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WAVE COUNTRY REPORT 2023

The status and value of women's specialist services in preventing and tackling gender-based violence against women

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List of abbreviations

BME	black and minority ethnic
CSO	civil society organisation
EU	European Union
GBV	gender-based violence
GBVAW	gender-based violence against women
IC	Istanbul Convention
LGBTQI+	lesbian, gay, bi-sexual, transgender, queer, intersex and others
NAP	National Action Plan
NGO	non-governmental organisation
RCC	rape crisis centre
SV	sexualised violence
SVRC	sexual violence referral centre
VAW	violence against women
WSS	women's specialist services

Foreword

The WAVE Country Report provides a regular check-in and monitoring overview of the situation of women's specialist services (WSS) in Europe and is an evidence base for their status and value.

What exactly does WAVE define as women's specialist services? **Women specialist services are feminist services that support women and their children experiencing gender-based violence (GBV)**. These services include but are not limited to: women's support centers, shelters, helplines, rape crisis or sexual violence referral centers and primary prevention services.

WSS empower and support women and girls throughout the cycle of violence by putting their needs at the centre of all interventions, applying an intersectional approach and working together with them, recognising their agency. WSS are run by feminist civil society organisations which aim to advance women's and girls' human rights, so they are able to enjoy a life free from all forms of violence.

Presently, WSS in Europe are operating in an increasingly difficult and often even hostile political climate in which all women and the feminist movement across Europe are experiencing an ever **intensifying backlash against women's rights**, which leads to increasing discrimination and oppression of women, as well as to the shrinking of public space for feminist civil society. This leads not only to a stalling in the advancement of women's and girls' rights, but also to reversing the many gains the women's movement has made over decades, in particular in the areas of fundamental rights and protection of women. The backlash is fueled by a damaging combination of:

- a) **Harmful political developments**, i.e. the strengthening of right-wing and populist movements which are defending sexist patriarchal values and are propagating a strong anti-gender discourse.
- b) **Adverse economic developments**, which once again relegate women to marginal roles, exacerbate the power and wealth gap between men and women and increase the many forms of intersecting discrimination which are serious causes of violence against women (VAW).
- c) **Increasing gender-neutral policies and regulations**, which are based on the gradual negating of VAW as 'gendered' and the allegation that 'gender-based violence affects both men and women equally'. Gender-neutral policies and practices hide or diminish the root causes of gender inequality and VAW by placing women and women-only services under threat and by failing to recognise the hundreds of years of prevalence of male violence against women.

These negative developments also lead to an increasing diversion of public resources from services offered for decades by WSS with great expertise, to gender-neutral services, which do not hold the gender-specific expertise of WSS and compete for the same funding opportunities. This situation leads to a serious deterioration of appropriate service provision to women and their children experiencing VAW, putting them at further risk of violence or even femicide, increasing secondary victimisation from interaction with inappropriate services, and limiting long-term perspectives of effectively tackling VAW. In addition to these obstacles, the funding climate WSS currently operate in is increasingly difficult as project funding and public procurement processes make it harder for WSS to apply for funding or exclude them completely, overburdening them with administrative and financial conditions which adversely affect service provision.

The WAVE Country Report aims to depict the situation of WSS in Europe from a feminist civil society perspective and as a reminder of why WSS are best placed to provide support for women, their children and girls who are experiencing GBV:

- **WSS are women-centred and women-led**, which means they are designed and run by women, for women. This is vital as this form of service provision creates a sense of trust and safety for women who are seeking support.
- **WSS are staffed by women experts who have a deep understanding of the needs of women and girls who have experienced violence**. They are also trained in trauma-informed care and provide a safe and supportive environment for survivors of VAW.
- **WSS are often the first point of contact** for women and girls who have experienced violence. They provide immediate and unbureaucratic support and crisis interventions, as well as longer-term support such as counselling, advocacy, and support groups. WSS put the **needs and strengths of women at the centre of their work** and collaborate with the women as active partners thus empowering them rather than treating them as passive victims.
- **WSS are independent of the state and other institutions**. This means that they can guarantee confidential and impartial support to all women, without fear of judgment or reprisal.
- **WSS work from a multi-agency approach**, cooperating with other voluntary and statutory agencies through the creation of strong referral pathways to ensure effective holistic support for women and their children.

WAVE intensively advocates for the distinction between general support services and women's specialist services in legislative frameworks, strategies and policies. This distinction is crucial in safeguarding the rights of and the tailored support required by survivors of VAW.

The GREVIO mid-term evaluation report on the implementation of the Istanbul Convention¹ also supports the view that WSS are best placed to provide specialist support services to women and girls who have experienced violence. The report found that WSS are essential for providing comprehensive and holistic support to survivors and that they play a vital role in preventing and combating VAW.

Beyond their role of providing life-saving support to women experiencing VAW, WSS transformed *service* into *political action* – from changing the life of a single woman, towards changing society as a whole. Focused on responding to the needs of women and children survivors of male violence, WSS have been advocating for the necessary political and cultural change needed to end VAW for decades.

As WAVE members continue to work in solidarity with women survivors of violence, it is imperative to reaffirm the indispensability of WSS in effectively preventing and tackling VAW. Upholding the gender-specific nature and feminist principles of these services is not merely about prioritising women; it is about acknowledging and rectifying hundreds of years of systemic inequalities and power imbalances which perpetuate GBV against women and girls today.

WAVE's commitment to advocating for the preservation and elevation of women's specialist services remains unwavering.

Stephanie Futter-Orel (WAVE Executive Director) and
Marcella Pirrone (WAVE President)

Vienna, December 2023

¹ GREVIO, *Mid-term Horizontal Review of GREVIO baseline evaluation reports* (2022), <https://rm.coe.int/prems-010522-gbr-grevio-mid-term-horizontal-review-rev-february-2022/1680a58499>

Executive summary

The WAVE Country Report 2023 provides an overview of statistics related to women's specialist services (WSS) in 46 European countries, namely national women's help-lines, women's shelters, women's centres, specialist services for survivors of sexualised violence (SV), and primary prevention services. Additionally, it also includes a section on femicide. For the purposes of this report, the general term 'European countries' is used by WAVE, referring to the 46 Member States of the Council of Europe which are part of the WAVE Network, although we are conscious that these 46 countries do not include all European countries. Some data sets include only partial figures for these countries. On occasion, it is relevant in data sets to point out the

difference between European Union (EU) Member States and European countries outside of the EU. A more detailed explanation of the data collection process and its limitations can be found in the methodology chapter.

An important document setting standards for the provision of WSS in Europe is the Council of Europe Convention on preventing and combating violence against women and domestic violence, also known as the 'Istanbul Convention' (IC). The Convention is the strongest and broadest international treaty to tackle violence against women (VAW) and aims at zero tolerance for such violence.

This is the status of signatures and ratifications of the IC as of November 2023:

- **The Convention has been signed by 44 countries:** Albania, Andorra, Armenia, Austria, Belgium, Bosnia and Herzegovina, Bulgaria, Croatia, Republic of Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Georgia, Germany, Greece, Hungary, Iceland, Ireland, Italy, Latvia, Liechtenstein, Lithuania, Luxembourg, Malta, Republic of Moldova, Monaco, Montenegro, Netherlands, North Macedonia, Norway, Poland, Portugal, Romania, San Marino, Serbia, Slovakia, Slovenia, Spain, Sweden, Switzerland, Ukraine, United Kingdom.
- **The Convention has been ratified by 38 countries:** Albania, Andorra, Austria, Belgium, Bosnia and Herzegovina, Croatia, Republic of Cyprus, Denmark, Estonia, Finland, France, Georgia, Germany, Greece, Iceland, Ireland, Italy, Latvia, Liechtenstein, Luxembourg, Malta, Moldova, Monaco, Montenegro, Netherlands, North Macedonia, Norway, Poland, Portugal, Romania, San Marino, Serbia, Slovenia, Spain, Sweden, Switzerland, Ukraine, United Kingdom.
- **One country has denounced and withdrawn from the Convention:** Türkiye (as of 01/07/2021).
- **The Convention was signed by the European Union in June 2017 and acceded on 28 June 2023.**

Despite the Istanbul Convention not being signed or ratified in all European countries, it sets a critical standard for service provision which all countries should follow. The standards laid out in the Istanbul Convention are

also reinforced and supported by the Council of Europe through the 2008 report on minimum standards for support services.²

² Council of Europe, *Combating violence against women: minimum standards for support services* (2008), [https://www.coe.int/t/dg2/equality/domesticviolencecampaign/Source/EG-VAW-CONF\(2007\)Study%20rev.en.pdf](https://www.coe.int/t/dg2/equality/domesticviolencecampaign/Source/EG-VAW-CONF(2007)Study%20rev.en.pdf)

National Women's Helplines



Telephone helplines are a vital WSS. They were one of the first forms of practical support provided by pioneer feminist organisations responding to the needs of VAW survivors. Being able to call a confidential number has been

a lifeline for countless women and girls who are experiencing violence and abuse.

Article 24 of the Istanbul Convention (IC) states that parties shall take the necessary measures to set up a state-wide, round-the-clock and free of charge helpline to provide confidential advice to callers in relation to all forms of violence covered by the scope of the IC.

Under the terms of the IC, States should take the necessary legislative or other measures to set up such national helplines.

A national women's helpline is understood as a service which is available throughout a country and exclusively or predominantly serves women survivors of VAW. It should

be free to use, operating round-the-clock, and offering information, advice and support to survivors of all forms of VAW, in all relevant languages. Specialist women's helplines work with a gendered understanding of VAW. Their practice is survivor-centred, with a focus on belief, safety and human rights. They avoid victim-blaming and support women's power to make their own choices. Helpline numbers should be widely promoted. They should also be advertised in all news and media coverage of violence against women and girls.

WAVE acknowledges the value of helplines which provide a good, gender-competent service to survivors, even if they deal only with domestic violence or sexualised violence, or other particular forms of VAW. Generic national helplines also provide a service, but they do not have the specialist expertise or insight that feminist women's NGOs have developed over decades of national and international engagement. It is incumbent on states to ensure that national women's helplines have stable, long term and sustainable funding, as required under Article 8 of the Convention.

Overview of findings on national women's helplines in Europe

37 of 46 European countries (or 80%) have at least one national women's helpline. The WAVE Country Report 2021 recorded a total of 39. Reassessment of the service in Latvia run by MARTA Centre has concluded that it does not qualify as a national women's helpline because it has limited operating hours, and services do not cover the whole country. In Belarus, the helpline operated since 2012 by the 'Gender Perspectives' international organisation was suspended by court order in September 2021. State repression of NGOs has impeded access to data relating to all women's specialist services in Belarus.

The national helpline in 32 countries (70%) now meets the recommended IC standards. This number has gone up from 30 (65%) in comparison with the Country Report 2021, because the helplines in France and Liechtenstein are now available 24/7. Five of the 37 national women's helplines do not yet meet one of the IC standards. Those in Hungary, Luxembourg and North Macedonia do not operate round-the-clock, while the national women's helplines in Poland and Türkiye are not free of charge. The feminist women's NGOs which operate the helplines in Hungary, Poland and Türkiye receive no state support or funding, which is directed instead to non-specialist generic helplines. Their capacity to provide a fully IC-compliant specialist helpline is constrained by insufficient and insecure funding, and active state hostility to their gendered approach.

Across Europe, there are also many national helplines

which may not conform to the standards set down by the Istanbul Convention, but nevertheless should be able to provide information, advice and support to women. They may be grouped under three general headings:

- those which offer specialised help for specific groups of women, or deal with particular forms of VAW (for example, sexualised violence and abuse, human trafficking, forced marriage, women's rights and legal advice).
- national helplines for gender-based violence (GBV) survivors, available to all genders and operating from a gender-neutral standpoint.
- national helplines for other issues/groups, which may overlap or intersect with VAW, (for example substance use, homelessness, support for asylum seekers, refugees and migrants).

In addition to state-wide helplines, regional and local helplines are widely available. In Belgium, the unique context of three autonomous regions and two distinct linguistic communities has shaped the provision of separate sub-state helplines. Each nation of the United Kingdom has its own national helpline. Across Europe, it is a common practice for local women's specialist services, including shelters, women's centres and rape crisis centres, to operate a helpline. Although these helplines may not operate 24/7, or deal only with certain forms of VAW, they are vital – especially where there is no specialist national helpline.

Key findings – National women’s helplines

- 81% of EU Member States and 79% of countries outside the EU have at least one national women’s helpline.
- 35 out of 37 national women’s helplines in Europe operate free of charge.
- 34 out of 37 national women’s helplines in Europe are available 24/7.
- 32 countries (70%) meet the Istanbul Convention standards – the helplines are both free of charge and available 24/7.

Recommendations

Each of the following recommendations is underpinned by the necessity of a gendered understanding of VAW.

- States must guarantee sustainable funding for national women’s helplines since viable service provision cannot be guaranteed where national women’s helplines rely on volunteers or private donations to operate.
- All European countries must establish at least one national women’s helpline which provides specialist support regarding all forms of violence against women, operates 24/7 and is free of charge.
- Data collection and reporting practices should be standardised for all national women’s helplines. This would facilitate a better understanding of the scope of VAW, the effectiveness of helplines, and the identification of areas needing improvement.
- Regular quality assurance should be implemented to assess the effectiveness of the helplines, identify gaps in service provision and ensure adherence to quality standards.
- National women’s helplines must ensure that all survivors are able to access support, by ensuring the availability of multilingual support. Accessibility of helplines can be improved with the use of technology, e.g., including chat options, mobile apps, and integration into social media platforms for wider reach.
- The telephone number of national women’s helplines should be widely advertised throughout the country, and routinely included in all broadcast, print or social media coverage of issues pertaining to VAW.
- Staff must be adequately trained and have a gender-specific approach in dealing with violence against women, including knowledge about the regional situation, applicable laws and rights, and all relevant provisions. The different needs of diverse groups of women need to be recognised and addressed, either through specialised services or in collaboration with organisations catering to specific groups.
- National women’s helplines should be equipped to provide referrals to other relevant services, including women’s specialist services.
- Innovations and improvements to national women’s helplines that have been made during the COVID-19 pandemic should be maintained and extended.

Shelters accessible to women



'Women-only shelters' are specialist support services for women survivors of VAW (most commonly domestic abuse by a partner or ex-partner) and their children (if any). They provide safe accommodation and empowering support, based on a gender-specific understanding of violence and the centrality of survivors' safety and human rights. Shelters, which may also be known as refuges or safe houses in some countries, are a vital component in the IC four pillars framework of protection, prevention, prosecution and policies. They respond to immediate crises and meet longer-term needs by offering safe, non-judgemental support throughout the complex process of leaving a violent partner, and/or moving on from situations of threat and harm. While shelters are not a solution to the underlying gender inequality which structures the economic and social as well as the interpersonal contexts of VAW, they are a crucial resource for women and their children in situations of fear and danger, and who need to find a temporary place of safety. Shelters also make a key contribution to the effective functioning of multi-agency collaborative partnerships, whether local or national, in responding effectively to VAW.

Article 23 of the IC calls for the provision of sufficient numbers of appropriate, easily accessible shelters for women survivors of VAW and their children. It urges that safe

accommodation should be available in every region. The IC Explanatory Report recommends that one 'family place' (average 2 beds, one woman and one child) per 10,000 head of population is the minimum requirement,³ but cautions that actual numbers of places to be made available will depend on the assessed needs of any given country. The methodology adopted for WAVE's data collection and Country Reports is based on 'bed spaces' rather than the 'family places' of the Convention, to avoid any confusion regarding the number of actual beds being counted.

The Report distinguishes between women-only shelters and shelters accessible to women, with the number of women-only shelters in each country highlighted in the respective table. This is important information to monitor, especially in light of concerns that women's specialist NGOs are increasingly losing funding or contracts in favour of 'gender-neutral' or generic providers. Some states have adopted GBV strategies and action plans which marginalise or exclude women-only shelters altogether. Bed numbers given here are for all shelters accessible to women, as the figures against which the IC recommended minimum standard of 1 per 10,000 can be measured. The Istanbul Convention requires that support should be made available to all GBV survivors, while recognising that women are by far the majority of those who seek and use shelters supporting survivors of domestic violence.

Overview of shelters accessible to women in Europe

According to data collected, there are 3,087 shelters accessible to women throughout 46 European countries, providing approximately 39,130 bed spaces to women and their children, if any. This represents an increase both in shelters and in available bed spaces since the WAVE Country Report 2021, as the overall percentage gap between beds needed and beds provided has decreased from 55% to 54%.⁴ In EU Member States the shortfall is 39%, and in states outside the EU it is 70%. The levels of provision vary considerably, both across and within different countries, but the overall picture is of great concern. The reason most often cited for declining referrals of survivors is the lack of capacity and space. Existing shelters are unable to provide accommodation to all who seek help, and in some regions, there are no shelters at all. Inadequate geographical distribution of shelters remains a challenge, especially for women who live in rural and remote areas.

Only ten of 46 European countries meet the Istanbul

Convention minimum recommended requirements for shelter provision, along with one of the nations which comprise the United Kingdom (Northern Ireland).⁵ A country is deemed to meet the standards according to the number of beds in shelters accessible to women, rather than women-only shelters (which are included in the total number). Since 2021, Estonia and Kosovo have joined Belgium, Denmark, Luxembourg, Malta, Slovenia, Sweden, Norway and Liechtenstein. Iceland is no longer considered to meet the standard because some of the available beds are in a homeless shelter without specialist VAW support.

In 27 EU countries, of the total 2,232 shelters, 1,616 are women-only, while in the 19 countries outside the EU, there are 554 women-only shelters, out of a total 855 shelters accessible to women. As noted above, this information is disaggregated to monitor possible evidence of funding being transferred from specialist women's NGOs to generic, gender-neutral shelter providers, thus losing the expertise and

3 Council of Europe, *Explanatory Report to the Council of Europe Convention on preventing and combating violence against women and domestic violence* (2011), Article 23, <https://rm.coe.int/1680a48903>

4 It should be noted that the data does not include estimates for bed spaces in Ukraine or the Russian Federation.

5 The IC Explanatory Report recommends that one 'family place' (average 2 beds, one woman and one child) per head of population is the minimum requirement, but cautions that the actual number of places to be provided will depend on the assessed needs of any given country.

gendered understanding which is crucial for the provision of appropriate and effective support to survivors of VAW.

Women who face particular vulnerabilities and risks, and have specific needs (for example black and minority ethnic, disabled and/or displaced women) often have additional barriers to accessing shelter. Some specialist shelters do exist, but there is a pressing need for countries to take serious steps so that women experiencing high levels of violence, discrimination and exclusion can access safe

and suitable shelter when they need it.

In Ukraine, the full-scale military invasion since February 2022 has had a severe impact on the provision of all women's specialist services, including shelters. It has not been possible to supply statistics. Some shelters located in occupied areas and conflict zones have been destroyed, damaged or repurposed to provide accommodation for displaced people, but many shelters are not fully functioning.

Key findings – shelters accessible to women

- In Europe, there are approximately 3,087 shelters accessible to women, providing ca. 39,130 bed spaces to women and their children, if any.
- Of 46 European countries, ten (22%) meet the Istanbul Convention's recommended standard of one bed space per 10,000 heads of population.
- 20 out of 27 EU Member States (74%) and 16 out of 19 states outside the EU (84%) are still failing to meet the minimum IC standards on the provision of bed spaces.

Recommendations

- It is important to preserve the independence and autonomy of women's shelters so that they can provide support to women survivors by taking a survivor-centred, human rights-based, gender-specific approach.
- The need to provide sustainable funding to women's shelters is critical for ensuring the continuity of their work. Governments must ensure these vital support services receive adequate and long-term funding, so that they have sufficient capacities and can provide services free of charge to all survivors.
- Laws regulating funding of women's shelters should ensure these services can provide accommodation and specialist support to all women survivors of VAW and their children, irrespective of whether they are undocumented migrants or have a precarious migration status.
- Women's shelters must be available in sufficient numbers and ensure adequate geographical distribution including rural and remote areas, to ensure that women in all regions have access to shelter services.
- Emergency response protocols with clear referral pathways to statutory services should be developed and implemented, in order to face situations like pandemics or conflicts, which can exacerbate the need for shelters and related services. Such protocols should also be included in National Action Plans (NAPs).
- Women's shelters must be staffed by professionals who have received adequate training on how to prevent and respond to VAW and must put the survivor and her needs at the centre of all interventions.
- Ongoing training and support for shelter staff, including mental health support, must be guaranteed to ensure that they can provide the best care to survivors and manage the emotional toll of their work.
- One of the most important factors influencing the policymaking process in the field of VAW is reliable, accurate and comparable data across countries. Data collection is, therefore, an essential component for demonstrating how many women survivors of violence and their children access shelters and how many are turned away. It is important to improve existing data collection methods to collect accurate, more comprehensive and reliable data on the number of women's shelters and the services they provide.

Women's centres



'Women's centres' are women's services providing non-residential specialist support to women survivors, serving only or predominantly women survivors of violence and their children.

They work within a gender-specific and culturally-sensitive framework of non-residential service provision. They are usually able to support survivors in response to immediate crises, short-term, or extended over a longer period, and are available for any woman who is a survivor of VAW. The services on offer may include information, advocacy, counselling, material help (e.g., food or clothing), practical advice in connection with education, employment, housing, legal rights, and court accompaniment. They may also engage in wider community education, awareness raising and prevention work. There is no single template for such work and the following are examples of services, any or all of which may be subsumed under the 'women's centre' term: therapy and counselling for women; crisis centres supporting women who are survivors of all forms of VAW; regional crisis centres on domestic violence; proactive intervention centres serving survivors as a follow-up to police interventions; specialist services for black and minority ethnic women, migrant and refugee women survivors of VAW; outreach services; specialist services supporting survivors of human trafficking, sexual exploitation, female genital mutilation (FGM), forced marriage and so-called 'honour-based' killings.

Women's specialist services are best placed to deliver flexible, tailored and holistic support to women (and to their children, where relevant) who are experiencing VAW. The complex and sensitive task of empowering survivors, for as long as support is needed, is most effectively undertaken by women's organisations.⁶ Women's centres empower women and their children by putting their needs at

the centre of all interventions, applying an intersectional approach, and working together with them, thereby recognising their agency. They work to ensure that women understand their rights and entitlements. These are crucial for the process of regaining control and autonomy, making connections and reducing isolation.

Most women's centres in Europe were established and are run by women's NGOs, usually based on feminist principles. Other service providers include generic NGOs, and directly delivered or contracted provision by local and/or national government departments. Some centres provide services only to women survivors of VAW, while other centres are for all survivors of violence, or specifically of GBV, including women.

Specialist services for survivors of sexualised violence (e.g., rape crisis centres and sexual violence referral centres) are the subject of data collection and analysis in a separate chapter, so they are not included in the data for women's centres, although most women's centres can provide support to survivors of sexualised violence (SV) as well. Helplines, shelters, centres, and SV services are specialist forms of provision for women survivors of VAW, each with their own minimum Istanbul Convention and/or Council of Europe standards. They therefore are considered in separate chapters of the Report.

The Council of Europe stipulates that the minimum standard for the provision of counselling services for survivors of violence against women is one per 50,000 women in the population. This is the standard which has been applied to the data as an appropriate measure of provision, and to determine the shortfall in the number of centres. It is important to note, however, that not all women's centres provide counselling (though most do).

Overview of findings on women's centres in Europe

In 44 of 46 European countries surveyed, there is at least one women's centre. As noted in the WAVE Country Report 2021, the exceptions remain Belarus and Hungary. A minimum of 4,085 centres are reported to be running, 2,995 in the 27 EU Member States and 1,090 in the 19 states outside the EU. On paper, this total represents a substantial increase since the last Report in 2021. However, it should not be assumed that actual levels of provision have increased significantly. Differences in data collection methodology and availability are at least to some extent responsible for the higher figure. In particular, official government statistics for Spain have been updated and now include centres from many regions which had not previously provided their

data. This alone accounts for an additional 810 centres.

According to the information submitted for the Country Report 2023, the majority of women's centres across Europe which comply with WAVE's standards are run by specialist women's NGOs. There are 14 countries where this is not the case. Service provider information is not available for Austria, Croatia, France, Spain, Switzerland, Ukraine and the Russian Federation.

More generally, without a common and shared definition of what constitutes a women's centre, information is not always readily obtainable and may be interpreted

⁶ Council of Europe, *Explanatory Report to the Council of Europe Convention on preventing and combating violence against women and domestic violence* (2011), Art. 22, para. 13, <https://rm.coe.int/1680a48903>

differently from country to country. Some statistics are estimates, and due to the imprecision of data, the overall number of centres should be treated with caution. A few new women's centres have opened, but others have closed, and many centres across Europe have to provide services without stable or sustainable funding. Especially in some countries outside the EU, they rely wholly or mainly on donations, international funding and project grants. Their future is insecure.

Using the data reported here, there is one centre per 106,509 women; in EU Member States, one centre per 76,257; in European countries outside the EU, one centre per 189,632. The current provision falls far short of the recommended level. In some populous countries, there

are only one or two women's centres in major cities. All countries report that counselling is one of the main services provided. However, the extent and quality of counselling may vary. Some centres do not offer specialist counselling but focus on practical support, advocacy, or education and prevention work.

At least 17 countries have one or more centres providing specialist services to particular groups of women. Most widespread are centres for survivors of human trafficking, others focus on forced marriage, and FGM. There are also a few specialist centres for LGBTQI+ survivors, migrant and undocumented women; for Roma, Sami and other marginalised groups in particular contexts.

Key findings – women's centres

- There is a minimum of 4,085 women's centres in Europe.
- 44 countries have at least one women's centre, two countries have no such centres.
- According to the data collected, 73% of the centres are in EU Member States and 27% in countries outside the EU.
- There is one centre per 106,509 women in Europe. This corresponds to a shortcoming of 53% of the recommended number of women's centres.
- The majority of women's centres complying with WAVE's definition are run by women's NGOs.

Recommendations

- Continuous efforts must be made to secure sufficient provision of women's centres providing specialist and gender-specific support for women survivors of violence and their children, if any. This is particularly urgent in countries which currently have no such centres, or only in certain cities or regions. Comprehensive geographical coverage is a fundamental requirement to ensure services are accessible to all women and children who need them.
- State funding should be allocated to specialist women's centres to meet these requirements, especially in countries that currently provide none, or allocate very limited resources to women's centres.
- Provision of specialist support services, e.g., for survivors of forced marriage, 'honour-based' violence, FGM, human trafficking and for refugee, migrant and undocumented women are non-existent or very limited in many countries. Sufficient resources need to be allocated to ensure adequate coverage of such services for ALL women, including those from minoritised groups.
- In keeping with the WAVE Network's long-term goal of developing common definitions, women's specialist services should strive to build, as far as possible, a shared understanding of 'women's centre' which encompasses different working models which all apply feminist principles and methodologies. This would improve clarity and consistency in the collection and recording of relevant data and would facilitate a more accurate representation of specialist services in relation to the Istanbul Convention.
- State-wide data collection systems regarding the provision of WSS should be established in each country. Data should identify the providers of such services (e.g., women's NGOs, other NGOs, state or religious organisations), which services are provided (short-term housing, counselling, legal services, etc.), where they are located and to whom services are provided (i.e. single women, mothers and their children, survivors of multiple forms of violence and discrimination). The number of clients served in each area should also be recorded. This data should be made widely accessible and available to service providers, advocates, policy-makers and the general public, including those in need of assistance. Accurate data is a crucial foundation for making evidence-based decisions to improve the situation in states, and it cannot rely solely on the limited resources of civil society organisations. Therefore, government involvement in setting up and maintaining reliable data collection procedures is necessary.

Specialist services for survivors of sexualised violence



Sexualised violence is defined as any form of contact or non-contact act (or attempt to obtain an act) of a sexualised nature without a person's freely given consent. It encompasses a range of abusive behaviours and acts, overwhelmingly committed by men against women and girls. These include sexual abuse (of children and or/adults), human trafficking and grooming for sexual exploitation, online sexual harassment and violence, non-consensual sharing of intimate images (so-called 'revenge porn'), sexual assault and rape.

Article 25 of the Istanbul Convention refers specifically to the importance of specialised support for survivors of sexualised violence, and calls on states to "take the necessary legislative or other measures to provide for the setting up of appropriate, easily accessible rape crisis or sexual violence referral centres for victims in sufficient numbers to provide for medical and forensic examination, trauma support and counselling for victims".

Dedicated and specialist centres are vital because specific critical services are required - in the immediate aftermath of a rape or other assault, in relation to any legal proceedings, and to address the longer-term impacts of SV. As the Explanatory Report notes, the traumatic nature

of sexualised violence requires 'a particularly sensitive response by trained and specialised staff'.⁷

This is the third time that separate data on SV services has been collected for the WAVE Country Report. In 2019, a baseline was established by asking about the forms of service provision recommended by the Istanbul Convention, which are rape crisis centres (RCC) and sexual violence referral centres (SVRC). These models for provision of services under one roof have developed in different contexts, and to meet somewhat different needs. The SVRCs provide crucial medical and forensic services and other kinds of multi-agency support or intervention in the immediate aftermath of sexual assault/rape. They are usually located in hospital settings. Rape crisis centres offer immediate and long-term confidential survivor-centred counselling and therapy, and provide advice, advocacy and accompaniment (including for police and court procedures) for survivors of recent and historical sexual assault and abuse.

Many of the women's centres discussed in the previous section do offer a range of support services to survivors of sexualised violence, as part of their comprehensive and holistic approach to tackling VAW. Some do so to a highly specialised degree, while others may not have the capacity or resources to do more than provide fairly basic and short-term support.

Overview of findings on rape crisis centres and sexual violence referral centres in Europe

The current provision of specialised sexualised violence services throughout Europe is grossly inadequate. Some form of specialist SV service (RCC, SVRC, or equivalent) is available in 28 countries, 10 in non-EU states and 18 in EU Member States, compared with 27 in the Country Report 2021. Women in 14 countries are still without provision of any RCCs or SVRCs at all, while no information on SV support provision is available in four countries. The introduction of SV services in three more countries is to be welcomed, but overall, the gulf between the recommended minimum IC standard (one centre for every 200,000 inhabitants) and actual number of centres is enormous. The shortfall is 85%. Only two countries, Norway and Iceland comply with the standard, and most countries are nowhere near meeting the need. The situation is unacceptable, given the high prevalence of SV, the serious immediate and enduring impacts on women's health and wellbeing, and the extremely low reporting and conviction levels for crimes of SV.

In 12 of the 30 countries with RCCs or SVRCs, only one or two centres exist, while only eight countries have centres in all regions. New RCCs or SVRCs have opened in Finland and Moldova. Several countries report that newly opened SV services are not fully functional, or have no separate funding for running costs.

Alternative sources of support include helplines specifically for survivors of sexualised violence, which are currently available in at least 26 European countries, though often with very limited hours. Some of these helplines are national, but many are provided by local RCCs or SVRCs.

Other SV services, not RCCs or SVRCs, are reported, including counselling, medical support, trauma therapy and a few centres specifically for survivors of human trafficking, sexual exploitation and sexualised violence in war and conflict zones.

⁷ Council of Europe, *Explanatory Report to the Council of Europe Convention on preventing and combating violence against women and domestic violence* (2011), Art. 25, para. 138, <https://rm.coe.int/1680a48903>

Key findings – specialist services for survivors of SV

- 28 countries out of 46 (61%) have at least one RCC, SVRC or equivalent centre.
- The reported number of such centres across Europe is 612.
- 90% of the necessary services are missing in European countries outside the EU, and the shortfall in EU Member States is 82%.

Recommendations

- European states must prioritise the establishment of sufficient rape crisis and sexual violence referral centres to meet the needs of survivors in every region, according to the Istanbul Convention standard of one such service per 200,000 inhabitants.
- Funding for specialist SV services shall be sustainable and move beyond short-term project funding to ensure long-term operational stability.
- Cooperation between different sectors, including healthcare, law enforcement, legal services, and NGOs shall be fostered, to provide a coordinated and comprehensive response to SV and to extend the reach and impact of services.
- Accessibility of specialist SV services shall be guaranteed to all survivors, with particular attention to those belonging to marginalised groups, such as women with disabilities or women who face language barriers.
- Regular quality assurance should be implemented to assess the effectiveness of the specialist SV services and ensure they are meeting the needs of the survivors.
- States must invest in regular, strategic public awareness, educational programmes and prevention campaigns to address pernicious myths and women-blaming stereotypes associated with sexualised violence, and with a focus on men's collective responsibility to challenge the norms and cultures which create enabling environments for such violence.
- A systematic programme of initial and continuous training and professional development for key sectors (including police, judiciary, health services and education) should be established and specialised training modules for different professionals should be developed. This should take a gender-specific approach towards SV to build a competent workforce with role-appropriate knowledge, skills and understanding, and it should include a workplace harassment policy to ensure SV is not tolerated.
- Definitions and legislation on sexualised violence which emphasise voluntary and meaningful consent as decisive should be developed and implemented by states, with the collaboration of specialists who have developed expertise in women's support services.

Primary prevention of violence against women



The Istanbul Convention is rooted in the conviction that gender-based violence against women (GBVAW) in all its forms is neither natural nor inevitable. It does not simply 'happen'. Violence is a chosen and functional behaviour, committed by reflexive human beings in social contexts, and with intention. Violence is also structural and cultural – embedded in the underlying systems of power at work in any given society.⁸ Violence against women remains pervasive and prevalent, at home and work, in schools and online, in faith communities and leisure activities, in conflict zones and embedded in patterns of migration or asylum-seeking.

The provision of women's specialist support services, as detailed in this Country Report, is vital. However, properly resourced and informed action must be undertaken to prevent such violence before it is committed. Without such action, millions of women and children will continue to suffer untold harms, their human rights will be violated, their ability to contribute fully as citizens will be impeded, and vast resources will still be needed to deal with the consequences of violence against women. In order to eradicate VAW, it is vital that relevant stakeholders and states understand its root causes, and dedicate sufficient funding to primary prevention.

Article 12 of the Istanbul Convention concerns the

prevention of VAW, and lays out the general obligations of states parties to 'take the necessary measures to promote changes in the social and cultural patterns of behaviour of women and men with a view to eradicating prejudices, customs, traditions and all other practices which are based on the idea of the inferiority of women or on stereotyped roles for women and men'.⁹

The World Health Organization (WHO) has successfully developed the interactive ecological model for public health approaches to disease prevention, defined as the disruption of means, pathways and mechanisms. This theoretical framework is recommended for VAW primary prevention work. It organises risk factors for VAW on the different levels at which they occur (societal, institutional, community/family, and individual).¹⁰

Primary prevention (PP) of VAW (stopping it before it occurs) is harder to evaluate than secondary prevention (early identification and intervention) and tertiary prevention (crisis response, support and recovery), but it is vital and cost-effective. It requires a long-term paradigm shift in behaviours, attitudes and systemic power structures.

Questions about PP were included in the survey for the first time this year. The information gathered will establish a base from which to assess and monitor actions taken by countries to meet their obligations.

Overview of findings on primary prevention

Thirty-one European countries have some form of violence against women and girls (VAWG) National Action Plan. Some NAPs are restricted in scope to domestic violence only. Some countries have separate NAPs for different forms of VAWG. NAPs are important indicators that a country may be taking a strategic and comprehensive national approach to responding to VAWG. However, it cannot be assumed that the existence of a NAP (or equivalent document) guarantees a clear set of actions based on a gendered understanding and with an operational definition of primary prevention. Questionnaire responses indicate that 23 countries have no such definition, while information is not known for a further seven countries. Even where a definition is given, it may focus on general 'awareness raising' without addressing how, specifically, that contributes to the actual prevention of VAW. A few NAPs, for example, that of Brussels-Wallonia, provide a more detailed definition, utilising the recommended WHO public health approach to primary prevention, including specific actions.

This 'theory of change' and 'whole system' approach takes seriously the need to change systems and structures at every level, not simply individual attitudes and behaviours. State funding is designated for prevention work in 32 countries. In some cases, such funding is for activities under the 'prevention' heading, but these do not conform to the IC or WAVE understanding of PP.

Based on a list of options, WAVE survey respondents noted the following activities being undertaken under the 'prevention' heading: public awareness-raising campaigns (43 countries), school-based PP programmes (33 countries), training for PP practitioners (27 countries), bystander intervention programmes (17 countries), feminist self-defence training (16 countries) and self-care activities (15 countries). The data from countries gives a general indication of what's happening across Europe, but it tells us little about the framing, content, aims or outcomes of these activities.

8 Galtung described structural violence as 'the avoidable limitations society places on groups of people that constrain them from achieving the quality of life that would have otherwise been possible. These limitations could be political, economic, religious, cultural, or legal in nature and usually originate in institutions that have authority over particular subjects. Cultural violence refers to culturally based justifications of direct or structural violence. Galtung, J., *Violence, Peace, and Peace Research* (1969), *Journal of Peace Research* 6:3

9 Hester and Lilley, *Preventing Violence Against Women: Article 12 of the Istanbul Convention* (2014), Council of Europe, <https://rm.coe.int/CoERMPublicCommonSearchServices/DisplayDCTMContent?documentId=0900001168046e1f0>

10 Ibid.

Some WAVE members are engaged in innovative PP work. Garance in Belgium and Autonomia and Juniper in Poland are dedicated specialist PP organisations. Research indicates that feminist initiatives and workshops to build

self-confidence, information and empowerment among girls and women are promising PP practices. Examples are cited in the prevention chapter.

Key-finding – primary prevention activities

- Thirty-one European countries (67%) have a NAP on VAWG (although these do not necessarily address specific primary prevention actions and measures).
- In only 16 European countries (35%) does the state include a definition of PP in its NAP, or other legislative framework. It cannot be confirmed if these definitions are based on a gendered understanding of PP, involving provisions across all domains of state responsibility.
- State funding is available for PP initiatives in 32 European countries (70%), which include; school-based PP programmes, public awareness-raising campaigns, training for PP practitioners, bystander intervention programmes, feminist self-defence training, and self-care activities.

Recommendations

- Increased attention to and resources for PP should never be at the cost of reducing the provision of secondary and tertiary prevention. These are still needed to safeguard survivors' human rights and allow them to recover from violence. However, survivors' most fundamental right is to not become victims of violence in the first place and to live lives free from violence. To effect the societal change needed to end VAWG, policymakers need to capitalise on the combined effectiveness of the full three-pronged public-health approach to violence prevention.
- Garner long-term political commitment to centre PP in the fight against VAWG on the European level.
- Invest increased funding for public authorities, NGOs and scientific research for furthering knowledge and knowhow in PP and exploit possible synergies (e.g., funding scientific evaluative research of NGO-run PP pilot programmes, funding of and research into upscaling existing promising and proven PP programmes, development of quality standards).
- Strengthen existing instruments such as the Istanbul Convention in terms of the conceptualisation and operationalisation of PP by:
 - including PP in a significant way in GREVIO's baseline questionnaire, monitoring process and reporting.¹¹
 - providing evidence-based policy orientation to ratifying states of what works in PP so that resources can be invested with maximum effectiveness.
 - adopting an optional protocol to the IC on PP on the basis that it is states' due diligence to prevent violence before it happens, thereby safeguarding women's and girls' fundamental right to live free from violence.
- Put PP at the centre of current and future European policy such as the revision of the EU Victim's Rights Directive, the EU Directive on Violence Against Women and Domestic Violence or the EU recommendations on harmful practices. PP should not be an afterthought to secondary and tertiary prevention, but needs to become a priority.
- At the same time, all European and national policy, such as social security, housing, migration or foreign affairs, should be reviewed in terms of the potential to promote PP of VAWG. Opportunities to further PP should be identified and capitalised on.
- All governments should adopt long-term National Action Plans to combat VAWG and coordinate the different government levels, institutions, and organisations active in this field. NAPs need to centre PP, include comprehensive definitions, sufficiently funded and NGO-run programmes targeting different types of VAWG and different demographics, and reporting on quantitative objectives to reduce the prevalence and incidence of VAWG over time.
- Governments specifically need to support WSS in evaluating and upscaling their existing PP programmes, including the training of PP professionals and the exchange of experiences and evaluation of transposability of programmes.

¹¹ GREVIO (Group of Experts on Action against Violence against Women and Domestic Violence) is the independent expert body responsible for monitoring the implementation of the IC.

Femicide



Femicide refers to the gender-related killing of women, usually by men, because they are women. In other words, it is a fatal manifestation of violence against women. Although the term is widely used by scholars, feminist NGOs and international instruments, there is no agreed definition or use of 'femicide' in law or policy. It may be interpreted narrowly to refer only to the murder of a woman by her partner or ex-partner, or more widely to include the killing of women in the context of sexual assault, so-called 'honour-based' killings, and human trafficking, among other instances. In wider research and policy discussions, 'femicide' may also incorporate suicide following domestic violence, the murder of children as well as partners by a perpetrator of domestic violence, and other deaths resulting from gender-based harms. In some European countries, *feminicide* is the term more commonly used.

Although femicide is not specifically mentioned in the text of the Istanbul Convention, its scope and purposes require that femicide must be taken seriously. It is the worst form of VAW, depriving women of life itself. The four IC pillars (prevention, protection, prosecution, and coordinated policy) must each be addressed. Visibility and naming of gender-based killing, as such, is a prerequisite for effective action.

The European Observatory on Femicide (EOF) was launched in January 2018. Its mission is the prevention of femicide through data collection, data visibility, research and awareness raising. It works towards establishing a framework for sharing and analysing data. New initiatives such as the FEM-United Project 2020-22 have strengthened this process.¹² The EOF works closely with the European Institute for Gender Equality (EIGE) which has developed a 'Femicide Package' to help EU countries gather solid data. EIGE also aims to establish a common definition.

Spain has set a good example of robust official methodology in data collection.¹³ Since 2022, the crime of femicide has been classified under five headings, which together encompass a comprehensive definition.

The WAVE Network makes its contribution to this important work by gathering data from members in 46 European countries. In many countries, WAVE members, and other feminist NGOs, pioneered and continue to engage in data collection, monitoring and campaigning to make femicide count. This is vital work, but there are significant challenges in finding and collecting data. Numbers should be regarded as estimates based on the best available sources. The true scale of gender-based killings/deaths of women will certainly be higher.

Key findings – femicide

Data gathered for this Country Report is based on diverse legal codes and practices in different jurisdictions.

- There were at least 2,558 victims of femicide in 2022, based on data (including estimates) from 37 of 46 countries.
- The term 'femicide' is now enshrined in the legal codes of Spain, France, Malta and the Republic of Cyprus. Legislation was approved in Belgium in 2023.
- In most countries, the police and/or other official state agencies collect data about homicides. Practices vary from country to country. Homicide statistics may disaggregate information about gender and/or age of victim and perpetrator; the relationship between them, if any, may be noted. Specific reference to women as victims is usually made in the context of 'domestic homicide'.
- In many countries, civil society organisations (usually feminist NGOs/WSS), journalists or researchers are the only or main collectors of data about the killing of women.
- At least 18 European countries now have some kind of femicide watch, but in most cases their work is not integrated into official instruments or mechanisms for preventing VAW.

¹² European Observatory on Femicide <http://eof.cut.ac.cy/>

¹³ European Institute for Gender Equality website, last retrieved 23rd Nov 2021, https://eige.europa.eu/publications-resources/publications/measuring-femicide-eu-and-internationally-assessment?language_content_entity=en

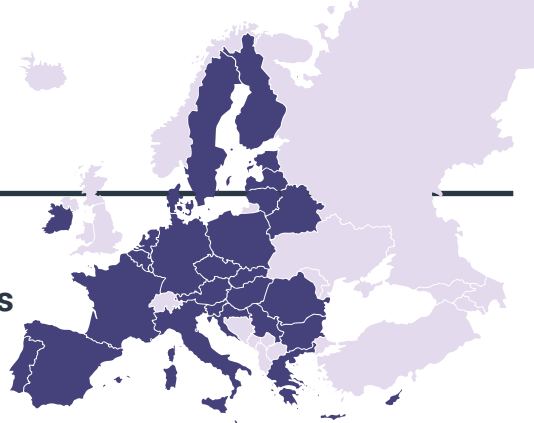
Recommendations

- It is of great importance that a basic level of vital information is recorded in the official homicide statistics of all European countries. The minimum requirement is the disaggregation by sex of victims and perpetrators, and that the relationship, if any, of victim and perpetrator is recorded.
- Data on complaints and reports of violence previously raised by the victims to the authorities should be recorded, as well as information on which statutory and voluntary agencies were previously involved in supporting the victim. The aims are to identify where gaps in service provision or collaboration between agencies occurred, which likely have contributed to the failure to prevent the femicide, to ensure accountability of all involved support agencies and to guarantee the effective protection of women experiencing VAW.
- Countries are urged to comply with the recommendation of the UN Special Rapporteur that a femicide watch initiative should be established (where it does not already exist) to monitor and highlight femicides, as a resource to improve policies, and to raise awareness of gender-based women killing as fatal manifestations on the continuum of VAW. Current examples of good practice could be adapted to ensure the development of appropriate and useful models in different national contexts.
- The work of the European Observatory on Femicide should be supported to facilitate effective international collaboration.
- Femicide should be named and integrated into national strategies and policies to address VAW, with actions identified to minimise and prevent such deaths.

Tables



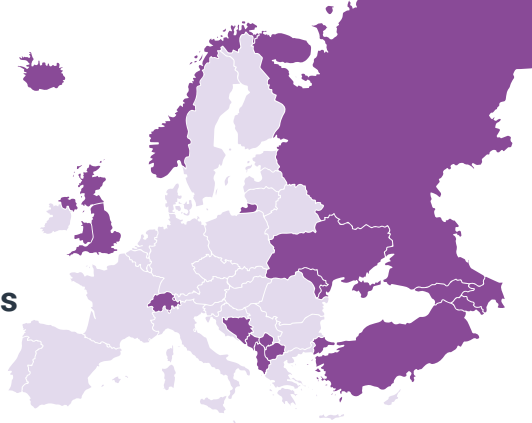
Table 1: National women's helplines in EU Member States (2022)



	EXISTENCE OF A NATIONAL WOMEN'S HELPLINE	NATIONAL WOMEN'S HELPLINE FREE OF CHARGE	NATIONAL WOMEN'S HELPLINE OPERATING 24/7	NATIONAL WOMEN'S HELPLINE FREE OF CHARGE AND OPERATING 24/7 (=MEETING THE STANDARDS OF THE IC)
Austria	Yes	Yes	Yes	Yes
Belgium	No	-	-	No
Bulgaria	Yes	Yes	Yes	Yes
Croatia	Yes	Yes	Yes	Yes
Republic of Cyprus	Yes	Yes	Yes	Yes
Czech Republic	No	-	-	No
Denmark	Yes	Yes	Yes	Yes
Estonia	Yes	Yes	Yes	Yes
Finland	Yes	Yes	Yes	Yes
France	Yes	Yes	Yes	Yes
Germany	Yes	Yes	Yes	Yes
Greece	Yes	Yes	Yes	Yes
Hungary	Yes	Yes	No	No
Ireland	Yes	Yes	Yes	Yes
Italy	Yes	Yes	Yes	Yes
Latvia	No	-	-	No
Lithuania	Yes	Yes	Yes	Yes
Luxembourg	Yes	Yes	No	No
Malta	No	-	-	No
Netherlands	No	-	-	No
Poland	Yes	No	Yes	No
Portugal	Yes	Yes	Yes	Yes
Romania	Yes	Yes	Yes	Yes
Slovakia	Yes	Yes	Yes	Yes
Slovenia	Yes	Yes	Yes	Yes
Spain	Yes	Yes	Yes	Yes
Sweden	Yes	Yes	Yes	Yes
TOTAL (27)	22 (yes) 5 (no)	21 (yes) 1 (no)	20 (yes) 2 (no)	19 (yes) 8 (no)



Table 2: National women's helplines in European countries outside the EU (2022)



	EXISTENCE OF A NATIONAL WOMEN'S HELPLINE	NATIONAL WOMEN'S HELPLINE FREE OF CHARGE	NATIONAL WOMEN'S HELPLINE OPERATING 24/7	NATIONAL WOMEN'S HELPLINE FREE OF CHARGE AND OPERATING 24/7 (=MEETING THE STANDARDS OF THE IC)
Albania	Yes	Yes	Yes	Yes
Armenia	No	-	-	No
Azerbaijan	No	-	-	No
Belarus	No	-	-	No
Bosnia & Herzegovina	Yes	Yes	Yes	Yes
Georgia	Yes	Yes	Yes	Yes
Iceland	Yes	Yes	Yes	Yes
Kosovo	Yes	Yes	Yes	Yes
Liechtenstein	Yes	Yes	Yes	Yes
North Macedonia	Yes	Yes	No	No
Republic of Moldova	Yes	Yes	Yes	Yes
Montenegro	Yes	Yes	Yes	Yes
Norway	Yes	Yes	Yes	Yes
Russian Federation	Yes	Yes	Yes	Yes
Serbia	Yes	Yes	Yes	Yes
Switzerland	No	-	-	No
Türkiye	Yes	No	Yes	No
Ukraine	Yes	Yes	Yes	Yes
United Kingdom	Yes	Yes	Yes	Yes
England	Yes	Yes	Yes	Yes
Northern Ireland	Yes	Yes	Yes	Yes
Scotland	Yes	Yes	Yes	Yes
Wales	Yes	Yes	Yes	Yes
TOTAL (19)	15 (yes) 4 (no)	14 (yes) 1 (no)	14 (yes) 1 (no)	13 (yes) 6 (no)



Table 3: Shelters accessible to women in EU Member States (2022)

	TOTAL POPULATION	TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF SHELTERS ACCESSIBLE TO WOMEN	EXISTING NUMBER OF BEDS	NUMBER OF BEDS NEEDED	NUMBER OF BEDS MISSING	PERCENTAGE OF BEDS MISSING
Austria	8,978,929	30	32	839	898	59	7%
Belgium	11,617,623	39	56 ¹⁴	2,521	1162	0	0%
Bulgaria	6,838,937	13	13	128	684	556	81%
Croatia	3,862,305	11	25	346	386	40	10%
Republic of Cyprus	904,705	4	5	79	90	11	13%
Czech Republic	10,516,707	7	22	200 ¹⁵	1,052	852	81%
Denmark	5,873,420	70	85	878	587	0	0%
Estonia	1,331,796	18	18	170	133	0	0%
Finland	5,548,241	1	29	230	555	325	59%
France	67,871,925	54	111	4,905	6,787	1,882	28%
Germany	83,237,124	380	380	2,720 ¹⁶	8,324	5,604 ¹⁷	67%
Greece	10,459,782	22	22	410	1,046	636	60%
Hungary	9,689,010	0	53	304	969	665	69%
Ireland	5,060,004	21	N/A	149 ¹⁸	506	357	71%
Italy	59,030,133	431	N/A	3,200	5,903	2,703	46%
Latvia	1,875,757	17	N/A	N/A	188	-	-
Lithuania	2,805,998	0 ¹⁹	0	0	281	281	100%
Luxembourg	645,397	7	7	219	65	0	0%
Malta	520,971	5	6	95 ²⁰	52	0	0%
Netherlands	17,590,672	25	73	1,300	1,759	459	26%
Poland	37,654,247	1	37	633 ²¹	3,765	3,132	83%
Portugal	10,352,042	35	37	631	1,035	404	39%
Romania	19,042,455	114	156	1,260 ²²	1,904	644	34%
Slovakia	5,434,712	9	N/A	183 ²³	543	360	66%
Slovenia	2,107,180	26	29	432	211	0	0%
Spain	47,432,893	276	N/A	3,639	4,743	1,104	23%
Sweden	10,452,326	N/A	282	1,653	1,045	0	0%
TOTAL	446,735,291	1,616	2,232²⁴	27,124	44,674	20,075²⁵	39%²⁶

14 This number does not include the living units accessible to women in Flanders.

15 This number refers to the beds in the seven women-only shelters.

16 Number of family places.

17 Number of missing family places.

18 The number of shelter beds is based on the third quarter of 2022, as figures for the end of 2022 are not available.

19 This information is from the WAVE Country Report 2021.

20 Number of beds in four women-only shelters.

21 Number of shelter beds from the WAVE Country Report 2021.

22 This number only includes the beds in women-only shelters.

23 Number of beds in seven women-only shelters, data about the other shelters accessible to women is not available.

24 Total number of shelters accessible to women includes also the 754 women-only shelters in the countries without an available number of all shelters accessible to women.

25 Total number of beds missing is the sum of number of beds missing in each country.

26 The average percentages of beds missing is calculated through the percentage of beds available.



Table 4: Shelters accessible to women in European countries outside of the EU (2022)

	TOTAL POPULATION	TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF SHELTERS ACCESSIBLE TO WOMEN	EXISTING NUMBER OF BEDS	NUMBER OF BEDS NEEDED	NUMBER OF BEDS MISSING	PERCENTAGE OF BEDS MISSING
Albania	2,793,592	N/A	24	153 ²⁷	279	126	45%
Armenia	2,963,251 ²⁸	2	4	30	296	266	90%
Azerbaijan	10,156,366	2	11	420	1,016	596	59%
Belarus	9,408,350 ²⁹	4	4	52	941	889	94%
Bosnia & Herzegovina	3,492,018 ³⁰	8	9	189 ³¹	349	160	46%
Georgia	3,688,647	9	9	170	369	199	54%
Iceland	376,248	2	2	28 ³²	38	10	26%
Kosovo	1,798,188 ³³	10	11	180	180	0	0%
Liechtenstein	39,308	1	1	10	4	0	0%
North Macedonia	1,837,114	9	14	50	184	134	73%
Republic of Moldova	2,603,729	8	8	181	260	79	30%
Montenegro	617,683	3	3	42	62	20	32%
Norway	5,425,270	0	43	969 ³⁴	543	0	0%
Russian Federation	143,666,931	30 ³⁵	116 ³⁶	N/A	14,367	N/A	N/A
Serbia	6,797,105	N/A	14	190	680	490	72%
Switzerland	8,738,791	24	N/A	437	874	437	50%
Türkiye	84,680,273	146	146	3,534	8,468	4,934	58%
Ukraine	40,997,698	N/A	73	N/A	4,100	N/A	N/A
United Kingdom ³⁷	67,029,329	296	339	5,371	6,703	1,474	22%
England	56,536,419 ³⁸	227	270	4,344	5,654	1,310	23%
Northern Ireland	1,904,600 ³⁹	14	14	332	190	0	0%
Scotland	5,479,900 ⁴⁰	36	36	423 ⁴¹	548	125	23%
Wales	3,105,410 ⁴²	19	N/A	272	311	39	12%
TOTAL (19)	397,109,891	554	855⁴³	12,006	39,713	9,814⁴⁴	70%⁴⁵

27 Number from the WAVE Country Report 2021, it refers to the eight women's shelters that offer long-term accommodation.

28 The most recent available data on Eurostat is from 2021.

29 The most recent available data on Eurostat is from 2020.

30 The most recent available data on Eurostat is from 2019.

31 Number of beds in the eight women-only shelters.

32 This number only includes the beds in the two women-only shelters in Iceland, as the other shelter accessible to women survivors of violence is not a specialised shelter and more generally for homeless women.

33 The most recent available data on Eurostat is from 2021.

34 Number of available beds based on state data from 2019.

35 This is just an estimation based on the situation in St. Petersburg. It is estimated that there are about 30 women-only shelters all over the country, most of them run by municipalities.

36 This is based on data from the WAVE Country Report 2021 and an estimation of the current number of women-only shelters for women survivors of violence. Accurate and updated numbers are not available.

37 United Kingdom encompasses England, Northern Ireland, Scotland and Wales.

38 Population data from the UK Office for National Statistics.

39 Northern Ireland Statistics and Research Agency, population estimates for mid-2021.

40 National Records of Scotland, mid-year population estimates 2021.

41 This is based on the number of beds for 34 services, for a total of 419 beds, plus an estimated 4 extra beds in one other service. There is one service with no available number of beds.

42 Office for National Statistics, *Estimates of the population for the UK, England, Wales, Scotland and Northern Ireland*, mid-2021 edition.

43 Total number of shelters accessible to women includes also the 43 women-only shelters in the countries without an available number of all shelters accessible to women.

44 Total number of beds missing is the sum of number of beds missing in each country.

45 The average percentage of beds missing is calculated through the percentage of beds available.



Table 5: Women's centres in EU Member States (2022)

	NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
Austria	46	98,988	N/A
Belgium	49	120,081	Women's NGOs; Other NGOs; State
Bulgaria	25–30	141,105 ⁴⁶	Women's NGO (20 centres); Other NGOs (5–10 centres)
Croatia	61	32,787	N/A
Republic of Cyprus	1	463,622	Women's NGO (1 centre)
Czech Republic	26	205,113	Women's NGO (5 centres); Other NGOs (N/A); State (N/A)
Denmark	35 ⁴⁷	84,300	Women's NGO; State
Estonia	17	41,081	Women's NGOs (16 centres); State municipality (1 centre)
Finland	34	82,504	Women's NGO (1 centre); Other NGOs (13 centres); State (20 centres)
France	250	140,144	N/A
Germany	492	85,712	Women's NGO (180 centres); Welfare organisations (299 centres); Other (N/A)
Greece	51	104,805	Women's NGOs (7 centres); State (44 centres)
Hungary	0	-	-
Ireland	40	63,907	Other NGOs (40 centres)
Italy	373	80,995	Women's NGOs; Other NGOs; State
Latvia	3	335,567	Women's NGOs (3 centres)
Lithuania	16	93,712	Women's NGOs; Other NGOs
Luxembourg	8	40,042	Women's NGO's (5 centres); Other NGOs (3 centres)
Malta	8	31,363	Women's NGO (1 centre); Other NGOs (5 centres); State (1 centre); Police (1 centre)
Netherlands	25	353,808	Women's NGOs (9 centres); Other NGOs (16 centres)
Poland	37	525,512	Women's NGOs (1 centre); Other NGOs; State
Portugal	197	27,558	Women's NGOs (2 centres); Others (N/A)
Romania	38	257,964	Women's NGOs (13 centres); State (25 centres)
Slovakia	27	102,845	Women's NGOs (14 centres); Other NGOs (11 centres); Others (2 centres)
Slovenia	16	65,593	Women's NGOs (11 centres); Other NGOs (4 centres); State (1 centre)
Spain	920	26,300	N/A
Sweden	200	25,958	Women's NGOs; Other NGOs; State
TOTAL (27)	2,995⁴⁸	76,257	Women's NGOs (289 centres); Other NGOs (97 centres); State (91 centres); State municipality (1 centre); Police (1 centre); Welfare organisations (299 centres); Other (2 centres)

⁴⁶ Number of female population per centre based on an estimate of 25 women's centres in Bulgaria.

⁴⁷ This figure is retrieved from the WAVE Country Report 2021 as figures from 2022 are not available.

⁴⁸ Total estimated number of women's centres only includes 25 women's centres for Bulgaria, as only an estimate of 25–30 centres was provided.



Table 6: Women's centres in European countries outside of the EU (2022)

	NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
Albania	13 ⁴⁹	108,195	Women's NGOs; Other NGOs; State; Other (religious institutions)
Armenia	11	142,286	Women's NGOs (9 centres); Other NGOs (2 centres)
Azerbaijan	20	254,092	State (9 centres); UN and state (11 centres)
Belarus	0	-	-
Bosnia & Herzegovina	11	163,535	Women's NGOs (9 centres); Other NGOs (2 centres)
Georgia	8	239,832	Women's NGOs (3 centres); State (5 centres)
Iceland	7	26,165	Women's NGOs (3 centres); Collaboration between state, municipalities, and NGOs (4 centres)
Kosovo	3	301,181	Women's NGOs (3 centres)
Liechtenstein	1	19,812	Women's NGO (1 centres)
North Macedonia	10	92,610	Women's NGOs (9 centres); Other NGOs (1 centres)
Republic of Moldova	10	135,720	Women's NGOs; Other NGOs
Montenegro	7	44,644	Women's NGO (7 centres)
Norway	43	62,510	Women's NGOs; Other NGOs; State; Other (religious institutions)
Russian Federation	150–180	514,134 ⁵⁰	N/A
Serbia	30	116,302	Women's NGOs; State
Switzerland	N/A	N/A	N/A
Türkiye	434	97,355	State (81 centres); Municipalities (303 centres); Women's NGOs (50 centres)
Ukraine	N/A	-	N/A
United Kingdom	332	103,057	Women's NGOs (254 centres); Other NGOs (70 centres); State (8 centres)
England	278 ⁵¹	103,792	Women's NGOs (202 centres); Other NGO's (68 centres); State (8 centres)
Northern Ireland	8	120,969	Women's NGOs (8 centres)
Scotland	41	68,472	Women's NGOs (39 centres); Other NGOs (2 centres)
Wales	5	317,135	Women's NGOs (5 centres)
Total	1,090⁵²	189,632	Women's NGOs (348 centres); Other NGOs (75 centres); State (103 centres); UN and State (11 centres); Municipalities (303 centres); Collaboration between state, municipalities, and NGOs (4 centres)

49 Number from the WAVE Country Report 2021.

50 Estimate based on the latest available data on female population in 2014. Number of female population per centre based on an estimate of 150 women's centres in the Russian Federation.

51 This number is calculated according to the number of individual local services offering different service types (for example, a local service offering legal support and outreach was counted as one centre).

52 Total estimated number of women's centres only includes 150 women's centres for the Russian Federation, as only an estimate of 150-180 centres was provided.

Methodology

Introduction

The WAVE Country Report (CR) is a key publication of the WAVE Network and it is published every two years. The aim of the CR is to survey the situation of women's specialist services (WSS) in 46 European countries and identify current gaps concerning service provision, putting an emphasis on five key areas of service provision – women's helplines, shelters accessible to women, women's centres, specialist services for survivors of sexualised violence, and primary prevention services.

This approach is in line with relevant provisions on specialist support services enshrined in the Council of Europe Convention on preventing and combating violence against women and domestic violence, also known as the Istanbul Convention (IC), in Articles 22, 23, 24 and 25, and with the

provisions about prevention in Chapter III of the IC, particularly articles 12-15. Furthermore, this report seeks to highlight which European countries, within and outside of the EU, meet the minimum standards of the IC on service provision on national women's helplines, shelters accessible to women survivors of VAW, and the minimum standards set by the Council of Europe for provision of women's centres.⁵³ Moreover, available data about femicide in the surveyed countries are presented.

This research is based on quantitative data, represented by the number of services available in the surveyed countries. However, qualitative information is also collected, for instance, to assess the quality and accessibility of services provided.

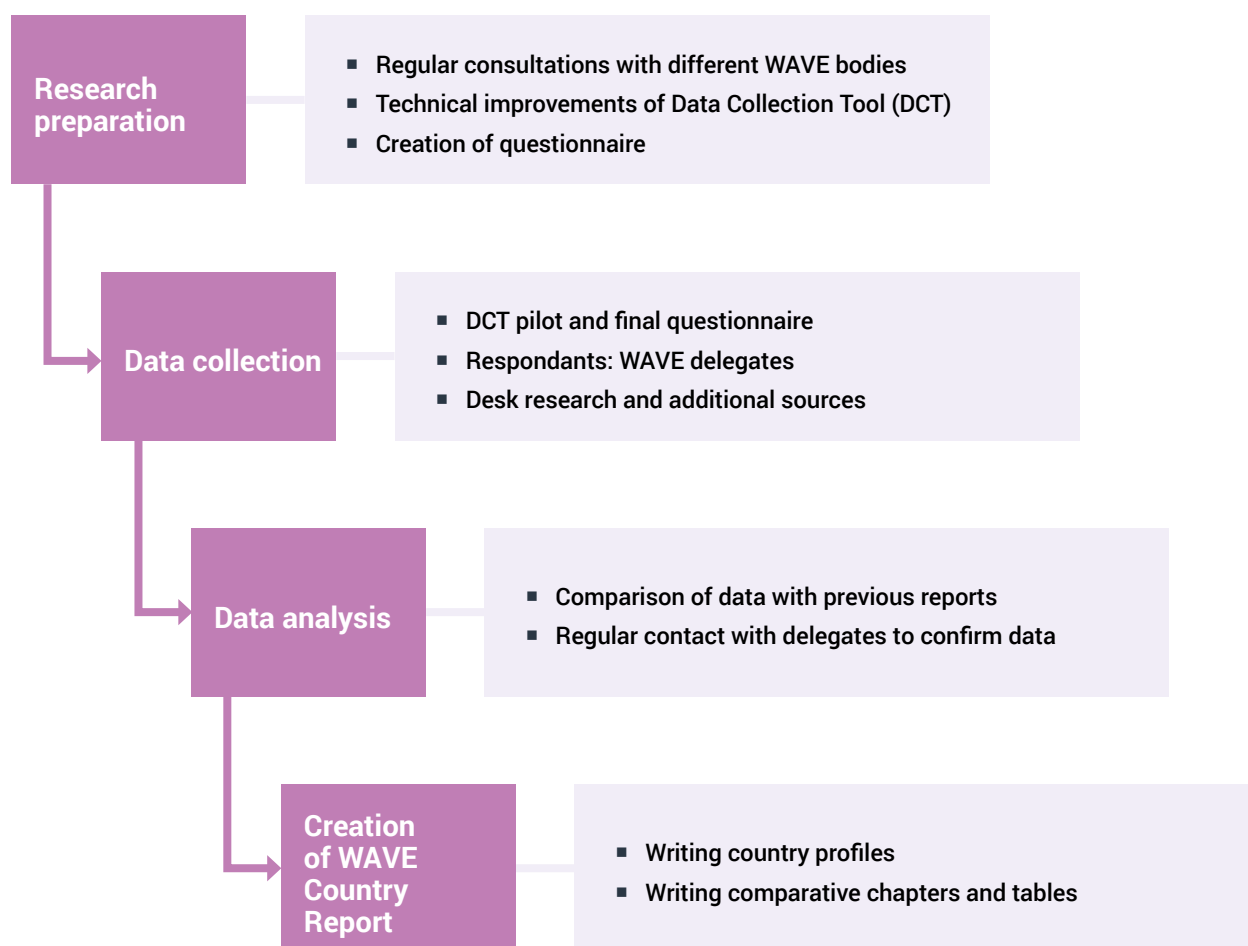


Figure 1: Methodological process of WAVE Country Report 2023

53 Council of Europe, *Combating violence against women: minimum standards for support services* (2008), [https://www.coe.int/t/dg2/equality/domesticviolencecampaign/Source/EG-VAW-CONF\(2007\)Study%20rev.en.pdf](https://www.coe.int/t/dg2/equality/domesticviolencecampaign/Source/EG-VAW-CONF(2007)Study%20rev.en.pdf)

Research preparation

Multiple WAVE bodies are involved in the development process of the WAVE Country Report, in order to publish a tool that reflects the current situation of women's specialist services in Europe.

The Editing Group (EG) was established to support the WAVE team in the development of the WAVE Country Report and questionnaire, and aims to implement knowledge and expertise from WAVE's diverse membership into the CR. The EG involved in the research preparation of the CR 2023 is composed of eight members, including WAVE Advisory Board Members, Board Members, and WAVE Team members. The members' responsibilities include providing their expert advice and support on key decisions regarding the methodology and participating in the editing of the Report.

In 2023, the WAVE Country Report includes for the first time a focus on primary prevention (PP) activities. To ensure adequate data collection on the topic, the support of the WAVE Thematic Working Group on primary prevention was essential. This working group was established in 2022 and consists of about 15 WAVE members who either are themselves directly working on primary prevention or are interested in integrating primary prevention into their organisational work. In February and March 2023, the working group contributed to the development of the questionnaire, and in October 2023 it was involved in the editing of the related chapter.

Additionally, the WAVE Country Report is presented and discussed regularly with the WAVE Advisory Board during its in-person meetings. The Advisory Board consists of the same delegates and co-delegates who are responsible for the data collection at the national level. Presenting the latest published report and discussing the strategic aims involved helps direct the development of the report over the years, based on the experience and input of the WAVE delegates from 46 countries.⁵⁴ In May 2022 and May 2023, the Advisory Board met in Vienna, and sessions related to the CR took place to present the data from the previous report and collect input for the current one.

Lastly, key decisions which are related to WAVE's advocacy and lobbying strategy are discussed by the WAVE Board whenever necessary and guide the research and the publications of the WAVE Network.

The online Data Collection Tool

The Data Collection Tool (DCT) is an online platform run by the WAVE Network and used to collect data on women's specialist services in Europe. It includes a questionnaire in English based on the minimum standards for data collection required by the Istanbul Convention. It is based on a mapping report published by WAVE in 2016⁵⁵ and was first used for the WAVE Country Report published in March 2018. Since then, the online tool was redesigned, to make it more user-friendly. In addition to this, the number of sections and questions included in the online questionnaire were shortened and reformulated, to make the data and information requests more explicit and concise. This was done in an effort to facilitate the data collection process and ensure more WAVE country delegates are able to submit their answers and provide updated data on women's specialist services. In 2023, the Data Collection Tool was further developed to improve the quality of the information collected. Multiple changes have been made to make the questionnaire clearer for the respondents, as most of them are not native English speakers, and might have a different understanding of the services and terminology included in the survey: some questions have been reformulated to make them more understandable, additional comment boxes have been added to allow respondents to clarify their answers, and more prompts have been included on the open questions to increase the response rate. The section on femicide has been developed, in order to include questions that are more relevant for the sake of the research aim and to collect information that could be used in the respective chapter. Finally, one additional section on primary prevention has been included in the questionnaire.

The questionnaire consists of a set of general questions (information about the respondent and availability of national statistics) and six core sections: national women's helplines, shelters accessible to women, women's centres, support services for survivors of sexualised violence, and primary prevention activities. The core sections are divided into main questions and additional questions, to highlight which parts are to be prioritised by respondents, in case of insufficient data or lack of available human resources to complete the whole questionnaire. The online questionnaire consists of approximately 55 questions, both closed and open-ended. Definitions of the different types of specialist services were provided directly in the online Data Collection Tool, next to the related questions.

⁵⁴ WAVE currently does not have members in Norway and Lithuania. The country-specific data was collected through desk research.

⁵⁵ WAVE Network, *WAVE Mapping, Administrative data collection by women's support services in Europe: national women's helplines, shelters, and centres* (2016).

Data collection process

Pilot phase and data collection process

Before starting the data collection process for the current country report, the updated Data Collection Tool was piloted by the delegates from two countries (Germany and the Netherlands) in March 2023. The aim was to gather feedback and assess how user-friendly the DCT was and what could be improved. This pilot phase further contributed to ameliorating the structure and the conciseness of the questionnaire, whilst ensuring comprehensive data collection at the same time. The actual data collection took place in May and June 2023.

The data presented in this report was collected directly from WAVE member organisations across Europe, represented by one delegate and one co-delegate from each country. When filling out the questionnaire, country delegates were encouraged to consult with other WAVE Members in their countries and relevant government agencies whenever necessary, in order to provide reliable and verified data.

The data collected through the DCT was complemented with desk research, for instance in cases where some information was lacking, or the data provided was not clear. Additional sources used to prepare the country profiles include GREVIO baseline evaluation reports about the countries that ratified the IC, CEDAW periodic reports for countries that have not ratified the IC, and reports published by the institutes of national statistics.

A common European Data Collection Tool is a long-term project for WAVE, as there is currently only limited data available on women's specialist services for most countries included in WAVE's Database. This incremental process will be beneficial to providers of women's specialist support services and policymakers alike, as it will strengthen the work and impact of such services, helping them to become more visible at a European level.

Countries included in the data collection

The data analysed in the report covers 46 European countries (27 European Union (EU) Member States and 19 European countries outside the EU) and was provided by WAVE delegates and co-delegates of each country, with the support of the WAVE Team members. For some countries, more delegates were involved in the data collection, each of them providing data for their own region or nation. This is the case for the United Kingdom, Belgium, Bosnia and Herzegovina, the Republic of Cyprus and the Republic of Moldova. In the case of three countries (Lithuania, Norway and Poland) the data collection has been conducted

by the WAVE Team through desk research, as it has not been possible to receive the necessary information from these countries during the data collection period.

As far as the United Kingdom (UK) is concerned, delegates and co-delegates from each of the UK countries (England, Scotland, Wales and Northern Ireland) filled out the questionnaire. Country profiles were drafted for each of the UK countries, however, when looking at service provision in Europe and in the countries outside the EU, the UK was considered as a single country. Two questionnaires were also filled out by delegates from Belgium, one covering Flanders (the Flemish-speaking part) and another one covering Brussels and Wallonia (the French-speaking part). One country profile was drafted for Belgium, covering the overall situation of service provision in the country, while providing specific information for each of these two regions. Similarly, two questionnaires were filled out by delegates from Bosnia and Herzegovina, one covering the Federation of Bosnia and Herzegovina and one covering Republika Srpska. One country profile was drafted, illustrating the overall situation in Bosnia and Herzegovina and its specificities. In the case of the Republic of Cyprus, since the government does not exercise direct control over the territory of northern Cyprus, administered by Turkish Cypriot authorities, two questionnaires were filled out by WAVE delegates, therefore the country profile presents the data from northern Cyprus in a different section, at the end of the profile. A similar approach was undertaken for the Republic of Moldova, where the government does not exercise direct control over the territory of Transnistria. In this case as well, two questionnaires were collected, and the profile presents data from Transnistria in a separate section.

Lastly, the CR includes information concerning the process of signing and ratifying the IC by the Member States of the Council of Europe up until November 2023.

Sources for population data

Population data presented in the country profiles and tables were retrieved from Eurostat's database and cover the year 2022⁵⁶ unless otherwise specified. If 2022 data was unavailable for certain countries at the time this report was finalised, the latest year with available data was selected. Different sources were used for retrieving population data of the four countries (England, Scotland, Northern Ireland and Wales) encompassing the UK.

56 Eurostat, Population change - Demographic balance and crude rates at national level: https://ec.europa.eu/eurostat/databrowser/view/DEMO_GIND/default/table?lang=en, and Population on 1 January by age and sex, https://ec.europa.eu/eurostat/databrowser/view/DEMO_PJAN_cus-tom_7115281/default/table, data extracted on 8 August 2023.

Data analysis process

Once WAVE received the data from the countries, the WAVE team controlled each submission and compared it with the data received for previous Country Reports. In case of notable inconsistencies, the respondents were contacted to confirm the reliability of the information provided. The regular communication with the respondents allowed for an improvement in the quality of information and precision of the country profiles, which were corrected and approved by the respondents before being published.

Methodological approach to assess service provision

This report presents data and information on women's specialist services covering the year 2022. Where data was unavailable for the year 2022, older data has been provided (referenced in footnotes). The Country Report 2021 included a specific chapter on the effects of the COVID-19 pandemic on Women's Specialist Support Services, which has been discontinued in this Report. From 2023, a new chapter on primary prevention activities has been added.

To assess the provision of **national women's helplines**, the standards provided by Article 24 of the Istanbul Convention were applied. Namely, a 24/7 and free of charge provision of a national women's helpline is needed to meet the IC standards. While Article 24 recommends that national helplines should provide advice in relation to all forms of violence, this Report considers helplines offering support mainly or only in relation to domestic violence as meeting the standards for the provision of national women's helplines. WAVE's methodology aims at recognising helplines across Europe that provide a good and gender-competent service to survivors, even if limited to domestic violence, to welcome current promising practices, and eventually encourage states to ensure adequate helpline provision for survivors of all forms of violence.

When assessing the capacity of **women's shelters** to accommodate women and their children, the standards provided by Article 23 of the Istanbul Convention were applied. For this methodology, one family shelter place is considered to be equivalent to one shelter bed space. When referring to family places, the Istanbul Convention and its Explanatory Report prescribe as a minimum requirement one family place (covering two beds, one for a woman and one for a child) per 10,000 population.⁵⁷ Despite such criteria, WAVE has decided to use the term 'bed spaces', to avoid any confusion regarding the number of persons that can be accommodated in one family shelter place. As noted by the Council of Europe in its monitoring report

from 2014, "beds have become the established measure of take-in capacity, recognising that the number of women who can stay in a shelter varies depending on the number of children they bring with them. It refers to the number of persons, women and/or children, who can stay at the shelter at any one time."⁵⁸

As in the CR 2021, this report distinguishes between women-only shelters and shelters accessible to all survivors, including women. Therefore, a separate column in the tables of the country profiles is available to record the number of women-only shelters in each country. WAVE considers it important to monitor the availability of gender-specific services, as women's NGOs providing specialist support are increasingly losing funding or contracts in favour of gender-neutral or generic providers.⁵⁹ WAVE's methodology aims to underline the importance of shelters by and for women, which are applying a feminist and gender-specific approach. When presenting information about other shelters which are not only supporting women, the groups of survivors supported by these shelters are specified, whenever this information was provided by the respondents. These might include shelters supporting women, men, non-binary people, transgender women and men, or other groups of survivors.

The standard set by the IC is a useful tool to assess the availability of beds in shelters accessible to women and to compare data across countries. Nevertheless, some countries might have higher or lower needs than what is required by the IC. Therefore, an additional comment box was added to the questionnaire and the respondents could explain whether the available number of beds does or does not meet the specific country needs. In some cases, this additional information helped to contextualise the availability of beds beyond the IC standards.

Similarly, an adequate number of beds available in a specific country does not necessarily reflect the accessibility of the shelters for different groups of survivors. Therefore, respondents were asked if the shelters in their country are accessible to the following groups of survivors: women with uncertain residence status, undocumented women, homeless women, women with physical and/or cognitive disabilities, women with substance abuse issues, older women, transgender women, and women with older sons. Additionally, it was assessed if there are any shelters specialised in supporting vulnerable groups, e.g., migrant/undocumented women, women with disabilities, BME (black minority ethnic) women, LGBTQI+ people, older women, or women survivors of specific forms of violence such as

57 Council of Europe, *Explanatory Report to the Council of Europe Convention on preventing and combating violence against women and domestic violence* (2011), Art. 23, para. 135, <https://rm.coe.int/1680a48903>

58 Hagemann-White, C., *Analytical study of the results of the fourth round of monitoring the implementation of Recommendation Rec (2002)5 on the protection of women against violence in Council of Europe member states* (2014), Council of Europe: Gender Equality Commission, p. 24.

59 WAVE Network, *WAVE Handbook 2020: How Gender Neutral Policy and Practice is Dismantling Women's Specialist Support Services and Ways to Counteract It* (2020), p. 25. Currently available only for WAVE members.

trafficking, so-called 'honour-based' violence, forced marriage and female genital mutilation (FGM). This information is included in the country profiles, in order to provide a clearer picture of the accessibility of shelter services in Europe.

The definition of **women's centres** can encompass a broad range of women's centres, from intervention centres to centres for survivors of trafficking to centres serving women from marginalised groups. Many women's centres have a focus on providing counselling, however, WAVE recognises that not all women's centres necessarily provide these services, e.g., some focus primarily or solely on prevention work and advocacy. In the relevant tables of the Report, women's centres are categorised under different headings than in previous reports. Firstly, the number of female population per centre is presented, to highlight that in most of the cases, there are not enough centres to comply with the Council of Europe recommendation of one counselling centre for VAW survivors for every 50,000 women. Secondly, the tables relating to women's centres include a column to show whether centres are run by women's NGOs, other NGOs, the State, or other providers. This information is important to track because it is an indication of the general approach to service provision in each country. WAVE recognises that women's NGOs mostly have a gendered understanding and analysis of VAW, and their service provision is based on a feminist, gender-sensitive approach that aims at empowering women.

As in the shelters section, additional accessibility information was gathered with respect to women's centres. Whenever available, the country profiles present information about specialist support provided to survivors of specific forms of violence and for survivors from vulnerable groups.

Article 25 of the Istanbul Convention makes specific reference to the provision of support for survivors of sexualised violence (SV). The requirements are that states provide for the establishment of appropriate and easily accessible rape crisis or sexual violence referral centres for survivors, with the recommendation being one centre available for every 200,000 inhabitants. Therefore, data on the availability of women's centres and **support services for survivors of sexualised violence** are presented in different sections of the CR. Although sexualised violence can also be a form of domestic violence, specialised services for survivors of sexualised violence should be analysed separately from domestic violence services. Importantly, sexualised violence can be committed irrespective of the relationship between the perpetrator and the survivor, in any setting,

including but not limited to home and work. Another key feature, that is normally not covered by general services, is a holistic service provision for survivors of child sexual abuse (CSA) and its long-term psychological and physical impact.

Some women's centres provide support for women survivors of sexualised violence. However, this support is not always specialised and may therefore result in repeated referrals, as many survivors have unique needs e.g., immediate forensic testing, complex trauma support and medical services, which general women's centres supporting all survivors of VAW cannot necessarily provide. Services responding to survivors' needs should ensure specific SV training and specialisation of service provision.

It is still important to notice that different European countries have varied approaches to the provision of SV services. In some countries, women's centres are offering specialised holistic support for all forms of violence against women, including SV. The aim is to avoid multiple referrals and re-traumatisation, as well as ensure adequate and feminist support to survivors. Other countries have consolidated networks of rape crisis centres, with trained staff offering immediate and long-term confidential survivor-led counselling and therapy and providing various services such as advocacy and prevention. To reflect these national differences, in the questionnaire filled out by WAVE delegates both sections about women's centres and SV support services included the same multiple-choice question with a list of services provided to survivors of SV. The availability of such services is not summarised in tables in this Report, to avoid comparison between countries that apply different approaches.

Questions about **primary prevention** (PP) were included in the questionnaire for the first time in this edition of the WAVE Country Report. The information gathered will establish a base from which to assess and monitor action taken by countries to meet the general obligations of state parties laid out in chapter three of the Istanbul Convention. Whenever available, the data presented refer to the existence of National Action Plans on violence against women and girls, operational definitions of PP, the available provision and funding of PP activities, and the beneficiaries of such activities.

Limitations of collected data

While all country delegates made efforts to ensure the data and information provided through the questionnaire was accurate, the figures presented should be interpreted with caution. In some cases, respondents were unable to obtain all relevant information and data. This was either because of limited capacity or because government agencies either do not collect this data or they do not make the data available to the public. Therefore, they could not present the whole picture of specialist services available in their country.

One of the limitations of the questionnaire relates to how the definitions were interpreted by respondents, the types of services they reported on and how they classified these. Not all members of the WAVE Network have the same understanding of definitions of women's specialist services; developing a common understanding of definitions in this sector is a long-term goal of the WAVE Network.

Moreover, not all countries have the same systems in place to support survivors of VAW, and while some models are successfully implemented in some countries, these might not work in other contexts, making the comparability of country situations difficult. This is the case with support services for survivors of sexualised violence, as mentioned in the previous section.

When it comes to the primary prevention data, this should be treated with caution, as it was collected for the first time and it is not yet fully comprehensive and comparable. This is due to the lack of information at the national level, or the lack of knowledge about available PP activities by the respondents.

The tables included in the report aim at summarising the results of the data collection and allow a comparison across countries and an overview of the situation at the European level. When consulting the tables, footnotes should be taken into account, as the lack of data in some countries does not always allow for a comparison across years and across data from different editions of the Country Report.

As emerged in previous reports, there are serious gaps in the availability and comparability of data concerning the recorded number of femicide victims in the 46 countries surveyed, as there is no Europe-wide data collection system or agreed use of the term femicide. These figures should be treated with caution. Data on the number of femicide victims were not available in nine of the countries surveyed, and the data available in the surveyed countries are not statistically robust and should be regarded as estimates based on the best available sources.

The importance of women's specialist services in the context of gender-based violence against women and gender neutrality

The landscape of addressing gender-based violence against women (GBVAW) and the provision of specialist services for survivors continues to evolve, reflecting both progress and challenges. For decades, women's specialist services (WSS) have stood as essential pillars, offering tailored, survivor-centred support, that recognises the complex and specific needs of women and their children impacted by violence against women and domestic violence (VAW/DV) and that applies a feminist approach. However, recent trends towards 'gender-neutral' policies threaten the specialised assistance provided by these essential services.

In 2021, the WAVE Country Report emphasised the critical importance of WSS, aligning with the principles outlined in international conventions such as the UN Convention on the Elimination of Discrimination against Women (CEDAW) and the Istanbul Convention (IC). It was underscored that VAW/DV stem from deeply entrenched inequalities and structural discrimination against women, necessitating gender-specific responses to address the multifaceted challenges faced by survivors.

The year 2023 marked the accession of the European Union to the IC, signalling the need for EU Member States to adapt their standards of service provision for VAW and DV to meet the standards of the IC. As the only report of its kind providing data on the availability of WSS in Europe, the WAVE Country Report endeavours to present an accurate depiction sourced directly from WSS themselves. Their observations on challenges and obstacles to specialised service provision stem from firsthand experiences on the ground, rendering the report an authentic reflection of the situation across EU and non-EU countries.

Recent EU legislative initiatives, such as the proposed EU Directive on Combatting VAW and DV⁶⁰ and the proposal for a revision of the Victims' Rights Directive⁶¹ have aimed, among other things, at delineating the unique characteristics of VAW/DV, highlighting the need for differentiating between general and specialised services, the latter tailored explicitly to address the specific support and protection needs of survivors of GBVAW.

WSS support survivors by facilitating informed choices and ensuring the highest quality of support tailored to their particular context and needs, placing the women and their active consent and participation at the centre of

every intervention. The work carried out by WSS includes, but is not limited to, the provision of shelter and safe accommodation, immediate support and collection of forensic medical evidence in cases of sexualised violence, short- and long-term counselling, advocacy and outreach, carrying out primary, secondary and tertiary prevention activities, as well as running telephone helplines applying a gendered understanding of VAW and offering non-judgemental listening, counselling survivors and directing them to relevant services. The experience developed over time and in diverse contexts has demonstrated the added value of holistic, survivor-centred support that recognises women's multiple and intersecting needs. Such services should be adequately resourced, easily accessible and with adequate geographical distribution. These measures must be implemented by way of effective cooperation among all relevant agencies, institutions and organisations, and it is imperative that legislative frameworks, strategies, programmes and policy decisions explicitly recognise the indispensable role of these services in addressing the gendered nature of violence and ensuring the rights and safety of survivors.

The significance of women's specialist services cannot be overstated. They have historically emerged based on feminist methodologies and their upcoming was not just a response to the limitations and inadequacies of mainstream services in effectively responding to the needs of survivors of VAW/DV, but an imperative acknowledgement of the diverse, gendered nature of violence experienced by women, with approximately 90% of perpetrators being men.

The rise of 'gender-neutral' policies, disregarding the disproportionate impact of male violence against women, poses multifaceted and detrimental implications. State-run services adopting a gender-neutral approach fail to comprehend the gendered dynamics of violence, perpetuating systemic disadvantages faced by women. Moreover, defunding and exclusion of women's specialist services under the guise of inclusivity and equality threaten the reliability and expertise consistently offered by these services addressing the specific needs of women survivors of gender-based violence. Providing direct and prompt access to specialised services for survivors of VAW and DV is not just practical; it is an ethical obligation fundamental to upholding victims' rights and the safety of survivors.

60 EU Directive on Violence Against Women and Domestic Violence (2022/0066 (COD) accessible at https://eur-lex.europa.eu/procedure/EN/2022_66.

61 Victim's Rights Directive (2012/29/EU), accessible at <https://www.europarl.europa.eu/legislative-train/theme-a-new-push-for-european-democracy/file-revision-of-the-victims-rights-acquis>.



National women's helplines



Introduction

Where do women turn for advice if their spouse or partner is abusing them? Who will listen with care and without judgement to a survivor of sexual assault? What happens in a time of crisis when lives may be in danger? In these and other situations, at any time of day or night, a reliable and accessible point of contact is essential. Telephone helplines have been a core component of women's specialist services (WSS) since early feminist campaigners broke the silence about violence against women (VAW) and reached out to offer practical support. Being able to call a free and confidential number has been a lifeline for countless women who are survivors of VAW. Speaking to someone who understands the dynamics of VAW and can provide immediate information about emergency shelter, ongoing support, and legal rights is a vital first step out of isolation. Whether a survivor calls once or many times, helplines have enabled millions of women and girls to find immediate protection in times of harm and danger. They are key catalysts for longer-term change, as women seek to recover control, discover their options and rebuild their lives. Helplines are particularly important for women who live in remote or rural areas without local specialist services.

The Istanbul Convention (IC) Article 24 states that

Parties shall take the necessary legislative or other measures to set up state-wide round-the-clock (24/7) telephone helplines free of charge to provide advice to callers, confidentially or with due regard for their anonymity, in relation to all forms of violence covered by the scope of this Convention.

It also recommends that national helplines should offer support in all relevant languages.

The Convention calls for free and widely advertised national helplines – that should include listings on all news and media coverage of violence against women - dealing with all forms of violence covered by its scope (domestic violence, rape and sexual assault, stalking, so-called 'honour-based' crimes, female genital mutilation (FGM), forced marriage, and sexual harassment). The current reality is that the majority of helplines across Europe primarily focus on domestic violence (DV). In public perception and media coverage, 'violence against women' is often equated with 'domestic violence'. Not enough countries have sufficient helpline provision for (or public acknowledgement of) sexualised violence, or other forms of VAW. In some places, forms of violence not explicitly covered by the IC (for example human trafficking or forced marriage) are significant issues, and specialist helplines have been

established accordingly. The history and development of women's NGOs responding to VAW in diverse circumstances help to explain the current pattern and scope of helplines in different countries.

Specialist women's helplines are firmly rooted in principles which are enshrined in the standards set out by the Convention. They should be staffed by properly trained women who:

- Operate from a gendered understanding of violence against women and girls (VAWG)
- Practice a survivor-centred approach to safety and human rights
- Have a culture of belief, and avoid any kind of victim-blaming
- Support the empowerment of women to make their own choices

These principles underpin helplines which are considered compliant with the Convention, for the purposes of this report.

It is true that some of the services WAVE recognises as national women's helplines deal only or mainly with domestic violence rather than the whole continuum of VAW. Others focus on sexualised violence and abuse. WAVE takes into consideration the importance of acknowledging helplines which provide a good, gender-competent service to survivors, even if they are limited to domestic violence or other particular forms and contexts of VAW. It is especially important to be supportive of recently established helplines, and those operating in difficult circumstances.

The same general approach is applied to helplines which are not exclusively for women, but nevertheless operate with a clear gendered analysis. In Scotland for example, the National Domestic Abuse and Forced Marriage Helpline run by the feminist NGO Scottish Women's Aid responds to men as well as women, but will refer men to the Respect Men's Advice Line, which is fully aligned with a gendered approach to gender-based violence (GBV).

WAVE welcomes good practice while encouraging helpline providers continually to develop expertise and widen scope, in order to offer women in all European countries the best possible service. At the same time, states are urged to ensure adequate helpline provision for survivors of all forms of violence.

Generic national helplines are not without value, but they do not have the expertise, standpoint or insight which women's NGOs have developed over decades of national

and international engagement. It is incumbent on states to ensure that national women’s helplines have stable, long-term and sustainable funding, as required under Article 8 of the Convention.


The crucial importance of helplines was particularly evident during the COVID pandemic when many countries introduced extended periods of lockdown or other mitigations which restricted movement and increased isolation. Access to the full range of VAW services was severely curtailed and in-person support became virtually impossible. The WAVE Country Report 2021 gave stark evidence of exponential increases in helpline calls or online contacts. They became the only accessible support service at a time when there was an upsurge in prevalence, intensity and severity of VAW and abuse. More complex and historic abuse issues also came to the surface for many survivors, in times of heightened stress or trauma. Women’s specialist helplines rose to these challenges with commitment and creativity. They were innovative in creating new channels and methods for contact. Live chat and website information proved vital, particularly for younger women, and

for concerned family members/friends. Great efforts were made to publicise the numbers and availability of helplines.

In some countries, additional state funding was made available, in recognition of the great need for helplines to support survivors. Other helplines struggled to meet increased demands with standstill or even reduced funding. This must have had variable impacts on the quality and accessibility of support in different countries. We aspire to equality of provision for every woman in Europe, no matter where she lives. It is unfortunate that existing inequalities were exacerbated during the pandemic.

An important function of the Country Report is to track trends and developments over time. The 2023 data collection tool did not specifically ask whether pandemic-related changes (increased calls, additional funding, etc.) have been sustained beyond lockdown restrictions, but some of the information gathered offers evidence which should be considered in that context.

Findings on the situation of national women’s helplines in Europe



	TOTAL NUMBER OF COUNTRIES WITH NATIONAL WOMEN’S HELPLINES	FREE OF CHARGE	24/7 SERVICE	NATIONAL WOMEN’S HELPLINES WHICH ARE BOTH FREE OF CHARGE AND 24/7 (MEETING THE IC STANDARDS)
Europe (46)	37	35	34	32
EU Member States (27)	22	21	20	19
European countries outside the EU (19)	15	14	14	13

Table 7: Overview of national women’s helplines in Europe

Countries with at least one state-wide helpline

In 2022, 37 of 46 European states (80%) had at least one national helpline providing support and information for women who are survivors of VAW. Some kind of helpline provision is available in all but one of the remaining countries, at the national and/or regional level. In the WAVE Country Report 2021, a state-wide helpline was reported for 39 countries. That included the helpline run by MARTA Centre in **Latvia** (*Biedrība Centrs MARTA*) which provides support to women survivors. Following reassessment of that service, it does not qualify as a national women’s helpline (as it has limited operating hours and services do

not cover all of Latvia). Unfortunately, the situation in **Belarus** has deteriorated significantly. The National Hotline for Victims of Family Violence (*Общенациональная горячая линия для пострадавших от насилия в семье*) had been operated by the international organisation ‘Gender Perspectives’ since 2012, but a court ruling suspended operation of the helpline in September 2021. This is due to severe state repression of NGOs, including those responding to domestic violence and other forms of VAW. The state of affairs has hindered access to data and other information about women’s specialist services in the country. This is an extremely serious situation for women experiencing VAW, in the wider societal context of authoritarian rule.

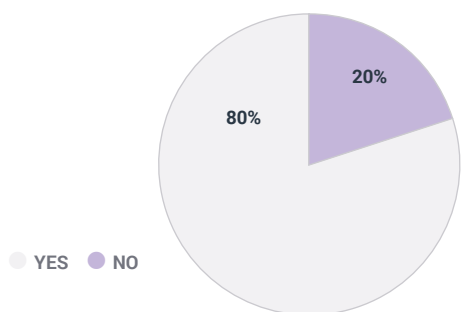


Figure 2: European countries with at least one national women's helpline

Of the countries without a state-wide helpline as of 2022, the ROSA Centre in the **Czech Republic** has since launched the ROSALIN helpline in 2023, meeting the IC criteria. There are plans currently under discussion with cantons to establish a nationwide helpline in **Switzerland**.

Article 24 of the Istanbul Convention calls for state-wide helplines as the gold standard provision. In some states, geopolitical situations or governance structures have led to the development of helplines which do not fully conform to the IC requirement, but may be suited to national circumstances. **Belgium** does not have a state-wide helpline. The country comprises three highly autonomous regions. Provision has developed to serve the needs of the two major linguistic communities, Flemish and French speakers, which largely equate with the Flanders and Wallonia Regions. None of the three helplines for French speakers are specifically for women only, but all are run by feminist organisations. The Flemish-language helpline, on the other hand, is for all victims of crime and violence and is run by Centres for General Welfare work. Note also that the **United Kingdom** is a unitary state, but comprising four nations, three of which have devolved governments. Each of the four nations operates its own national helpline, so the UK (which for statistical purposes counts as one country) is considered to comply with IC standards.

In countries which do not have a state-wide women's helpline, there may be helplines offering support to women, but which are not considered to qualify as a women's helpline according to the definition used by WAVE. This is the case particularly where provision is not specifically for women, and/or where the service does not have a gendered understanding and approach to domestic violence and other forms of VAW. This is the situation in the **Netherlands**, where the government-backed domestic violence and child abuse helpline (*Safe Home*) is for all survivors and operates from a gender-neutral perspective. **Malta** has a generic gender-neutral helpline; the separate Women's Rights Foundation legal support helpline closed in March 2023 due to the lack of resources. **Azerbaijan, Armenia** and **Belarus** likewise have generic helplines which do not conform to the standards expected of women's helplines, but do provide a form of service for women.

Most countries have regional and local helplines, often linked to and run by women's shelter organisations or women's centres, and providing excellent support to survivors of VAW. These are vital resources – especially where there is no recognised national helpline. For instance, in **Serbia**, women are reported to be much more likely to contact local WSS phone lines than the state-supported national line. Local helplines often focus only on one aspect of VAW (e.g., domestic abuse or sexualised violence), and may not be free, or available at all times. On the other hand, all kinds of organisations may run local services and helplines which do not meet a range of important standards, not least in their underpinning perspective on VAW.

National Women's Helplines meeting Istanbul Convention Standards

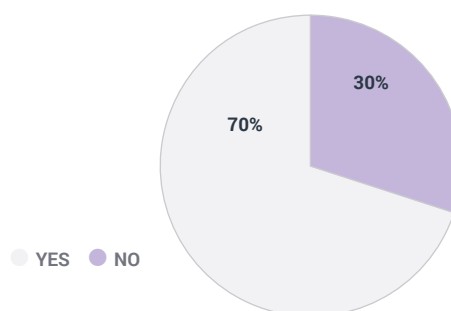


Figure 3: European countries meeting the IC standards for the provision of a national women's helpline

The Istanbul Convention calls for women's national helplines to work from a gendered perspective, to be free of charge and available 24 hours a day. It is gratifying to report that since the last Report, both the Violence Femmes Info hotline in **France** and *24 Stunden Notruf in Liechtenstein* have started to provide a full 24/7 service. This brings the number of helplines meeting IC standards up to 32 (**70% of 46 countries**). This number counts the **United Kingdom** as one state. There are four nations in the UK, each of which operates its own fully compliant national helpline. The national helpline in Northern Ireland is no longer run by Women's Aid Federation Northern Ireland, but by Nexus Northern Ireland, which frames its services as gender-neutral. As reported in the Country Report 2021, the situation in **Serbia** remains provisional because of concerns expressed: women's specialist organisations were eliminated from the tendering process for the state-supported helpline. Information provided for the Country Report suggests the *SOS telefon za žene sa iskustvom nasilja* line may not be providing a confidential, fully trained, and gender-sensitive service. Most of these helplines offer some kind of multilingual support in relevant languages. This may be provided by helpline staff who are fluent in different languages, but in some countries translation and interpretation is provided solely or partly using Language Line and other software, or drawing on specialist translation services. A number of helplines

increased accessibility through provision of interpretation for women who are deaf or have hearing difficulty.

There are eight helplines which currently can only offer support in one language. Some are in countries with very small populations, or where helpline provision is new or reliant on volunteers. In larger countries where this is the case (such as **Russia and Poland**) helplines operate with limited resources in extremely challenging circumstances.

Helplines which are not yet compliant with the Istanbul Convention

Five of the 37 national women's helplines do not fulfil one or more of the IC requirements. Those in **Hungary, Luxembourg** and **North Macedonia** are not available 24/7. The specialist helplines in **Poland** and **Türkiye** are not free of charge. In **Hungary, Poland** and **Türkiye**, these services are run by women's NGOs without state support or funding, which is directed instead to non-specialist generic helplines. As noted in the 2021 Report, the situation in those three countries for women's specialist services (including helplines) operating from a gender-sensitive perspective is extremely difficult. The political climate is hostile – directly opposed to the gendered framework of the Istanbul Convention. In challenging environments, the lack of sufficient, secure funding impedes the ability of women's specialist organisations to meet the IC standards.

Funding for national women's helplines

Who pays for helplines across Europe? The spirit and intention of the Istanbul Convention is that state parties should accept responsibility to provide adequate resources. Public funding covers all or part of the costs for helplines in 37 countries. Note that this number includes some sub-state nations and regions which submit separate WAVE surveys; the four **UK** nations, the autonomous regions of **Belgium**, and **northern Cyprus**. In most cases there is full or majority state funding, often supplemented by private donations.

Where there is substantial state investment, helplines are sometimes run directly or coordinated by a government agency, but it is more common for the work to be contracted to an NGO. However, tendering processes may not always result in appropriate specialist women's organisations being awarded contracts. WAVE members in **France** and **Serbia** express concerns of this nature, and there are a number of countries where state support is channelled into generic or gender-neutral helplines. The result is that helplines which meet IC requirements have to rely on other sources to finance their service (such as trusts, donations, and international funding). This is the situation in **Türkiye, Hungary, Ukraine** and **Poland**.

Taking an overall view of funding, little has changed since 2021. At a time of general economic recession, there are various factors which may account for the lack of any or sufficient state funding for national women's helplines.

Some countries are relatively poor and state support (in the form of funding and/or legal and policy frameworks) for the provision of social services may be inadequate. However, of more concern is the reported lack of government cooperation and engagement with women's NGOs and the absence of a legal mandate on government funding for women's specialist support services. The situation is challenging for helplines in countries without recourse to international conventions which hold states accountable, such as the ratification of the Istanbul Convention. No specific evidence from the WAVE data collection process indicates if additional state funding, which was provided in some countries during the COVID pandemic in recognition of extra demands on helplines, has been sustained.

Most of the countries which report relying on private donations and international funding are not part of the European Union (e.g., **Armenia, North Macedonia, and Bosnia & Herzegovina**). They are therefore unable to access EU project funding or structural funding. **Slovakia**, as an EU member, relies on the European Social Fund to maintain its helpline.

In **Russia** and **Belarus**, government hostility to gendered perspectives on VAW is compounded by current wider state repression and the context of war against Ukraine. Communication is problematic and all matters related to women's NGOs, including funding, are extremely sensitive.

Other national helplines in Europe

This chapter of the report is primarily about assessing the current situation with regard to national women's helplines which meet IC requirements. But it is important also to note the existence of many other sources of telephone and online support for women around Europe. They may be grouped under three general headings: specialised help for specific groups of women or dealing with particular manifestations of VAW; national helplines for survivors of GBV, operating from a gender-neutral standpoint; national helplines for other issues which may overlap or intersect with VAW. Additionally, most countries have also regional and local helplines.

■ Specialised VAW helplines

Many WAVE survey responses give examples of organisations whose services include helplines. Examples include the Danish Stalking Centre in **Denmark**, the Centre for Sexual Violence in the **Netherlands**, and a 'Revenge Porn' helpline in the UK. Several countries (e.g., **Moldova, Spain, and Ukraine**) have specialised human trafficking helplines. In **France**, there are dedicated helplines for survivors of forced marriage and workplace sexual harassment. In **Norway**, the Red Cross operates a helpline for survivors of forced marriage, female genital mutilation and 'honour-based' violence. In several countries, there are helplines which address issues such as female genital mutilation and sexual exploitation. Some countries, particularly those with a tradition of rape crisis centres, offer helplines for survivors

of sexualised assault and violence, including historic abuse. There are also helplines which specialise in women's legal rights, or broader gender discrimination.

Certain groups of women whose lived experience includes complex intersections of multiple discriminations and oppressions have a particular need for well-informed, sensitive expert advice and support. There are helplines dedicated to Roma women, refugees, survivors of war-related violence, women with disabilities, older women, black and other minoritised women. In **Bosnia and Herzegovina**, there is also a state-wide helpline that provides help specifically for survivors of war-related sexualised violence (SV) and is free of charge and available 24/7. It is called Unique telephone line for support and help to survivors of war rape and SV and their family members (*Jedinstvena telefonska linija za pomoć i podršku preživjelim ratno silovanje i seksualno nasilje i članovima njihovih porodica*) and it is run by Association 'Medica' Zenica. The information about specialised helplines gathered by WAVE may not be fully comprehensive, but it gives a good indication of what is available.

■ **Generic Gender-Based Violence or Victim Support Helplines**

As already discussed, there are countries where national generic helplines are available for all people regardless of gender. Because they may overtly or implicitly operate within a gender-neutral framework, the advice provided might fail to acknowledge or even recognise the gendered dimensions of women's experience, and this may compromise the advice and support offered. Women may be exposed, however unwittingly, to service-generated risks. Especially in crisis situations, generic advice is usually preferable to a complete absence of support. However, it is of concern that states such as the **Netherlands** and **Malta**, which have ratified the Istanbul Convention, only provide support to helplines with gender-neutral approaches.

■ **Helplines responding to other issues**

Women may seek help or be referred to helplines dealing with issues such as drug and alcohol use, homelessness, mental health, family planning, and parenting. Advice relating to VAW is often available, and providers should certainly be trained in awareness and understanding of VAW, but there is no guarantee of such expertise.

■ **Regional and local helplines**

Most countries have regional and local helplines, often linked to and run by women's shelter organisations, rape crisis or women's centres, and providing excellent support to survivors of VAW. Especially if their existence is well publicised in their local communities, they will be the first port of call for many. These are vital resources – especially where there is no recognised national helpline. Indeed, it is to these local service providers that national callers will often be referred. Conversely, local

organisations may signpost information about the national helpline to callers during out-of-office hours. They often focus on one aspect of VAW (e.g., domestic abuse or sexualised violence), and may not be free, or available at all times. All kinds of non-specialist organisations may run local services and helplines which do not meet a range of important standards, not least in their underpinning theories or perspectives on VAW.

Information on the volume of calls received

Data requested on national helplines includes the number of calls received for 2022. In a few cases, no figures are provided. There may be different reasons – statistics are not collected systematically by the helpline in question; there might be no public access to them, even if asked; or statistics for 2022 were not yet or fully available in time for submission. This report was the first time WAVE asked for data not only on number of calls but also number of callers, whenever available.

Where such statistics are provided, it becomes evident that taken as raw data, they do not provide a reliable base for cross-country comparison about relative prevalence or extent of VAW. Factors which make interpretation problematic include:

- Whether the numbers are only for VAWG-related contacts, or include all callers (although some helplines which are for anyone regardless of gender, do give gender-disaggregated statistics).
- Contextual factors, such as length of time the helpline has been in operation, extent of public awareness and publicity for the helpline, and variable levels of state support (financial and also general backing/promotion of the helpline).
- General levels of public discourse, awareness or understanding of VAW and what forms it may take. This may affect women's own recognition that their experiences are indeed violent and/or abusive, and thus their ability or willingness to seek help.

For example, in **Wales** (population c. 3 million) the Live Fear Free helpline run by Welsh Women's Aid had around 35,000 calls in 2022, whereas in **Denmark** (population c. 6 million) the Live Without Violence line received 6,222 calls. At face value, this seems to suggest a stark difference in scale of problem, but in the absence of qualitative contextual information, that cannot be assumed. The Welsh Helpline is part of a comprehensive national VAW and DV strategy with full government backing; it is marketed and promoted proactively. This may help to explain why it receives this volume of calls.

Even as measures of change over time within a given country, the data given should be treated with caution. From year to year, those contributing statistics may change; they may access information or interpret questions in

slightly different ways; in some cases, contact numbers are for more than one helpline, and these may also vary from one Country Report to another.

Nevertheless, it is clear that as a general rule, helpline calls and online contacts have increased substantially across Europe since the last Country Report, despite the ending of lockdown restrictions, which means that helplines are no longer the only accessible source of support. There are 28 countries for which WAVE has data for 2020 and 2022. Of these, a total of 18 national helplines (11 EU, seven non-EU) report that the number of calls has increased. In eight EU and two non-EU countries, there has been a fall in call numbers. Overall, there were 12% more calls reported in 2022: a 7% increase in reported calls across EU countries

and a much greater 28% rise in non-EU countries. Whether this reflects a greater awareness and readiness by women to seek help, or an actual increase in different forms of VAW, or a combination of these and other explanatory factors, it demonstrates the continuing need for these vital specialised VAW helplines.

During the pandemic, helplines were responding to many repeat callers who needed ongoing support or counselling for complex stress and trauma. Where information is available about unique or repeat callers, no discernible pattern is evident to assess how much this continues to be the case. But the 'shadow pandemic' of VAWG continues, and one after-effect of the COVID lockdown may be a continuing heightened awareness of that fact in some countries.

Conclusions

It is good to report that there are now 32 countries (up from 65% to 70% of all European states compared to the Country Report 2021) with at least one national women's helpline which offers support with a gendered understanding of VAW free of charge and available around the clock, thus meeting the requirements of the Istanbul Convention. A further five countries have national helplines which are not fully compliant, and in all but one country some kind of helpline offering information and advice is available. The unfortunate absence of reliable information about the situation in Belarus is a matter of grave concern, although a generic helpline is available.

Beyond these statistics, there is little evidence from the data collected of any major change in the nature of funding or the range of helpline services offered. One question asked for information about the most commonly reported forms of violence. Psychological, physical and sexual violence are ubiquitous, but economic violence is increasingly evident as an issue. Depending on the context and interpretation of data, this may reflect serious hardship and poverty as generally prevalent among women, especially in times of austerity. It may also indicate growing awareness, among survivors and also service providers, that economic control and violence is a key tactic deployed by perpetrators of coercive control. In any case, as some comments note, it is not always possible or helpful

to talk of separate 'forms' of violence when it is a course of conduct which constitutes domestic violence. Women are victimised by a constellation of abusive behaviours. Other issues which are increasingly reported include online trolling and misogyny, and stalking.

The total volume of calls and number of women using helplines certainly did not decrease after pandemic restrictions were lifted. Wider awareness that such helplines exist, callers continuing to use them for ongoing support, and greater accessibility may all be factors. It is certainly not the case that need has diminished.

It is all the more important that gender-sensitive specialist service providers receive adequate, secure and sustainable funding to maintain and expand this vital provision. In several countries, women's NGOs with the requisite expertise to meet all the IC standards receive inadequate state funding or are actively denied resources which are awarded to generic helplines. This is unacceptable because it denies women full access to the specialist help they need, and thus undermines both safety and human rights.



Recommendations

Each of the following recommendations is underpinned by the necessity of a gendered understanding of VAW.

- States must guarantee sustainable funding for national women's helplines since viable service provision cannot be guaranteed where national women's helplines rely on volunteers or private donations to operate.
- All European countries must establish at least one national women's helpline which provides specialist support regarding all forms of violence against women, operates 24/7 and is free of charge.
- Data collection and reporting practices should be standardised for all national women's helplines. This would facilitate a better understanding of the scope of VAW, the effectiveness of helplines, and the identification of areas needing improvement.
- Regular quality assurance should be implemented to assess the effectiveness of the helplines, identify gaps in service provision and ensure adherence to quality standards.
- National women's helplines must ensure that all survivors are able to access support, by ensuring the availability of multilingual support. Accessibility of helplines can be improved with the use of technology, e.g., including chat options, mobile apps, and integration into social media platforms for wider reach.
- The telephone number of national women's helplines should be widely advertised throughout the country, and routinely included in all broadcast, print or social media coverage of issues pertaining to VAW.
- Staff must be adequately trained and have a gender-specific approach in dealing with violence against women, including knowledge about the regional situation, applicable laws and rights, and all relevant provisions. The different needs of diverse groups of women need to be recognised and addressed, either through specialised services or in collaboration with organisations catering to specific groups.
- National women's helplines should be equipped to provide referrals to other relevant services, including women's specialist services.
- Innovations and improvements to national women's helplines that have been made during the COVID-19 pandemic should be maintained and extended.

Shelters accessible to women



Introduction

Safe shelter is a necessity and a basic human right. A serious and widespread consequence of violence against women (VAW) is that homes become places of fear and harm for women and their children – most often because their partner or ex-partner's pattern of abusive and controlling behaviour makes the home dangerous for their physical, psychological and emotional wellbeing. Other women are deprived of a safe place to stay because they have been trafficked for sexual or domestic exploitation. A high number of women and children are migrants, displaced or forced to flee conflict and war zones. They are also refugees seeking sanctuary from domestic violence (DV) and other forms of VAW in a strange land.

There are compelling reasons why the provision of safe shelter must be at the heart of holistic action to combat and prevent VAW. The shelter movement in Europe, which has its origins in the feminist activism of the 1970s, began as a practical and compassionate response to the plight of women and their children. They provided secure and confidential accommodation, but much more than that: not only a roof and bed in times of crisis but also support for women to take stock of their situation, assess risks and receive practical and emotional help to overcome the impacts of living with a violent, coercive and controlling partner. Shelters grounded in feminist values and staffed by women who understand the gendered dynamics of DV, give women time and space to identify options, build self-confidence and make decisions about the future. Over the decades, safe houses all around Europe have been transformative for the lives of countless individual women and their children, and also in the transnational movement to combat and end violence against women.

Escalating physical violence and injury inflicted by partners may precipitate the need for emergency accommodation. At the same time, ongoing economic abuse and other elements of coercive control heighten women's vulnerability to homelessness and housing insecurity. Domestic violence/abuse is a major causal factor of women's homelessness, while homelessness itself is a conducive context for DV:

'The evidence on the causation of women's homelessness remains partial at the European level but there is strong, consistent evidence of a mutually reinforcing relationship between women's homelessness and experience of

domestic abuse. There is a heightened risk of abuse while homeless, especially when living in situations of 'hidden' homelessness with friends, relatives and acquaintances and there exists associations between repeated homelessness and domestic abuse.⁶²

Women's shelters (which may also be referred to as refuges or safe houses) are now recognised as essential services, but levels of provision are quite inadequate in almost all European countries, which means that the lives and wellbeing of too many women and their children are at risk because they do not have immediate round the clock access to safe accommodation and support. Even where emergency accommodation is available e.g., in generic shelter provision for homeless people, or with non-specialist shelter providers, these do not offer the in-depth gendered understanding and expertise which women's specialist services have developed. That is why women-only shelters with a survivor-centred methodology and sufficient stable and sustainable funding are the gold standard.

Article 23 of the Istanbul Convention (IC):

Parties shall take the necessary legislative or other measures to provide for the setting-up of appropriate, easily accessible shelters in sufficient numbers to provide safe accommodation for and to reach out pro-actively to victims, especially women and their children.

The Council of Europe guidelines recommend minimum standards for shelters, based on decades of experience, practice development and research evidence. They should be run by appropriately trained female staff (including qualified childcare workers), ensure that accommodation is secure and confidential, be available for as long as a woman needs to be there, undertake a tailored needs assessment, and provide safety planning and support. They should also ensure that legal advice, advocacy, counselling, and rehabilitation services are available. This comprehensive range of holistic support should be rooted in an empowerment model, so that women are able to make choices and access resources for independent and self-determined living.⁶³

In European countries, not all shelter provision is for women only or provided by feminist NGOs. There are many generic gender-neutral shelters open to survivors of family violence regardless of gender, and others run by women's

62 Bretherton, J. and Mayock, P., *Women's Homelessness: European Evidence Review*, (2021), https://eprints.whiterose.ac.uk/172737/1/FEANTSA_Women_s_Review.pdf

63 Logar, R., *Shelters for Victims of Gender-based violence in Europe: Best practices and challenges* (2021), EUROSOCIAL Programme, https://eurosocial.eu/wp-content/uploads/2022/03/Herramienta_91-Shelters-for-Victims-of-Gender.pdf

NGOs which are under pressure – financial and political – to provide services to men. There are also other forms of emergency accommodation which do not have any

specialist understanding of, or expertise in, domestic violence. These should not be considered to meet the requirements for appropriate provision of women's shelters.

Data Collection and Methodology

The Istanbul Convention recommends that, as a minimum standard, one place in a women's shelter should be provided per 10,000 head of population. WAVE gathers data to assess how far European countries have come in meeting this requirement. However, there is no commonly accepted definition or understanding of what constitutes a women's shelter, so collecting readily comparable data from across Europe and diverse contexts remains a challenge. As in the WAVE Country Report 2021, this year's Country Report distinguishes between **women-only shelters** and **shelters accessible to women** and there is a separate column to record the number of women-only shelters in each country. This is important information to monitor, especially in light of concerns that women's NGOs operating with a gendered analysis are increasingly losing funding or contracts in favour of gender-neutral or generic providers.⁶⁴ Bed numbers given here are for all shelters accessible to

women, as the figures against which the IC recommended minimum standard of 1 per 10,000 can be measured. There are three countries where no women-only shelters are available – **Hungary, Lithuania and Norway**. Each of these represents a distinct policy environment, and different reasons why there are no such shelters. Lithuania, according to the assessed needs of the country, adopted a specialised help model based on the support provided by specialised complex health centres, and shelters do not play a central role. In Hungary, the state is hostile towards feminist NGOs and official denunciation of feminist NGOs, as well as towards the gendered understanding espoused by the IC. Norway is among the most gender-equal societies in the world, but its legally mandated Crisis Centres are for all 'persons', and under gender-neutral law, funds have been diverted from women's services to provide shelter for men, for which there is little demand.

Findings on shelters accessible to women in Europe

The data collected from 46 European countries indicates that in 2022 there were 3,087 shelters accessible to women, providing approximately 39,130 beds. These headline figures show an increase since 2022. It should be noted that for some countries the bed space numbers are estimates, and that owing to the current conflict situation, it has not been possible to provide any statistical data for

shelters in Ukraine or the Russian Federation. 27 EU member states had a total of 2,232 shelters accessible to women, with 27,124 beds. That number includes 1,616 women-only shelters. The 19 non-EU states had 855 shelters accessible to women, of which 554 were for women-only. The total number of beds in all shelters accessible to women in non-EU states was 12,006.


	TOTAL POPULATION ⁶⁵	SHELTERS ACCESSIBLE TO WOMEN	NUMBER OF EXISTING BED SPACES	NUMBER OF BED SPACES NEEDED	NUMBER OF COUNTRIES THAT MEET IC MINIMUM STANDARDS
Europe (46)	843,842,182	3,087	39,130	84,387	10
EU Member States (27)	446,735,291	2,232	27,124	44,674	7
European countries outside the EU (19)	397,106,891	855	12,006	39,713	3

Table 8: Overview of shelters accessible to women in Europe

Behind the headline figures, it is encouraging to note that **Estonia** now meets the IC minimum requirement for bed spaces per head of population, joining fellow EU members **Belgium, Denmark, Luxembourg, Malta, Slovenia** and

Sweden. Austria was just 7% off the target in 2022, and in 2023 three further shelters have opened. **Croatia, Wales** and the **Republic of Cyprus** were within 15% of meeting required bed spaces. Outside the EU, **Kosovo** now has

⁶⁴ WAVE Network, WAVE Handbook 2020: *How Gender Neutral Policy and Practice is Dismantling Women's Specialist Support Services and Ways to Counter-act It* (2020), p. 25. Currently available only for WAVE members.

⁶⁵ The population data reflect the information included in the country profiles and were retrieved from Eurostat's database. In most cases, the population data refer to the year 2022. In Armenia, Belarus, Bosnia & Herzegovina, Kosovo and the Russian Federation, the latest available data were included. The population data about the UK states were retrieved from national offices for statistics and refer to the year 2021.

sufficient beds to meet the IC recommendation, joining **Norway, Liechtenstein, and Northern Ireland**.⁶⁶ In **Iceland**, the number of bed spaces is down to 28 compared to 40 in 2020. This is because 12 beds which were counted in the Country Report 2021 are in a homeless shelter and do not offer specialist support to women who are DV survivors. None of **Norway's** shelter accommodation is classified as women-only. While legislation obliges the network of Crisis Centres to ensure that accommodation for women and men is separated, women's NGOs have noted that in some cases women and men are accommodated in the same facilities, although with separate entrances.

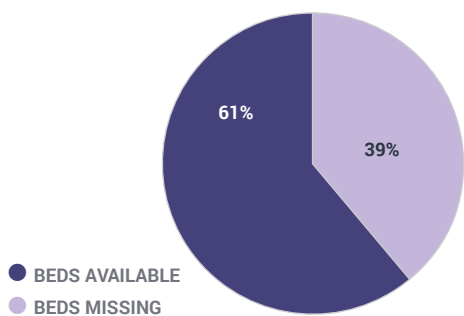


Figure 4: Percentage of beds available and missing in EU Member States

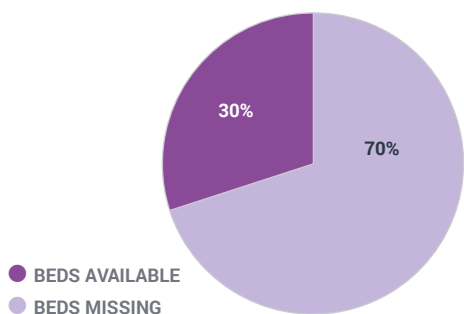


Figure 5: Percentage of beds available and missing in the European countries outside the EU

There has been an increase both in shelters and in available bed spaces since the WAVE Country Report 2021, as the overall percentage gap between beds needed and beds provided has decreased from 55% to 54%.⁶⁷ While positive developments are to be welcomed, it remains the case that the provision of safe and accessible accommodation for women and their children is totally inadequate to meet even the minimum recommended level. In the EU there are at least 20,075 missing beds – a shortfall of 39%. In non-EU states, only 12,006 of the needed 39,713 beds are available, which represents a 70% shortfall.⁶⁸ It should be noted that the level and quality of provision represented

by these figures will by no means always meet the service standards recommended by the Council of Europe. Some accommodation will not be appropriate or even entirely safe for women and their children who are survivors of domestic violence.

Many more shelters and beds are urgently needed throughout Europe. Even in countries where provision is relatively good, there may be regions or areas without any place of safety. Shelters may be concentrated in major cities and population centres, so women in rural and remote areas are not readily able to access safety. The situation is particularly dire in countries with critically low provision. As in 2020, the countries with the poorest availability are **Bulgaria** (81% missing beds), **Czech Republic** (81%), **Ireland** (71%), and **Poland** (83%), where there is just one women-only shelter run by a feminist NGO with a gendered understanding, plus 36 shelters which are state-run and gender-neutral, for a population of nearly 60 million. The government in **Ireland** has committed to the provision of 12 more shelters in the next five years. Outside the EU, the state of affairs is worst in **Belarus** (94% missing beds), **Armenia** (90%), and **North Macedonia** (73%). **Serbia** (72% missing) has no shelter provision at all in the western and eastern regions of the country, and only one women's specialist NGO shelter in Belgrade.

WAVE delegates in Russia and Ukraine have not been able to supply statistical information. In the **Russian Federation**, it is estimated that there are around 30 women-only shelters, mostly run by municipal authorities, and an unconfirmed 86 other shelters with 448 beds. This is catastrophically inadequate for a large country with a population of around 145 million. In **Ukraine**, a situation which was drastic in 2020 (97% missing beds) has become immeasurably worse since the February 2022 Russian military invasion. A total of 73 shelters accessible to women is reported. Some shelters located in occupied areas and conflict zones have been destroyed, damaged or repurposed to provide accommodation for displaced people. Although the state has made funds available for some new refuges in regions without provision, not all are fully functioning. The war has had a major negative impact on all services, and on the general situation for women in the country.

Supplementary information from WAVE delegates gives snapshots of the great diversity in legislative, policy and approaches to practice for the provision of safe accommodation for women and their children – between but also within some countries. For example, the **Netherlands** has no shared operational definition, and different terminology is used from region to region. 'Shelter' may refer to services not only for survivors of DV. Within the network of providers, accommodation can range from 12 bed spaces

66 Note that because the provision in England, Scotland, and Wales is not yet sufficient, the United Kingdom as a whole currently falls short of the recommended bed spaces.
 67 It should be noted that the data does not include estimates for bed spaces in Ukraine or the Russian Federation.
 68 Ibid.



to 150, and in both shared and individual units. It is evident that in other countries too, different kinds of services and lengths of stay may be included under the umbrella of 'shelter' terminology. One pattern of provision, as in **Spain**, is two or three types of accommodation: emergency shelter (possibly for 24–48 hours); longer term temporary residences where women and their children might stay for 3 to 6 months (or longer if necessary) with a range of services available; and transitional housing where survivors live independently, but with continuous support as they rebuild their lives and prepare for relocation to a permanent home.

Where local contexts and needs assessments are referred to by delegates, they serve as a reminder that the IC benchmark is only a guideline for sufficient provision. In **Belgium**, where a new national plan has already led to an increase in shelters, the housing crisis in that country has made it harder for women to move on into permanent accommodation. This is the case in other countries too, for example **Luxembourg**. Additionally, **Liechtenstein** meets the IC standards, but the shelter also receives requests from Switzerland. Because they must always keep at least one bed available for women from Liechtenstein, they sometimes have to decline other requests. **Wales** and **Iceland** may be close to having sufficient beds, but the problem is the geographical distribution of refuge spaces. In **Estonia**, there are more than enough beds, so rent is being paid for empty space while there are insufficient resources to meet the pressing need for counselling services.

While shelters play a crucial role, and more are desperately needed in most countries, they are only one element of a comprehensive response to VAW. The principle of a holistic approach implies that women and their children have the right to stay safe at home and that the perpetrator should be obliged to leave. It also means that those who seek shelter should not be obliged to stay there longer than necessary because of a lack of housing. Under Article 20 of the IC, States must ensure that victims are able to access services facilitating their recovery from violence, such as housing. Safe, suitable and affordable permanent housing is a strong protective factor for good outcomes. Multi-agency partnership collaboration is vital to ensure coherent and effective housing solutions for women who have separated from abusive partners. Women's specialist services (WSS) have always campaigned for legislative and social changes, legal and economic gender parity, and housing rights for women, including restraining and exclusion orders to remove offenders from family homes. Assessment of shelter requirements may be different according to national circumstances. Prioritising women's autonomy and rights of citizenship, to enjoy safe and independent lives within an appropriate socio-legal infrastructure, is the necessary longer-term prevention strategy.

Other aspects of shelter provision across Europe are largely unchanged since the Country Report 2021. There are a few countries which do not provide some state funding for accommodation, but in some, it goes mainly to

gender-neutral or generic emergency shelters. Some specialist women's NGOs (for example in **Poland** and **Serbia**) have to rely entirely on grants and donations. While there may be formal charges to stay, most shelters are able to offer services without charge at the point of delivery. It is common practice that rent and living costs for those who do not have sufficient means will be met by state provision of housing and welfare benefits, though inability to pay is a barrier in some places.

Of particular and pressing concern is the situation for women who are undocumented or have uncertain status. Thousands of refugees, migrants and asylum seekers, already suffering dislocation, danger, isolation and insecurity, are unable to access a considerable proportion of shelters across Europe, not least because they have (to use the language of the British state) no recourse to public funds. Shelter organisations may support them in other ways, but it is a travesty of basic equal human rights that so many women who are at great risk may be excluded from much needed safe accommodation.

In 30 of 46 countries, all or most shelters are accessible 24/7. Others may only be contacted during office hours. There is no clear pattern to suggest that shelters in EU or non-EU countries are more likely to be accessible at any time of day or night.

The standard length of stay in most shelters seems to be between three and six months. Some impose a strict time limit, but most providers (especially those working with a feminist women-centred empowerment model of support) allow women and their children to stay according to assessment of their needs, or until appropriate permanent housing is available. This can mean up to a year or more. **Austrian** statistics illustrate this needs-led approach: 15% of survivors stayed for 1-3 days, 26% for four days to one month, 27% one to six months, 13% more than six months, and 19% were still in shelters after a year. The type of shelter is also a factor, and in countries such as **Finland** and **Estonia** the usual stay is around two weeks, probably reflecting models for support, and other housing options.

Throughout Europe, the majority of women who seek refuge and support in shelters do so because they experience forms of violence which are tactics in a course of conduct deployed by husbands, intimate partners or ex-partners. Psychological, physical, sexual and economic violence are all prevalent – usually as features of coercion and control. Emotional abuse, threats of violence and killing, possessiveness and jealous behaviour are mentioned. Sexual abuse may be particularly difficult for women to disclose, especially in cultural contexts where discussion of sex remains taboo. There are references to digital abuse, material violence, and in some places, violence committed by other family members.

As in previous years, the data collection survey responses point to some issues and trends which are of concern.

Accessibility – For this Country Report, data was collected about shelter provision for groups who face specific barriers or vulnerabilities – not only whether there are specific shelters for certain groups (for example, migrant and undocumented survivors, LGBTQI+ survivors, and BME survivors) but if general shelters are able to accept and adequately support survivors who have specific vulnerabilities or needs.

Research shows that women with physical disabilities are statistically at higher risk of experiencing violence against women. They are often isolated and economically disadvantaged too, and yet they may not be able to access specialised shelter and support. **Finland, Kosovo, Malta** and **Romania** report that all shelters are fully accessible. In **Austria, France, Iceland, Latvia** and **Luxembourg**, most are. Elsewhere some (in two cases no) shelters are accessible to women with physical disabilities. Behind this basic information lies an issue which needs to be addressed, to a greater or lesser extent, in most European countries. Generally, it seems that more shelters are able to accept women with cognitive disabilities (though this may depend on the availability of specialist trained staff). Thirty-one countries report that all, most or some shelters can accept migrant women and those with undocumented status. There are only three countries which either have no shelters that are accessible to homeless and older women, or where that information is not known. Transgender women cannot access any shelter in **Georgia, Greece** or **North Macedonia**, while in twelve countries, all shelters are open to transgender women. Information on the accessibility of shelters for transgender women is not known for eleven countries. In terms of other accessibility barriers, substance use issues may present a challenge for shelters, because they do not have specialist staff or resources, and need to assess potential risks to other residents.

Restrictive access and conditions of entry – Many survey respondents express concern about the conditions under which shelters that are not run by gender-sensitive women's NGOs operate. State agencies and regulations operate as gatekeepers for access to emergency shelters, and conditions of entry are often highly restrictive. In **Türkiye**, all applicants must go to 'First Step Stations' for up to 15 days. These are overcrowded and basic, with no additional support. Staff then make decisions about access to longer-term shelter. In **Spain** and **Albania**, women with court protection orders are given priority or exclusive access. In **Slovakia**, a prior interview is required. The quality and accessibility of shelters in **France** varies greatly from region to region.

Patchy and inadequate geographical coverage continues to be a problem. In **Germany**, 90 out of 400 regions do not have a shelter. **Serbia** and **Montenegro** have no regional provision beyond the major cities, while it is reported that

most of the state-run shelters in **North Macedonia** are effectively non-functional. However, it is encouraging that in **Ireland** the government has made a commitment to develop twelve new shelters in the next five years.

The most common reason for rejecting referrals to shelters remains lack of capacity or space. All over Europe, women and their children who need safe shelter and support are being put at risk, even in emergency situations, because there are simply not enough accessible beds, shelters and sustainable resources to maintain an adequate service, and in the places where these are required. More importantly, those specialist organisations who have the requisite understanding and expertise struggle to provide the quality of service they aspire to, because of lack of resources, support or collaboration with state and other relevant agencies.

Unfortunately, there is no sign that the growing trend towards gender-neutral provision of shelters has been checked, even in countries where there is long established expertise and proven value of women's NGOs operating with a gender analysis. Legislation, policy and planning to address gender inequality and violence is framed using gender-neutral language. Feminist organisations may be excluded in consultations, or from tendering for contracts to provide services. Market-driven commissioning and procurement of services (as has happened lately in **Denmark**, with commercial companies opening women-only shelters) usually means a reduction in the range and quality of support, and a loss of the crucial human rights-based approach to women's security and autonomy. The women's shelter in Salzburg, **Austria** used to be a member of the Association of Autonomous Austrian Women's Shelters, but since July 2021 it has been run by generic NGOs.

Shelters for specific groups of women

Although the IC calls for shelters to be available in response to all forms of VAW, in practice the great majority of shelters are for survivors of domestic abuse. However, some specialised shelters have been established for women affected by other manifestations of violence on the continuum of gender-based violence against women (GBVAW), or with particular needs which cannot adequately be met in the DV shelters.

Seventeen countries report the existence of shelters which support women who are survivors of human trafficking – not all are women-only, and they are not all run 'by and for' women. Faith-based organisations are often providers. There are also shelters for refugee and migrant women and a few specifically for black and minority ethnic women, and LGBTQI+ survivors of gender-based violence. There are rare examples of shelters for older women, those with physical or learning disabilities, or with substance use issues.

Conclusions

Since 2020 there has been a slight improvement in the overall provision of shelters for women and their children. Ten countries have achieved the IC benchmark of one bed space per 10,000 population, along with one of the nations which comprise the United Kingdom (**Northern Ireland**). Particularly within the EU, some countries (e.g., the **Netherlands** and **Lithuania**) are assessing the need for safe accommodation in the context of developments in overall strategies and plans to prevent violence against women. But ensuring that women and their children can access shelter when their homes become places of danger, or when other circumstances make them vulnerable to violence against women and harm, remains vital. Unfortunately, too many European countries still fall far short of meeting the minimum requirement. The situation remains critical in some populous countries (for example, **Russia**, **Poland**, **Türkiye**, and **Ukraine**) where the level and quality

of shelter provision is quite inadequate. War and oppression have greatly exacerbated an already calamitous state of affairs for women in **Ukraine**, **Russia** and **Belarus**. Women who face additional barriers are even more at risk, because sufficient specialised shelters are lacking almost everywhere in Europe.

Women's specialist shelters, run by women's NGOs with a holistic understanding of domestic violence or other forms of VAW, offer more than safety. They provide a range of vital support services (such as counselling, advocacy, legal and practice advice, peer support, groupwork, etc.) which enable women and their children to heal, consider options, and build self-confidence and autonomy. They are transformative at individual and societal levels, and cost-effective in the longer term. Member states are urged to meet their obligations accordingly.

Recommendations

- It is important to preserve the independence and autonomy of women's shelters so that they can provide support to women survivors by taking a survivor-centred, human rights-based, and gender-specific approach.
- The need to provide sustainable funding to women's shelters is critical for ensuring the continuity of their work. Governments must ensure that these vital support services receive adequate and long-term funding, so that they have sufficient capacities and can provide services free of charge to all survivors.
- Laws regulating funding of the women's shelters should ensure these services can provide accommodation and specialist support to all women survivors of VAW and their children, irrespective of whether they are undocumented migrants or have a precarious migration status.
- Women's shelters must be available in sufficient numbers and ensure adequate geographical distribution including rural and remote areas, to ensure that women in all regions have access to shelter services.
- Emergency response protocols with clear referral pathways to statutory services should be developed and implemented, in order to face situations like pandemics or conflicts, which can exacerbate the need for shelters and related services. Such protocols should also be included in National Action Plans.
- Women's shelters must be staffed by professionals who have received adequate training on how to prevent and respond to VAW and must put the survivor and her needs at the centre of all interventions.
- Ongoing training and support for shelter staff, including mental health support, must be guaranteed to ensure that they can provide the best care to survivors and manage the emotional toll of their work.
- One of the most important factors influencing the policymaking process in the field of VAW is reliable, accurate and comparable data across countries. Data collection is, therefore, an essential component for demonstrating how many women survivors of violence and their children access shelters and how many are turned away. It is important to improve existing data collection methods to collect accurate, more comprehensive and reliable data on the number of women's shelters and the services they provide.

Women's centres



Introduction

The threat of gender-based violence against women (GBVAW), in all forms, is an everyday reality for women and girls all over the world. It is endemic, experienced directly by most women throughout the course of their lives in routine harassment, intimate intrusions and a range of violations which undermine their safety, bodily integrity and wellbeing. A recent meta-survey conducted by the World Health Organisation reports that an estimated one in three women is subjected to physical or sexual violence by an intimate partner, or sexual violence from a non-partner during her lifetime.⁶⁹ Other domains for VAW include (but are not limited to) sexual exploitation, human trafficking, forced marriage, digital abuse, 'honour-based' violence, harmful cultural practices, conflict and war, migration and asylum seeking.

The Istanbul Convention (IC) recognises this continuum of violence against women and girls (VAWG), from before birth to death, and in all spheres of human life and relationships. Categories of VAW may be separated in law, research, policies and service provision, but are intertwined in women's experiences and the impact on their lives. VAW in all its manifestations functions to control and limit the status, movement, integrity, opportunities and rights of women. It sustains women's inequality, from the interpersonal to global.

Article 22 of the IC concerns specialist support services:

1. Parties shall take the necessary legislative or other measures to provide or arrange for, in an adequate geographical distribution, immediate, short- and long-term specialist support services to any victim subjected to any of the acts of violence covered by the scope of this Convention.
2. Parties shall provide or arrange for specialist women's support services to all women victims of violence and their children.

This makes clear that specialist provision of support is a requirement. Without a gendered understanding and analysis of VAW, states and other stakeholders are poorly equipped to develop the most effective and appropriate service responses.

That is why WAVE campaigns for feminist services that support women and their children experiencing gender-based violence. Women's specialist services (WSS) empower and support women and their children, by

putting their needs at the centre of all interventions, applying an intersectional approach, and working together with them, to recognise their agency.

Women's centres are a crucial component of WSS. WAVE uses the term 'women's centre' to define all women's services providing non-residential specialist support to survivors, serving only or predominantly women survivors of violence and their children (if any). These centres provide empowering short and long-term support, based on a gender-specific approach to violence and focussing on the human rights and safety of survivors. The following services are subsumed under the term: women's counselling and women crises centres supporting women survivors of all forms of gender-based violence; services offering support to survivors of sexualised violence; regional crises centres on domestic violence; proactive intervention centres serving survivors as a follow-up to police interventions; specialist services for black, minority ethnic women, migrant and refugee women survivors of violence; outreach services; services providing independent domestic or sexual violence advisors, and other newer types of services. These centres usually provide, amongst other, the following kinds of support: information, advice, advocacy and counselling, court accompaniment, proactive support, and outreach. They may also engage in wider community education, awareness raising and prevention work. Those run by feminist women's NGOs are rooted in a commitment to promote women's human rights and empowerment. They often engage in wider campaigning for cultural and societal change, in the knowledge that VAW is both cause and consequence of gender inequality.

It is on the basis of this broad and encompassing definition that WAVE members provided information about centres for the Country Report.

Centres with trained specialist staff take a woman-centred approach. With adequate funding and resources, they can support her and her children, through the difficult process of addressing complex harms and impacts (psychological, material, legal and social) of men's violence. With skills, knowledge and sensitivity, they offer appropriate advice, advocacy and solidarity, on the road to self-determined recovery and wellbeing.

Different approaches to the delivery of specialised services have developed throughout Europe, reflecting diverse histories and contexts in which activists, NGOs and governments have responded to VAW. A longstanding practice in many countries is that shelters run by women's

69 WHO Report, Geneva 2021, based on an analysis of available prevalence data from surveys and studies conducted 2000-2018, <https://iris.who.int/bitstream/handle/10665/341337/9789240022256-eng.pdf?sequence=1>

NGOs have connected or fully integrated non-residential support centres. These tend to focus mainly or exclusively on services for domestic violence survivors. Feminists also pioneered the development of rape crisis centres for survivors of sexualised violence and abuse (discussed in the following chapter).

Particular groups of women face added barriers to accessing support. Specialisation is required both in relation


to the forms of violence and/or the target groups who are usually marginalised, ignored and underserved. A strategic approach to meeting IC standards for combatting and preventing VAW will also promote training for specialist workers within statutory services (e.g., health services, housing, education, the justice system and policing), to ensure that they have in-depth knowledge and understanding of VAW, and work in partnership with women's centres to build a coherent and coordinated response.

Findings on the situation of women's centres in Europe

Availability

All but two European countries (26 EU and 18 non-EU, a total of 96%) have some kind of women's centre provision, offering non-residential support and advice for survivors of domestic violence and/or other forms of VAW. **Belarus** and **Hungary** remain the exceptions. In Belarus, there are 136 'crisis rooms' available. They can provide casework, referrals, and other services, but are not specialised in VAW or for working with women. Women survivors in Hungary

may seek help from residential shelters, or at one of the nine 'crisis ambulances' across the country. Providers of these services do not operate with a gendered perspective. Women's NGOs, NANE and Patent Association, have several initiatives that provide specialised services and support to survivors of VAW, although not in the form of a centre. They have also collaborated with other NGOs to respond to the needs of Ukrainian refugee women and girls, including crisis intervention services and support.



	TOTAL FEMALE POPULATION ⁷⁰	NUMBER OF WOMEN'S CENTRES	NUMBER OF WOMEN'S CENTRES NEEDED	NUMBER AND PERCENTAGE OF WOMEN'S CENTRES MISSING	NUMBER OF FEMALE POPULATION PER CENTRE
Europe (46)	435,089,332	4,085	8,702	4,617 (53%)	106,509
EU Member States (27)	228,390,297	2,995	4,568	1,573 (34%)	76,257
European countries outside the EU (19)	206,699,035	1,090	4,134	3,044 (74%)	189,632

Table 9: Overview of women's centres provision in Europe

According to information provided by WAVE members, there are at least 4,085 centres operating across Europe: 2,995 in EU states and 1,090 in non-EU states. This number is considerably higher than the total recorded in 2021, but it should not be assumed that actual levels of provision have increased significantly. There are some anomalies which require explanation:

- First, it should be noted that the total number does not include centres in **Switzerland** or **Ukraine**, for which data is not available.
- More generally, many of the country statistics are estimates. Survey respondents from one Country Report to the next may change. They have to assess what constitutes a 'women's centre' in their own context, find information which might not be readily available, or amend data in order to present a more accurate picture of the situation.
- For example, the huge increase in the number of centres reported in **Spain**, from 110 in 2021 to 920 for 2023, is mostly because official government statistics have been updated and now include centres from many regions which had not previously provided their data.
- In **Slovenia**, the increase from two to 16 centres is a result of clarification about what 'women's centres' signifies in the national context. All counselling centres for women survivors of VAW are now included.
- Conversely, in **England**, a reduction in the number of centres reflects a change in the methodology used to calculate. Previously, a centre was counted twice if it provided two types of service. The new figure (down from 596 to 278) is more accurate.

⁷⁰ The female population data reflect the information included in the country profiles and were retrieved from Eurostat's database. In most cases, the population data refer to the year 2022. In Armenia, Belarus, Bosnia & Herzegovina, Kosovo, Moldova and the Russian Federation, the latest available data were included. The population data about the UK states were retrieved from national offices for statistics and refer to the year 2021.

In this context, as for other services, data collection remains a challenge. The situation in **Denmark** is a good example of the difficulties. Data for this report is taken from the Country Report 2021. The delegate from Denmark explained that it is nearly impossible to give a correct number of women's centres. Although the number of services is increasing, most actors are small or local organisations and often the resources are few, and most are working with both women and men. In addition, the term 'centre' in Danish has connotation with a substantial (and public) organisation, and few services for women survivors are that.

The WAVE understanding of 'women's centre' is clear, but it is not always straightforward to assess whether diverse models of service provision in different national and political contexts align with that understanding. It is quite likely that some services subsumed within the 'women's centre' heading are included in some country data but not in others. It cannot be assumed that like-for-like comparisons are possible. Nevertheless, this report is a vital resource for highlighting general trends, and also the underlying challenges.

In **Romania**, the number of reported women's centres has risen from 17 to 38. In this case, there has been an increase in provision, through the European Structural Fund VENUS Project, but here also, it is reported that few VAW services in Romania meet the WAVE definition. NGOs have to evaluate official data accordingly. Information provided in 2021 was based on data provided by the National Agency for Equal Opportunity; the Romanian public coordinating body on VAW. NGOs have no resources to undertake proper service quality monitoring (this is in fact a duty of the state). They can only collect data from the state authorities and filter some of this information based on their own knowledge.

The Council of Europe recommends one counselling centre for VAW survivors for every 50,000 women. Using the data reported here, there is one centre per 106,509 women: in EU member states, one centre per 76,257, and in non-EU member states, one centre per 189,632. By these estimates, provisions fall far short of the recommendation. All countries report that counselling is one of the main services provided. However, the level, extent and quality of counselling is likely to vary considerably, and some centres focus more (or entirely) on practical support, advocacy or education/prevention work.

Geographical distribution of centres

There is some form of women's centre provision in most regions of most European countries. In some cases, only major cities are served,⁷¹ and only the capital city in the cases of the **Republic of Cyprus** and **Georgia**. But from

the information provided, it is clear that uneven provision is a problem across Europe, even in countries which are relatively well served. In **Italy**, inequalities between the wealthy industrial and urban north, and the poorer, more rural south, are reflected in the concentration of women's centres in the north. In **Germany**, there is inadequate provision in the east, and in rural areas. The absence or limited availability of vital services in rural and remote areas is a real concern for VAW survivors throughout the continent.

Entities running women's centres and providing services

In this year's Country Report, the tables of data relating to women's centres include a column to show whether centres are run by women's NGOs (WNGOs), other NGOs, the State, or other providers. This information is important to track, because it is an indication of the general approach to service provision. Women's (usually feminist) NGOs mostly have a gendered understanding and analysis of VAW. Their service provision is rooted in a women-centred human rights and empowerment ethos.

In recent years, WAVE has been concerned about the spread of gender-neutral policy and practice in response to gender-based violence against women. This tendency has been noted across Europe, in EU member states and non-EU countries alike. It undermines the gender-sensitive and gender-specific approach taken by WNGOs – an approach which is recommended by the Istanbul Convention as the evidence-based gold standard. A Gender Neutrality working group was set up by WAVE in 2016. Its conclusions were reported in the WAVE Handbook (2020), along with practical proposals for counteracting gender neutrality in diverse political and economic contexts.⁷²

According to the information submitted for the Country Report 2023, the majority of women's centres across Europe which comply with WAVE's standards are run by specialist WNGOs. There are 14 countries where this is not the case.⁷³ In addition, service provider information is not available for Austria, Croatia, France, Spain, Switzerland, Ukraine and the Russian Federation.

Behind the statistics, supplementary information does suggest a very mixed picture regarding the provision of non-residential services. Real concerns are expressed that WNGOs in some countries are losing out on procurement contracts, and that official government funding and support is going to gender-neutral services – many of which are not gender-based violence (GBV) or VAW specialists, but offering more generic victim support services. In some situations (for example **Slovakia**) WNGOs which previously ran women-only centres have been obliged by legislation to provide services for all DV survivors, regardless of

71 As in Iceland, Romania, Moldova, the Czech Republic, Bulgaria, North Macedonia, and Russia.

72 WAVE Network, *WAVE Handbook 2020: How Gender Neutral Policy and Practice Is Dismantling Women's Specialist Support Services and Ways to Counteract It* (2020). Currently available only to WAVE members.

73 Azerbaijan, Czech Republic, Finland, Georgia, Greece, Italy, Malta, Netherlands, Norway, Poland, Portugal, Romania, Slovakia, and Türkiye.



gender, in order to receive accreditation and state funding. In **Türkiye**, 81 Violence Prevention and Monitoring Centres are funded and run by the state. They do not conform to the operational definition of women's centres, but are included because they are public institutions and the places most women go to for help. Some centres in **Russia** may be harmful for women survivors, because they reinforce stereotypes and victim-blaming. In certain countries where there has been an ideological backlash against gendered language and analysis, or where governments have been slow to develop or fund strategic responses to VAW, feminist WNGOs have to rely on international funding and private donations to sustain their services. Some have had to cease operations or have insufficient resources to offer specialised long-term support. This is the case in **Georgia** and **Kosovo**. As reported in the Country Report 2021, the insecure funding of feminist NGOs is a cause for real concern. Europe cannot afford to lose their expertise and commitment, especially when there is a backlash against women's rights and equality.

The situation in Ukraine

The full-scale invasion which started on 24 February 2022, as a continuation of the military aggression that Russia has been carrying out against Ukraine since 2014, has been profoundly destructive and damaging for women's safety and wellbeing, exacerbating and intersecting with the everyday realities of VAW. One of the consequences has been the severe impact on the provision of women's specialist services. Prior to the invasion, regions in Ukraine received state funding to develop services for DV and other VAW survivors, including women's centres. Other forms of support, including centres, have now been set up. Information from the National Social Service of Ukraine shows that there are 43 day centres providing social and psychological assistance for domestic violence survivors. Some centres are run by international organisations, but exact numbers are not available, and information on centres run by NGOs is also not available.

Profiles of women's centres and survivors supported

It is vital to provide empathetic and expert services tailored to the needs of particular groups of women whose experiences of VAW are mediated and compounded in specific ways by the intersections of oppression and discrimination rooted in racism, ethnicity, poverty, age, disabilities, gender identity, and sexual orientation, among others. It may also be offered in designated specialist centres, which exist in at least 17 countries including **Austria**, **Germany**, **Scotland**, **Latvia**, **North Macedonia**, and **Serbia**. The most widespread are centres for survivors of human trafficking; others are specifically for survivors of forced marriage, and female genital mutilation; there are a few specialist centres for LGBTQI+ survivors, migrant and undocumented women; for Roma, Sami and other marginalised groups in particular contexts.

Some women's centres are for women only, while others provide a range of services to all survivors (mostly of domestic violence, but also sexualised violence, human trafficking and other forms of VAW). This mirrors the situation with the provision of shelter, and should be considered in the light of entities providing services. Women's NGOs with a gendered understanding will be able to tailor appropriate support and advice to women in the light of that approach. On the other hand, there may be women-only centres which are run by NGOs, state agencies or faith-based organisations (FBOs) such as Caritas, without the benefit of a gendered perspective, and therefore unlikely to meet the criteria which underpin best standards and practice. Even with the best of intentions, they might collude with damaging stereotypes or offer potentially dangerous advice. There have been no major changes in the overall picture of providers since 2021. Most countries have centres of both kinds. The balance varies widely, as do prevailing values and approaches of the centres.

Services provided by women's centres

In some countries where non-residential specialist services were first provided by women's shelters for domestic violence survivors (for example the Women's Aid networks in the nations of the **United Kingdom**), most of the reported women's centres remain part of those networks, and their services are primarily used by DV survivors. However, they have in many cases developed expertise on other aspects of VAWG and understand how these are connected to women's lived experience. In other countries (e.g. **Italy**) there is a history of women's centres which promote services for survivors across the spectrum of GBVAW. From the latest survey of WAVE members, it seems that in most countries, there are at least some centres which can offer specialist support relating to forms of VAW, including sexualised violence, 'honour-based' violence, forced marriage, and female genital mutilation. Whatever the context of violence and abuse, there are commonalities in the consequences and impacts for women, as well as the challenges they face in dealing with those. Needs-centred, strengths-based and trauma-informed psycho-social counselling, therapy, groupwork, peer support and education are all vital. Equally important, and sometimes more pressing, are the practical and legal issues women face (not least in connection with post-separation access to and custody of children) and the need for advocacy.

Conclusions

Easily accessible and available specialised non-residential support is a fundamental requirement for women across Europe, whatever the circumstances or context of the gender-based violence they experience. Women's centres exist in some form, as specified in the chapter, in almost every country. The majority have been established and are run by women's organisations, often with all or most of their funding coming from local or national authorities. In some countries, however, state funding goes to more generic victim support services, leaving specialist WNGOs reliant on donations and/or international grants. The needs of particular groups facing greater risks and more barriers are widely recognised, and some centres can offer specialised support.

The trend for states to fund and give official status to gender-neutral services, for economic or ideological reasons, remains a concern for quality, effectiveness and sustainability of best practices in meeting women's needs, and it threatens the survival of long-standing and experienced WSS.

The statistical data is difficult to interpret, given the wide range of models and approaches for delivery of non-residential services; but supplementary narrative information provided by WAVE members is useful for an overall picture of provision across Europe, and to draw attention to challenges or developments in particular national contexts.

It remains the general case that the minimum recommended level of provision is not being met. In many places, it falls far short of the requirement. Uneven distribution of centres means that there are huge geographical areas where women simply have no readily available source of in-person specialised support. This is true even in the best-resourced countries, and is a more acute problem where general levels of state funding and support for WSS are deficient. Provision for women facing additional risks and barriers, including the thousands of refugees, undocumented and migrant women throughout Europe, is a pressing concern.

Recommendations

- **Continuous efforts must be made to secure sufficient provision of women's centres providing specialist and gender-specific support for women survivors of violence and their children, if any. This is particularly urgent in countries which currently have no such centres, or only in certain cities or regions. Comprehensive geographical coverage is a fundamental requirement to ensure services are accessible to all women and children who need them.**
- **State funding should be allocated to specialist women's centres to meet these requirements, especially in countries that currently provide none, or allocate very limited resources to women's centres.**
- **Provision of specialist support services, e.g., for survivors of forced marriage, 'honour-based' violence, female genital mutilation, human trafficking and for refugee, migrant and undocumented women are non-existent or very limited in many countries. Sufficient resources need to be allocated to ensure adequate coverage of such services for ALL women, including those from minoritised groups.**
- **In keeping with the WAVE Network's long-term goal of developing common definitions, women's specialist services should strive to build, as far as possible, a shared understanding of 'women's centre' which encompasses different working models which all apply feminist principles and methodologies. This would aid clarity and consistency in the collection and recording of relevant data and would facilitate a more accurate representation of specialist services in relation to the Istanbul Convention.**
- **State-wide data collection systems regarding the provision of WSS should be established in each country. Data should identify the providers of such services (e.g. women's NGOs, other NGOs, state or religious organisations), which services are provided (short-term housing, counselling, legal services, etc.), where they are located and to whom services are provided (i.e. single women, mothers and their children, survivors of multiple forms of violence and discrimination). The number of clients served in each area should also be recorded. This data should be made widely accessible and available to service providers, advocates, policy-makers and the general public, including those in need of assistance. Accurate data is a crucial foundation for making evidence-based decisions to improve the situation in states, and it cannot rely solely on the limited resources of civil society organisations. Therefore, government involvement in setting up and maintaining reliable data collection procedures is necessary.**



Specialist services for survivors of sexualised violence



Introduction

Sexualised harassment and non-consensual intimate experiences are everyday realities affecting millions of women and girls across Europe. A prevailing culture of normalised and sexualised harassment encompasses a range of abusive behaviours and acts, overwhelmingly committed by men and boys against women and girls. These include sexual abuse (of children and/or adults) human trafficking and grooming for sexual exploitation, cyber sexual harassment and violence, non-consensual sharing of intimate images (so-called 'revenge porn'), sexual assault and rape. Sexualised violence (SV) is defined as any form of contact or non-contact act (or attempt to obtain an act) of a sexualised nature without a person's freely given consent. It occurs in families, intimate relationships, workplaces and educational institutions, faith communities, leisure activities, as well as online and in public spaces. SV has also been widely deployed as a deliberate strategy in war and conflict situations, and as a form of coercion or torture, not least by forces of law and order. Perpetrators may be current or former partners, family members, friends, acquaintances, those in positions of power and authority, and strangers. Girls and women may be subjected to SV at any stage throughout their lives.

The impact is profoundly traumatic, for the perpetrator undermines the victim's integrity, autonomy and self-determination at the deepest levels. The complex harms of rape and sexualised assault endure, and may have severe, life-changing consequences. Where SV occurs in an environment of shame, silence and taboo; where a society and its laws do not fully recognise or penalise SV; and where informed specialist care and support is lacking, women are thereby subjected to systematic discrimination and denial of basic human rights.

The Istanbul Convention (IC) addresses the need for clear and consistent legislation for SV crimes in Article 36:

1. Parties shall take the necessary legislative or other measures to ensure that the following intentional conducts are criminalised:
 - a.) engaging in non-consensual vaginal, anal or oral penetration of a sexual nature of the body of another person with any bodily part or object;
 - b.) engaging in other non-consensual acts of a sexual nature with a person;

c.) causing another person to engage in non consensual acts of a sexual nature with a third person.

2. Consent must be given voluntarily as the result of the person's free will assessed in the context of the surrounding circumstances.

3. Parties shall take the necessary legislative or other measures to ensure that the provisions of paragraph 1 also apply to acts committed against former or current spouses or partners as recognised by internal law.

The focus here is on the giving of consent, as a matter of *voluntary free will*, which should be assessed in context. The crime of SV does not reside in the use of violence or force, but in the disregarding of another person's free will to consent to an act. There have been important and progressive legislative changes in many European countries, but there are still countries where the onus is to prove that violence was used. The Explanatory Report notes the states' obligations 'as requiring the penalisation and effective prosecution of any non-consensual sexual act, including in the absence of physical resistance by the victim'.⁷⁴ It also highlights that assessment of evidence must recognise the wide range of behavioural responses to SV and rape, and avoid widespread assumptions, gender stereotypes and myths.

Article 25 of the Convention refers specifically to the importance of specialised support for survivors of sexualised violence:

Parties shall take the necessary legislative or other measures to provide for the setting up of appropriate, easily accessible rape crisis or sexual violence referral centres for victims in sufficient numbers to provide for medical and forensic examination, trauma support and counselling for victims.

The recommendation is that at least one such centre should be available for every 200,000 women per population. Although many women's centres do offer support for SV survivors, there is a need for dedicated and specialist centres offering specific and critical services: in the immediate aftermath of a rape or other assault, in relation to any legal proceedings, and to address the longer-term impacts. As the Explanatory Report notes, the traumatic nature of

⁷⁴ Council of Europe, *Explanatory Report to the Council of Europe Convention on preventing and combating violence against women and domestic violence* (2011), Art. 36, para. 191, <https://rm.coe.int/1680a48903>

sexualised violence requires 'a particularly sensitive response by trained and specialised staff'.⁷⁵

It is evident that best practice holistic service responses to SV require the contribution and cooperation of highly knowledgeable and skilled professionals. These include frontline and investigative police officers, medical and forensic care teams, lawyers, judges and court officials; and also providers of advocacy, specialist counselling and trauma therapy. Community education and awareness raising is particularly important to challenge the harmful myths and taboos around SV, and to challenge the social norms which make it so prevalent.

Data about SV and associated services was collected separately for the first time for the WAVE Country Report 2019 and presented in a separate chapter. This reflected increased global concern, as the #MeToo movement and other campaigns brought the lived experiences of women, and their determination to break the silence about sexualised violence, into the centre of public attention. Lobbying and advocacy for better legislation and services have increased in intensity. The need is urgent throughout Europe, particularly in countries where support services are almost or entirely lacking.

A baseline was established by collecting data about the forms of provision recommended by the Istanbul Convention, which are rape crisis centres (RCC) and sexual violence referral centres (SVRC).

These models for provision of services under one roof have developed in different historical contexts. While there may be commonalities and overlaps in what they offer, some distinctive features may be attributed to the origins of each model.

The first *Rape Crisis Centres* emerged in the late 1970s-early 1980s out of the women's movement to name violence against women (VAW) and support survivors. As a general rule, they work with survivors of recent and historic sexual assault and abuse, often including adult survivors of

child sexual abuse. They offer immediate and long-term confidential trauma-informed, survivor-led counselling and therapy, and provide advice, advocacy and accompaniment. They also undertake awareness-raising, training and prevention work.

Sexual Violence Referral Centres developed to improve the experience of survivors in the immediate aftermath of sexual assault (usually up to seven days). They provide specialist forensic, health and medical care and crisis intervention; they may also incorporate frontline and specialist policing, short-term counselling and advocacy. They typically refer and signpost survivors to other specialised and community-based organisations, including RCCs, where these exist.

These distinctions are generally reflected in the scope of RCCs and SVRCs, but elements of each may be incorporated into specialist centres which provide holistic services under one roof.

Given the complex and interlocking needs of SV survivors, it is vitally important that the agencies involved in responding to SV do so with informed understanding and sensitivity. Survivors often report that poor responses from police, health professionals and the judiciary leave them feeling blamed, dehumanised and disempowered. Indeed, many women are reluctant to report rape because they do not believe that they will be treated with respect, care or justice. Evidence shows that interaction with key agencies (particularly criminal justice systems) in the wake of SV often compounds the trauma of the original assault, because survivors continue to experience loss of control, choice and autonomy. RCCs and SVRCs are vital in the process of supporting survivors, to ensure that interventions are helpful, to prevent secondary victimisation, and to offer the safety required on the difficult journey of recovery. The Istanbul Convention stipulates that specialised services must be easily accessible, providing medical and forensic exams, trauma support and counselling. They should be offered whether or not the survivor files a complaint with the police.

Findings on the situation of specialist services for survivors of sexualised violence in Europe

This is the third time that data collection about SV services has been undertaken for the Country Report.

In 2021, 27 European countries reported at least one RCC, SVRC or equivalent. This is comparable to this year's data, as survey returns indicate that some form of specialist SV service is available in 18 EU member states and 10 non-EU

states – a total of 28 countries. Women in 14 countries are still without provision of any RCCs or SVRCs at all,⁷⁶ while no information on SV support provision is available in four countries. This is unacceptable, given the high prevalence of SV, the serious immediate and enduring impacts on women's health and wellbeing, and the extremely low reporting and conviction levels for crimes of SV.

⁷⁵ Ibid., art. 25, para. 138.

⁷⁶ Countries with no SV specialist services: Greece, Hungary, Italy, Latvia, Lithuania, Poland, Slovakia (EU); Azerbaijan, Belarus, Georgia, Kosovo, Liechtenstein, Montenegro, Türkiye (outside the EU).




	TOTAL POPULATION ⁷⁷	NUMBER OF SERVICES REQUIRED TO MEET IC STANDARD	NUMBER OF RAPE CRISIS CENTRES/SEXUAL VIOLENCE REFERRAL CENTRES	NUMBER AND PERCENTAGE OF SERVICES MISSING
Europe (46)	843,842,182	4,219	612	3,607 (85%)
EU Member States (27)	446,735,291	2,234	411	1,823 (82%)
European countries outside the EU (19)	397,106,891	1,986	201	1,785 (90%)

Table 10: Overview of specialist services for survivors of SV in Europe

Behind that overall tally, the general situation remains of grave concern. In twelve countries, there are only one or two centres in total. Some of those have very small populations, although only **Iceland** and **Norway** comply with the IC minimum recommended SV specialist centre per head of population, while women in **Liechtenstein** (pop. c40,000) can access services in Switzerland. But in the most populous nation in Europe (such as the **Russian Federation**) there are only two SVRCs. This failure to provide services for millions of women and girls is inexcusable.

Although the number of countries reporting the existence of SV centres has risen, the total number of centres has shown no marked increase. Here, as with data collected for other sections of the report, caution must be exercised about the statistics. Some countries have extensive provision of rape crisis or sexual violence referral centres, but it has not been possible to provide numerical data. This is the case for **France, Luxembourg, Switzerland** and **Ukraine**. In other cases, numbers given are estimates, so overall totals should be regarded as the minimum. On the other hand, it may be that some centres are counted twice, as RCCs and SVRCs, because they offer the full range of services. Terminology and definition of terms varies from country to country, so some delegates have to make judgements as to whether the services provided in their country meet the criteria for women's specialist services.

Italy has a longstanding tradition of feminist women's centres which provide a full range of specialised services for survivors of all forms of VAW. This is based on clear political principles and an operational analysis of the continuum of gender-based VAW. There are 87 centres belonging to the D.i.Re network which are able to offer full support to SV survivors, including cooperation with national health system's forensic and medical care procedures, as required by law. Feminist organisations in other countries, for example **Türkiye**, have adopted a similar model. For the purposes of this chapter, such centres are not included in the statistics for RCCs and SVRCs.

In **Belgium**, there are well developed SV services, including one RCC in Brussels, SOS Rape (*SOS Viol*), which is the only NGO in Belgium that provides long-term support for

survivors of sexualised violence. Wallonia and Brussels have four SVRCs, called Sexual Assault Care Centres (*Centres de Prise en Charge des Violences Sexuelles – CPVS*) providing a comprehensive range of services. The Centre in Brussels has recently been extended to expand that range still further. In Flanders, there are five CPVS/Sexual Assault Care Centres, called *Zorgcentrum na Seksueel Geweld* (ZSG) in Flemish.

Inevitably, there are grey areas, but whatever the precise number of SV centres, provision throughout Europe remains appallingly inadequate, falling short of recommended levels by around 85%. The situation in countries outside the EU is particularly bleak. Apart from the nations of the **United Kingdom** (with an estimated 112 SV centres), **Norway** (44 centres) and **Switzerland** (no statistics available), there are a reported 16 centres for 16 countries. There are SVRCs in **Ukraine**, but as with all sections of this report, it has not been possible under war conditions to provide numbers. SV services in Ukraine are currently having to respond to the needs of survivors of conflict-related rape and sexualised violence, as well as 'normal' everyday sexualised violence.

There are a few small beacons of hope. Among EU member states, Finland has opened 10 new state-funded SERI Centres (SVRCs) since 2021 and now has 20, in most regions. More are planned to open in the next two years. There are plans for two new RCCs in **Sweden**.

In **Moldova**, two pilot sexual assault centres have been established in 2023, as part of the EVA Project, with EU funding, and supported by UN Women and UNICEF. For the first time, survivors in the Ungheni area have access to specialist services. It is to be hoped that these initiatives will be sustained beyond the pilot period. In **Bosnia and Herzegovina**, three rape crisis centres were established in 2021, but are not yet fully operational. In **Serbia**, a similar project in 2016–18 piloted seven centres, supported by the Vojvodina local government. In 2021 only two centres remained, but there are now four – in Kikinda, Novi Sad, Zrenjanin and Sremska Mitrovica. These provide medical, psychological and legal support to survivors, depending on where they initially go for help. Most women's groups

⁷⁷ The population data reflect the information included in the country profiles and were retrieved from Eurostat's database. In most cases, the population data refer to the year 2022. In Armenia, Belarus, Bosnia & Herzegovina, Kosovo and the Russian Federation, the latest available data were included. The population data about the UK states were retrieved from national offices for statistics and refer to the year 2021.

are able to provide long-term psychological and/or emotional support and information to women who have experienced sexualised violence. The bigger picture in Serbia, according to research by the Autonomous Women's Center, is that forensic medical examinations of SV survivors are not uniformly available throughout Serbia. In Belgrade and Niš, survivors can, on their own initiative, undergo an examination by a medical forensic expert, but these services are not covered by mandatory health insurance, so women must pay for them.

Even where services exist, they may struggle with inadequate or even no financial resources to support their vital work. In **Romania**, there are now 10 integrated crisis/medical centres (five in 2021) located in hospitals around the country, but SV support services receive no state funding or donations, so they depend on individual hospitals making provisions within budgets to operate. It is suggested that they operate more as referral services, and centres have received only 15 beneficiaries since 2021 (five of these centres have not supported any SV survivor since they opened). **North Macedonia** has three SVRCs which should be funded by the Ministry of Health, but have no budget allocation.

Geographical coverage and distribution of SV services

Eight countries (including three of the nations comprising the **United Kingdom**) have specialised services in all regions. From the end of 2023, this should also be the case in **Belgium**. Likewise, by the end of 2023, all autonomous communities of **Spain** must have at least one 24/7 rape crisis centre. **Portugal** only has centres in Lisbon and Porto. Small countries (e.g. **Malta** and **Cyprus**) may only have one specialist centre, but which is relatively accessible for all regions. In some countries (e.g. **Ireland**), outreach services from specialist centres can support women in rural and remote areas.

It is overwhelmingly true that vast areas have absolutely no provision, particularly in eastern and southern Europe. For example, SV services in **Serbia** are concentrated in major cities in the northern part of the country, leaving the rest of the country with no services at all. This means that existing inequalities between women are exacerbated, both within countries and across the continent, because access to specialised SV services is effectively denied to the majority, while those in major cities and in wealthier nations are better served. The resulting geographical lottery is an unacceptable infringement of women's rights, as enshrined in a series of international instruments and spelled out in the Istanbul Convention.

Specialist helplines for SV survivors

To comply with IC standards, national women's helplines must be able to offer support to survivors of all forms of VAW, though as discussed in the helpline chapter, many

of these are known and advertised primarily as domestic violence helplines. Nevertheless, it is clear that sexualised violence is very commonly reported by callers to helplines across Europe.

Some countries also have dedicated sexualised violence helplines which provide a specialised service for SV survivors. In 2021, it was reported that 19 countries had such helplines available, whether operating nationally or locally. This time, 29 out of 54 questionnaires indicated the availability of specialised helplines. Note the following:

- included in the 29 are some sub-state countries or regions (the four nations of the UK, Flanders, and Brussels-Wallonia). Excluding the sub-state countries or regions, a total of 26 countries have a specialised helpline.
- In many cases, the 'yes' survey response refers to national VAW helplines which offer support and advice to survivors of all forms of VAW, including SV. Some respondents do not count those general helplines under this SV heading, although they note that some level of support can be given. Where that distinction is made, it usually indicates that the nature of support on offer is not as specialised or specific to SV survivors' needs, as would be given by specialist SV providers.
- Other 'yes' replies refer to specific SV helplines, which are often run by or connected to RCCs or SVRCs (e.g., in **Armenia, Ireland**, the five ZSGs (Sexual Assault Care Centres – *Zorgcentrum na Seksueel Gewelds*) in **Flanders** and the Reclaim the Power Association in Slovenia).
- For many years, *Medica Zenica* has run a specialised telephone helpline for survivors of war-related sexual violence in **Bosnia and Herzegovina**.

Other services for survivors of sexualised violence

It is usually the case that women's centres will offer support and services to SV survivors, as discussed in the previous chapter. The extent and specialised nature of those services varies widely. Some have the resources to employ staff trained to deal with complex and specific needs, while others are not able to include dedicated SV specialists in their teams. However, the feminist and gendered approach of women's centres is important, and most will offer referrals, advocacy and counselling. Especially in countries which do not have any other SV services, they are vital.

In addition to a network of 17 RCCs, the **Scottish** Government funds a National Advocacy Project, coordinated by Rape Crisis Scotland (RCS) and overseen by an Advisory Group which includes representatives of RCS, Police Scotland and the Crown Office & Procurator Fiscal Service. The NAP provides dedicated advocacy support for survivors of rape and SV, through the complex and often traumatic



criminal justice process. **Austria** has specialised counselling centres in every federal province. In **Ireland**, as well as RCCs and Sexual Assault Treatment Centres, One in Four and Ruhama are NGOs working from a feminist perspective and responding to SV survivors. Ruhama works particularly with survivors of trafficking and commercial sexual exploitation. The Central Statistics Office of Ireland recently published findings of the Sexual Violence Survey which was conducted in 2022, following a request from the Department of Justice and the Irish Government. The objective of the survey is to provide high quality national prevalence data on sexual violence in Ireland which will act as a new baseline for the levels of sexual violence in Ireland. The survey is proposed to be conducted again in 10 years' time.⁷⁸

Several countries including the **Netherlands** and **Hungary** give information about services for children who have experienced sexual abuse. Although the Lilium Centre in **Albania** is for women as well as children, most of those supported in 2022 were children; 31 minor girls, one woman, and four minor boys.

Conclusions

Evidence consistently demonstrates that sexualised violence is a reality which most women and girls have to contend with in their daily lives. Liz Kelly argues that unwanted intimate intrusions are the most ubiquitous ways in which most girls and women experience VAW.⁷⁹ They are expected either to put up with it, or to organise their lives, restrict their freedoms and in general take responsibility for their own safety. Meanwhile the men who perpetrate sexualised violence overwhelmingly do so without social or legal accountability for their behaviour. To a greater or lesser extent, a culture of virtual impunity persists throughout Europe. Sexual assault is an extreme and fundamental violation of women's human rights and their wellbeing. Well attested traumatic stress can endure for a lifetime. The costs are enormous – to the individual survivor, and also to wider society. Sexualised violence is not simply a matter of isolated or extreme incidents, but a form of systemic injustice which is embedded in enduring and highly gendered cultural norms. Despite some welcome advances and rhetorical commitments, many existing laws, procedures, and practices concerning sexualised violence do not comply with international human rights standards. Failures in ensuring a holistic system of preventing and prosecuting sexualised violence and providing redress lead to the denial of justice and compromise women's wellbeing.

Unfortunately, **Türkiye** remains a complete desert with no SV specialist support services available for over 80 million women. This appalling situation is of great concern.

Funding for SV services

There is a dearth of public finance being invested in specialist SV services around Europe. Although most countries do provide some measure of national or local government funding, the level of support is clearly insufficient almost everywhere – even in the relatively wealthy nations of north and western Europe. Otherwise they would be much closer to attaining the recommended minimum of SV services provided by specialist women's organisations. In far too many countries, the stability and sustainability of such services – even where they exist – is always precarious. They have to rely mostly on short-term project funding, usually from international organisations such as UN Women, European funding streams and the Oak Foundation, plus donations. States must urgently step up to meet their binding obligations.

Actions to address and prevent sexualised violence should be a priority for all nations. To that end, international agreements which bind signatories to legal obligations, such as the Istanbul Convention, are important. States must rise to the challenge by developing survivor-centred and trauma-informed institutional procedures for coordinated responses by medical, police and judicial services. Most importantly, they should recognise the value and effectiveness of dedicated specialist support services, working from a gender-sensitive perspective.

Disappointingly, the shortage of such services remains severe and critical. Several countries have no specialist provision at all. Even in nations where centres do exist, uneven geographical coverage means that millions of women survivors (especially those living outside main centres of population) are unable to access any kind of in-person specialist service at all.

Alternative sources of support include helplines for survivors of sexualised violence, which are currently available in 16 European states though in some cases with very limited operating hours. Women's centres may also be able to provide specialist support, though specific expertise or capacity may be limited. In countries like Italy, there is a network of women's centres whose ethos and practice are

78 Central Statistics Office of Ireland, *Sexual Violence Survey 2022*. Main results available at <https://www.cso.ie/en/releasesandpublications/ep/p-svsmr/sexualviolencesurvey2022mainresults/>

79 Elizabeth Stanko first introduced the concept 'intimate intrusion' in 1985. Liz Kelly has used it to characterise the everyday, normalised and minimised experiences of SV in the lives of women and girls. See Stanko, E., *Intimate Intrusions (Routledge Revivals): Women's Experience of Male Violence* (2013). 1st ed. United Kingdom: Routledge. See Kelly, L., *Standing the Test of Time? Reflections on the Concept of the Continuum of Sexual Violence*. In: Jennifer M Brown and Sandra L. Walklate (eds) *Handbook on Sexual Violence* (2011), London: Routledge, pp. 17-26.

to include a full range of specialised services needed by SV survivors. But elsewhere they are primarily set up for domestic violence survivors, as reported in the chapter on centres.

Specialist medical and forensic services need to be provided within the timeframe required to gather evidence if survivors choose to make a complaint or a formal police report (even when they do not do so immediately). Lack of care and sensitivity in this process can be seriously re-traumatising, and is one of the reasons so many survivors do not pursue justice. Furthermore, specialist advocacy or accompaniment helps ensure survivors are aware of their rights and options. Given low rates of reporting, prosecution and conviction for sexual violence crimes, this kind of support, which can be complex and time-consuming, makes a vital contribution to creating a less intimidating and re-victimising environment for survivors.

Long-term cultural change requires education, awareness-raising and campaigning work to build societies where the norms which facilitate and collude with sexualised violence are eliminated from everyday life. Those include the fallacious gender stereotypes, misconceptions and attitudes which may be shared by perpetrators, those in positions of authority and the wider public. It cannot be right that women are shamed into silence or too embarrassed to disclose what has been done to them. Neither is it acceptable that prejudice or misogynist cultures in police or justice systems leave survivors unable to trust institutions, or even be fearful of the responses they can expect from these institutions. The women's NGOs which operate RCCs, and other specialist services often undertake this essential training, education and prevention work. But it needs to be endorsed and resourced by authorities at all levels, rather than being left as piecemeal and underfunded interventions.

Recommendations

- **European states must prioritise the establishment of sufficient rape crisis and sexual violence referral centres to meet the needs of survivors in every region, according to the Istanbul Convention standard of one such service per 200,000 inhabitants.**
- **Funding to specialist SV services shall be sustainable and move beyond short-term project funding to ensure long-term operational stability.**
- **Cooperation between different sectors, including healthcare, law enforcement, legal services, and NGOs shall be fostered, to provide a coordinated and comprehensive response to SV and to extend the reach and impact of services.**
- **Accessibility of specialist SV services shall be guaranteed to all survivors, with particular attention to those belonging to marginalised groups, such as women with disabilities or women who face language barriers.**
- **Regular quality assurance shall be implemented to assess the effectiveness of the specialist SV services and ensure they are meeting the needs of the survivors.**
- **States must invest in regular, strategic public awareness, educational programmes and prevention campaigns to address pernicious myths and women-blaming stereotypes associated with sexualised violence, and with a focus on men's collective responsibility to challenge the norms and cultures that create enabling environments for such violence.**
- **A systematic programme of initial and continuous training and professional development for key sectors (including police, judiciary, health services and education) should be established and specialised training modules for different professionals should be developed. This should take a gender-specific approach towards sexualised violence to build a competent workforce with role-appropriate knowledge, skills and understanding, and it should include a workplace harassment policy to ensure sexualised violence is not tolerated.**
- **Definitions and legislations on sexualised violence which emphasise voluntary and meaningful consent as decisive should be developed and implemented by states, with the collaboration of specialists who have developed expertise in women's support services.**



Primary prevention of violence against women and girls



Introduction

On a global scale, violence against women (VAW) impoverishes individual women, families, communities and countries, undermining national and international wellbeing and development. It drains public resources, damages human capital, and lowers economic productivity. It undermines women's capacity to act as agents for change and robs them of choices and control over their bodies, sexuality and lives.

The Istanbul Convention (IC) is rooted in the conviction that gender-based violence against women (GBVAW) in all its forms is neither natural nor inevitable. It does not simply 'happen'. Violence is an intentional and functional behaviour, committed by reflexive human beings in social contexts. Violence is also structural and cultural – embedded in the underlying systems of power at work in any given society.⁸⁰ Particular acts or threats of violence should not be understood as random, regrettable (or even justifiable) events. They occur within, and are expressions of, social relations of power. The provision of women's specialist services (WSS), as detailed in this Country Report, is vital to challenging and overcoming these power relations. However, unless serious and informed work is undertaken to prevent such violence before it occurs, millions of women and children will continue to suffer untold harm, their ability to contribute fully as citizens will be impeded, and vast resources will still be needed to protect them. To eradicate violence against women and girls (VAWG),⁸¹ it is vital that relevant stakeholders and states understand the root causes, in order to tackle these at the source.

For centuries, men's violence against women went largely unacknowledged, accepted and in some situations legitimised. In recent generations, due to the tireless efforts of the women's movements and supported by ever-expanding scientific evidence, this situation has been challenged. Particularly in the wake of the UN Declaration on the Elimination of Violence Against Women in 1993, international consensus has been enshrined in commitments with legally binding obligations, such as the Council of Europe's IC. Article 3 of the Convention states:

Violence against women is a human rights violation and a form of discrimination against women. "Violence against women" refers to all acts of violence that result in, or are likely to result in physical, sexual, psychological or economic harm or suffering to women, including threats, coercion or arbitrary deprivation of liberty, whether occurring in public or private spaces.

In 2017, the UN Convention on the Elimination of Discrimination Against Women (CEDAW) Committee recognised that the prohibition of gender-based violence against women has evolved into a principle of customary international law, binding all States. Yet violence against women remains pervasive and prevalent, at home and work, in schools and online, in faith communities and leisure activities, in conflict zones and embedded in patterns of migration or asylum-seeking. These everyday manifestations of VAWG in diverse situations and contexts do not occur in isolation from each other and cannot be explained as aberrations from a normal, violence-free state of affairs. A theoretical framework is required in order to make the connections, build a shared understanding and respond effectively.

The different forms of VAW – including emotional, psychological, sexual and physical abuse, economic abuse, coercion and constraints – are interlinked. They have their roots in gender inequality. Statistically speaking, gender is the major risk factor for the victimisation of women and the perpetration of any form of violence, and must not be ignored. Such violence cannot be understood in isolation from the norms, social structure, and gender stereotypes in any given society. Despite considerable and important changes in the formal status of women, it remains the case that political, public, economic and cultural power is still disproportionately in the hands of men and of institutions rooted in patriarchal traditions. The acceptable use of violence remains embedded not only in the early learning and socialisation into masculinity of boys and men but also in the everyday enactments of masculinity throughout men's life cycle, even though this is increasingly resisted and challenged.

80 Peace researcher Johan Galtung described structural violence as 'the avoidable limitations society places on groups of people that constrain them from achieving the quality of life that would have otherwise been possible. These limitations could be political, economic, religious, cultural, or legal in nature and usually originate in institutions that have authority over particular subjects.' Cultural violence refers to culturally based justifications of direct or structural violence. Johan Galtung, *Violence, Peace, and Peace Research* (1969), *Journal of Peace Research* 6:3.

81 Throughout this chapter, the term violence against women and girls (VAWG) is predominantly used, as primary prevention in large part also focuses on girls and young women (under the age of 18).

Women and girls' everyday experiences of violence at home and outside, common in countries across Europe, have the cumulative impact of narrowing their autonomy. This causes anxiety and fear, limits their freedom of movement, makes women and girls self-conscious about their bodies and appearance, affects their self-understanding, teaches them to scrutinise and police their own behaviour and socialises them to keep quiet, or to accept constraints because that's 'just the way things are'. Where mundane violations are ignored and go unchallenged, girls and boys learn powerful messages about what is acceptable and expected, what is allowed and encouraged, and who pays the price.

Understanding VAWG is not just about counting incidents. The context of what happens influences meanings and consequences. Cultures and institutions which turn a blind eye to everyday sexism create conducive contexts for gender-based violence. In her groundbreaking analysis,⁸² Professor Liz Kelly argued that acts which have been defined and regulated as VAWG – rape, physical assault of intimate partners, child sexual abuse and so on – are the criminalised end of a continuum of otherwise socially sanctioned and still widely accepted patterns of gender relations. These include aggressiveness, coercive behaviour, notions of masculine entitlement to women's domestic or sexual services, and deep-rooted patriarchal norms.

Primary prevention (PP) of VAWG (stopping it before it occurs) is harder to evaluate than secondary prevention (early identification and crisis intervention) and tertiary prevention (long-term support and recovery), but it is critical as it creates a long-term paradigm shift in behaviours, attitudes and systemic power structures.

Chapter three of the IC concerns the prevention of VAWG, and Article 12 lays out the general obligations of state parties:

Article 12 – General obligations

1. Parties shall take the necessary measures to promote changes in the social and cultural patterns of behaviour of women and men with a view to eradicating prejudices, customs, traditions and all other practices which are based on the idea of the inferiority of women or on stereotyped roles for women and men.
2. Parties shall take the necessary legislative and other measures to prevent all forms of violence covered by the scope of this Convention by any natural or legal person.
3. Any measures taken pursuant to this chapter shall take into account and address the specific needs of persons

made vulnerable by particular circumstances and shall place the human rights of all victims at their centre.

4. Parties shall take the necessary measures to encourage all members of society, especially men and boys, to contribute actively to preventing all forms of violence covered by the scope of this Convention.
5. Parties shall ensure that culture, custom, religion, tradition or so-called "honour" shall not be considered as justification for any acts of violence covered by the scope of this Convention.
6. Parties shall take the necessary measures to promote programmes and activities for the empowerment of women.

In the collection of papers on Article 12, published by the Council of Europe and prepared by Marianne Hester and Sarah-Jane Lilley,⁸³ the authors note that research data from campaigns and interventions, both in Europe and worldwide, offer examples of promising approaches for effective prevention strategies. A recommended theoretical framework is the interactive ecological model of violence prevention, which organises risk factors for GBVAW on the different levels at which they occur (societal, institutional, community/family, and individual). This framework is based on the World Health Organization's (WHO) public health approaches to disease prevention, defined as the disruption of means, pathways and mechanisms. Hester and Lilley encourage programme designers to base primary prevention programmes and practice on the following principles, which are drawn from promising work:

- uses a gendered and human rights approach
- provides a local evidence-base
- is sustainable and replicable
- enables excluded sectors of society
- includes community ownership
- includes partnerships⁸⁴

The WHO also developed the RESPECT framework in 2019 with infographics on the prevention of violence against women, based on the UN framework for action to prevent VAW from 2015 and updated new evidence.⁸⁵ The framework outlines seven strategies to prevent VAW:

- **R** – relationship skills strengthened
- **E** – empowerment of women
- **S** – services ensured
- **P** – poverty reduced
- **E** – environments made safe
- **C** – child and adolescent abuse prevented
- **T** – transformed attitudes, beliefs, and norms

82 Kelly, L., *Surviving Sexual Violence* (1988), Cambridge, Polity Press.

83 Hester and Lilley, *Preventing Violence Against Women: Article 12 of the Istanbul Convention* (2014), Council of Europe, <https://rm.coe.int/CoERMPublicCommonSearchServices/DisplayDCTMContent?documentId=090000168046e1f0>

84 Ibid., p.13.

85 World Health Organization, *RESPECT women – Preventing violence against women* (2019), <https://www.who.int/publications/i/item/WHO-RHR-18.19>



Preventing VAWG – What Works, a Scottish Government Report published at the end of 2020, reviewed relevant literature to assess the effectiveness of primary prevention interventions, highlighting moderating factors for their successful implementation. It found strong evidence that interventions focused on modifying unsafe physical school environments are effective. Bystander programmes are

promising, as are school programmes to prevent dating and intimate partner violence. There was mixed evidence about education for sexual violence prevention in Higher Education settings. Lack of longitudinal research means it is not yet possible to draw reliable conclusions on awareness raising, ‘honour-based’ violence or female genital mutilation (FGM) preventive interventions.⁸⁶

WAVE Country Report Findings on Primary Prevention

Questions about PP were included in the survey for the first time for this edition of the WAVE Country Report. The information gathered will establish a base from which to assess and monitor actions taken by countries to meet their obligations. While most WSS focus on the provision of support, shelter, information and advice (the kind of services which fall under the secondary and tertiary prevention heading), there are also many women’s NGOs which provide primary prevention services. Indeed, WSS and feminist NGOs, in partnership with scholars and other actors, have been at the forefront of developing the gendered understanding of VAWG and inequality. The survey asked about National Action Plans (NAP) on VAWG, operational definitions of PP, provision and funding of PP activities, and beneficiaries. The data provided by country delegates may not yet be fully comprehensive and comparable, but it does highlight some key trends, issues and concerns.

National Action Plans

According to information received, thirty-one countries have some kind of VAWG National Action Plan (NAP). This includes separate plans for three of the four nations in the United Kingdom; and in Belgium, a national as well as three regional plans. Twelve countries have no such plan. The situation in **Belarus** and **Montenegro** is not known. Of the countries without a NAP, supplementary information suggests that the following have either launched a plan in 2023 (**Northern Ireland**) or are in process/preparation for a plan (**Germany, Malta, and Slovenia**). **Croatia** adopted a Gender Equality Plan in June 2023, including the prevention of VAWG as a key priority.

Country delegates were also asked if the NAP included specific provision for PP. Thirty survey returns answered yes. Some provide additional details about the relevant sections or chapters of NAPs. At the level of rhetoric and commitments on paper, some countries do make impressive PP pledges, but the data collected suggests that so far, they are not so good at delivering on them. Based on the information received, few NAPs frame primary prevention as a challenge to address gender inequality more broadly. Awareness raising, training, education for children, and work to make public spaces safer are among the initiatives included in NAPs.

NAPs cannot always be taken at face value. Following withdrawal from the IC, the 2021 Plan for **Türkiye** was drafted specifically to counteract and replace the Convention, with all references to gender equality eliminated. In the **Russian Federation**, a declarative NAP ‘in the interest of women’ subsumes VAW under the general heading of ‘social disadvantage’ and makes no provision for PP. It seems that some NAPs are restricted in scope to domestic violence (DV) only. Desk research provides evidence that in various countries (for example **Romania**) there are separate NAPs for different forms of VAWG. This is of grave concern as splitting up VAWG ignores the interrelatedness of different forms of violence, and reduces the effectiveness of policy and programming initiatives aimed at preventing VAWG.

Defining Primary Prevention

NAPs are important indicators that a country may be taking a strategic and comprehensive national approach in responding to and eliminating VAWG, although this does not systematically include PP. Good practice and the obligations of the IC should require that strategies are based on a coherent gendered understanding, a clear definition of PP, and provisions across all domains of state responsibility. However, it cannot be assumed that the existence of a NAP (or equivalent document) guarantees a clear strategy based on a gendered framework and with an operational definition of PP. Questionnaire responses indicate that 23 countries have no such definition. For seven other countries, the survey response was ‘don’t know’. These countries may indeed include PP activities as part of their plans (as discussed in the next section), but without a clear definition or framing of what this means, it is possible that neither the activities nor their rationale will conform to the Istanbul Convention’s objective of social and cultural change to stop violence before it happens. Absence of a clear definition may also indicate that PP is not a priority.

Examples of definitions being used include:

‘Primary prevention involves preventing the occurrence of violence by raising awareness through campaigns, education on human rights, educational materials for children and adolescents, etc.’ (**Republika Srpska**).

86 Scottish Government, *Preventing Violence Against Women – What Works* (2020), <https://www.gov.scot/publications/works-prevent-violence-against-women-girls-summary-evidence/>

Germany does not have a NAP yet, but this definition is given as an example of state-level policy, from the Berlin Department of Women and Gender Equality:

Prevention – primary – secondary – tertiary

In the sense of a social policy, primary prevention includes the socio-political task of informing about the causes, forms and effects of violence against women and raising awareness among all population groups.

Secondary prevention involves the provision of support services for the affected women and their children in acute or potential situations of violence and conflict in order to intervene in the dynamics of the act of violence and to protect those affected.

Tertiary prevention aims to prevent violence or its continuation through certain programmes and measures. The Berlin Senate uses all three forms of prevention to get closer to the goal of a non-violent civil society.

Note that both of these definitions focus on PP as a matter of 'raising awareness' or 'informing' but fail to address how that, in itself, contributes to the actual prevention of VAW.

The **Belgian** NAP does address how specific measures do result in prevention, and refers to the WHO public health approach: 'Primary prevention aims to prevent the onset of a health problem by acting on a series of actions: preventing exposure to risks, changing risky behaviour, strengthening resistance to disease or injury. In the case of gender-based violence, primary prevention is an effective means of putting an end to violence against women by improving people's quality of life and health, and ensuring respect for their fundamental rights. Primary prevention also produces financial benefits for the community (health care, psychological follow-up, recourse to justice, support for perpetrators, involvement in the workplace, etc.).'

Links to country NAPs or VAWG strategies are provided by several WAVE delegates. Checking these shows that some other countries have also adopted the recommended WHO public health approach, for example **Estonia** (but note this is from the generic Violence Prevention Agreement for 2021–2025):

'Understanding of violence prevention is based on the World Health Organization's recommendations on the public health model, which emphasises the need to address the root causes of violence rather than just the symptoms. Only by doing so, it is possible to break the cycle of violence and reduce its impact on individuals, their families, and communities. According to the recommendations of the World Health Organization, attention should be given to education and social skills, support and assistance services, economic well-being, support for parenting

and caregivers, a safe environment, norms and values, and legislation, among other aspects, for the prevention and reduction of violence'.

And **Wales**:

'The principles of public health provide a useful framework from which to understand our approach and the 'theory of change' through which we intend to end VAWDASV.⁸⁷ A public health approach understands the causes and consequences of violence, abuse and control. The approach is based on whole populations and, as such, depends on co-ordinated effort acknowledging the causes of health and social problems through multi-agency responses.

A public health approach to preventing VAWDASV improves the safety of all by addressing the underlying risk factors that increase the likelihood that an individual will become a survivor or perpetrator'.

This 'theory of change' and 'whole system' approach takes seriously the need to change systems and structures at every level, not simply individual attitudes and behaviours.

Specific provisions and funding for the primary prevention of VAWG

With the exception of Romania, in all countries with a NAP (and some without) delegates report that specific provisions are made for PP. However, several qualify this with comments about the nature or scope of such provision, and this will be discussed in the next section.

Thirty-two countries provide some state funding for PP initiatives, ten do not, and the provision in six countries remains unknown. Since there is currently no national strategy for **Germany**, public funding is provided at regional level for fixed-term projects. In **Hungary**, state funded programmes at national level do not acknowledge VAWG as a phenomenon, follow a rights-based gendered approach or involve women's rights (WR) NGOs. In **Italy** only 14% of all funds are dedicated to PP, few organisations can access them, school programs are not adequately funded, and PP is often not a priority. This contrasts with **Finland**, where over 50% of the first NAP provisions were directed towards PP. It is gratifying to note that **Spain** has earmarked 209 million euros of PP funding – an increase of 16.1% from 2021. In some cases, the state may be funding activities under the 'prevention' heading, but these do not conform to the IC or WAVE understanding of PP.

Non-state sources of PP funding include international organisations, trusts and local NGOs and private donors. Named examples of such sources include Open Society Foundation (OSF), Norwegian funds or resources of CSOs.

87 VAWDASV stands for Violence Against Women, Domestic Abuse and Sexual Violence.



Primary Prevention Activities

The WAVE questionnaire provided a list of options for delegates to tick, indicating the kind of PP activities provided. The most popular, with provision in almost all countries, were public awareness-raising campaigns (43 countries) and school-based PP programmes (33 countries). Activities mentioned include 16 Days campaigns and events, conferences, the use of theatre (**Luxembourg**) in schools and elsewhere for VAWG PP, workshops and exhibitions, and PP targeting groups of women facing additional risk or barriers, including women with disabilities, Roma and other racialised women. Training for PP practitioners is offered in 25 countries,⁸⁸ bystander intervention programmes (17 countries), feminist self-defence training (16 countries) and self-care activities (15 countries). In **England**, Relationships Education is compulsory in all primary schools, Relationships and Sex Education is mandatory in all secondary schools, and Health education is compulsory in all state funded schools. This comprehensive approach is to be welcomed. In the **Netherlands**, despite a considerable number of initiatives, projects, guidelines, tools and protocols, a clear long-term strategy and plan to prevent and combat VAW and DV is still lacking. There is

little coherence between programmes, and they tend to be short term, often adopting a gender-neutral perspective. However, the recent "Combating sexual transgressive behaviour and sexual violence" programme shows that the Dutch government can develop an approach that is both gender-specific and human-rights oriented, including PP activities. **Moldova** has organised educational initiatives and awareness campaigns are conducted to promote gender equality, challenge harmful gender stereotypes, and raise awareness about the root causes and consequences of VAWG. These campaigns often target schools, universities, communities, and the general public. In **Germany**, programmes developed for schools normally aim to empower girls rather than change male behaviour, although both approaches are complementary and most effective when combined. This may be true in other countries as well. Work with men and boys to explore and challenge problematic behaviour, and the underlying norms of masculinities, has to be central in any effective PP strategy, alongside empowering women and girls. In **Ireland**, programmes in schools address, but are not wholly geared towards, PP. Most programmes include secondary prevention and self-care aspects, while some PP initiatives are at the early stages of analysis.

Case Study – Belgium

In French-speaking Belgium, the feminist NGO Garance has been at the forefront of advocacy for PP for almost 20 years.⁸⁹ From the outset, Garance constructed an effective platform from which to pursue this mission. The first stage was to develop a feminist perspective on resisting VAWG, and to build alliances with other feminist NGOs focused on a recognition that PP is essential – not in competition with secondary and tertiary prevention services. The ultimate purpose of engaging in any anti-VAWG work must be an active commitment to the notion that a world without violence against women and girls is possible and achievable. On this basis, collaboration and solidarity with other NGOs have broadened feminist support for PP. The long-term pioneering work of Garance offers a proven model that could be adapted for effective PP work in other countries. Some of Garance's PP activities include:

- **Feminist self-defence workshops**

At feminist self-defence (FSD) workshops offered by Garance, participants have the opportunity to overcome the feeling of helplessness and defencelessness against verbal and physical attacks they encounter in public places, at school, at work, and/or at home. Women and girls, including those with LBTQIA+⁹⁰ identities, learn how to recognise and respond to boundary transgressions and violence. They strengthen their sense of self-confidence, self-esteem and agency.

- **Peer education programme**

Peer education is based on the fact that a peer facilitator shares certain characteristics of the group (e.g., gender, age, origins, life experiences, etc.) and experiences similar issues and discrimination. The fact that they share the same realities enables the group to develop strategies together that meet their needs so that they can better defend their rights and feel more confident at home, on the street, or at work. The peer education programme on safety is also a gateway into feminist self-defence.

At the moment, the three audiences for Garance's peer education programmes are older women, migrant women/women of colour and women with learning disabilities. They facilitate five safety workshops on prevention strategies, boundaries, safety in public spaces, domestic and family violence, and discrimination.

88 It should however be noted that the quality of such trainings could not be evaluated through WAVE's data collection, and there is a stark difference between training provided for prevention workers from women's NGO's own funds and state-funded, evidence-based formal PP training.

89 Additional information about the work of Garance can be found on the website www.garance.be.

90 LBTQIA+ stands for lesbian, bisexual, transgender, queer, intersex, asexual, and more.

■ School-based prevention programme

Child Assault Prevention (CAP) is a programme developed in 1978 in the US by FSD practitioners. Garance was trained by Canadian CAP trainers in 2015 and has since then implemented the programme CAPable children (Enfants CAPables) in Belgian French-speaking primary schools. Its objective is the primary prevention of bullying and sexual violence. It is based on a three-pronged educational approach, including workshops for parents, school staff, and children. In this way, consistent prevention messages are disseminated to all three groups and can reinforce each other. The programme aims to inform and raise awareness, but above all to empower children and adults alike and to increase their self-confidence and personal and collective resources for action.

In **Türkiye**, WAVE member Mor Çatı Women's Shelter Foundation engages in direct social work with a feminist perspective. Their approach encompasses meaningful conversations and crisis interventions, going beyond mere "call centre" operations. These interactions involve providing preventive information regarding conducting risk assessments and developing plans to address potential future violence or rights infringement, as well as preventing institutional violence. Mor Çatı recognises the importance of comprehensive support, including strategies to prevent violence and empower women. Thus, in their feminist social work, there is a primary prevention component on top of the secondary and tertiary prevention work of the call centre operations.

Feminist self-defence and assertiveness training has been a productive method of PP work with girls and women based on the empowerment approach. WAVE members in **Belgium** and **Poland** conduct workshops. Polish workshop participants, both adult women and girls, were overwhelmingly positive in their evaluation. Regarding workshops for girls, 100% of participants felt safer, and for 95%, participation in the workshops resulted in an increase in self-confidence, as well as in skills related to assertive communication and the ability to recognise and respond to violence.

Case Study – Scotland

Equally Safe (ES)⁹¹ is Scotland's strategy for preventing and eradicating violence against women and girls, developed by the devolved government in partnership with the Convention of Scottish Local Authorities, WSS, feminist NGOs and others. Primary prevention is a core objective, and ES states 'we recognise that violence against women and girls is not 'caused' by a single factor. Rather, it is driven by a complex interaction between a range of underlying or contributing factors, at different levels of influence – individual, relationship, community and societal. This is what we call the 'causal story' of violence against women and girls. In common with the Scottish Government's Violence Prevention Framework, it utilises the WHO public health ecological approach. ES contextualises VAWG in relation to gender inequality across all domains of life. Gendered poverty, discrimination and intersectional barriers are recognised as key features of the 'causal story'.

Examples of PP initiatives include *Equally Safe at Work* – an innovative employer accreditation programme developed by Close the Gap, Scotland's expert policy advocacy organisation working on women's labour market equality. It supports employers to improve their employment practice to advance gender equality at work and prevent VAW (focusing on secondary and tertiary prevention).

Rape Crisis Scotland works closely with local Rape Crisis Centres to deliver the national PP education programme. In 2021-22 centres delivered workshops to 27,952 young people across 181 schools (approximately half of the secondary schools in Scotland). Rape Crisis Centres also supported 415 young people take the lead in helping prevent sexual violence, focusing on what they want to change in their school, community and wider society. *Equally Safe at School* (ESAS) and *Equally Safe in Colleges and Universities* (ESCU) are secondary prevention programmes which complement the PP programme developed by Rape Crisis Scotland. Despite these and other excellent programmes, and stated prioritisation of PP, Scottish Government VAWG funding remains focused on acute and 'upstream' needs.

91 More information about *Equally Safe: Scotland's Strategy for Preventing and Eradicating Violence Against Women and Girls* can be accessed here: <https://www.gov.scot/policies/violence-against-women-and-girls/equally-safe-strategy/>



The country data gives a general indication of what's happening across Europe, but it tells us little about the theoretical framework, content, aims or outcomes of these activities. As already noted, in some cases official state funded and sanctioned provision is actually at odds with the principles and objectives elucidated in the IC because it rejects and seeks to counteract a rights-based approach which sees gender inequality as the root problem. Supplementary information from delegates identifies some particular limitations and challenges in their situations.

Schools-based PP in **Hungary** has always faced serious shortcomings. Neither mandatory nor systematic, it relied on individual teachers who were committed to human rights or violence prevention education. As the government currently promotes an anti-LGBT stance, formal registration is required, and women's NGOs are denied access to schools. Other countries also mention that exclusion from partnerships makes it difficult for women's rights NGOs to do prevention work in schools. However, Hungarian women's rights NGOs NANE and PATENT operate a joint intimate partner violence and sexual violence prevention

program for young people, comprising two standalone but complementary programs, 'Equal Together' and 'Turn Me On'. In response to school curricula's failure to address VAWG PP, NANE and PATENT also run 'Rebellious Girl' Camps. The interactive camp workshops increase girls' self-esteem, they learn about and can discuss the topics of gender roles and gender inequalities, beauty culture and porn, equality-based relationships and sex, the menstrual cycle and contraception, different forms of violence and their warning signs. They have an opportunity to participate in a feminist self-defence workshop focusing on boundaries.

In many countries, women's centres and shelters do undertake PP activities, but with competing demands on their time, and often without proper funding. Given the vital importance of PP, it is concerning to report the apparent near absence of women's specialist organisations dedicated to primary prevention of VAWG. *Autonomia* and *Juniper Foundation*⁹² in **Poland**, and *Garance* in **Belgium**, are among the few exceptions.

Conclusion

Primary prevention is fundamental to the success of any strategy to prevent and eradicate VAWG. Every country should provide sufficient resources to support this kind of work. The overall impression from the first year of data-gathering on PP is that across Europe this vital element of the IC and other international agreements is not a priority. Even where VAWG NAPs or equivalent strategies include a declaration of intent, a definition and/or acknowledgement that PP is the key to eradicating such violence, there is little evidence that mandatory, systematic, properly resourced programmes are being delivered nationally. Initiatives and programmes tend to be project-based, piecemeal, short-term. They fail to address the powerful structures and institutions which normalise stereotypes and the continuum of violence. Most are not integrated strategically into a coherent national approach with an adequate budget. Officially sanctioned state provision may be gender neutral; it may actively resist or undermine a gendered perspective. Most work focuses on domestic and/or sexual violence. Other forms of VAWG, and differential impacts on certain groups, are much less likely to be addressed as PP concerns. The huge variations observed in policymaking, programming and evaluation of primary

prevention speak to the lack of shared standards across Europe.

In spite of these shortcomings, innovative and promising PP initiatives are developed out around Europe. These should be commended as good examples and hopeful signs upon which to build. The case studies in this chapter show what might be possible on a much larger and systematic scale. Proper monitoring and evaluation of PP work is challenging but necessary so that in future we have strong evidence about what works in diverse contexts.

Most of the funding made available for VAW work is allocated to crisis response, shelter and support services. These services are absolutely necessary and will always benefit from greater investment. But in the longer term, if states and stakeholders do not devote significant resources, both financial and human, to strategic PP, the underlying causes of VAWG will continue to produce survivors and perpetrators, to the detriment of individuals, relationships and communities. Collaboration and long-term planning at every level of society is necessary to tackle gender inequality and its consequences at source.

92 Juniper Foundation was founded in 2023.

Recommendations

- Increased attention to and resources for PP should never be at the cost of reducing the provision of secondary and tertiary prevention. These are still needed to safeguard survivors' human rights and allow them to recover from violence. However, survivors' most fundamental right is to not become victims of violence in the first place and to live lives free from violence. To effect the societal change needed to end VAWG, policymakers need to capitalise on the combined effectiveness of the full three-pronged public-health approach to violence prevention.
- Garner long-term political commitment to centre PP in the fight against VAWG on the European level.
- Invest increased funding for public authorities, NGOs and scientific research for furthering knowledge and knowhow in PP and exploit possible synergies (e.g., funding scientific evaluative research of NGO-run PP pilot programmes, funding of and research into upscaling existing promising and proven PP programmes, development of quality standards).
- Strengthen existing instruments such as the IC in terms of the conceptualisation and operationalisation of PP by:
 - including PP in a significant way in GREVIO's baseline questionnaire, monitoring process and reporting.
 - providing evidence-based policy orientation to ratifying states of what works in PP so that resources can be invested with maximum effectiveness.
 - adopting an optional protocol to the IC on PP on the basis that it is states' due diligence to prevent violence before it happens, thereby safeguarding women's and girls' fundamental right to live free from violence.
- Put PP at the centre of current and future European policy such as the revision of the EU Victim's Rights Directive, the EU Directive on Violence Against Women and Domestic Violence or the EU recommendations on harmful practices. PP should not be an afterthought to secondary and tertiary prevention, but needs to become a priority.
- At the same time, all European and national policy, such as social security, housing, migration or foreign affairs, should be reviewed in terms of the potential to promote PP of VAWG. Opportunities to further PP should be identified and capitalised on.
- All governments should adopt long-term NAPs to combat VAWG and coordinate the different government levels, institutions, and organisations active in this field. NAPs need to centre PP, include comprehensive definitions, sufficiently funded and NGO-run programmes targeting different types of VAWG and different demographics, and reporting on quantitative objectives to reduce the prevalence and incidence of VAWG over time.
- Governments specifically need to support WSS in evaluating and upscaling their existing PP programmes, including the training of PP professionals and the exchange of experiences and evaluation of transposability of programmes.

Femicide



Introduction

Femicide is a term which refers, broadly speaking, to the gender-related killing of women by men, because they are women. It draws an important distinction between the killing of women as a fatal manifestation of violence against women (VAW), and killings where the gender of the victim is random or incidental. The word was first used publicly by feminist writer and activist Diana Russell. In 1976, at the first International Tribunal on Crimes Against Women, she introduced the concept to highlight the reality that in diverse global contexts, women die at the hands of men who thereby seek to preserve the unequal gender order which confers male privilege, power, dominance and control over women. 'Femicide' was invested with meaning as an awareness-raising and campaigning tool. As the term acknowledges who the victim is and why she is targeted, it enables a better understanding of approaches for intervention and prevention. In this political sense, femicide is framed as part of the continuum of VAW which connects extreme criminal acts with the everyday realities of intrusion, harassment, constraint and abuse which so many women experience. In 1992, Russell and her colleague Jill Radford drew attention to this framing by describing femicide as the 'misogynist killing of women by men'.⁹³

The term is increasingly used by scholars, feminist NGOs and international instruments. Definitions and use of 'femicide' for research, policy and legislation are subject to debate. In practice, it is widely understood to refer to the killing of a woman by her intimate partner or ex-partner. But this limited definition fails to take account of the continuum of VAW, from before birth to death, and in all domains of human activity. Following the landmark 2012 Vienna Declaration and the UN General Assembly Resolution adopted in 2013, the gender-related killing of women has been a thematic priority for the UN Special Rapporteur on Violence Against Women. This work draws on a comprehensive understanding of femicide which incorporates categories of killing, perpetrated directly and indirectly, as developed particularly in the Special Rapporteur's special thematic report (2012) on gender-based killings of women:

Direct

- killings as a result of intimate-partner violence;
- sorcery/witchcraft-related killings;
- so-called 'honour-related' killings;
- armed conflict-related killings;
- dowry-related killings;

- gender identity- and sexual orientation-related killings;
- female infanticide and gender-biased sex selection
- ethnic- and indigenous identity-related killings.

Indirect

- deaths due to poorly conducted or clandestine abortions;
- maternal mortality;
- deaths from harmful practices (e.g., related to female genital mutilation);
- deaths linked to human trafficking, drug dealing, organised crime and gang-related activities;
- the death of girls or women from neglect, through starvation or ill-treatment;
- deliberate acts or omissions by the State.

This list is not exhaustive. The killing or forced death of women in other contexts (e.g., fundamentalism, extremism, or mobility of displaced persons and refugees) should also be regarded as femicide. Additionally, there is also the hidden reality of indirect femicide: women who commit suicide following the trauma of domestic violence, sexualised violence, online abuse and other gender-based harms. It is interesting to note that the estimate of femicides in **Belgium** for 2022 tracked by 'Stop Femicide' includes the case of an elderly woman who sought legal euthanasia after being raped.

The related term *feminicidio* has been utilised by feminists and policymakers particularly to emphasise the role of the state in enabling these crimes and the impunity with which they are treated. This terminology originated in Mexico and elsewhere in Latin America to denote the epidemics of women murdered because they were women and the related state's complicity. It has been widely adopted internationally. In some European countries, feminicide is the term more commonly used for femicide.

There is no universally agreed definition of femicide, but all definitions recognise that gender-based killings of women and girls are not 'isolated, sporadic or episodic cases of violence; rather they represent a structural situation and a social and cultural phenomenon deeply rooted in customs and mindsets'.⁹⁴ There is now an extensive literature of evidence-based research and analysis, allied to activist movements agitating for legal and policy recognition at all levels. Femicide is a preventable pandemic, and states are

93 Radford, J., and Russell, D., *Femicide: The Politics of Woman Killing*. Birmingham (1992), OUP. Preface, p. 11.

94 CEDAW, *Report on Mexico produced by the Committee on the Elimination of Discrimination against Women under article 8 of the Optional Protocol to the Convention* (2005), New York: United Nations. Quoted in Dawson, Myrna, and Michelle Carrigan, *Identifying Femicide Locally and Globally: Understanding the Utility and Accessibility of Sex/gender-Related Motives and Indicators* (2021), *Current sociology* 69.5: 682–704.

called to accountability for ensuring the safety of women from this most extreme form of gender-based violence against women (GBVAW).

The United Nations Office on Drugs and Crime (UNODC) estimated that globally there were 81,000 female victims of homicide in 2021. Of these, 47,000 (58% of the total number of women and girls) were killed by intimate partners or family members, primarily men.⁹⁵ Although serious challenges concerning underreporting and measuring variations persist between member states, UNODC's report suggests that, globally, one woman or girl is killed by someone close to them, on average, every 11 minutes. However, the remaining 42% of female homicides also require attention and examination. They are women and girls, also mostly killed by men, often involving sex- or gender-related motivations and factors, but gaps in data sources, whether official or unofficial, mean that accurate information about the full picture of femicide in all contexts is not available. In addition, countries which fail to report the relationship between the victim and the perpetrator – often those with higher degrees of impunity and lack of accountability – were not included in UNODC's results.

The European Context

Although femicide is not specifically mentioned in the text of the Istanbul Convention (IC), its scope and purposes make it clear that femicide must be taken seriously. It is self-evidently the worst form of VAW, depriving women of the right to life itself. The four IC pillars (prevention, protection, prosecution, and coordinated policy) must each be addressed. Visibility and naming of gender-based killing is a prerequisite for effective action.

The Council of Europe Convention on preventing and combating violence against women and domestic violence is based on the understanding that violence against women is a form of gender-based violence that is committed against women because they are women. It is the obligation of the state to address it fully in all its forms and to take measures to prevent violence against women, protect its victims and prosecute the perpetrators. Failure to do so would make it the responsibility of the state.

In 2015, the Special Rapporteur called on UN Member States to establish a femicide watch or observatory which would be responsible for systematically collecting and publishing the number of femicides each year, disaggregated by the age and sex of the perpetrators, and providing information about the relationship between the perpetrator and the victim. Such panels should be interdisciplinary and integrated within countries' mechanisms for

preventing violence against women. The collection of data is vital, but fraught with challenges at national and international levels. In order to compare and analyse such data meaningfully, clarity is required. 'We want our counting to count for women!'⁹⁶

Transnational initiatives to this end have gathered momentum in recent years. The European Observatory on Femicide (EOF) was launched in January 2018. Its mission is the prevention of femicide through data collection, data visibility, research and awareness raising. It works through two thematic groups (quantitative and qualitative), currently has 23 country research groups as focal points, and works towards establishing a framework for sharing and analysing data. New initiatives such as the FEM-United Project 2020–22 have strengthened this process.⁹⁷ The EOF works closely with the European Institute for Gender Equality (EIGE) which has developed a 'Femicide Package' to help EU countries gather solid data, and aims 'to establish a framework for the measurement of femicide at EU level by using variables that might lead to a common definition, and the operationalisation of variables for statistical purposes'.⁹⁸ The Femicide Watch Platform (FWP), established in 2019, is a joint project of the UN Studies Association (UNSA) Global Network and the UNSA Vienna's Femicide Team. FWP is a volunteer-based team of activists, advocates, practitioners, researchers and academics who curate, categorise and contextualise all kinds of global content related to the prevention of femi(ni)cide.⁹⁹

Femicide in European countries – the challenges of data collection

The WAVE Network makes its contribution to this important work by gathering data from members in 46 European countries. As specialist service providers, their perspective on the killing of women comes from the experience of being in contact with women who are survivors of VAW, for whom the risk and reality of being killed is a real threat. They have expert understanding of the risk factors, and the failures of state agencies to adequately protect women or prevent femicides. In many countries, these organisations and other NGOs pioneered and continue to engage in data collection, monitoring and campaigning to make femicide count. This is vital work, but there are significant challenges in finding and collecting data. The information reported here should be treated with caution, as it is not statistically robust. Numbers should be regarded as estimates based on the best available sources. As noted above, there is not yet a Europe-wide data collection system and the term femicide, even where it is used, means different things in different countries. The true scale of gender-based killings/deaths of women will certainly be higher.

95 UNODC, *Gender-related killings of women and girls (femicide/feminicide)* (2022), https://www.unodc.org/documents/data-and-analysis/briefs/Femicide_brief_Nov2022.pdf

96 Shalva and Consuelo, eds. *Femicide Across Europe: Theory, Research and Prevention* (2018), Bristol: Policy Press.

97 European Observatory on Femicide <http://eof.cut.ac.cy/>

98 European Institute for Gender Equality website, last retrieved 23rd Nov 2021, https://eige.europa.eu/publications-resources/publications/measuring-femicide-eu-and-internationally-assessment?language_content_entity=en

99 Femicide Watch Platform: <https://femicide-watch.org/node/920400>

According to information provided by 37 respondents, at least 2,558 women were femicide victims in 2022. The figure includes guesstimates from the Netherlands (30–45

victims). No information about femicide was forthcoming from Romania, Lithuania, Luxembourg, Liechtenstein, Norway, Poland, Azerbaijan, Ukraine, or Belarus.



ESTIMATED NUMBER OF FEMICIDE VICTIMS

Europe (46)	2,558
EU Member States (27)	800
European countries outside the EU (19)	1,758

Table 11: Estimated number of femicide victims in 46 European countries (2022)

The survey asked if the term ‘femicide’ is used by the state or other authorities. Twelve replies said yes, but it is important to note what that signifies in these countries. In 2022, the governments of **Malta** and the **Republic of Cyprus** passed the terminology into law, while in **Belgium**, legislation to that effect was approved in June 2023. These are encouraging developments. The term was already enshrined in the legal codes of **France**, and in **Spain**, where official statistics have recorded killings as gender violence, if there was evidence of a relationship between the killer and his victim. Since 2022, that rubric has been expanded to include the murder of any women and children where gender is deemed to be a factor.¹⁰⁰ Records of the **Kosovo** State Prosecutor’s Office uses the term, although the NGO Kosovo Women’s Network observed, in reference to a case where a man killed his wife, ‘One more woman murdered in a country where every femicide is accompanied by institutional silence, procrastination and low sentences’.¹⁰¹ In **Italy**, official statistics are published and discussed under the term omicidi di donne (women’s homicides). In **Albania**, the term is used but it is not a criminal offence, and nothing is provided in the Criminal Code to regulate gender-based murders, as discussed in a 2022 report.¹⁰² Other countries which answered yes to the use of ‘femicide’ are referring mostly to its use by politicians, in policy discussions, media reports or public discourse. It is apparent from many country responses that this kind of unofficial usage of the term is fairly widespread. This is a positive indication of growing acknowledgement that gender-based women killing is a phenomenon which needs to be highlighted. But this trend needs to be systematised in legislation and data collection methodology.

In most countries, data relevant to femicide is collected by the police and/or other official state agencies. Most commonly, homicide statistics provide some kind of disaggregated information about gender and/or age of victim and perpetrator; sometimes also about the relationship, if any, between them. Where official attention is paid specifically to women as victims, the focus is on murder by partners or

ex-partners, or other family members. This may be under the rubric of ‘domestic homicide’ or similar. **Portugal** and **Scotland** have recently set up official reviews of domestic homicides to develop appropriate models for data collection and prevention.

Where no information about the nature of the relationship is provided, it is difficult to distinguish intimate partner or family-related femicide victims from total recorded female homicides (some of which may be femicides by acquaintances or strangers and committed in private or public settings, while others may be non-gender-based killings). Access to such information is necessary if police and other authorities are to develop effective prevention measures. The truth seems to be that in far too many cases, there is little or no commitment to stopping such killings before they happen.

Data gathered for this Country Report is based on diverse legal codes and practices in different jurisdictions.

Spain has already been referred to as an example of robust and innovative official practice. Since 1 January 2022, the crime of femicide is now classified under five headings:

1. Femicide by the partner or ex-partner (previously femicide due to gender violence): Murder of a woman in the terms provided for in Organic Law 1/2004, of 28 December, on Comprehensive Protection Measures against Gender Violence (scope of the partner or ex-partner).
2. Family femicide: Murder of a woman by men in her family environment (excluding partner or ex-partner). Included in this category are femicides due to so-called ‘honour-related’ killings.
3. Sexual femicide: Murder of a woman by men without a partner or family relationship linked to sexual violence included in Organic Law 10/2022, of 6 September, on

100 As reported in The Guardian newspaper on 31 December 2021, <https://www.theguardian.com/world/2021/dec/31/spain-says-it-is-first-in-europe-to-officially-count-all-femicides>. See also the EIGE briefing paper, *Measuring Femicide in Spain* (2021), https://eige.europa.eu/sites/default/files/documents/20211586_mh0221352enn_pdf.pdf.

101 As reported in Balkan Insight on 6 January 2022, <https://balkaninsight.com/2022/01/06/kosovo-activists-request-maximum-sentencing-in-latest-femicide/>

102 Hysi, Anastasi, Bozo, Vora, *Murders of women (femicide) and attempts for femicide in Albania* (2022). Report summary in English https://www.qag-al.org/ang/publication/summary_femicide.pdf

the comprehensive guarantee of sexual freedom. Included in this category are femicides due to sexual assault, those linked to trafficking for sexual exploitation, prostitution, female genital mutilation and those linked to forced marriages.

4. Social femicide: Murder of a woman by a non-sexual assault by a man with whom she did not have a relationship or was not a relative (a stranger, a co-worker, a neighbour, a friend, employer, etc.).
5. Vicarious femicide: Murder of a woman of legal age by a man as an instrument to cause harm or harm to another woman on the basis of gender.

In addition, we will count here all the minors killed by any type of violence against women.¹⁰³

Based on this new comprehensive methodology, 2022 is the first year for which full statistical data is available. Eighty-three femicides were recorded in Spain.

Across Europe, direct comparability is impossible, although general patterns are evident, and the numbers provided are indicative, not definitive. In many countries, CSOs (usually feminist NGOs/WSS) are the only or main collectors of data. The **Czech Republic, Denmark and Montenegro** are examples of countries where this is the case. It is good to note that at least 18 European countries now have some kind of femicide watch, but in many cases, these are not integrated into official instruments or mechanisms for preventing VAW.

The report from **England** notes:

'Whilst the killing of women in the UK has recently generated unprecedented interest, the UK government has failed to name and identify femicide in its VAWG Strategy.¹⁰⁴ Our data since 2009 shows that while the majority of cases of femicide are committed by men within women's domestic sphere (62% by a current or former partner, 8% by a son, 7% by other male family or partner's family members), 15% of women were killed by men they knew outside of a family or partner relationship including friends, colleagues and flat-mates. One in twelve (8%) were killed by strangers. So, over a quarter of all killings of women by men are killed outside the context of domestic femicide. The Domestic Abuse Act also fails to name femicide.'

It is imperative that this kind of evidence, being gathered and monitored by similar femicide watches around Europe, is fully integrated and utilised. Collecting and

disseminating data is not an end in itself, but a powerful tool to assess the level of violence against women and girls in order to improve legislation and policy responses to all forms of violence against them. Detailed research and modelling based on both quantitative and qualitative data demonstrates how useful robust information about femicide can be in identifying risks and opportunities for effective intervention and prevention measures – especially in situations where systematic partnership working between key agencies (both public institution and NGOs) enable effective risk assessment. This work clearly has the potential to save lives and is urgently required if states are to be accountable for protecting women from preventable killing. The WAVE survey asked whether information about the relationship between victim and perpetrator was included in femicide data, and also if victims had previously reported domestic violence or stalking to police or other authorities. Where disaggregated statistics were available, they usually specified the relationship, if any. In some countries, it was not possible to say whether victims had reported previous abuse. However, elsewhere there was evidence of women repeatedly contacting police and other agencies. The use of multi-agency risk assessment conferences (MARACs) is increasingly widespread, but it is not clear how well they are working as a means of prevention. An effective strategy to prevent violence against women recognises the importance of identifying women at high risk. But crucially it also requires proper monitoring and sanctions for men whose extreme possessive, coercive or controlling behaviour and/or stalking are signs that they represent a serious threat to women's lives.¹⁰⁵ Another important point is that children are often also victims of domestic femicide, where a man murders his own children along with his ex/partner. Men also sometimes kill themselves, a woman's new partner, or other family member/s.

It is encouraging that the new legislation in **Malta** does away with the spurious 'crime of passion' defence, which has no place in any modern criminal justice system. Unfortunately, it is still being used in some European countries. A recent and alarming trend in some femicide cases where the woman has died during sex is the so-called 'rough sex' defence, which contends that the victim had consented to rough and violent sex (most commonly choking).¹⁰⁶ While the links with pornographic and mainstream media depictions of extreme and violent sex may or may not be directly causal, the normalisation of such acts creates a conducive context.

Although in public discourse and sometimes in law, femicide is commonly equated with intimate partner or ex-partner murder, gender-based killings of women are committed

103 Government of Spain website, Methodological notes - Government Delegation against Gender Violence, https://violenciagenero.igualdad.gob.es/violenciaEnCifras/victimasMortales/notas_metodologicas/notas_metodologicas.htm

104 Note that the UK Government VAWG strategy applies only to England (which does not have its own parliament). Devolved governments are responsible for VAWG strategies in the other three nations of the UK.

105 Criminologist Dr Jane Monckton Smith reviewed 372 UK domestic violence femicides. She found that they occurred in relationships which overwhelmingly conformed to an eight-stage pattern where control (not physical violence) was the key indicator. Monckton Smith, Jane, *Intimate Partner Femicide: Using Foucauldian Analysis to Track an Eight Stage Progression to Homicide* (2020), Violence against women 26.11: 1267–1285. <https://core.ac.uk/download/210991723.pdf>

106 Williamson, A., *The 'rough sex' defence: lessons from history* (2020), <https://www.historyandpolicy.org/policy-papers/papers/the-rough-sex-defence-lessons-from-history>

in a range of circumstances. This year, the WAVE survey invited respondents to share stories of high-profile cases, and many were provided from across Europe. This chapter concludes with a few examples to stand for the thousands of lost lives. Behind the statistics there are names, stories and hopes of real women, cruelly extinguished. They must not be forgotten or hidden from view.

Feminist NGOs and grassroots campaigns are leading movements of sorrow, anger and commemoration, for example in **Hungary**: During the annual 16 Days of Activism against gender-based violence, the women's NGO NANE organises a Silent Witness march, with life-sized red silhouettes commemorating the victims who have been killed in the past year. Their names and stories are read. The march demands state action to respond properly to prevent femicides. On May 22, 2022, Julia (16) and Timea (14) were murdered by their father. He had been a controlling and abusive husband, keeping the girls and their mother in a state of terror, and had been convicted several times. After divorce, he was given unsupervised visitation rights over Timea, despite her being under a child protection order because of his violence. Julia accompanied Timea to protect her sister.

Northern Ireland: Natalie McNally was brutally murdered in December 2022. She was 16 weeks pregnant. Stephen McCullagh, who was the father of the baby, is currently awaiting trial. He made a fake hours-long 'live' stream to give himself an alibi at the time of the murder. He was released from custody until forensic officers were able to prove the 'live' stream was recorded days before. The case

received high profile attention due to Natalie being pregnant, the brutal way in which she was killed, her alleged killer not being in police custody for several weeks following her murder, and the alleged killer faking a live stream to give himself an alibi.¹⁰⁷

Spain: In 2016, 18-year-old Dian Quer was returning home alone after attending a local festivity when she was abducted, raped and murdered by a man. Her whereabouts were unknown until her body was found 497 days after her disappearance. This case had a great media impact due to the circumstances surrounding the case, and, from a feminist point of view, due to the sexism of some media outlets that tried to link the young woman's death to the way she dressed, her behaviour with men or her parents' divorce, even blaming the young woman's mother for her death. It generated widespread public debate and outrage.

Türkiye: Pınar Gültekin (27), a university student was found dead on July 21, 2020, five days after she had gone missing. A forensic medical examination found that Gültekin had been burned alive. A lawsuit was filed against Cemal Metin A. on the charge of "killing with monstrous feeling or by tormenting" and against Mertcan A. for "destroying, hiding or tampering with criminal evidence." The trial process witnessed several examples of victim blaming and on June 20, 2022, the court used the provision of "unjust provocation" to reduce the jail term of Cemal Metin Avcı who brutally killed Pınar Gültekin. The higher court then appealed the decision and sentenced the man to aggravated life imprisonment.

Recommendations

- It is of great importance that a basic level of vital information is recorded in the official homicide statistics of all European countries. The minimum requirement is the disaggregation by sex of victims and perpetrators, and that the relationship, if any, of victim and perpetrator is recorded.
- Data on complaints and reports of violence previously raised by the victims to the authorities should be recorded, as well as information on which statutory and voluntary agencies were previously involved in supporting the victim. The aims are to identify where gaps in service provision or collaboration between agencies occurred, which likely have contributed to the failure to prevent the femicide, to ensure accountability of all involved support agencies and to guarantee the effective protection of women experiencing VAW.
- Countries are urged to comply with the recommendation of the UN Special Rapporteur that a femicide watch initiative should be established (where it does not already exist) to monitor and highlight femicides, as a resource to improve policies, and to raise awareness of gender-based women killing as fatal manifestations on the continuum of VAW. Current examples of good practice could be adapted to ensure the development of appropriate and useful models in different national contexts.
- The work of the European Observatory on Femicide should be supported to facilitate effective international collaboration.
- Femicide should be named and integrated into national strategies and policies to address VAW, with actions identified to minimise and prevent such deaths.

107 As reported on the BBC news website, *Natalie McNally: Stephen McCullagh charged with murder of pregnant woman*, 2nd February 2023, <https://www.bbc.com/news/uk-northern-ireland-64494847>



Table 12: Estimated number of femicide victims in EU Member States (2022)

	REPORTED NUMBER OF FEMICIDE VICTIMS	DATA COLLECTED BY THE STATE (OFFICIAL SOURCES) AND/OR OTHER ENTITIES
Austria	29 ¹⁰⁸	There is no official data collection on femicide. Available data is collected by the state, the police, and the Association of Autonomous Austrian Women's Shelters (AÖF).
Belgium	25 ¹⁰⁹	Data is collected by CSOs through media reporting. ¹¹⁰
Bulgaria	25	No systematic data is collected on femicide. Available data is collected by the police and CSOs.
Croatia	13	Data is collected by the state, CSOs, and the Ombudsman for Gender Equality. ¹¹¹
Republic of Cyprus	2 ¹¹²	No official data on femicide. Available data is collected by the state and police.
Czech Republic	28 ¹¹³	No official data on femicide. Available data is collected by CSOs.
Denmark	13	No official data on femicide. Data on the number of women killed is collected by the police. Available data on femicide is collected by the media, CSOs, and through independent research.
Estonia	6	Data is collected by the state. The Ministry of Justice collects information on all homicides, and on request, also provides information on the relationship between victim and perpetrator.
Finland	18 ¹¹⁴	Data is collected by the state, the police, and the media.
France	118	Data on the number of killings of women by current or former intimate partners are collected by the Ministry of Interior. NGOs also collect data on femicide.
Germany	113 ¹¹⁵	Data is collected by the police as well as NGOs and activists based on media reporting. ¹¹⁶ The police do not use the term femicide. They also do not include when children, new partners or relatives are also killed in the context of a femicide.
Greece	24 ¹¹⁷	Data is collected by the state, police, and CSOs.
Hungary	25 ¹¹⁸	No official state data on femicide. Available data is collected by the police, media, and CSOs. Homicide data is collected by the Unified Criminal Statistical System of the Investigation Authority and Prosecution Service (ENYÜBS).
Ireland	12	No official data on femicide. Data collected by the NGO Women's Aid Ireland under its "Femicide Watch" initiative.
Italy	120	Data is collected by CSOs and the Femicide Inquiry Commission. ¹¹⁹
Latvia	28	Data is collected by the Ministry of Interior and police. ¹²⁰
Lithuania	N/A	N/A
Luxembourg	N/A	No official data on femicide.
Malta	3	Data is collected by the police and CSOs. ¹²¹
Netherlands	30–45 ¹²²	No official data on femicide. Data is collected by the media and CSOs.
Poland	N/A	N/A
Portugal	26 ¹²³	Data is collected by the police, CSOs and the justice system. ¹²⁴
Romania	N/A	No official data on femicide.
Slovakia	23	Police collects data disaggregated by gender on the number of victims of homicide or manslaughter related crimes. The data is not publicly available and must be requested.
Slovenia	13	Data is collected by NGOs.
Spain	83	Data is collected by the state, police, and CSOs.
Sweden	23	The Swedish National Council for Crime Prevention annually gathers statistics on homicide victims (including women victims of homicide as a result of VAW). In addition, the media report on the number of women murdered.
TOTAL (27)	800¹²⁵	

108 This is the number from the crime statistics provided by the state police. However, the state does not consider the relationship between victim and perpetrator and the gender-based nature of the crime. The women's NGO AÖF counted 28 femicides, which is based on information retrieved from media coverage. More information available at: <https://www.aeof.at/index.php/zahlen-und-daten/femizide-in-oesterreich>.

109 This number includes one indirect femicide. Thirteen femicides occurred in Flanders, and two in the Brussels-Capital Region.

110 The federal government approved a bill in 2023 which will put in place annual statistical data collection on femicide. Currently, data on femicide comes from StopFemicide, a nonprofit blog created by the Feminist Platform against Violence Against Women, available at: <https://stopfemicide.blogspot.com/>.

111 Femicides are not a separate criminal offence and are not used in judicial practices.

112 Data from the Republic of Cyprus comes from the Advisory Committee for the Prevention and Combating of Violence in the Family. This number does not include suspicious suicides or deaths.

113 This data is collected by the NGO ROSA Center for Women from media reports.

114 Latest available data from Statistics Finland (*Tilastokeskus*) is for 2021. Data for 2022 is not yet available.

115 Latest available police data is for 2021. There were also 301 attempted femicides in 2021. Data for 2022 is not yet available.

116 The movement "One Billion Rising" is counting the number of attempted and completed femicides based on media reporting, available at: <https://www.onebillionrising.de/femizid-opfer-meldungen-2022/>.

117 This number is an estimate based on unofficial data.

118 This data is collected from the NGO NANE based on media reporting. It only includes killings related to domestic violence.

119 The National Institute of Statistics (ISTAT) also collect statistics on killings of women, available at: <https://www.istat.it/it/violenza-sulle-donne/il-fenomeno/omicidi-di-donne>.

120 The Central Statistical Bureau of Latvia provides any interested party with statistics about female victims of crime, available at: <https://data.stat.gov.lv:443/sq/17445>.

121 Research has been conducted by the NGO Women's Rights Foundation (WRF) and the University of Malta, Department of Sexuality and Gender Studies as part of an EU-funded project. In 2021, WRF has also launched the Malta Observatory on Femicide and also forms part of the European Observatory on Femicide and collects qualitative and quantitative data. More information available at: <https://www.wrf.org.mt/publications>.

122 This number is based on various sources and definitions (commonly derived from media reporting). It is estimated that 30–45 women are murdered by a partner or ex-partner per year.

123 This number includes 24 women and two children.

124 The data is collected by state authorities under female homicide victims in the context of intimate relationships and/or family.

125 Total estimated number of femicides includes 30 femicides in the Netherlands, as only an estimate of 30–45 was provided.



Table 13: Estimated number of femicide victims in European countries outside the EU (2022)

	ESTIMATED NUMBER OF FEMICIDE VICTIMS	DATA COLLECTED BY THE STATE (OFFICIAL SOURCES) AND/OR OTHER ENTITIES
Albania	9 ¹²⁶	Data is collected by the state, the police, the media, CSOs and groups of activists.
Armenia	16	Data is collected by the media and CSOs. ¹²⁷
Azerbaijan	N/A	No official data on femicide.
Belarus	N/A	No official data on femicide.
Bosnia & Herzegovina	10	In the Federation of BiH, data is collected by the media, CSOs and researchers. ¹²⁸ Data in Republika Srpska is collected by the NGO United Women Foundation Banja Luka based on media reports.
Georgia	12	Data is collected by the state and the police.
Iceland	1	Data is collected by the police.
Kosovo	3	Data is collected by the state prosecutor's office, the police, the media and CSOs.
Liechtenstein	N/A	No official data on femicide.
North Macedonia	2	No official data on femicide. Available data is collected by the police and CSOs, including the NGO National Network to end VAW and DV. Courts and public prosecution offices are not collecting data by victim, but by perpetrator and criminal offence.
Republic of Moldova	45	Data is collected by the police and the prosecutor's office.
Montenegro	6	There is no reliable statistical data on femicide. The available data is collected by CSOs. ¹²⁹
Norway	N/A	N/A
Russia	1,174 ¹³⁰	No official data on femicide is collected by the state. There are only general statistics provided by the Ministry of Internal Affairs on the number of killed women annually. Available data is collected by CSOs and informal grassroot organisations.
Serbia	27 ¹³¹	Data is collected by the media and CSOs. ¹³²
Switzerland	16 ¹³³	No official data on femicide is collected by the Federal Statistical Office. Available data is collected by the police and CSOs. ¹³⁴
Türkiye	327 ¹³⁵	Data is collected by the state, the media and CSOs. ¹³⁶
Ukraine	N/A ¹³⁷	Data is collected by the state, the police and CSOs.
United Kingdom	110 ¹³⁸	Data is collected by the police and state and is reported on by the organisation Femicide Census.
TOTAL (19)	1,758	

126 This number includes three Albanian women who were living abroad at the time of the crime.

127 The state of Armenia does not recognise the term femicide and does not collect data on it. However, women's support NGOs carry out research within their capacities.

128 However, there is no systematic data collection in the Federation of Bosnia & Herzegovina. NGOs collect their own data, and there is an analysis of court practice in prosecuting femicide and attempted femicide in Bosnia and Herzegovina, available at: <https://vsud-fbih.pravosudje.ba/vstvfo/S/142/article/124609>

129 In 2022, the NGO SOS Hotline for Women and Children Victims of Violence Nikšić conducted comprehensive research on femicide. The research titled "Social and institutional response to femicide in Montenegro" is available at: <https://sosnk.org/en/drustveni-i-institucionalni-odgovor-na-femicid-u-crnoj-gori/>

130 According to Femicid.net (independent anti-femicide project) which provides data based on publications in open sources. More information available at: <https://www.wmmsk.com/femicid/>.

131 This number includes 26 women and one girl.

132 Several CSOs collect statistics on femicide, including the number of cases, basic data about the victims, the relationship between the perpetrator and victim, whether the victim reported violence or not, and other relevant information. The NGO Autonomous Women's Centre (AWC) reports on the issue of femicide annually, data available at: <https://www.womenngo.org.rs/publikacije/izvestaji-o-femicidu-u-srbiji>.

133 According to the Stop Femicide website, which is not operated by the state, there were 16 femicides and five attempted femicides in 2022. According to the Police Crime Statistics, there were 25 homicides and 61 attempted homicides in the field of domestic violence in 2022.

134 The police record offences (homicide and attempted homicide) but not specifically femicide.

135 This number is based on information provided by independent media outlets, as state data is not considered reliable. According to state authorities, there were 273 cases of femicide in 2022.

136 The state collects and shares quantitative data on femicide. However, numbers are not reliable considering that the official data is lower than the data collected and shared by independent media outlets and women's NGOs through media monitoring. The data shared by an independent media outlet is available at: <https://bianet.org/english/lgbti/274142-men-kill-at-least-327-women-in-2022>.

137 According to the statistics of the General Prosecutor's Office on registered criminal offenses and the results of their pre-trial investigation in 2022, there were 376 women victims of intentional murders and attempted murders. The data does not include information on the number of prosecutions where the femicide was the result of domestic violence or other forms of VAW. The General Prosecutor's Office also provides data on victims who died in cases related to domestic violence, but the number of women among them is unknown.

138 Latest available data is for 2020. It includes the number of victims in England, Northern Ireland, Scotland, and Wales. All reports available at: <https://www.femicidecensus.org/reports/>.

ALBANIA

GENERAL COUNTRY INFORMATION

Population	2,793,592
Female population	1,406,532
Member of Council of Europe (year)	1995
Member of European Union (year)	No
Member of United Nations (year)	1955
CEDAW ratified (year)	1994
CEDAW optional protocol ratified (year)	2003
Istanbul Convention signed (year)	2011
Istanbul Convention ratified (year)	2013



SUMMARY

► There is one national women's helpline in Albania which is free of charge and operates 24/7. Therefore, the country **does meet** the Istanbul Convention (IC) standards for the provision of a women's helpline. There are 24 shelters accessible to women in the country: eight shelters can offer long-term accommodation to survivors of VAW, and have 153 beds. With 45% of the necessary beds missing, the country **does not meet** the IC standards for the provision

of women's shelters. There are multiple women's centres in Albania, which are run by women's NGOs, other NGOs, the state and religious institutions, and there is one rape crisis centre. There is a National Action Plan against VAW in Albania, which includes specific provisions on the primary prevention of VAW. The state collects data on women's specialist services, and it is available upon request.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	Yes	3,117 calls

📞 There is one national women's helpline in Albania, the National Counselling Line for Women and Girls (Linja Kombetare e Keshillimit per gra e vajza, tel.: +355 116117), which is free of charge and operates 24/7. The helpline provides services in Albanian, English, and Italian for all types of violence against women. It is run thanks to state funding, donations and international funding. In 2022, the helpline received 3,117 calls, and the most common forms reported by callers were psychological violence (62% of the cases), physical violence (55% of the cases) and economic violence (29% of the cases).

There is one regional helpline that covers Durrës and Tirana County, but also receives calls from other cities. It is run by the Community Centre "Today for the Future". A mobile application called Find Your Voice (*GjejZa*) provides a series of numbers (such as the national or local women's helplines) that can be used by women and girls whenever they face threats of being harassed or are harassed and need advice in cases of VAW. In Albania, there is the National Helpline Centre for the Treatment of Domestic Violence cases and the National Reception Centre for the victims of trafficking, including women and girls.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN		EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
		24/7 ACCESS				
N/A	24	Most	153 ¹	126	45%	18,259

🏠 There are 16 emergency shelters in Albania, which offer support for 24 to 72 hours. There are eight shelters that offer long-term services to survivors of violence against women and domestic violence located in four

municipalities. Besides safe accommodation, they provide psycho-emotional support, economic empowerment programmes, referrals and counselling.²

¹ Number from the WAVE Country Report 2021, it refers to the eight women's shelters that offer long-term accommodation.

² Report submitted by Albania pursuant to Article 68, paragraph 4 of the Council of Europe Convention on preventing and combating violence against women and domestic violence, p. 45, <https://rm.coe.int/state-report-addressed-to-greivio-11680ac0c69>.

The availability of shelters in the country does not meet the needs of survivors, and more shelters and bed spaces would be needed. Most shelters offer 24/7 access and women are not expected to pay for their accommodation. Funding comes from the state, donations and international funding. Six of these shelters are run by women's NGOs with a gender-specific perspective, while the others are run by other NGOs, faith-based organisations and the state. Women's shelters are available in major cities: Tirana, Vlora, Elbasan, Dibra, Shkodra and Fier. In emergency shelters, access is restricted to women who have a protection order in force.

Most women's shelters in Albania can provide support to women with uncertain residence status/undocumented women, women with cognitive disabilities, women with substance abuse issues, and some shelters can also

support homeless women, women with physical disabilities, older women, transgender women and women with older sons. If shelters had to decline referrals, it was due to the lack of space/capacity to accommodate the survivors with their children, or the ineligibility of the survivor to receive support. The most common forms of violence reported by the clients of women's shelters were psychological, physical and sexualised violence. The in-house services provided by shelters include specialised counselling, casework, housing, food, health care, legal assistance, psycho-social rehabilitation, employment empowerment, and reintegration services. In 2022, about 160 women were accommodated in women's shelters.

There are four other shelters in Albania with 65 beds. One shelter supports LGBTQI+ people, while another shelter supports women survivors of human trafficking.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
13 ³	108,195	Women's NGOs; Other NGOs; State; Other (religious institutions)

❖ There are at least 13 women's centres in Albania. They are run by women's NGOs, except for the National Center for the Treatment of Victims of Domestic Violence, which is run by the government.⁴ There are other centres available in the country, but the exact number is not available. Women's centres offer counselling, psychological support, legal advice, financial and social welfare support, housing advice, employment, referrals, and representation at court/police/social services. They also support survivors of specific forms of violence, such as forced marriage, honour-based violence, and trafficking in persons (four centres), and women from vulnerable groups, such as women

with uncertain residence status, women with disabilities (two centres), older women, transgender women (one centre). Women's centres also provide specialist support for survivors of sexualised violence, including specialist forensic and medical care, needs assessment, specialist psychological care and advocacy services. Women's centres in Albania are run by women's NGOs, other NGOs, the state and religious institutions. The funding for women's centres comes from state funding, donations and international funding. Women's centres are available only in major cities and in 2022 they supported more than 8,000 women.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There is one rape crisis centre in Albania, the Lilium Centre, based in Tirana. Support provided consists of specialist forensic and medical care, needs assessment, specialist psychological care, and specialist sexualised violence (SV) advocacy. In 2022, the Lilium Centre supported 31 minor girls, one woman, and four minor boys. Some

women's shelters and centres also provide support to survivors of SV, in particular those run by women's NGOs. Services supporting survivors of SV receive government funding, donations, and international funding and provide support to women, young women, and children.

5. PRIMARY PREVENTION SERVICES

👏 There is a National Action Plan on VAW in Albania, which includes specific provisions on the primary prevention of VAW. The state partially funds primary prevention activities and collaborates with international and local organisations to deliver them. Nevertheless, most of the activities are covered by NGOs with the support of international donors. Primary prevention activities carried out in

Albania include feminist self-defence training, training for primary prevention practitioners, self-care activities, and awareness-raising campaigns or programmes. Many activities are carried out in March, around International Women's Day, and during the 16 days of activism against GBV, and they target a wide range of beneficiaries.

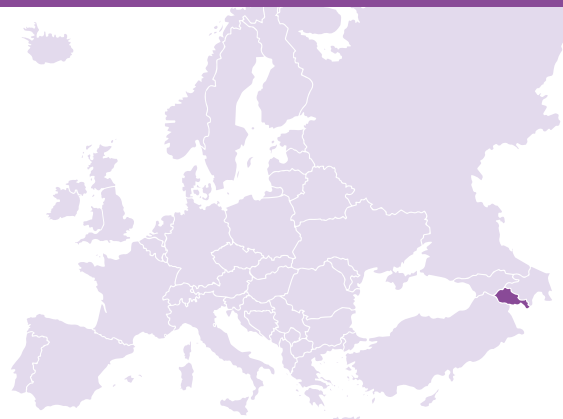
³ Number from the WAVE Country Report 2021.

⁴ Ibid.

ARMENIA

GENERAL COUNTRY INFORMATION

Population	2,963,251 ⁵
Female population	1,565,144 ⁶
Member of Council of Europe (year)	2001
Member of European Union (year)	No
Member of United Nations (year)	1992
CEDAW ratified (year)	1993
CEDAW optional protocol ratified (year)	2006
Istanbul Convention signed (year)	2018
Istanbul Convention ratified (year)	No



SUMMARY

► There is no national women's helpline in Armenia, although there are a number of regional helplines supporting women survivors of violence. Therefore, Armenia **does not meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. There are two women-only shelters in the capital of Armenia and two other shelters that are accessible to women, with a total of 30 beds. Armenia **does not meet** the IC standards for

the provision of women's shelters as 89% of the necessary bed spaces are missing. There are 11 women's centres operating as domestic violence support centres as well as one sexual assault crisis centre for survivors of sexualised violence. There is no National Action Plan on violence against women and girls in Armenia. The state does collect data on women's specialist services, which is not public, but available upon request.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
0	-	-	-	-

☎ There is no national women's helpline in Armenia. The Ministry of Social Affairs runs a national helpline (tel.: +374 114 and 119) which is not specialised but can refer domestic violence cases to regional helplines, according to the location of the survivor. There are 13 regional helplines, which are run by the domestic violence support services.

Rights House (tel.: +374 77570870), *Arevamanouk* (tel.: +374 77159470), Women's Community – *Martuni* (tel.: +374 94876502), *Gavar* (tel.: +374 94876505), *Sose* (tel.: +374 98848453), Women's Empowerment Resource Centre NGO (tel.: +374 77380053), You Are Not Alone (tel.: +374 98886077), Young Tavush (tel.: +374 099788770), Young Avanguard (tel.: +374 93574657), *Talin-Huys* (tel.: +374 91482035), Women's Rights Centre (tel.: +374 91416249), and Women's Support Centre (tel.: +374 99887808).

There are a number of other helplines in Armenia including *Spitak* Human rights (tel.: +374 93252017), Women's

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN		EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
		24/7 ACCESS				
2	4	All	30	266	89%	98,775

🏠 There are two women-only shelters in Armenia with a total of 24 beds run by the Women's Support Centre, a women's NGO with a feminist and gender-sensitive approach. The women-only shelters are located in Yerevan,

the capital city, operate 24/7, and are funded by the state as well as through donations and international funding.

Women are not expected to pay for their accommodation,

5 The most recent available data on Eurostat is from 2021.

6 Ibid.

and they receive food, hygiene products, clothes, and other amenities. Women usually stay in the shelters for a period of three to six months. However, if the survivor's security is at risk, there is no limit to how long she can stay. The shelters offer services such as casework, counselling, referrals, and practical and legal advice services. They also run self-help groups, sexual and reproductive rights group sessions, and parenting skills training. Shelters cannot offer support to women who have substance abuse problems or a psychiatric diagnosis. The three most common types of violence reported by clients to the women-only shelters are physical, psychological, and economic violence. The

women-only shelters are accessible to women with physical disabilities, transgender and lesbian women, and older women.

There is also a shelter for unmarried women with children up to the age of two, and one shelter for survivors of trafficking, which has seven available beds. These shelters can also offer accommodation to all survivors if the other shelters do not have availability. There are no other specific shelters for vulnerable groups such as women with disabilities nor specific forms of violence such as forced marriage and honour-based violence.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
11	142,286	Women's NGOs (9 centres); Other NGOs (2 centres)

❖ There are 11 domestic violence support centres only for women survivors of VAW. All centres provide counselling and referrals, nine centres provide legal advice and representation at court/police, eight provide financial and social welfare support, and employment, and two provide housing advice. In addition, women's centres also provide hygiene products, condoms, medical help, wheelchairs, and other necessary equipment for women with disabilities. Nine centres are run by women's NGOs and two are run by other NGOs. Two women's centres also provide residential support services (run by the NGO Women's Support Centre). In Armenia, centres are funded by the state as well as through donations and international funding, and they are located in most regions of the country. In 2022, these centres provided support to approximately 1,500–2,000 women.

Women's centres also provide specialist support for survivors of different forms of violence; four centres provide support to women with uncertain residence status, three provide support to survivors of trafficking, transgender women, and non-binary people, two centres provide support to women with disabilities, and one centre supports survivors of forced marriage and black and minority ethnic women. There are no centres that provide support to survivors of honour-based violence or female genital mutilation.

In addition to the 11 domestic violence support centres, there are other centres providing support to women, although not specifically survivors of domestic violence, as well as centres supporting LGBTQI+ survivors of violence.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There is one sexual assault crisis centre in the capital of Armenia, Yerevan, the Sexual Assault Crisis Centre (SACC), which provides a helpline, crisis support, psychological support, social support, and legal support. When needed, the sexual assault crisis centre can also provide healthcare services. The centre provides needs assessment, specialist psychological care, specialist sexualised

violence advocacy services, and community awareness and education for prevention. Funding for the sexual assault crisis centre comes from donations and international funding. Besides the centre in Yerevan, SACC also has focal point NGOs in different regions of the country offering support. The sexualised violence service is available to all survivors of sexualised violence, including women.

5. PRIMARY PREVENTION SERVICES

👏 There is no National Action Plan on violence against women and girls in Armenia. However, there are primary prevention activities related to VAWG such as feminist self-defence trainings, bystander intervention training, self-

care activities, and awareness-raising campaigns and programmes. These activities are for the general public, women, and men, as well as LGBTQI+ people.

AUSTRIA

GENERAL COUNTRY INFORMATION

Population	8,978,929
Female population	4,553,444
Member of Council of Europe (year)	1956
Member of European Union (year)	1995
Member of United Nations (year)	1955
CEDAW ratified (year)	1982
CEDAW optional protocol ratified (year)	2000
Istanbul Convention signed (year)	2011
Istanbul Convention ratified (year)	2013



SUMMARY

► There is one national women's helpline in Austria that operates 24/7, is free of charge and offers multilingual support. Therefore, the country **does meet** the Istanbul Convention (IC) standards for the provision of a women's helpline. There are 30 women-only shelters in the country offering 839 beds, which corresponds to 7% of the necessary beds missing; therefore, the country **does not meet** the IC standards for the provision of women's shelters. There are 46 women's centres located in all regions in

Austria and nine counselling centres for survivors of sexualised violence. There is no National Action Plan on VAWG in Austria.

The state requires women's specialist services which are funded by national authorities to collect and publish data. However, the data collected varies according to the contract, it is used by the state for internal purposes and is not compiled and published by the state.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	Yes	8,493 calls

📞 There is one state-wide women's helpline in Austria called Women's Helpline against Violence (*Frauenhelpline gegen Gewalt*, +43 800 222 555). It is free of charge, available 24/7 and offers multilingual support in Arabic, Bosnian-Croatian-Serbian, Dari-Farsi, English, German, Romanian, Spanish and Turkish. The helpline is run by the Association of Autonomous Austrian Women's Shelters (AÖF - Verein Autonome Österreichische Frauenhäuser). The main source of funding is provided by the state, followed by donations. The helpline provides support for all forms of GBV and in 2022 received 8,493 calls, out of which 7,559

were by women and girls (89%). The most common form of violence reported by callers was psychological violence, but most of the women who call experience a combination of several forms of violence – verbal, psychological, financial, as well as sexualised and physical violence.

There are other regional helplines supporting survivors of VAW in the country, such as the 24-hour Women's Helpline of the City of Vienna (*Frauennotruf der Stadt Wien*, +43 1 71 71 9).

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN		EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
		24/7 ACCESS				
30	32	Most	839	59	7%	10,702

🏠 There are 30 women-only shelters in Austria with 839 beds available. The shelters exist in major cities in the nine federal states, and most of them offer 24/7 access. Women who have an income are expected to pay a small fee

for their stay in the shelters, while women with lower financial means are not expected to pay. The shelters' funding comes from local authorities of the respective federal states and from donations. The length of the women's stay

in the shelters varies according to their individual situation, with most women staying between one and six months. As of 2022, there are two networks of women's shelters in Austria: the Autonomous Austrian Women's Shelters (AÖF - *Verein Autonome Österreichische Frauenhäuser*), including 13 shelters, and the Association of Austrian Women's Shelters (ZÖF - *Zusammenschluss Österreichischer Frauenhäuser*), which includes 12 shelters. Five other women's shelters do not belong to an umbrella organisation.

According to the statistics of the AÖF shelters, the three most common forms of violence reported by the clients in 2022 were physical violence, psychological violence and sexual violence. The in-house services that are most often provided by women's shelters are casework, practical advice and legal advice. Some women's shelters also have an adjoint counselling centre, where also women who do not need to be accommodated in the shelter, can seek help and advice.

In 2022, the autonomous women's shelters of the AÖF network accommodated a total of 991 people, of whom 500 were women and 491 were children.⁷

In terms of accessibility, all shelters can accommodate older women, most can accommodate women with uncertain residence status/undocumented women, women with physical disabilities, and women with older sons. Some shelters are also accessible to homeless women, women with cognitive disabilities, and transgender women. In some cases, shelters have to decline referrals, for instance, if there is no space or capacity to support the survivor, if the survivor is ineligible for support because of regional laws and regulations concerning accommodating a woman in a shelter in a different federal state than the one she comes from, or due to mental health issues, pets and drug addiction.

There are two other shelters accessible to women: the women's counselling centre "Orient Express" in Vienna, which runs a shelter/emergency apartments to accommodate girls and women between the ages of 16 and 24 from all over Austria who are affected by forced marriage, and a shelter for women victims of trafficking run by the NGO LEFÖ/IBF. These shelters do not offer 24/7 access.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
46	98,988	N/A

❖ There are at least 46 women's centres that are only or predominantly supporting women survivors of VAW and their children and have sub-offices in Austria. This number includes nine violence protection centres, that are not women's centres as such but mainly serve women (and children) due to the high amount of female survivors of domestic violence. Additionally, there are multiple centres that support all survivors, or that are focused on women and girls, but not only for issues related to VAW. For instance, there are about 150 counselling centres for women and girls across the country, that are financed by the state and offer support on different subjects, including VAW. The Network of Austrian Counselling Centres for Women and Girls (*Netzwerk Österreichischer Frauen- und Mädchenberatungsstellen*) has 63 counselling centres in all nine Austrian federal states, which are run by NGOs. The counselling centres receive funding from national, regional and communal bodies as well as through projects and donations. The counselling is confidential and free of charge and takes place at the counselling centres, by phone or online. Women and girls usually approach the counselling centres with a wide variety of issues, such as training career guidance, return to work after parental leave, migration, employment law and residence, with questions regarding partnership and child-rearing, divorce and custody, in the case of health problems, and concerning all forms of violence against women.

In Austria, all women's centres provide counselling, psychological support, financial and social welfare support, housing advice, employment advice and referrals; many of the member centres of the Network of Austrian Counselling Centres for Women and Girls provide advice on legal matters and some have an attorney for a few hours a week who can provide legal advice and legal representation. Some of the centres of the Network of Austrian Counselling Centres for Women and Girls accompany the clients to courts, police and social services if they have time and human resources. Some also offer psychosocial process support.

Women's centres are located in all federal states, but mostly in larger cities. There is a lack of availability in rural areas, and the available centres don't have the capacity to provide their services every day.

Every year, more than 110,000 consultations take place in the centres of the Network of Austrian Counselling Centres for Women and Girls. Violence against women affect about 40% of the women who seek support.

There are multiple centres offering support to survivors of specific forms of violence and from vulnerable groups. For instance, four centres are specialised in supporting survivors of female genital mutilation (FGM): the African Women Organization with the project "Bright Future" in Vienna,

⁷ No statistics from 2022 are available about the other shelters at the time this report was written.

FEM Süd – *Frauengesundheitszentrum at Kaiser Franz Josef-Spital* in Vienna, Orient Express in Vienna and DIVAN, in Graz. Moreover, there is a female genital mutilation/cutting (FGM/C) Coordination Office, which offers advice, information and support on all issues related to FGM/C. Some members of the Network of Austrian Counselling Centres for Women and Girls are specialised in supporting survivors of forced marriage (i.e. *Frauen aus allen Ländern in Innsbruck* and Orient Express and LEFÖ in Vienna). The counselling centre - DIVAN (belonging to Caritas) supports survivors of honour-based violence, and LEFÖ has an intervention centre for survivors of trafficking, which offers psychosocial and legal process support for women and children. According to the law, since 2016 all counselling centres in Austria that are recognised women's service

centres must be barrier-free. The organisation Ninilil in Vienna offers empowerment and counselling specifically for women with disabilities. Some women's centres have specific concepts to support LGBTQI+ people, who can also find support in some specialist organisations, mostly in the capital city.

Women's centres in Austria also provide support to survivors of sexualised violence (SV), including needs assessment, specialist psychological care, specialist SV advocacy services, community awareness and education for prevention. Some women's centres also provide residential support, or they closely collaborate with women's shelters.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There are nine counselling centres for survivors of sexualised violence available in all regions of Austria, which belong to the association BAFÖ, and are also included in the section above among the 46 women's centres. Moreover, there are multiple specialised helplines in Austria that are focusing on cases of SV. Women's centres also support survivors of SV and refer them to specialist services and medical professionals. Hospitals have specialist

victim's protection groups (*Opferschutzgruppen*) that are specialised in supporting survivors of SV.

The support provided by SV support services includes needs assessment, special psychological care, community awareness and education for prevention. They are financially supported by state funding from local/national authorities and donations.

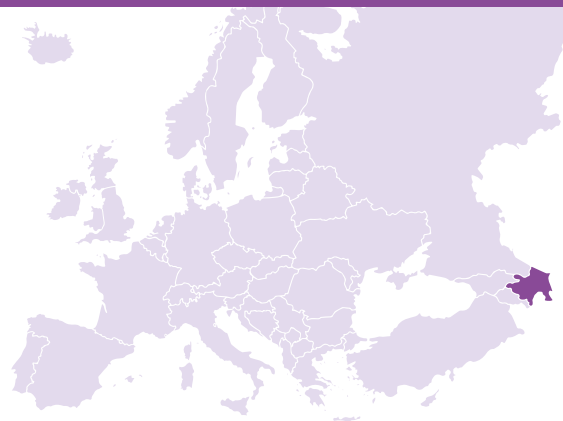
5. PRIMARY PREVENTION SERVICES

👏 There is no National Action Plan on VAWG in Austria, and the last one was for the years 2014-2016. There is no official definition of primary prevention; the state funds some primary prevention activities such as awareness-raising campaigns and projects. Beneficiaries of these activities are the general public, women and girls.

AZERBAIJAN

GENERAL COUNTRY INFORMATION

Population	10,156,366
Female population	5,081,846
Member of Council of Europe (year)	2001
Member of European Union (year)	No
Member of United Nations (year)	1992
CEDAW ratified (year)	1995
CEDAW optional protocol ratified (year)	2001
Istanbul Convention signed (year)	No
Istanbul Convention ratified (year)	No



SUMMARY

► There is no national women's helpline in Azerbaijan. The country **does not meet** the standards of the Istanbul Convention (IC) for the provision of a national women's helpline. There are 11 shelters accessible to women in Azerbaijan, of which two are women-only, offering 420 beds. With 59% of beds missing, Azerbaijan **does not meet** the IC standards for provision of women's shelters. There are 20 women's centres located in most regions of Azerbaijan, providing a variety of support services. There are no

rape crisis centres or sexual violence referral centres in Azerbaijan. However, 13 women's centres do provide services for survivors of sexualised violence. The state does not collect data on women's specialist services. There is a National Action Plan on violence against women and girls (VAWG) in Azerbaijan, which includes specific provisions on the primary prevention (PP) of VAWG.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
0	-	-	-	-

☎ There is no state-wide women's helpline in Azerbaijan. However, there is a helpline for survivors of violence against women (VAW) (tel.: +994 860) which was created jointly by the State Committee for Family, Women and Children of the Republic of Azerbaijan and the United Nations Population Fund. There is another national helpline which is run by the Public Union "Hopeful Future" (*"Umidli Galajak"*) and supported by UNICEF (tel.: +994 1161111, available 24/7). It used to be only for children, but now also supports women survivors of violence against women.

There is also a police-led helpline (tel.: +994 102) which is for all survivors and receives mainly complaints about physical violence. Although the helpline handles all types of help requests, staff are trained to speak with survivors of VAW, refer them if necessary, and provide all necessary assistance in such cases.

There are four other helplines that support survivors of VAW in Azerbaijan. Two helplines are NGO-led (tel.: +994 116 and +994 111). They receive calls related to psychological and economic violence. There is also a police-led helpline for survivors of human trafficking that covers VAW (tel.: +994 12152) which is funded and run by the Ministry of Internal Affairs. This helpline is available 24/7, free of charge, and offers multilingual support. The organisation Public Union "Clean World" AID to Women also runs a helpline for survivors of human trafficking (tel.: +994 125111152), which receives donations from the Ministry of Internal Affairs. Public Union "Clean World" AID to Women also has a helpline supporting survivors of domestic violence (tel.: +994 124085669), which is funded by donations.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
2	11	Yes	420	596	59%	24,182

There are two women-only shelters in Azerbaijan, with 80 beds available. The two shelters offer 24/7 access and women are not expected to pay for their accommodation. Funding for the women-only shelters comes from the states national/local authorities, donations, and international funding. The two shelters are managed by two women's NGO with a gender-specific/feminist approach and exist in major cities only. The Public Union "Clean World" Aid to Women manages one shelter in Baku and TAMAS Regional Development Public Union runs the second shelter in Ganja. On average, women can stay in the women-only shelters from three to six months. Women can stay longer than six months if there is a danger that is causing harm to the woman's health and this danger persists or if the woman is pregnant and is due to give birth. In case the survivor does not have anywhere else to go, she can stay in the shelter until the child is two years old. The main reasons for women-only shelters having to decline referrals were lack of space/capacity to support the survivor and the shelters not being adequately equipped for the needs of the women/children. The three main in-house services provided by women-only shelters are referrals/collaboration with other services, counselling, and legal advice. Other types of services provided include casework, practical advice, and vocational training.

The women-only shelter, that is run by the Public Union "Clean World" Aid to Women, is also accessible to migrant/undocumented women and women survivors of specific

forms of violence such as, trafficking, honour-based violence, and forced marriage. In 2022, 552 women were accommodated in the Public Union "Clean World" Aid to Women's shelter.

In terms of accessibility, all women-only shelters can accommodate women with uncertain residence status/undocumented women, homeless women, and transgender women. Some women-only shelters are accessible to women with physical and cognitive disabilities, women with substance abuse issues, and older women. There is no women-only shelter accessible for women with older sons (14 years and above).

There are nine shelters, beside the women-only shelters, which are accessible to survivors of VAW with 340 available beds. These shelters are accessible to men and women and offer 24/7 access. The shelters provide support to different vulnerable groups including survivors of trafficking, homeless people and children. One shelter is provided by the Ministry of Internal Affairs for survivors of human trafficking, and it has different pavilions for men, women and children. Three shelters are provided by the Ministry of Labor and Social Protection of Population for vulnerable people, teenagers, homeless people, and people in need who are in difficult financial situations. Four shelters are specifically for children and are run by NGOs and the Catholic Church runs one shelter for homeless and stateless people.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
20	254,092	State (9 centres); UN and state (11 centres)

There are 20 women's centres in Azerbaijan, which are divided into nine women's resource centres run by the United Nations jointly with the State Committee for Family, Women and Children Affairs and 11 children and family centres⁸, which are managed by the State Committee for Family, Women and Children Affairs of the Azerbaijan Republic. Women's centres are located in most regions of Azerbaijan and are funded by the state from national/local authorities, donations as well as international funding. The women's resource centres offer counselling/psychological support, legal and housing advice, financial and social welfare support/advocacy, employment, referrals, as well as representation at court/police/social services. Three

centres provide specialist support for survivors of trafficking in persons and one NGO, called Gender and Development, advocates for the rights of transgender women and non-binary people. There are two centres that provide specialist support to women with uncertain residence status/undocumented women. In 2022, 12,790 women were supported by all women's centres in Azerbaijan.

There are no women's centres that provide specialist support for survivors of forced marriage, honour-based violence, female genital mutilation, or to black and minority ethnic women and women with disabilities. Women's centres provide only non-residential support services and


⁸ The WAVE Network does not consider family justice centers (FJCs) to be women's specialist services, as they do not provide adequate survivor-centred support to women and their children.

participate in the placement of women in shelters.

Women's centres also provide specialist support for survivors of sexualised violence (SV), such as specialist


forensic and medical care, needs assessment, specialist psychological care, specialist SV advocacy services and community awareness and education for prevention.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

 There are no rape crisis centres or sexual violence referral centres in Azerbaijan. However, 13 women's centres across the country do provide services for survivors of sexualised violence including referrals and escorting survivors to medical organisations to receive medical services. Other services offered include specialist forensic and medical care, needs assessment, specialist psychological care, specialist SV advocacy services and community

awareness and education for prevention. Additionally, SV services are available for all women (both adult and young) and children. These centres do not provide crisis or medical services themselves, nor do they operate a specialised helpline. Funding for sexualised violence support services comes from state funding from national and local authorities, donations, and international funding.

5. PRIMARY PREVENTION SERVICES

 There is a National Action Plan on violence against women and girls in Azerbaijan, which includes specific provisions on the primary prevention of VAWG. The state funds some primary prevention activities such as training for primary prevention practitioners and awareness-raising campaigns or programmes. Beneficiaries of these activities are the general public, women and men.

BELARUS

GENERAL COUNTRY INFORMATION

Population	9,408,350 ⁹
Female population	5,070,289 ¹⁰
Member of Council of Europe (year)	No
Member of European Union (year)	No
Member of United Nations (year)	1945
CEDAW ratified (year)	1981
CEDAW optional protocol ratified (year)	2004
Istanbul Convention signed (year)	No
Istanbul Convention ratified (year)	No



SUMMARY

► There is no national women's helpline in Belarus after the civil society organisation "Gender Perspectives" was forcibly closed by the Belarusian authorities in 2021. Therefore, Belarus **does not meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. Belarus has four women-only shelters with a total of 52 beds. Therefore, Belarus **does not meet** the IC standards

for the provision of women's shelters as 95% of the recommended beds are missing. There are no women's centres in Belarus as well as no support services for survivors of sexualised violence. In addition, there is no National Action Plan on violence against women and girls in Belarus. The state does not collect data on women's specialist services.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
0	-	-	-	-

☎ There is no national women's helpline in Belarus. It should be highlighted that due to the mass repressions that began in Belarus in 2020, including towards NGOs working with survivors of domestic violence and violence against women, the national women's helpline which was in operation was indefinitely suspended in September 2021¹¹. This situation has created significant challenges and limitations in accessing information on women's specialist services in Belarus.

There is one other generic helpline that provides support to all survivors of domestic violence; the Hotline for Victims of Domestic Violence (*Горячая линия для пострадавших от домашнего насилия*, tel.: +375 173173232) which is free of charge, available 24/7, and is run by the governmental Minsk City Center for Social Services for Family and Children.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN		EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
		24/7 ACCESS				
4	4	N/A	52	889	94%	180,929

🏠 There are four women-only shelters in Belarus with a total of 52 beds. There are no other shelters in the country that can provide support to survivors of domestic violence. Survivors in need of a safe shelter are provided with

temporary shelter services, in one of the 136 available crisis rooms across the country, in which there are a total of 435 beds available, including 129 for children. The majority of crisis rooms are located in a city or near a city.

⁹ The most recent available data on Eurostat is from 2020.

¹⁰ The most recent available data on Eurostat is from 2018.

¹¹ This helpline was the National Hotline for victims of family violence (*Общенациональная горячая линия для пострадавших от насилия в семье*) which was run by the international public association "Gender Perspectives" since 2012.

One women-only shelter that was run by a women's rights organisation was closed in 2017 due to the end of funding for the project. Another women-only shelter that was run by a faith-based organisation was closed in 2018 due to a lack of resources. One more women-only shelter which was run by the feminist organisation Radislava,

was forcibly closed by authorities in 2022. Four others are run by SOS Children Village. One shelter for women and children offers its services in the Mogilev region and all the others are in Minsk and the Minsk region. On average, women can stay in the women-only shelters for up to one year.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
0	N/A	N/A

❖ There are no women's centres in Belarus. There are, however, the 136 crisis rooms that also provide non-residential support such as casework, referrals and collaboration with

other services, as well as practical advice. Crisis rooms do not offer specialised assistance to VAW survivors, or only to women, but to all in different crisis situations.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There are no services for women and girls survivors of sexualised violence in Belarus.

5. PRIMARY PREVENTION SERVICES

👤 There is no National Action Plan on violence against women and girls in Belarus. In 2022, amendments were made to the Law of the Republic of Belarus from 2014; No. 122-Z "On the Basics of Activities for the Prevention of Offenses", aimed at preventing domestic violence. The amendments introduced the concepts of psychological, physical, and sexual actions, which formed the basis for the definition of domestic violence. It is important to note

that the principles of "preserving traditional family values, respecting privacy, not considering customs, beliefs, and traditions as justifications for offenses, and prioritising preventive measures over punitive measures" have been added to Article 4 of the law, which regulates the principles of the activities in the field of offense prevention. There is no further information regarding available primary prevention activities and if these are funded by the state.

BELGIUM

GENERAL COUNTRY INFORMATION

Population	11,617,623
Female population	5,883,978
Member of Council of Europe (year)	1949
Member of European Union (year)	1958
Member of United Nations (year)	1945
CEDAW ratified (year)	1985
CEDAW optional protocol ratified (year)	2004
Istanbul Convention signed (year)	2012
Istanbul Convention ratified (year)	2016



SUMMARY

► There is no national women's helpline in Belgium. Therefore, Belgium **does not meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. However, there are regional helplines offering support to survivors of violence, both in Brussels and Wallonia and in Flanders. There are approximately 39 women-only shelters in Belgium, as well as 17 other shelters that are accessible to women, with approximately 2,521 beds in total. Therefore, Belgium **does meet** the IC standards for the provision of women's shelters. There are at least 49 women's centres in Belgium providing different support services, and there are also nine sexual violence referral centres and one rape crisis centre. Belgium has a National Action

Plan on violence against women and girls, which includes specific provisions on primary prevention. The state in the French-speaking part of Belgium does not systematically collect data on women's specialist services. In Flanders, data on women's specialist services is available upon request and sometimes (partially) publicly available on the website of the Flemish Parliament.

The state requires women's specialist services which are funded by national authorities to collect and publish data. However, the data collected varies according to the contract, it is used by the state for internal purposes and is not compiled and published by the state.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
0	-	-	-	-

📞 There is no national helpline for the entire country of Belgium due to structural and language differences within the country. Instead, there are distinct helplines for each of the two main linguistic communities (the French-speaking part, Brussels and Wallonia, and the Dutch-speaking part, Flanders).

For the French-speaking part of Belgium, there are three helplines supporting women survivors of violence: Domestic Violence Helpline and Centre for the Prevention of Domestic Violence (*Écoute violence conjugale et Centre de Prévention des Violences Conjugales et Familiales*, tel.: +32 80003030), SOS Rape (SOS Viol, tel.: +32 80098100), and Helpline of the Collective against Family Violence and Exclusion (*Ligne d'écoute du CVFE - Collectif contre les Violences familiales et l'Exclusion*, tel.: +32 42234567). Domestic Violence Helpline is free of charge and available 24/7. The helpline received 12,122 calls in 2022 and the three most common forms of violence reported by callers were psychological violence (20%), verbal violence (16%), and

physical violence (13%). In total, 55% of the callers were survivors of domestic violence. SOS Rape is also free of charge and runs 24/7, and the helpline received 2,397 calls in 2021¹². The helpline of the Collective against Family Violence and Exclusion is also available 24/7 and received 5,475 calls in 2021¹³. There is also a helpline for survivors of forced marriage, My Marriage Belongs to Me (*Mon mariage m'appartient*, tel.: +32 80090901) which is free of charge but does not run 24/7, it is available on workdays only.

Funding for women's helplines in Brussels and Wallonia comes from the state, local authorities, subsidies, and donations. None of the helplines indicate that they are specifically for women, and in some cases, perpetrators and third parties can receive support and information. However, all three helplines are run by feminist organisations with a gender-specific approach. In addition to these regional helplines, there is also a group of government-initiated, volunteer-run helplines called Listening Ears (*Luisterende*

¹² Figures for 2022 are not available.

¹³ Ibid.

Oren) which offer support to survivors of domestic violence in 24 languages (individual phone numbers available by language).

In Flanders there is a helpline (tel.: +32 1712) to report any kind of violence and (child) abuse, which is available to all survivors of violence, not just women. The helpline is run by the Centres for General Welfare Work (*Centrum voor Algemeen Welzijnswerk – CAW*) and Child Abuse Trust Centres (*Vertrouwenscentra kindermishandeling – VK*) and is accessible via phone, mail, and chat. The helpline is state-funded, free of charge, and offers multilingual support in Dutch, English, and French, but it is not available 24/7. The helpline registered 9,045 calls in 2022, concerning 12,044 persons or (potential) survivors of violence,

abuse, or child abuse. Sixty-five percent of callers were women, 34% were men and one percent were non-binary people. The three most common forms of violence reported were emotional violence (42%), physical violence (20%), and sexual violence (19%).

There is another regional helpline in Belgium supporting survivors of violence, Tele-Reception (*Tele-Onthaal/Télé-Accueil/Telefonhilfe*, tel.: +32 106) which is available 24/7 and also offers a chat. The helpline is a general support line run by volunteers for all possible questions, including support for survivors of all kinds of violence. In 2022, helpline *Tele-Onthaal* received 110,269 calls and 18,548 chat requests (67% by women).

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN		EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
		24/7 ACCESS				
39	56 ¹⁴	Most	2,521	0	0%	4,608

🏠 In the French-speaking part of Belgium, there are 21 women-only shelters, five in Brussels and 16 in Wallonia, with a total of 889 beds divided as the following, 203 beds in Brussels and 686 in Wallonia. The increase in women-only shelters and beds is partially due to the fact that some shelters were previously not approved to accommodate survivors of violence. Most of the women-only shelters offer 24/7 access and are funded by national/local authorities as well as donations. Women are expected to pay for their accommodation in the shelter, which is calculated based on their income. Six women-only shelters are run by women's NGOs with a feminist and gender-specific approach. Most women-only shelters are accessible 24/7 and women can stay there for up to one year. The main reasons why shelters have to decline referrals are no space/capacity to support the survivor, no space/capacity to accommodate the survivor with her children, and/or the shelter not being adequately equipped for the needs of the women/children. In the shelters run by the Collective against Family Violence and Exclusion, all survivors reported experiencing psychological and verbal violence, three quarters also reported economic violence, while two-thirds reported physical violence and/or sexualised violence. Counselling, legal advice, and parenting support are the three most frequent in-house services provided by women-only shelters. In 2019, 4,260 survivors of domestic violence, the vast majority of whom were women, were accommodated in Wallonia and Brussels.¹⁵

Most women-only shelters are accessible to homeless women, some are available to women with uncertain residence status, women with physical disabilities, women with substance abuse issues, and women with older sons (14 years and above). In addition, there are specific shelters for vulnerable groups such as the Sisters' House in Brussels, which is accessible to migrant women and can welcome 70 women. The Brussels Refuge (Le Refuge

Brussels) provides emergency accommodation for up to three months, and support for LGBTQI+ people aged 18 to 25 who have been discriminated against because of their sexual orientation and/or gender identity. Very few women-only shelters can accommodate undocumented women and the ones who do, do so outside of their legal framework and obligations.

In addition, there are other shelters that can provide support to survivors of violence against women, namely 17 shelters, six in Wallonia and 11 in Brussels, with a total of 958 beds, divided into 143 in Wallonia and 815 in Brussels. These shelters are available to all survivors and are located in all regions of Brussels and Wallonia.

In Flanders, there are 18 women-only shelters, but the number of beds for 2022 is not known. In 2021, there were approximately 409 beds: 214 in secret address shelters (*Vluchthuizen*) with 77 living units, and 195 in assisted living/women's residential centres (*Vrouwenopvangcentra*) with 66 to 69 living units. In Flanders, the Centres for General Welfare Work (*Centra voor Algemeen Welzijnswerk – CAW*) are responsible for providing residential accommodation for women who are in serious danger. These CAWs are recognised and funded by the Flemish government.

Some of the women-only shelters offer 24/7 access. In each region in Flanders, CAWs work together with different organisations to offer solutions to survivors in a crisis situation, including a shelter bed in acute, high-risk situations. If there is no space in a shelter or the open space does not meet the survivor's needs, alternative solutions are provided. Women are expected to pay for their accommodation in women-only shelters. The daily rate in a shelter is 18.37 euros (for those under 12 years) and 29.87 (for those over 12 years). People who do not have enough

¹⁴ This number does not include the living units accessible to women in Flanders.

¹⁵ More recent figures are unavailable.

money to pay can apply to a public social action centre (OCMW) to help them pay their fees. If a woman is unable to pay the daily fee and the OCMW refuses to help and if appeal proceedings are underway, the woman cannot be admitted to a shelter. If there is space and if the situation is high-risk, the shelters may pay for the accommodation from their own budgets and the product of their fund-raising efforts. Women can stay in the shelters between three and six months. In 2022, the average length of stay in secret address shelters was 86.6 days, and 257.2 days in assisted living centres. Women-only shelters are run by the CAWs which are funded by the state as well as donations. The three most common types of violence reported by clients to the women-only shelters in Flanders were physical violence, psychological violence, and sexualised violence. The three types of in-house services most often provided are casework, counselling, and referrals. The main reason why women-only shelters had to decline referrals was because of a lack of capacity for example due to illness of staff members, or because there was no space to accommodate the survivor and/or her children.

All women-only shelters in Flanders are accessible to older women. Most women-only shelters are accessible to

women with substance abuse issues, transgender women, and women with older sons (14 years and above). Some shelters are accessible to women with uncertain residence status, and women with physical and/or cognitive disabilities. There are no specific shelters for survivors from vulnerable groups such as women with disabilities or specific forms of violence such as forced marriage. Women-only shelters are not accessible to homeless women, but temporary accommodation is available for women (and their children) who can no longer live at home due to various circumstances or when they have nowhere to stay due to an emergency situation.

In addition, there are 69 living units in Flanders, which can accommodate 195 women and children. These units are in shelters for survivors of human trafficking or for homeless people, but they also welcome survivors of violence against women. These shelters are available to women, men, non-binary people, as well as transgender women and men and are available 24/7. They are located in all provinces of Flanders. Moreover, *Payoke*, a non-governmental organisation for survivors of trafficking and exploitation, offers specialised care and support to survivors of human trafficking, including shelter accommodation.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
49	120,081	Women's NGOs; Other NGOs; State

❖ There are at least 34 women's centres in Wallonia and Brussels, although the exact number is hard to pinpoint. Four of these centres are only for women survivors of violence, while the rest are accessible to all survivors, including women. These centres provide counselling, legal advice, financial and social welfare, housing advice, and employment, but do not provide referrals or representation at court/police. Funding for women's centres comes from national/local authorities as well as donations and they are located in most regions. In addition, two centres provide specialised support to survivors of forced marriage and honour-based violence and are run by the Marriage and Migration Network (*Réseau Mariage et Migration*). Three women's centres also provide specialist support to survivors of female genital mutilation, including GAMS Belgium, the group for the Abolition of Female Genital Mutilation, two centres are for survivors of trafficking, including the NGO *Payoke*, and one for women with uncertain residence status and homeless women. Furthermore, two centres provide specialised support to transgender women and non-binary people. There are no women's centres for black and minority ethnic women or women with disabilities. Women's centres also provide specialist support services for survivors of sexualised violence such as specialist forensic and medical care, specialist psychological care, and specialist sexualised violence advocacy services.

In Flanders, there are 11 centres that are part of the Centres

for General Welfare Work (CAW), offering residential and non-residential support to survivors of violence, in collaboration with the Houses of Justice (*Justitiehuisen*) and the victim support unit of the police. They provide counselling, legal advice, financial and social welfare support, referrals, and representation at court/police. For example, INTACT is an organisation that goes to court on behalf of survivors. Women's centres do provide specialised support to survivors of forced marriage and INTACT also provides support to survivors of honour-based violence. There are also other women's organisations, that are not part of CAW, but provide a range of services to survivors of specific forms of violence. GAMS Belgium also operates in Flanders providing support to survivors of female genital mutilation, forced marriage, honour-based violence, and trafficking, as well as to women of marginalised groups, as well as *Payoke* offering support to survivors of trafficking. There are also women's centres that provide specialist support to women with uncertain residence status/undocumented women, black and minority ethnic women, transgender women, and non-binary people. There is one centre, *Persephone*, which provides support to women with disabilities. The centres are funded by the state as well as donations and are located just in major cities.

There are additionally four Family Justice Centres (FJCs)¹⁶ in the Flemish provinces of Antwerp, Kempen, Mechelen, and Limburg.¹⁷ These centres utilise a chain-approach

16 The WAVE Network does not consider family justice centers (FJCs) to be women's specialist services, as they do not provide adequate survivor-centred support to women and their children.

17 In 2023, more FJCs are planned to be opened in Leuven, Halle, Gent, Kortrijk and Oostende.

model involving cooperation between different services working with families including social services, judicial services, and the police. The 'high-risk teams' deal with more complex and serious situations of intra-family violence

and provide case management as well as on-site services such as peer support groups for survivors, self-defence courses, services for migrants and asylum seekers, legal advice by lawyers, and advice on debt and counselling.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☔ There is one rape crisis centre in Belgium, SOS Rape (*SOS Viol*), which is the only NGO in Belgium that provides long-term support for survivors of sexualised violence. While the organisation has a feminist background, it also works with male survivors. *SOS Viol* also runs a free helpline but does not have the means to operate it 24/7, and the organisation only operates in Brussels. In Flanders, there are some non-profit organisations that offer individual and group counselling/ support for both women and men but not with a feminist background.

In addition, there are four sexual violence referral centres in Wallonia and Brussels, called Sexual Assault Care Centres (*Centres de Prise en Charge des Violences Sexuelles – CPVS*) providing specialist psychological care as well as one-stop emergency intervention and assistance for survivors of sexualised violence. The centre provides medical and forensic care, psychological support, and follow-up for survivors. Specialised police inspectors are also on hand at the centre if the victim wishes to lodge a complaint. The one in Brussels has been extended this year to be able to offer more examination and consultation rooms, as well as a multi-purpose area to provide additional activities for survivors or their families. These centres are located in Brussels, Liege, Namur, and Charleroi,¹⁸ and are open to all survivors of sexualised violence, including women, men, transgender people, and children. Although 91% of survivors receiving support in CPVS centres are women, including transwomen. In 2022, the CPVS centres supported a total of 3,287 survivors of sexualised violence, with an average of nine people visiting a centre per day. The average age of survivors seeking support in a CPVS is 24, and 70%

of survivors reported to the CPVS within seven days of the assault. Funding for sexualised violence support services comes from the state and these services are located just in major cities, but given the size of Belgium, services do cover all regions.

In Flanders, there are also five CPVS/Sexual Assault Care Centres which are called *Zorgcentrum na Seksueel Geweld (ZSG)* in Flemish. These centres are located in Antwerpen, Leuven, Limburg (since 2023), Oost-Vlaanderen (Gent), and West-Vlaanderen (Roeselare). Funding for these sexualised violence services comes from the state and donations, and ZSGs are located in most regions of Flanders.¹⁹ All ZSGs also run a helpline and from January to September 2022, 2,466 survivors (91% of which were women, including transwomen) called one of the ZSGs.

The helpline 1712 can also provide support to survivors of sexualised violence.

Furthermore, nupraatikerover.be is an online chat support service for minors who have questions about, or are survivors of, abuse, neglect, or sexualised violence. It is an initiative of the Child Abuse Trust Centres (*Vertrouwenscentra Kindermishandeling - VK*). In 2021, the VK received 7,535 calls concerning 10,070 children and young people and the *Nupraatikerover* received 574 chat requests. Child Focus is another helpline available in Belgium that aims to address and prevent the disappearance and sexual exploitation (both offline and online) of children (tel.: +32 116000) and is available 24/7. In 2021, the helpline received 2,147 calls of suspected sexual abuse images of minors.

5. PRIMARY PREVENTION SERVICES

👋 Belgium has a National Action Plan on violence against women and girls, namely the National Action Plan to Combat all Forms of Gender-Based Violence for the period of 2021-2023. The NAP includes specific provisions on the primary prevention of VAWG (in Axis III) as well as a definition of primary prevention in line with the definition used by the World Health Organisation (WHO).²⁰ The first specific objective stated is the following: "Prevent violence through awareness-raising, information, and primary prevention initiatives." The regions fund primary prevention activities such as feminist self-defence trainings, school-based primary prevention programmes, training

for primary prevention practitioners, self-care activities, and awareness-raising campaigns. These activities are for the general public, girls and boys under the age of 18, women, and LGBTQI+ people. In addition, peer education activities are organised by several organisations, including the Belgium-based NGO *Garance*, which also provides specialised activities to three target groups: older women, migrant women, and women with learning disabilities. Additionally, there is a Flemish Action Plan on sexualised violence (2020-2024).

18 The one in Namur opened in April 2023 and by the end of 2023 another one will open in Arlon. Four more centres are planned to be opened in 2024, covering the provinces Halle-Vilvorde, Eupen, Mons and Walloon Brabant. The creation of CPVS is part of a federal pilot project supported by the Secretary of State for Equality between Women and Men, subsidised by the national lottery and piloted by the ICRH (International Centre for Reproductive Health) UZ Gent.

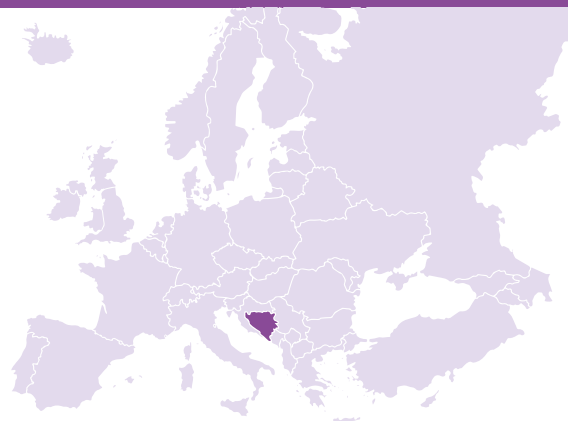
19 By 2023 all provinces will be covered, currently Limburg is missing.

20 According to the World Health Organisation (WHO), primary prevention aims to prevent the onset of a health problem by acting on a series of actions: preventing exposure to risks, changing risky behaviour, strengthening resistance to disease or injury. In the case of gender based violence, primary prevention is an effective means of putting an end to violence against women by improving people's quality of life and health, and ensuring respect for their fundamental rights. Primary prevention also produces financial benefits for the community (health care, psychological follow-up, recourse to justice, support for perpetrators, involvement in the workplace, etc.).

BOSNIA AND HERZEGOVINA

GENERAL COUNTRY INFORMATION

Population	3,492,018 ²¹
Female population	1,798,889 ²²
Member of Council of Europe (year)	2002
Member of European Union (year)	No
Member of United Nations (year)	1992
CEDAW ratified (year)	1993
CEDAW optional protocol ratified (year)	2002
Istanbul Convention signed (year)	2013
Istanbul Convention ratified (year)	2013



SUMMARY

► There are two national women's helplines in Bosnia and Herzegovina, one covering the Federation of Bosnia and Herzegovina and one covering Republika Srpska. They are both free of charge and available 24/7, therefore the country **does meet** the Istanbul Convention (IC) standards for the provision of a women's helpline. There are eight women-only shelters in the country that offer 189 beds. With 46% of the necessary beds missing, Bosnia and Herzegovina **does not meet** the IC standards for the provision of women's shelters. There are 11 women's centres in the

country, nine of which are run by women's NGOs and two by other NGOs. Since 2021, three rape crisis centres are operating in the Federation of Bosnia and Herzegovina. There are National Action Plans on VAW both in the Federation of Bosnia and Herzegovina and in Republika Srpska, and they include specific provisions on primary prevention. The governments collect data on the situation of women's specialist services, which are available upon request.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
2	Yes	Yes	No	5,202 calls

☎ There are two state-wide women's helplines in Bosnia and Herzegovina, one covering the Federation of Bosnia and Herzegovina and one covering Republika Srpska.

In the Federation of Bosnia and Herzegovina, the SOS helpline for survivors of domestic violence (*SOS telefon za žrtve nasilja*, tel.: +387 1265) is free of charge and operates 24/7, but it does not offer multilingual support. It is run by five women's NGOs, namely Association "Medica" Zenica, Vive Women Tuzla (*Vive žene Tuzla*), Foundation of Local Democracy Sarajevo (*Fondacija Lokalne demokratije Sarajevo*), Women with Una Bihać (*Žene s Une Bihać*) and Women of BiH Mostar (*Žena BiH Mostar*). Additionally, the Centre for Social Work Jajce runs the helpline in one canton of the Federation, Central Bosnia Canton, but in this case the line is not operating 24/7. In 2022, the SOS helpline received 1,281 calls, and the most common form of violence

reported by callers was domestic violence.

In Republika Srpska, the women's helpline is called SOS Line for Domestic Violence (*SOS telefon za žrtve nasilja*, tel.: +387 1264) and is run by United Women Foundation from Banjaluka, Budućnost from Modriča and Lara from Bijeljina. It is free of charge, operates 24/7, but does not offer multilingual support. The helpline is run thanks to international funding. In 2022, it received 3,921 calls from 3,620 callers. The most common forms of violence reported by the callers were physical, psychological and economic violence.

In Bosnia and Herzegovina, there is also a state-wide helpline that provides help specifically for survivors of war-related sexualised violence (SV). It is called Unique telephone line for support and help to survivors of war

²¹ Eurostat, data from 2019.

²² Agency for Statistics of Bosnia and Herzegovina, 2022, data about female population from 2013: https://bhas.gov.ba/data/Publikacije/Bilteni/2022/FAM_00_2021_TB_1_BS.pdf.

rape and SV and their family members (*Jedinstvena telefonska linija za pomoć i podršku preživjelim ratno silovanje i seksualno nasilje i članovima njihovih porodica*, tel.: +387 80

022334) and it is run by Association "Medica" Zenica. This helpline is also free of charge and operates 24/7. In 2022, it received 75 calls.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
8	9	All	189 ²³	160	46%	18,476

There are eight women-only shelters in Bosnia and Herzegovina, five in the Federation of Bosnia and Herzegovina and three in Republika Srpska, offering 189 beds in total.

In the Federation of Bosnia and Herzegovina, the five women-only shelters offer 129 beds, they are run by women's NGOs and are accessible 24/7. They are located in Zenica (*Zenica Dobojski Canton*), Sarajevo (*Sarajevo Canton*), Mostar (*Herzegovina Neretva Canton*), Tuzla (*Tuzla Canton*), and Bihać (*Una Sana Canton*). Women are not expected to pay to stay in the shelters, and according to the Law on Protection against Domestic Violence, the funding for temporary accommodation in women's shelters should be covered by the Federation (70% of the budget of the shelters) and by the Canton (30% of the budget). Nevertheless, this law is not fully implemented, and women's shelters often work with insufficient funding. In 2022, the total budget for five shelters amounted to BAM 250,000 (ca. 125,000 €), while the annual budget per shelter is BAM 360,000 (ca. 180,000 €), which shows that the budget allocated at the Federal level does not comply with the 70% standard. In 2023, the available budget for the five shelters was increased by 50%. At the cantonal level, the situation varies: for instance, the Zenica Dobojski Canton covers 30% of the budget, while the Sarajevo Canton covers 100% of the costs of the women's shelter in Sarajevo. According to the Law on Protection against Domestic Violence, survivors can stay in the shelters for up to six months. In some cases, especially when the survivors have children, this period can be extended.

In terms of accessibility, all shelters can provide support to older women, and some shelters can support women with uncertain residence status/undocumented women, women with physical or cognitive disabilities, and women with older sons. In 2022, the women's shelters signed a protocol of cooperation with the Ministry of Security, which regulates the admission of survivors of trafficking to the shelters.

In some cases, women's shelters had to decline referrals, and this was mainly due to psychiatric disorders of the survivors which are considered a risk factor for others, and for which the shelters are not adequately equipped. The most common type of violence reported by clients in 2022 was domestic violence, in most of the cases combined with

other forms of violence such as psychological, sexualised, or economic violence. The in-house services provided by women's shelters include casework, counselling, referrals, practical advice, legal advice, occupational therapy, economic empowerment, training, and education of children. In 2022, 319 survivors of violence were admitted to five women's shelters in the Federation of Bosnia and Herzegovina (144 women and 175 children). Moreover, there is one shelter supporting survivors of trafficking and homeless people in the Federation of Bosnia and Herzegovina, and it is run by the humanitarian organisation MSF-EM-MAUS.

The three women-only shelters in Republika Srpska are run by women's NGOs and offer 60 beds. Shelters are available in most regions. The number of beds is adequate in the regions of Banja Luka, Bijeljina and Modriča, but two more shelters would be needed to cover the demand in East Sarajevo and Trebinje. All shelters are accessible 24/7 and women are not expected to pay for their accommodation. The funding comes from national/local authorities. Women can stay in a shelter for a maximum of six months, but in cases where the conditions for an exit strategy have not yet been met, the stay can be prolonged, in rare cases for several years.

In terms of accessibility, all shelters in Republika Srpska can provide support to women with uncertain residence status, undocumented women, homeless women, women with cognitive disabilities, older women and transgender women. Most shelters can also accommodate women with physical disabilities and women with older sons. If shelters had to decline referrals, the main reasons were the lack of space/capacity to support the survivors and to accommodate survivors with children, and shelters not being adequately equipped for the needs of women and their children. The most common types of violence reported by clients were physical, psychological and economic violence. The in-house services provided by women's shelters include counselling, referrals/collaboration with other services, and legal advice. In 2022, 114 survivors were accommodated in women's shelters in Republika Srpska (43 women, 53 children and 18 children without parental care).

²³ Number of beds in the eight women-only shelters.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
11	163,535	Women's NGOs (9 centres); Other NGOs (2 centres)

❖ There are eight women's centres in the Federation of Bosnia and Herzegovina: seven only for women, which are run by women's NGOs, and one open to all survivors. Women's centres are located in most regions. All centres offer counselling/psychological support, financial and social welfare support, and referrals; most of the centres also offer legal advice, housing advice, and representation at court/police/social services, etc. Women's centres can provide support to survivors of specific forms of violence or vulnerable groups: all centres are able to support women with disabilities and older women, while six centres can support survivors of forced marriage and trafficking in persons. Women's centres also provide specialist support for survivors of sexualised violence, such as specialist psychological care, advocacy services and community

awareness and education for prevention. The work of women's centres is funded through international funding. Only centres that also run shelters receive funding from the government.

In Republika Srpska there are three women's centres, two of which are exclusively for women survivors of VAW. Two centres are run by women's NGOs, while one is run by another NGO. Women's centres provide counselling/psychological support, legal advice, housing advice, employment support, referrals, and support for vulnerable groups such as women with disabilities and older women. The funding for women's centres comes from donations and international funding.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There are three rape crisis centres in the Federation of Bosnia and Herzegovina, which were established in 2021, following the signature of the Agreement on Cooperation on the Establishment of Crisis Centers for Victims of Rape and Sexual Violence by the Gender Equality Agency, but they are not fully operative yet. These centres are located in the hospitals of major cities and support women and young women/children under the age of 18. Women's

centres also provide specialist support for survivors of SV in the country.

The helpline run by the Association "Medica" Zenica provides help specifically for survivors of war-related sexualised violence, it is free of charge and operates 24/7. There are no specialised support services for survivors of SV in Republika Srpska.

5. PRIMARY PREVENTION SERVICES

👤 The Government of the Federation of Bosnia and Herzegovina adopted the Strategy for the Prevention and Combating of Domestic Violence for the years 2021-2027. The priorities are the improvement of systemic prevention and the improvement of the system of comprehensive and effective protection of victims of domestic violence through the promotion of tolerance, non-violence, and gender equality in the family and society, as well as the development of mechanisms for the early recognition and elimination of risk factors of domestic violence. The Strategy is not available to the public.

Primary prevention activities taking place in the country include school-based primary prevention programmes, training for primary prevention practitioners and awareness-raising campaigns or programmes, which are targeting multiple beneficiaries' groups.

There is a NAP on VAW in Republika Srpska, and it includes a definition of primary prevention and specific provisions on the primary prevention of VAW. Awareness-raising campaigns are conducted in the country, and they target the general public and women.

BULGARIA

GENERAL COUNTRY INFORMATION

Population	6,838,937
Female population	3,527,626
Member of Council of Europe (year)	1992
Member of European Union (year)	2007
Member of United Nations (year)	1955
CEDAW ratified (year)	1982
CEDAW optional protocol ratified (year)	2006
Istanbul Convention signed (year)	2016
Istanbul Convention ratified (year)	No



SUMMARY

► There are two national women's helplines in Bulgaria, which are free of charge and operate 24/7 but do not offer multilingual support. Bulgaria **does meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. There are 13 women-only shelters in Bulgaria with a total of 128 beds available. This means that Bulgaria **does not meet** the IC standards for the provision of women's shelters, as 81% of the necessary beds

are missing. There are 25 to 30 women's centres in Bulgaria; 18 centres are only for women survivors of violence against women. There is one rape crisis centre in Bulgaria. The state collects data on women's specialist services and this data is available upon request. There is a National Action Plan on violence against women and girls in Bulgaria, which includes specific provisions on the primary prevention of violence against women and girls (VAWG).

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
2	Yes	Yes	No	2,500 calls ¹

☎ There are two national women's helplines in Bulgaria. One is run by the Alliance for Protection against Gender-Based Violence (Алианс за защита от насилие, основано на пола, tel.: +359 80011977) and is available 24/7 and free of charge. The second helpline is run by Foundation Animus and is called the National Helpline for Survivors of Violence (tel.: +359 80018676/+359 29817686). This helpline is also free of charge and offers 24/7 support. Both helplines are run by NGOs and do not offer multilingual support. The main sources of funding for the national helplines are state funding from the Ministry of Justice and donations. In 2022, the total number of calls was 2,500, although this number is only approximate and

based on the average numbers announced by operators. The most common forms of violence reported by callers were domestic violence, sexualised violence, and stalking.

There are also ten other helplines supporting survivors of violence against women run by members of the Alliance against Gender-Based Violence and also other helplines run by other NGOs. For example, an additional women's helpline was opened in 2020 by Association Demetra (tel.: +359 70040150), supporting professionals working with survivors of domestic violence, such as medical doctors, psychologists, and police officers. The helpline is not free of charge but is charged according to local call rates.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
13	13	All	128	556	81%	53,429

🏠 There are 13 women-only shelters in Bulgaria, with 128 available beds. All the women-only shelters offer 24/7

access, although in practice there are some difficulties, including bureaucratic challenges. Women are not expected

¹ This number is based on the average numbers announced by the operators, they are not official national helpline statistics.

to pay for their accommodation in shelters. Women-only shelters are run by women's NGOs and are funded by the state, as well as by donations and through international funding. They are located in major cities only. Women usually stay in women-only shelters for three to six months. The main reasons for shelters having to decline referrals were lack of space/capacity to support the survivor or to accommodate the survivor with her children and survivors being ineligible for support. The main in-house services that women-only shelters provide are referrals or collaboration with other services and practical as well as legal advice. In 2022, 250 women were accommodated in women-only shelters and the most common type of violence that was reported was domestic violence.

Some women-only shelters are accessible to women with uncertain residence status, undocumented women, homeless women, women with physical and/or cognitive disabilities, and women with older sons (14 years and above). All women-only shelters are accessible to older women. There are no specific shelters for vulnerable groups (i.e., women with disabilities or LGBTQI+ survivors), nor for women survivors of specific forms of violence (i.e., honour-based violence and female genital mutilation). There are other shelters that can provide support to children survivors of VAW, and they offer 24/7 access.

In addition to the women-only shelters, there are other shelters for survivors of human trafficking and crisis centres for abused children, including girls. It is estimated that there are nine such additional services, but their overall bed capacity to accommodate survivors is unknown.²

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
25–30	141,105 ³	Women's NGOs (20 centres); Other NGOs (5–10 centres)

❖ There are approximately 25 to 30 women's centres in Bulgaria. This estimate is based on NGOs which are funded by the state but there are no official statistics, therefore the exact number is not known. Eighteen women's centres are only for women survivors of VAW, and the rest are for all survivors of violence, specifically domestic violence survivors. Twenty women's centres are run by women's NGOs and five to ten centres are run by other NGOs. Women's centres are located in the major cities only, and are funded by the state as well as through donations and international funding. Centres usually provide both non-residential and residential support as they sometimes provide emergency accommodation as well. Approximately 20 women's centres provide counselling/psychological support, legal advice, referrals, and representation at court/police/social services. Ten centres, approximately, provide housing advice and employment, and approximately 15 centres offer

financial and social welfare support/advocacy. In 2022, women's centres supported 1,500 women in Bulgaria.

Regarding specialist support, six women's centres provide specialist support for survivors of forced marriage and approximately 10 to 12 centres provide support for survivors of trafficking in persons (in Burgas, Varna, and Sofia). Women's centres do not provide specialist support for older women, transgender women, or black and minority ethnic women.

Women's centres also provide specialist support for survivors of sexualised violence (SV) including, specialist forensic and medical care, specialist psychological care, specialist SV advocacy services as well as community awareness and education for prevention.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There is one rape crisis centre for survivors of sexualised violence in Bulgaria, located in Burgas. The centre provides specialist forensic and medical care, specialist SV advocacy services, community awareness and education for prevention as well as counselling, information, and

referrals. This service is funded by the state and through donations and is only accessible to women and girls. There are no other services for survivors of sexualised violence in Bulgaria.

5. PRIMARY PREVENTION SERVICES

👏 There is a National Action Plan on violence against women and girls in Bulgaria for the period 2020–2025, which includes specific provisions on the primary prevention of VAWG. There is no official definition of primary prevention in Bulgaria. The state funds primary prevention activities.

Such activities include school-based primary prevention programmes, training for primary prevention practitioners, and awareness-raising campaigns or programme. Beneficiaries of these activities are the general public, girls and boys under the age of 18, as well as women and men.

² Information from the WAVE Country Report 2021.

³ Number of female population per centre based on an estimate of 25 women's centres in Bulgaria.

CROATIA

GENERAL COUNTRY INFORMATION

Population	3,862,305
Female population	2,000,012
Member of Council of Europe (year)	1996
Member of European Union (year)	2013
Member of United Nations (year)	1992
CEDAW ratified (year)	1992
CEDAW optional protocol ratified (year)	2001
Istanbul Convention signed (year)	2013
Istanbul Convention ratified (year)	2018



SUMMARY

► There are two national women's helplines in Croatia, which are free of charge and available 24/7. Therefore the country **does meet** the Istanbul Convention (IC) standards for the provision of a women's helpline. There are 25 shelters accessible to women in Croatia with a total of 346 beds. With 10% of the necessary beds missing, Croatia **does not meet** the Istanbul Convention standards for the

provision of women's shelters. There are 61 women's centres in the country and two sexual violence referral centres. There is no National Action Plan on violence against women (VAW) in the country. The state and other national/local actors collect data on women's specialist services and this data is available upon request.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
2	Yes	Yes	Yes	1,619 calls; 1,300 callers ⁴

☎ There are two state-wide women's helplines in Croatia, which are available 24/7 and are free of charge. The first women's helpline is the Autonomous Women's House Zagreb (*Autonomna ženska kuća Zagreb*, tel.: +385 0800 5544)⁵ which provides support for survivors of all types of VAW in Croatian, English, French, and Italian. The helpline has recorded 1,619 calls and 1,300 callers in 2022. The other helpline is Women's Help Now - SOS Telephone for Women and Children Victims of Violence (*Ženska pomoć sada – SOS telefon za žene i djecu žrtve nasilja*, tel.: +385

800655222), which is also free of charge, is available 24/7 and is run by *Ženska pomoć sada*. The helplines receive funding from the state, donations, as well as international funding. The three most common forms of violence reported by callers were family violence, rape and violation of children's rights. There are other regional helplines that are specialised in specific forms/survivors of VAW. Additionally, the National Call Centre for Victims of Crime (*Nacionalni pozivni centar za žrtve kaznenih djela i prekršaja*, tel.: +385 116006) provides support to all survivors of crime.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN		EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
		24/7 ACCESS				
11	25	Most	346	40	10%	11,163

🏠 There are 25 shelters accessible to women survivors of VAW in Croatia, and 11 of them are only accessible to women. Eight of them are run by women's NGOs with a gender-specific/feminist approach. Most of the shelters

have 24/7 access. On average, women can stay in the shelters for up to one year and are not required to pay for their accommodation. The main reasons why women's shelters have to decline referrals are the lack of space/

⁴ Data available for the helpline Autonomous Women's House Zagreb (*Autonomna ženska kuća Zagreb*)

⁵ In 2023, Autonomous Women's House Zagreb was granted the EU-wide standard helpline number for survivors of violence against women. The number is 116 016.

capacity to accommodate the survivor with her children, survivors are not eligible for support, or the shelters are not adequately equipped for the needs of the women/children.

Women’s shelters are located in most regions and receive funding from the state, donations by trusts, foundations and individuals as well as international funding. The most common types of violence reported by survivors are gender-based violence, family violence, and threats. The women’s shelters provide in-house services such as casework, counselling, referrals/collaboration with other services, practical advice and legal advice.

Some of the shelters provide access to women with uncertain residence status/undocumented women, homeless women, women with physical disabilities, women with substance abuse issues, older women and women with older sons. Additionally, there are specific shelters in Croatia that provide support to vulnerable groups e.g., migrant/undocumented women, women with disabilities, BME (black and minority ethnic) women, LGBTQI+ people, older women, or women survivors of specific forms of violence such as trafficking, honour-based violence, forced marriage and female genital mutilation. Some faith-based organisations provide services for homeless people, older people, survivors of trafficking, people with substance abuse problems, unaccompanied children, and people with disabilities.

3. WOMEN’S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN’S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
61	32,787	N/A

❖ There are 61 women’s centres in Croatia, which are located in all regions of the country. They provide different services, such as counselling/psychological support, legal and housing advice, financial and social welfare support/advocacy, employment, referrals, and representation at court/police/social services. The main sources of funding for women’s centres are state funding from national/local authorities, donations, and international funding.

There are centres that offer specialised support for survivors of trafficking in persons, women with uncertain residence status/undocumented women, women with disabilities, older women and transgender women. Some women’s centres provide specialist support for survivors of sexualised violence (SV), such as needs assessment, specialist psychological care, as well as specialist SV advocacy services, and community awareness and education for prevention.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE

☂ There are two sexual violence referral centres and two specialised helplines in Croatia. The support provided by SV support services includes needs assessment, specialist psychological care, specialist SV advocacy services, and community awareness and education for prevention.

There are no rape crisis centres or crisis/medical services centres. The SV services are in the capital city only and are available for women aged 18+ only. They are financially supported by state funding from local/national authorities, donations and international funding.

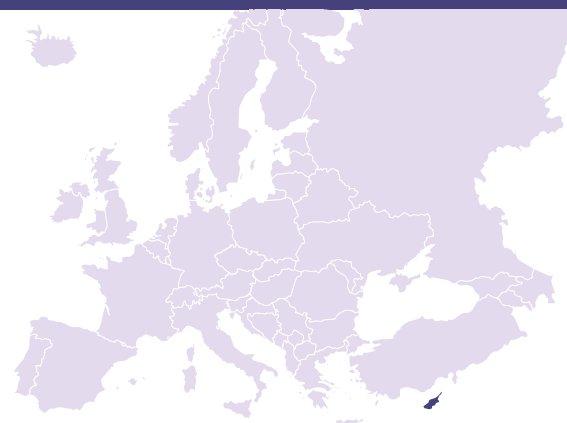
5. PRIMARY PREVENTION SERVICES

👏 There is no National Action Plan on violence against women and girls (VAWG). There is no official definition of primary prevention. School-based primary prevention programmes and awareness-raising campaigns or programmes are among the primary prevention activities that are carried out for the general public.

THE REPUBLIC OF CYPRUS

GENERAL COUNTRY INFORMATION

Population	904,705
Female population	463,622
Member of Council of Europe (year)	1961
Member of European Union (year)	2004
Member of United Nations (year)	1960
CEDAW ratified (year)	1985
CEDAW optional protocol ratified (year)	2002
Istanbul Convention signed (year)	2015
Istanbul Convention ratified (year)	2017



SUMMARY

► In the Republic of Cyprus, there is one national women's helpline, which is free of charge, operates 24/7 and provides multilingual support. Therefore, the Republic of Cyprus **does meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. There are four women-only shelters that offer 79 beds. With 13% of the necessary beds missing, the Republic of Cyprus **does not meet** the IC standards on the provision of women's shelters. There is one women's centre in the country, which provides several services including specialist support for survivors of sexualised violence (SV). The National Strategy and the National Action Plan on violence against women and girls (VAWG) in the Republic of Cyprus have been adopted for the period of 2023–2028. The state does collect data on women's specialist services, and this data is available upon request.

In the northern part of Cyprus, there is one women's helpline, which is free of charge, available 24/7, and provides multilingual support based on the capacity and skills of the staff members. Additionally, there is only one women-only

shelter with 48 beds available and two women's centres. There are no specialised services for women and girls who have experienced SV in northern Cyprus. There is a National Action Plan on VAWG in northern Cyprus, specifically, the Domestic Violence Action Plan. In northern Cyprus, the authorities do not collect data on women's specialist services.

The Republic of Cyprus does not exercise control over the northern territory of the country, which is administered by Turkish Cypriot authorities. Therefore, it is not possible to identify a gap between ratification and effective implementation of the Istanbul Convention, because although the Republic of Cyprus has ratified the Convention, it cannot implement it in the northern part of the country. Since it does not exercise control over that territory, it cannot be held responsible for any gaps in implementation in the northern part of the country. For these reasons, the services of the Republic of Cyprus, where the government exercises direct control, and those of northern Cyprus are presented in separate sections under this profile.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	Yes	9,095 calls

☎ In the Republic of Cyprus, there is one national women's helpline for survivors of domestic violence and all forms of gender-based violence. It is called National Helpline 1440 (for people living in the Republic of Cyprus: tel.: 1440, for people calling from abroad: tel.: +357 22339001), and is run by the Association for the Prevention and Handling of Violence in the Family (SPAVO), an association that also provides women's shelters and centres services. The helpline is free of charge and operates 24/7. It offers

multilingual support in Greek and English. The SPAVO helpline also offers a live chat and an SMS service (tel.: +357 99984042). The helpline receives funding from the state's national and local authorities. In 2022, it received 9,095 calls. The most common forms of violence reported were psychological, physical, and financial violence. There are no other helplines providing support for survivors of VAW.⁶

⁶ SPAVO has signed a declaration of commitment with the Ministry of Justice and Public Order of the Republic of Cyprus to operate the European Hotline for Women Victims of Violence 116 016; the approval by the Council of Ministers is pending.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
	4	5	Yes	79	11,5	13%

There are four women-only shelters in the Republic of Cyprus, with a total of 79 beds available for both adults and minors. Three of the women-only shelters are for women survivors of domestic violence and one, called Sophie's House, is for young or underage mothers who are asylum seekers. If shelters exceed their capacity, SPAVO rents alternative safe accommodation that offers the same services as shelters. All shelters offer 24/7 access and women are not expected to pay for their accommodation. Funding for women-only shelters comes from the state as well as donations. The women-only shelters are run by women's NGOs with a gender-specific/feminist approach. Sophie's House operation was undertaken by SPAVO in April 2023.⁷ Women-only shelters are currently only in the major cities Nicosia, Limassol, and Pafos.⁸ Women are allowed to stay up to six months in women-only shelters. However, all cases are evaluated individually, and women may stay in a shelter for longer. If women-only shelters have to decline referrals, the main reasons are the lack of space/capacity to accommodate the survivor with her children, the survivor being ineligible for support, or the shelter not being adequately equipped for the needs of the women/children. Women-only shelters provide in-house services such as casework, counselling, vocational support, referrals/collaboration with other services, and practical advice. Since 2020, SPAVO introduced the Childcare

Support programme in its shelters, which provides childcare and training on parental skills. In 2022, 445 women and 444 children were accommodated in women-only shelters and the most common types of violence reported by the clients were psychological, financial, and physical violence.

In terms of accessibility, all women-only shelters can accommodate women with uncertain residence status/undocumented women, homeless women, women with cognitive disabilities, women with substance abuse issues, and older women. Most women-only shelters are accessible to women with physical disabilities, while some women-only shelters can accommodate women with older sons (14 years and above).

In cases of men, transgender people, and LGBTIQ+ survivors of domestic violence, SPAVO offers alternative safe accommodation that offers the same services as in its women-only shelters. If survivors cannot be accommodated in women's shelters and there is no available alternative safe accommodation offered by SPAVO, they are referred to the Social Welfare Services to arrange accommodation for them. Additionally, there is a shelter for survivors of trafficking which is managed and operated by the Social Welfare Services.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
1	463,622	Women's NGO (1 centre)

There is one women's centre in the Republic of Cyprus called Woman's House, which is only for women survivors of VAW. Woman's House is located in the capital, Nicosia, and is run by the Association for the Prevention and Handling of Violence in the Family (SPAVO). The centre was opened in December 2020 by ministerial decision, and the government designated SPAVO to lead the centre, ensuring full funding by the state for two years. Cases from other regions may also be referred to Woman's House if it is deemed necessary by the police and/or the Social Welfare Services. Also, survivors of rape and SV are referred to Woman's House regardless of their province of residence. Woman's House is operated by professionals

from various specialities and government officials, such as clinical psychologists, social workers, Social Welfare Services officers, and specially trained members of the Cyprus Police, who work under the same roof and provide appropriate non-residential support services to women survivors of violence and their children. Support services provided include immediate and short-term counselling/psychological support, legal advice, medical examination, financial and social welfare support/advocacy, as well as housing advice, employment, and referrals. Survivors' accompaniment to other services is provided by the Woman's House Crisis Intervention Team. The centre can also provide a written and visual testimony for the survivors

⁷ Since 2023, following a Ministerial Decision of the Deputy Ministry of Welfare, SPAVO has run Sophie's House. The programme addresses migrant young and underage mothers who have arrived in Cyprus as asylum seekers or survivors of trafficking. As of September 2023, the programme hosts 12 young women and 11 newborns and children. It provides these women with a safe space to live, as well as practical support, counselling, accompaniment, childcare, training on parental skills, vocational support, medical services, and legal counselling.

⁸ SPAVO will soon operate its fourth shelter for women survivors of domestic violence in the province of Larnaca, which will also serve survivors from the province of Ammochostos.

and take security and protection measures. Additionally, multi-agency meetings take place when needed. In 2022, 395 women were supported by Woman's House.

Woman's House provides specialist support for survivors of domestic violence, stalking, forced marriage, honour-based violence, female genital mutilation, and trafficking in persons and for women with uncertain residence

status/undocumented women, black and minority ethnic women, women with disabilities, and older women. Woman's House also provides specialist forensic and medical care, needs and risk assessment, specialist psychological care, specialist SV advocacy services as well as community awareness and education for prevention support services for survivors of SV.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There are support services for survivors of SV in the Republic of Cyprus that are provided by Woman's House, including crisis/medical services, specialist forensic and medical care, needs and risk assessment, specialist psychological care, specialist SV advocacy services as well as community awareness, and education for prevention. All three communication outlets of the SPAVO Helpline (1440,

live chat, and SMS) offer support to survivors of SV and make necessary referrals to competent authorities and the Woman's House. Woman's House is located in Nicosia and is available for women and girls. Survivors of rape are referred to the Woman's House regardless of their province of residence. Funding comes from the state's authorities.

5. PRIMARY PREVENTION SERVICES

👤 There are a National Strategy⁹ and a National Action Plan¹⁰ on VAWG in the Republic of Cyprus for the period of 2023–2028. Individual goals and priorities arising from both the Istanbul Convention and the basic implementation of the law entitled "On the Prevention and Handling of Violence against Women and Domestic Violence" are included, as well as priorities arising from the Evaluation Report provided by GREVIO (Group of Independent Experts on Action against Violence against Women and Domestic Violence) regarding the degree of compliance of

Cyprus with the IC provisions. There is an official definition of primary prevention in the Republic of Cyprus. The state funds primary prevention activities. Activities conducted in Cyprus include school-based primary prevention programmes, training for primary prevention practitioners, and awareness-raising campaigns or programmes. The beneficiaries of such activities are the general public, girls and boys under the age of 18, men, women, and LGBTQI+ people.

NORTHERN CYPRUS

1. NATIONAL WOMEN'S HELPLINES

📞 There is one women's helpline in the northern part of Cyprus, called Hello 183 Notice line (*Alo 183 ihbar hattı*, tel.: +90 183), which is free of charge and available 24/7. This helpline provides support to women survivors of all forms of violence against women. However, the services provided by the support line are limited and the helpline functions more as a referral service. This helpline also accepts calls from children and other people with various vulnerabilities. The helpline mainly provides support in Turkish; however, based on the language skills of the staff member, it can also provide support in English. The helpline is run by the social services department functioning under the Ministry of Employment and Social Security and is funded by the central authorities. In 2022, the helpline received 55 calls and the most common forms of violence reported were physical, psychological, and economic violence.

There are two other regional helplines in northern Cyprus, the Association of Women to Support Living helpline (tel.: +90 03922270751) and the Nicosia Turkish Municipality's helpline (tel.: +90 5338553030). These offer psychological support, legal advice, counselling, education and health services, and can refer women to women's specialist services.¹¹ There is another helpline that offers support for survivors of violence from the LGBTQI+ community, including transgender women survivors of domestic violence, provided by Queer Cyprus Association & Famagusta Youth Centre (MAGEM) Office (tel.: +90 542 8585847). This helpline provides a referral service and in 2022 it received 114 calls.

9 National Strategy for the Prevention and Control of Violence against Women 2023-2028, <http://www.familyviolence.gov.cy/upload/20230629/1688033752-24151.pdf>.

10 National Action Plan for the Prevention and Control of Violence against Women 2023-2028, <http://www.familyviolence.gov.cy/upload/20230629/1688033994-24215.pdf>.

11 Information about the regional helplines from WAVE Country Report 2021.

2. SHELTERS ACCESSIBLE TO WOMEN

🏠 There is one women-only shelter in northern Cyprus which is located in Nicosia and offers 48 beds. With this new shelter established in 2021, the number of beds is enough to meet the current needs of the survivors, according to the level of awareness in the community. There are four beds in each room. Thus, women can stay in their rooms with their children. The shelter is run by municipal staff of the Turkish Municipality of Nicosia and is funded by the authorities as well as international funding (the initial project was funded by the European Union). The shelter provides 24/7 access: women can call any helpline and will be referred to staff who will escort them to the shelter on a 24/7 basis. Women are not expected to pay for their accommodation. On average, women are allowed to stay between three and six months. This period can be extended up to 12 months in cases of emergency. In general, the only time women are declined from the shelter is if they did not experience VAW or if they are women with

substance abuse issues or cognitive disabilities. The most common types of violence reported by clients were physical violence, economic violence, and psychological violence. Besides accommodation, the shelter offers referrals, casework, practical advice, and legal advice. Survivors are mainly in need of referrals and casework, for example, to ensure children's registration in schools and to find work; this is specifically applicable to survivors who have not been working for a substantial amount of time. In 2022, 51 survivors were accommodated in the shelter.

The shelter is accessible to women with uncertain residence status/undocumented women, homeless women, women with physical disabilities, older women, transgender women, and women with sons up to the age of 15. There are no specific shelters for vulnerable groups, or women survivors of specific forms of violence.

3. WOMEN'S CENTRES

❖ There are two women's centres in northern Cyprus. The first one is the municipal women's centre that is run by the Turkish municipality of Nicosia and the second belongs to the Association of Women to Support Living, which provides referral and counselling/psychological support services only. Two women's centres previously managed by the municipality of Kyrenia and by the central government have been halted.¹² The municipal women's centre offers counselling/psychological support, legal advice, financial and social welfare support/advocacy, housing advice, employment, and referrals as well as representation at court/police/social services. However, it does not offer specialist support for survivors of specific forms of violence and for survivors from vulnerable groups. The Association of Women to Support Living's women's centres also helps survivors of forced marriages, honour-based violence, and

human trafficking.¹³ The Turkish Cypriot Bar Association can provide legal advice and assistance for survivors of trafficking in persons, and the Refugee Rights Association provides legal and psychological support for migrant and refugee women.¹⁴

The centres operate mainly through international funding. The northern part of Cyprus is considered outside of the European Acquis Communautaire; therefore, NGOs cannot apply for EU funding. The only funding available to the Turkish Cypriot Community is via special community-specific grants by the EU.

Women's centres also provide specialist psychological care for survivors of sexualised violence.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There are no specialised services for women and girls who have experienced sexualised violence in northern Cyprus.

5. PRIMARY PREVENTION SERVICES

👤 The Domestic Violence Action Plan was published in 2017. Only one provision of the plan which relates to legal aid has been put into place, and no updates, amendments or follow-up reports have been published afterwards.

There is no official definition of primary prevention in northern Cyprus, nor do the authorities fund primary prevention activities.

12 The Kyrenia Municipality has stated they will re-open the support services; however, as of October 2023, they are not functioning.

13 Information from WAVE Country Report 2021.

14 Ibid.

THE CZECH REPUBLIC

GENERAL COUNTRY INFORMATION

Population	10,516,707
Female population	5,332,932
Member of Council of Europe (year)	1993
Member of European Union (year)	2004
Member of United Nations (year)	1993
CEDAW ratified (year)	1993
CEDAW optional protocol ratified (year)	2001
Istanbul Convention signed (year)	2016
Istanbul Convention ratified (year)	No



SUMMARY

► There is one national women's helpline in the Czech Republic which is free of charge, but is not available 24/7. Therefore, the Czech Republic **does not meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. There are seven women-only shelters with 200 beds available in the Czech Republic. With 81% of the beds missing, the Czech Republic **does not meet** the IC standards for the provision of women's shelters. In the Czech Republic, there are 26 women's centres, of which

five are run by women's NGOs and are only for women survivors of VAW, while the others are for all survivors of violence. There are also two sexual violence referral centres and two specialised hotlines. There is a National Action Plan on violence against women and girls (VAWG) in the Czech Republic, which has a specific chapter on prevention and related activities. The state does not collect data on women's specialist services.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
0	-	-	-	-

📞 There is no national women's helpline in the Czech Republic in 2022. The women's NGO ROSA Centre for Women (*ROSA – centrum pro ženy*) launched a new helpline called Rosalin Helpline (tel.: +420 800 60 50 80), which started operating free of charge and 24/7 in 2023. There is also a helpline for survivors of sexualised violence run by the NGO proFem (available on Tuesdays and Thursdays for two hours at a time).

There is a helpline for victims of criminality and domestic violence in the Czech Republic, operating free of charge and 24/7, and run by the organisation White Circle of Safety (*Bílý kruh bezpečí*, tel.: +420 116006). However, it does not follow a gender-sensitive and feminist approach.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN		EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
		24/7 ACCESS				
7	22	Some	200 ¹⁵	852	81%	52,584

🏠 There are seven women-only shelters in the Czech Republic, with 200 beds available, and some of them are accessible 24/7. The number of shelters and beds is insufficient to meet the needs of survivors in the country. One women-only shelter is run by a women's NGO with a gender-specific/feminist approach, one is run by another NGO, three shelters are run by faith-based organisations,

and two women-only shelters are run by municipalities. All shelters require women to pay for their accommodation around 120 CZK (ca. 5 euros) per day. Women-only shelters receive funding from national/local authorities, donations, and international funding, although the state support is insufficient. Women-only shelters are located in major cities only, and women can stay for up to a year. The

¹⁵ This number refers to the beds in the seven women-only shelters.

main reasons for having to decline referrals are the lack of space/capacity to support the survivor or to accommodate the survivor with her children as well as the survivor's ineligibility for support. The three types of services most often provided by women's shelters are counselling, referrals/ collaboration with other services, and practical advice.

All the women-only shelters are accessible to older women, and most of them are accessible to homeless women. Some women-only shelters accommodate women with physical disabilities, women with cognitive disabilities, women with substance abuse issues, as well as women with older sons (14 years and above). None of the women-only shelters are accessible to women with uncertain

residence status/undocumented women. There is also one shelter that provides services specifically to survivors of trafficking, as well as a specific shelter for migrants.

There are 15 other shelters that can provide accommodation in the Czech Republic. These shelters are accessible to both women and men. Nevertheless, these shelters are not specialised in supporting survivors of VAW and do not have a gender-specific and feminist approach but are focused on resolving the housing needs of individuals, rather than specifically helping women survivors of VAW. These shelters offer a total of 175 beds and some of them have 24/7 access. Most shelters are available for mothers and their children, and are run by faith-based organisations.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
26	205,113	Women's NGOs (5 centres); Other NGOs (N/A); State (N/A)

❖ There are 26 women's centres in the Czech Republic, of which five are only for women survivors of VAW, are run by women's NGOs and have a gender-sensitive approach. The women-only centres are located only in major cities and receive international funding. The other centres are open to all survivors of violence and are run by other NGOs and government agencies. All centres provide counselling/psychological support, referrals, financial and social welfare support/advocacy, and housing advice, with most also providing legal advice and representation at court/police/social services. Most centres provide only non-residential support. There are no centres providing specialist support for survivors of forced marriage, female genital mutilation, or honour-based violence or to women with uncertain residence status/undocumented women, black

and minority ethnic women, women with disabilities, older women, transgender women, or non-binary people. However, these vulnerable groups can find support in existing women's centres. Three centres provide support to survivors of trafficking. Women's centres also provide specialist support to survivors of sexualised violence (SV), such as specialist psychological care and specialist SV advocacy services. Approximately, 1,400 women were supported by women's centres in 2022.

Out of the 26 centres, 15 are intervention centres that focus on support as a follow-up to police intervention. However, they do not fulfil the definition of women's specialist service as they do not perceive violence as a gendered issue, nor do they apply a gender-sensitive approach.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There are two sexualised violence referral centres in the Czech Republic, which provide specialist psychological and specialist SV advocacy services. These services are in Prague (proFem) and Brno (Persefona), and are funded by several resources, including the state (mainly through European funding), donations as well as international funding.

One centre is for survivors over the age of 18, while the other supports survivors over the age of 16. There are no specific rape crisis centres or crisis/medical services for survivors of sexualised violence. There are two specialised helplines (mentioned above) and there is an NGO called Konsent focusing on awareness and education.

5. PRIMARY PREVENTION SERVICES

👏 There is a National Action Plan on VAWG in the Czech Republic for the period of 2019–2022.¹⁶ The NAP has a specific chapter on prevention and preventing activities. Specifically, it mentions education, awareness-raising campaigns, and data collection, yet quite generally. There is no official definition of primary prevention (PP) in the Czech Republic, nor does the state fund primary prevention activities. PP activities are mostly funded by international

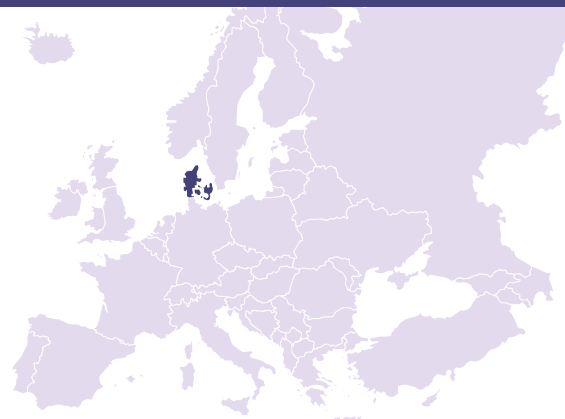
resources (OSF, Norwegian funds) or by individual resources of civil society organisations. PP activities carried out in the Czech Republic include feminist self-defence training and awareness-raising campaigns or programmes. Beneficiaries of such activities are the general public as well as boys and girls under the age of 18. Both activities are scarce and do not take place on a regular basis.

¹⁶ Office of the Government of the Czech Republic, Action Plan for the Prevention of Domestic and Gender-based Violence for 2019–2022 (2019), <https://www.vlada.cz/assets/ppov/rovne-prilezitosti-zen-a-muzu/dokumenty/AP-Prevention-DGBV-2019.pdf>

DENMARK

GENERAL COUNTRY INFORMATION

Population	5,873,420
Female population	2,950,505
Member of Council of Europe (year)	1949
Member of European Union (year)	1973
Member of United Nations (year)	1945
CEDAW ratified (year)	1983
CEDAW optional protocol ratified (year)	2000
Istanbul Convention signed (year)	2013
Istanbul Convention ratified (year)	2014



SUMMARY

► There is one national women's helpline in Denmark, which is free of charge, operates 24/7 and offers multilingual support. This means that Denmark **does meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. There are 70 women-only shelters in Denmark as well as 15 other shelters available to women with a total of 878 beds. Therefore, Denmark **does meet** the IC standards for women's shelter provision.

Denmark has several women's centres offering a range of services and specialist support, including for women survivors of sexualised violence. There is a National Action Plan on violence against women and girls in Denmark, which includes specific provisions on primary prevention. The state collects data on women's specialist services and this information is publicly available.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	Yes	6,222 calls

☎ Denmark has one national women's helpline called Live Without Violence's National Hotline (*Lev Uden Volds nationale hotline*, tel. +45 1888), which is run by *Lev Uden Vold*, and is free of charge, available 24/7 as well as offers multilingual support in any language provided by the interpretation service. The helpline is not exclusively for women as any survivor of domestic or intimate partner violence as well as relatives, survivors of rape, and perpetrators can call. In 2022, the helpline registered 6,222 calls. The most

common forms of violence reported were psychological violence, physical violence, and sexualised violence. Funding for the helpline comes from national and local authorities.

In addition, there are three other helplines that offer support to survivors of violence namely the Danish Stalking Center (tel.: +45 25177374), Danner (tel.: +45 33330047), and Mother's Aid (*Mødrehjælpen*, tel.: +45 33458600).

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN		EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
		24/7 ACCESS				
70	85	Most	878	0	0%	6,690

🏠 There are 70 women-only shelters in Denmark with a total of 745 beds. The number of women-only shelters almost doubled since 2017, and there is a dramatic increase in the number of commercial actors offering shelter accommodation. This dramatic increase in the number of shelters also means an increase in the financial expenses for the municipalities. Most women-only shelters are

accessible 24/7 and accommodation is funded by the municipality with a 50% state reimbursement. Women are required to pay 12 euros per day to cover shelter expenses such as the use of water, electricity, and Wi-Fi. However, if a woman has a low income or has economic obligations concerning housing expenses elsewhere, she can apply for an exemption. Thirty-two women-only shelters are

led by women's NGOs with a gender-specific and feminist approach, four are led by other NGOs, two are led by faith-based organisations, and eight are led by the state. In addition, there are 22 private commercial shelters. Women-only shelters exist in all five regions of Denmark, but not all municipalities. Women are allowed to stay as long as they need, but the average length of stay is between three and four months.

All women-only shelters are accessible to older women and some to women with uncertain residence status, homeless women, women with physical and/or cognitive disabilities, women with substance abuse issues, transgender women, and women with older sons. There are specific shelters for LGBTQI+ people and survivors of honour-based violence. If women-only shelters declined referrals it was due to a lack of space, survivors not being eligible for support, and

shelters referring survivors to other shelters for safety reasons. The three most common types of violence reported were psychological violence, physical violence, and digital violence. The in-house services most often provided by women-only shelters are casework, counselling, referrals as well as legal and practical advice. In 2021, women-only shelters accommodated 2,618 women.

In addition, there are 15 other shelters in Denmark that can provide support to survivors of violence against women with a total of 133 beds. The groups supported by these shelters are individuals with different social problems aside from being survivors of violence, such as substance abuse issues, psychological problems, and homelessness. These shelters are available to women, men, non-binary people, transgender women, and men. Some of them offer 24/7 access.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
35 ¹⁷	84,300	Women's NGOs; State

❖ There are numerous women's centres in Denmark providing non-residential support to all survivors of violence, including women. It is difficult to give an accurate figure but there is an estimate of 35 women's centres in Denmark, some of which also operate as a shelter. Women's centres are located in most regions of the country. Only a few shelters and women's counselling centres are based on a gender-specific approach to violence, and organisations such as *Joan-Søstrene*, *Center for Magtanalyse*, *Q-værk*, *Q-net* and a lot of small local associations offer counselling to women survivors. Centres offering non-residential support to all survivors include *Mødrehjælpen*, *Dialog mod Vold* (for perpetrators as well as survivors), *Offerrådgivningen*, and *Bryd Tavsheden*.

Most of these centres provide counselling and housing advice, *Danner* and *Joan-Søstrene* provide legal advice, *Mødrehjælpen* provides financial and social welfare support, and *Joan-Søstrene* and *Offerrådgivningen* provide

representation at the court/police. No women's centres provide employment support. Most women's counselling centres are run by women's NGOs while centres offering support to survivors of sexualised violence are provided by the state. In 2022, more than 12,000 women were supported by the different centres.

Five women's centres provide specialist support to survivors of forced marriage and honour-based violence and one centre provides support to survivors of trafficking. Women's centres also provide support to transgender women and non-binary people. No centre provides specialist support to survivors of female genital mutilation, women with uncertain residence status, black and minority ethnic women, women with disabilities, and older women. Many centres also provide specialist support for survivors of sexualised violence such as forensic and medical care as well as psychological care.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There are 13 rape crisis centres in Denmark, nine of which also operate as sexual violence referral centres, as well as crisis services, and a specialised helpline.¹⁸ The Center for Rape Victims based in Copenhagen runs nine regional centres, and four other centres provide specialised support to women and children who have experienced child sexual abuse or sexual exploitation. A range of support is provided by these services including specialist forensic and medical care and psychological care. Funding for sexualised violence support services comes from

the state and these services are found in most regions in Denmark. Services for survivors of sexualised violence in Denmark are available to all survivors, including women.

17 This figure is retrieved from the WAVE Country Report 2021 as figures from 2022 are not available.

18 This information is based on the WAVE Country Report 2021.

5. PRIMARY PREVENTION SERVICES

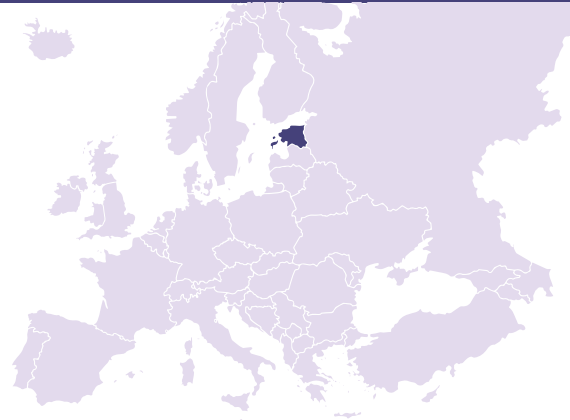
👏 There is a National Action Plan on violence against women and girls in Denmark, called the National Action Plan on Intimate Partner Violence and Partner Homicide for the period of 2023–2026, which includes provisions on primary prevention. Out of the 26 specific provisions outlined in the NAP, one refers to the creation of a creative

competition for young people on how to recognise violence and how to get help. However, there is no definition of primary prevention in the NAP, and it lacks a focus on the root causes of violence against women and the importance of addressing these in primary prevention activities. The state does not fund primary prevention.

ESTONIA

GENERAL COUNTRY INFORMATION

Population	1,331,796
Female population	698,381
Member of Council of Europe (year)	1993
Member of European Union (year)	2004
Member of United Nations (year)	1991
CEDAW ratified (year)	1991
CEDAW optional protocol ratified (year)	No
Istanbul Convention signed (year)	2014
Istanbul Convention ratified (year)	2017



SUMMARY

► There is one national women's helpline in Estonia that is free of charge, operates 24/7 and provides multilingual support. Estonia therefore **does meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. There are 18 women-only shelters with approximately 170 available beds. Estonia **does meet** the IC standards for women's shelter provision, and there is in fact an underusage of shelter beds. All women-only shelters also

provide non-residential services such as counselling and also operate as women's support centres. Estonia also has four rape crisis centres located in regional hospitals. There is a National Action Plan on violence against women and girls in Estonia which does include specific provisions on the primary prevention of VAWG. The state does collect data on women's specialist services and this information is available upon request.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	Yes	16,784 calls

☎ There is one national women's helpline in Estonia called the Victim's Crisis Helpline (*Ohvriabi Kriisitelefoni*, tel.: +372 116006). The Social Insurance Board Victim's Support Services (*SKA Ohvriabi*) is responsible for running and overseeing the helpline. The helpline is free of charge, available 24/7 and provides multilingual support in Estonian, English, Russian, and Ukrainian (18:00–20:00 on weekdays). The helpline is funded by the state and provides support for all forms of violence and all survivors, although about 70% of calls are from women survivors of violence. In 2022, the helpline received 16,784 calls, although it should be noted that not all calls related to VAW, and many calls also came from people who were lonely and needed someone to talk to, but did not experience violence. The most common

forms of violence reported were physical, sexualised, and psychological violence.

There are other helplines supporting survivors of VAW in Estonia, including 16 regional helplines run by women's support centres and operating 24/7. In addition, the organisation Lifeline (*NPO Elulii*) runs a specific helpline for survivors of human trafficking and sexual exploitation, available during limited hours.¹⁹ Lifeline also runs a helpline providing emotional support to anyone in a crisis situation, including for victims of violence, in English (tel.: +372 6558088) and in Russian (tel.: +372 6555688) and which is available Monday to Friday from 19:00–07:00.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN		EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
		24/7 ACCESS				
18	18	All	170	0	0%	7,834

¹⁹ Information on the different operating hours and phone numbers available here: <https://elulii.ee/inimkaubandusohvrite-ja-prostitutsiooni-kaasatute-noustamine>.

🏠 There are 18 women-only shelters in Estonia with approximately 170 beds. The number of beds is approximate, as there is no clear requirement from the state regarding the amount of beds needed. The sole requirement is that all victims who come to a shelter must be eligible to receive the necessary support, including accommodation if needed. The current number of beds in women-only shelters meets the country's needs, and there is in fact an underusage of beds as most women survivors (around 90%) who come to support centres do not need accommodation and rather seek counselling services.

All women-only shelters in Estonia offer 24/7 access and women are not expected to pay for their accommodation. Funding for women-only shelters comes from the state and donations, although state funding remains low and is based on the public procurement figures established in 2018. A funding increase was agreed in spring 2022, which will come into effect for the new public procurement and will be carried out in 2023. State funding covers the rent for shelters and counselling centres, crisis and social counsellors' salaries, and any necessary or critical supplies for women and children who stay in shelters. In certain cases, the state pays for psychological counselling, when shelters also operate as centres and provide this service. Sixteen women-only shelters are run by women's NGOs with a gender-specific and feminist approach, one is run by another NGO, and one by the municipality of Tallinn (the capital city). The state shelter is for mothers and children, and can accommodate up to 15 women.

Women-only shelters exist in all regions of Estonia and women can stay on average three to six months in shelters. Depending on their employment and income status,

survivors may stay up to a year, although in most cases they usually stay up to two weeks. The main reasons for having to decline referrals to women-only shelters are the survivor being ineligible for support and the shelter not being adequately equipped for the needs of the survivor, such as women with psychological/mental disorders (as there is a lack of specialists who can be present in the shelter 24/7). The three most common forms of violence reported to women-only shelters in 2022 were physical, sexualised and psychological violence. The types of in-house services most often provided by women-only shelters include counselling, referrals/collaboration with other services, and practical advice. Other services offered include legal advice and representation at court (although not offered by all shelters), psychotherapy and psychologists for children. According to the state, shelter services were provided to 347 women and 301 children in 2022.

Most women-only shelters are accessible to women with uncertain residence status/undocumented women and older women. Some are accessible to homeless women, women with physical and/or cognitive disabilities, transgender women, and women with older sons (14 years and above). Shelters are not accessible to women with substance abuse issues, as this could pose a risk to other residents. There is a need for specialised shelters for survivors with substance abuse issues in Estonia, but there is currently no funding for such services. There is one shelter working specifically with survivors of forced marriage (although there are few such cases), but no other specific shelters for vulnerable groups of survivors. There are no other shelters in Estonia which can provide support to victims of VAW.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
17	41,081	Women's NGOs (16 centres); State municipality (1 centre)

❖ There are 17 women's centres in Estonia which are only for women survivors of VAW. Sixteen such centres are run by women's NGOs and one by a state municipality. Each county has a women's support centre, which is almost always connected to a women-only shelter. The Social Insurance Board Victim's Support Services (Sotsiaalkindlustusamet) provides these services, and women's centres are financed by the state as well as through donations. All women's centres offer counselling/psychological support, legal advice, financial and social welfare support/advocacy, housing advice, and referrals. Ten women's centres also offer representation in court, at the police or social services. Women's centres in Estonia base their services on the individual needs of survivors, and can also provide further support such as financial literacy, employment practice interviews, and CV skills, among others. In 2022,

approximately 2,000 survivors were supported by women's centres in Estonia.

In terms of specialist support, all women's centres can provide specialist support to black and minority ethnic women, women with uncertain residence status/undocumented women and older women. Two centres provide specialist support to women with disabilities, transgender women and non-binary people, and one centre provides specialist support to survivors of trafficking. None of the women's centres are able to provide specialist support to women survivors of forced marriage, honour-based violence or female genital mutilation. Some women's centres also provide specialist support to survivors of sexualised violence, including specialist SV advocacy series.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☔ There are services for survivors of sexualised violence in Estonia, including four crisis/medical services which operate as rape crisis centres. The four major hospitals in Estonia provide specialist support to survivors of SV, which are geographically spread out in major cities. These centres provide mainly specialist forensic and medical care such as examinations, collecting evidence and injury notes, and storing data and information. They can also

provide crisis counselling if needed, but for further support, they would refer the survivor to a women's support centre. Other support provided includes needs assessment, specialist psychological care, specialist advocacy series, and community awareness and education for prevention. Funding for these services comes from the state and they are accessible to all survivors of sexualised violence, including women.

5. PRIMARY PREVENTION SERVICES

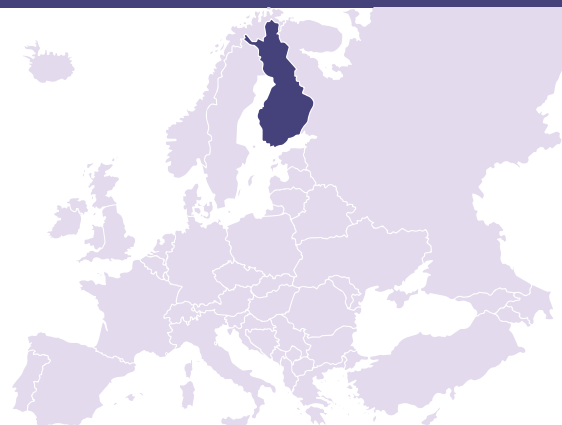
👤 There is a National Action Plan on violence against women and girls in Estonia which does include specific provisions on the primary prevention (PP) of VAWG. Namely, these are included in the long-term state strategies "Estonia 2035" and "Fundamentals of Criminal Policy until 2030". A broad definition of PP is included in the Violence Prevention Agreement for 2021–2025, where there are 14 areas of critical concern. Understanding of violence prevention is based on the World Health Organization's recommendations on a public health model, which emphasises the need to address the root causes of violence rather than just the symptoms. According to the

recommendations of the World Health Organization, attention should be given to education and social skills, support and assistance services, economic well-being, support for parenting and caregivers, a safe environment, norms and values, and legislation, among other aspects, for the prevention and reduction of violence. Primary prevention activities available in Estonia include training for primary prevention practitioners, bystander intervention training, self-care activities, and awareness-raising campaigns or programmes. However, the state does not fund PP activities. Beneficiaries of these activities are the general public, girls and boys under the age of 18, women and men.

FINLAND

GENERAL COUNTRY INFORMATION

Population	5,548,241
Female population	2,805,140
Member of Council of Europe (year)	1989
Member of European Union (year)	1995
Member of United Nations (year)	1955
CEDAW ratified (year)	1986
CEDAW optional protocol ratified (year)	2000
Istanbul Convention signed (year)	2011
Istanbul Convention ratified (year)	2015



SUMMARY

► There is one national women's helpline in Finland that is free of charge, operates 24/7, and offers multilingual support, as well as five other helplines supporting women survivors of different forms of violence. Therefore, Finland **does meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. There is one women-only shelter in Finland for migrant women and approximately 28 other shelters accessible to women with a total of 230 beds. Finland **does not meet** the IC standards for the provision of women's shelters, as 59% of the

necessary beds are missing. There are approximately 34 women's centres²⁰ in Finland as well as one rape crisis centre and multiple support centres for survivors of sexualised violence. There is a National Action Plan on violence against women and girls in Finland, which has a focus on primary prevention. The Finnish state collects data on the 24/7 helpline, shelters, and sexual violence support centres, but does not collect systematised data on women's specialist services that are run by NGOs.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	Yes	15,368 calls; 10,420 callers

☎ There is one national women's helpline in Finland called Zeroline against domestic violence and violence against women (*Nollalinja*, tel.: +358 80005005), coordinated by the National Institute for Health and Welfare, and serviced by the NGO *Setlementti Tampere*. The helpline is free of charge, available 24/7, and provides support in Finnish, English, and Swedish as well as support through interpretation in eight languages. In addition, survivors can also get in touch with a crisis worker via the *Nollalinja* chat service. The chat is open on weekdays from 9:00-15:00. In addition, the website is available in eight different languages. The helpline offers its services to all survivors of violence. *Nollalinja* is a special government service funded by the Finnish state through victim surcharges paid by offenders in criminal cases. In 2022, the helpline received 15,368 calls from 10,420 callers. The three most common forms of violence reported by callers were psychological, physical, and sexual violence as well as the threat of violence.

In addition, there are five other national helplines supporting survivors of violence in Finland. The Women's Line (*Naisten Linja*, tel.: +358 80002400) is run by an NGO with the same name and provides support to women survivors of all forms of VAW. In 2022, Women's Line received 3,533 calls of which they were able to answer 891. Helpline Monika (*Kriisikeskus Monika*, tel.: +358 80005058) is run by Monika's Women Association (*Monika-naiset liitto ry*) and provides support to migrant women. *Suvanto* Helpline run by Suvanto Association (*Suvanto, turvallisen vanhuuden puolesta ry*, tel.: +358 0505770218 or +358 0505770214) is specialised in supporting older women, and provides support to survivors of elder abuse. There is also a national helpline for survivors of human trafficking (*Ihmiskaupan uhrien auttamisjärjestelmä*, tel.: +358 0295463177) run by the Assistance System for Victims of Human Trafficking. Lastly, there is the Victim Support helpline (*Rikosuhripäivystys*, tel.: +358 116006) which is run by Victim Support Finland. All helplines are free of charge and offer support in

20 It is important to note that the term women's centres is not used in Finland. Rather, there are NGOs offering local services for all survivors of domestic violence. Most of these services are provided by appointment only, rather than through a walk-in service.

Finnish, English, and Swedish, while Helpline Monika also offers support in Russian and Arabic. Funding for these national women's helplines comes from the state and the

Centre for Social Welfare and Health Organisations (STEA) under state supervision.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
1	29	All	230	325	59%	24,123

There is one women-only shelter in Helsinki, the capital city of Finland, which has 14 available beds for families, operates 24/7, and is funded by the state. This shelter is run by the Monika Association and is specifically for migrant women survivors of VAW. Women are not expected to pay for their accommodation in the women-only shelter and also receive free meals. In 2022, there were 299 women with their children staying in the women-only shelter.

The women-only shelter is accessible to women with uncertain residence status, homeless women who have experienced intimate partner violence, women with physical and/or cognitive disabilities, women with substance abuse issues (although alcohol and drug use is prohibited in the shelter), older women, transgender women, and women with older sons. There are also plans to develop a shelter for women survivors of intimate partner violence with severe substance abuse problems.

In addition, there are 28 other shelters accessible to women in Finland with a total of 216 beds for families. All adults get their own room, which can accommodate their children. These shelters are available to women, men, non-binary people, as well as transgender women and men, and are available 24/7. Although these shelters are open to all, they are predominantly accessed by women and work

with a gender-sensitive approach. Shelters are coordinated and funded by the National Institute for Health and Welfare, an expert agency working under the Ministry of Social Affairs and Health. Women are not required to pay for their accommodation and can generally stay in the shelters for up to two months, depending on their needs during the crisis stage. On average, survivors stay in a shelter for 17 days. Of the 28 other shelters, 22 shelters are run by NGOs and six are run by local municipalities. Shelters in Finland are accessible to all survivors of specific forms of violence and survivors from vulnerable groups.

The main reasons for having to decline referrals were lack of space and capacity to support the survivor and to accommodate her with her children. The only women-only shelter in Finland has 14 places, so sometimes it can be full and cannot accommodate more survivors. All women are welcome in the shelters; however, the staff assesses the situation of the client, as experiences of violence against women determine whether access to the shelter is granted. For example, homelessness alone is not a reason to stay in the shelter. The most common types of violence reported by shelter clients were psychological violence, physical violence, and threat of violence. The main in-house services provided by shelters in 2022 were referrals to counselling services and practical advice.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
34	82,504	Women's NGO (1 centre); Other NGOs (13 centres); State (20 centres)

There are approximately 34 women's centres in Finland, of which three are for women survivors of violence only, and the rest are for all survivors of violence, including women. There is no state-wide information on these centres. One centre is run by a women's NGO, 20 are run by the state, and the others are run mainly by other NGOs. Funding for these centres comes from the state. The Federation of Mother and Child Homes and Shelters (*Ensi- ja Turvakotien Liitto*) has 22 daytime centres for domestic violence and violence against women survivors. Additionally, some other NGOs and some local municipalities have daytime help centres. The term women's centres is not used in Finland and there is no state-wide information on these centres, but there are an estimated 34 centres

in most regions of Finland providing specialist support to survivors of VAW.


Daytime help centres provide non-residential support services such as information and advice, counselling, advocacy, practical support, empowering support, and legal advice. In 2022, the 22 daytime centres that are part of the Federation of Mother and Child Homes and Shelters supported 3,051 women and 610 children.

Centres provide a range of services including counselling/psychological support, financial and social welfare support, representation at the court/police, legal advice, and housing advice. In addition, some centres offer support

to survivors of forced marriage, honour-based violence, female genital mutilation, trafficking, and women with uncertain residence status. Moreover, all centres provide specialist support to black and minority ethnic persons, women with disabilities, older women, transgender women, and non-binary people.


Some centres in Finland also provide a range of services for survivors of sexualised violence including specialist forensic and medical care, needs assessment, specialist psychological care, and specialist sexualised violence advocacy series. Most centres do community awareness and education for prevention.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

 In Finland, there is one rape crisis centre, The Rape Crisis Centre *Tukinainen*, and 20 sexual violence referral centres, called *Seri Support Centres* which also act as rape crisis centres. Many of these centres have opened in the last two years, and more centres are planned to open in the coming years. The Rape Crisis Centre Helpline (*Raiskauskriisikeskus Tukinainen*, tel.: +358 080097899), is run by The Rape Crisis Centre *Tukinainen*. In addition, there is a specialised helpline for survivors of sexualised violence run by *Oulaskangas Seri Support Centre*, which is available 24/7 (tel.: +358 505643769). Both types of centres provide

crisis and medical services, and are in local and university hospitals. The centres provide specialised forensic and medical care, assessment of the victim's needs, specialised psychological care, specialised SV advocacy, community awareness and education for prevention. They are present in most regions, and funded by the state and donations as part of the implementation of the Istanbul Convention in Finland. The Rape Crisis Centre *Tukinainen* is only accessible to women, while all the other centres are available to all survivors.

5. PRIMARY PREVENTION SERVICES

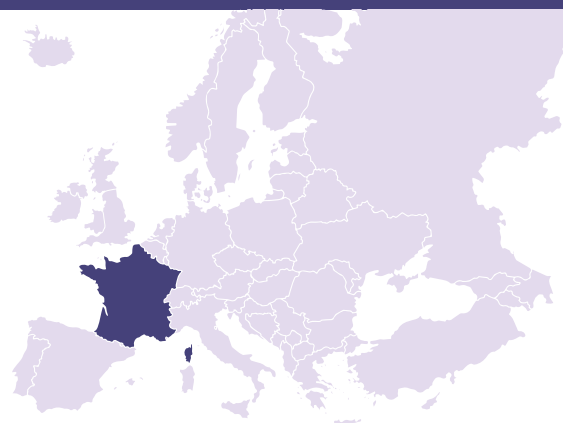
 There is a National Action Plan (NAP) on violence against women and girls in Finland, called the Action Plan for the Istanbul Convention for the period of 2022–2025, which has a central focus on primary prevention ranging from awareness raising to teaching safety skills for children. Over 50% of the first NAP provisions are directed towards primary prevention. The state funds primary prevention activities and there is a definition of primary prevention in the NAP. The primary prevention activities

available in Finland include school-based primary prevention programmes, training for primary prevention practitioners, self-care activities, and awareness-raising campaigns. The beneficiaries of these activities are the general public, boys and girls under 18, and women and men. The focus of prevention work is on schools and primary care, and in training professionals working in those fields. It should be noted that prevention work in Finland is quite general and not gender specific.

FRANCE

GENERAL COUNTRY INFORMATION

Population	67,871,925
Female population	35,035,940
Member of Council of Europe (year)	1949
Member of European Union (year)	1957
Member of United Nations (year)	1945
CEDAW ratified (year)	1983
CEDAW optional protocol ratified (year)	2000
Istanbul Convention signed (year)	2011
Istanbul Convention ratified (year)	2014



SUMMARY

► There is one state-wide women's helpline in France, which is free of charge, runs 24/7, and offers multilingual support. Therefore, France **does meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. There are 54 women-only shelters belonging to the National Network on Women Solidarity – FNSF and 57 other shelters accessible to women, offering in total approximately 4,905 beds. With 28% of the necessary beds missing, France **does not meet** the IC standards for

the provision of women's shelters. There are around 250 women's centres in France as well as support services for survivors of sexualised violence. France has a National Action Plan on violence against women and girls which also includes specific provisions on the primary prevention of VAWG. The State collects data on women's specialist services and this information is available on request, although the data collected is not comprehensive.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	Yes	177,989 calls; 122,753 callers

☎ There is one national helpline for women, called Women Violence Info (*Violence Femmes Info*, tel.: +33 3919) which is run by the National Network on Women Solidarity (*Fédération Nationale Solidarité Femmes*). The helpline is available 24/7, free of charge, and offers multilingual support in English, French, Spanish, and Arabic. The helpline provides support for survivors of violence, including forced marriage, female genital mutilation, sexual harassment at work, sexual harassment, and domestic violence. The funding for the helpline comes from national/local authorities as well as donations. In 2022, the helpline received 177,989 calls from 122,753 callers. The three most common forms of violence reported by callers were domestic violence, sexual harassment, and sexual harassment at work.

In addition, there are other free national helplines in France that offer specialist support for survivors of different forms of violence. For instance, there are helplines supporting survivors of sexualised violence (*Viols Femmes Informations*, tel.: +33 800059595), forced marriage (*SOS Mariages Forcés*, tel.: +33 130310505), and sexual harassment at work (*Violence Faites aux Femmes au Travail - AVFT*, tel.: +33 145842424). There are also different regional helplines such as the Family Planning helpline for questions about contraception, abortion, sexually transmitted infections, and sexual violence (*Planning Familial*, tel.: +33 800081111), the helpline for women with disabilities (*Femmes pour le Dire Femmes pour Agir*, tel.: +33 140470606) and the Information Centres National Foundation helpline for legal advice on women and family's rights (*Fondation Nationale des Centres d'Information sur les Droits des Femmes et de la Famille – FNCIDFF*, tel.: +33 142171200).

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
54	111	Most	4,905	1,882	28%	13,837

🏠 The National Network on Women Solidarity - FNSF (*Fédération Nationale Solidarité Femmes*) has 54 women-only shelters and 57 other shelters accessible to women, offering approximately 4,905 beds. The shelter provision in France is insufficient to meet the needs of survivors: in 2022, four out of ten women who applied for emergency accommodation were left without an adequate solution and ultimately only 12% of the requests made by women survivors of violence resulted in a referral to a place suited to their specific background.²¹ Most of the shelters offer 24/7 access, but this varies greatly across regions and there is no centralised approach to help women find accommodation.

Women-only shelters in France are financed by national/local authorities and donations, and women, depending on their financial circumstances, are expected to pay for their accommodation. Women-only shelters exist in most regions of France and women are normally allowed to stay there for three to six months. All shelters are accessible to homeless women and older women, most shelters are

accessible to women with physical disabilities and women with older sons, some shelters are accessible to women with uncertain residence status, women with cognitive disabilities, women with substance abuse issues, and transgender women. The main reasons why women-only shelters decline referrals are that no space is available, the survivors are ineligible for support, and/or the shelters are not adequately equipped for the needs of the women and their children. Domestic violence, sexual violence, and intra-family violence are the most common types of violence reported. The women-only shelters provide case-work, counselling, referrals, and practical as well as legal advice.

In France, different types of organisations run women's shelters. There are organisations with a gender/feminist approach (*Fédération Nationale Solidarité Femmes - FNSF, La Maison des Femmes*), women's NGOs (*CIDFF, SOS Femmes*), faith-based organisations (*Secours Catholique*) and other associations and local services (*Amicale, CHR, SIAO*).

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
250	140,144	N/A

✦ There are approximately 250 women's centres in France, of which 98 are part of the FNCDIFF network (*Fondation Nationale des Centres d'Information sur les Droits des Femmes et de la Famille*). The women's centres provide counselling, legal advice, financial and social welfare support, housing advice, employment, referrals, and representation at court/police. They provide specialist support to survivors of forced marriage, honour-based violence, female genital mutilation, trafficking in persons, women

with uncertain residence status, black and minority ethnic women, women with disabilities, older women, and transgender women. Funding for the women's centres comes from the state and donations, and they are located in most regions. Women's centres can also support survivors of sexualised violence through needs assessment, specialist psychological support, specialist sexualised violence advocacy services, and community awareness and education for prevention.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ Support services for survivors of sexualised violence are provided by rape crisis centres, sexual violence referral centres, crisis/medical services, and specialised helplines, as well as the public organisation called *Planning Familial* in all regions of France. They provide specialist forensic and medical care, specialist psychological care, and community awareness and education for prevention. Funding for sexualised violence support services comes from

national/local authorities and donations, and the services are for women, young women/children as well as other population groups. Additionally, there is an online portal to support survivors of sexualised violence (*Portail de signalement des violences sexuelles et sexistes*, via the website service-public.fr). It is free of charge, available 24/7 and consists of a chat with police officers trained to support and counsel survivors of sexualised violence.

5. PRIMARY PREVENTION SERVICES

👤 France has a National Action Plan on violence against women and girls and it includes specific provisions on the primary prevention of VAWG. The state funds primary prevention activities. However, there is no official definition of primary prevention in the country. Primary prevention activities available in France include school-based

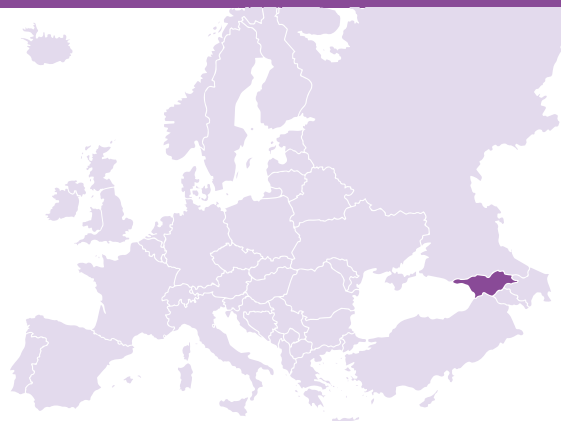
prevention programmes, training for primary prevention practitioners, bystander intervention training, self-care activities, and awareness-raising campaigns or programmes. The beneficiaries are the general public, girls and boys under the age of 18, women and men, as well as LGBTQI+ people.

²¹ Public Senat, *Violences conjugales : «Les chiffres nous montrent que les mesures du Grenelle ne sont pas suffisantes»*, 2 September 2022, retrieved 25 September 2023, <https://www.publicsenat.fr/actualites/societe/violences-conjugales-les-chiffres-nous-montrent-que-les-mesures-du-grenelle-ne-sont>.

GEORGIA

GENERAL COUNTRY INFORMATION

Population	3,688,647
Female population	1,918,652
Member of Council of Europe (year)	1999
Member of European Union (year)	No
Member of United Nations (year)	1992
CEDAW ratified (year)	1994
CEDAW optional protocol ratified (year)	2002
Istanbul Convention signed (year)	2015
Istanbul Convention ratified (year)	2017



SUMMARY

► There is a national women's helpline in Georgia which is free of charge, operates 24/7 and provides multilingual support. Georgia **does meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. There are nine women-only shelters in Georgia, four of which are run by women's NGOs and five by the state, with in total 170 beds. Georgia **does not meet** the IC standards for women's shelter provision, as 54% of the necessary beds are currently missing. There are also eight women's crisis centres in Georgia which are accessible to all

survivors of violence. There are no specialised services for survivors of sexualised violence in the country, although state-run centres and shelters do support survivors of SV. There is a National Action Plan (NAP) on violence against women and girls in Georgia, which includes specific provisions on the primary prevention of VAWG. The state does collect data on women's specialist services in Georgia and this data is available upon request.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	Yes	3,474 calls

☎ There is a national women's helpline in Georgia, namely the Agency for the State Care and Assistance to Victims of Trafficking (სახელმწიფო ზრუნვისა და ტრეფიკინგის მსხვერპლთა დაზარალებულთა დახმარების სააგენტო, tel.: +995 116006). The helpline is run by the Anti-Violence Network Georgia (AVNG) and the Democrat Women's Organisation of Samtskhe-Javakheti. The helpline is free of charge, operates 24/7, and offers multilingual support in

Georgian, English, and Russian. Funding for the helpline comes from the state as well as international funding. In 2022, the helpline received a total of 3,474 calls and the most common forms of violence reported were psychological and physical violence. There are other helplines supporting women survivors of VAW in Georgia, including five helplines run by local women's NGOs.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN		EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
		24/7 ACCESS				
9	9	All	170	199	54%	21,698

🏠 There are nine women-only shelters in Georgia, four of which are run by women's NGOs with a gender-specific and feminist approach with in total 50 beds. All women-only shelters offer 24/7 access, and women are not expected to pay for their accommodation in the shelter. Funding for women-only shelters comes from the state as well as

international funding. The main reasons why women-only shelters had to decline referrals were no space/capacity to support the survivor and the survivor being ineligible for support. The three types of in-house services most often provided by women-only shelters are casework, counselling, and legal advice. In 2022, the most common form of

violence reported by clients was physical violence. There are also five state shelters for survivors of VAW with a capacity of 120 beds, which are only accessible to women and their children. The maximum length of stay in a state-run shelter is nine months, while accommodation at the shelters run by women NGOs is more flexible.

In terms of accessibility, some of the women-only shelters are accessible to women with physical disabilities.

However, none of the women-only shelters in Georgia are accessible to women with uncertain residence status/undocumented women, homeless women, women with cognitive disabilities, older women, transgender women, and women with older sons (14 years and above). There are no specific shelters for survivors from vulnerable groups such as women with disabilities or older women, nor for specific forms of violence such as survivors of human trafficking or forced marriage.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
8	239,832	Women's NGOs (3 centres); State (5 centres)

❖ There are eight women's centres in Georgia, five of which are state-run crisis centres²² and three of which are crisis centres run by women's NGOs. All crisis centres are for all survivors of violence, including women survivors of violence against women. Since 2020, two crisis centres run by women's NGOs were closed. The centres offer non-residential support including counselling/psychological support, legal advice, housing advice, employment, referrals, and representation at court/police/social services.

Women's centres are only located in the capital city and are funded by the state as well as through international funding.

Specialist support is available for survivors of forced marriage, as well as to survivors of sexualised violence in the form of needs assessment and specialist psychological care, but no other vulnerable groups.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There are no specialised services for women survivors of sexualised violence in Georgia. However, legal counselling and survivor needs assessments are provided by all state-run women's crisis centres and shelters.

5. PRIMARY PREVENTION SERVICES

👏 There is a National Action Plan (NAP) on violence against women and girls in Georgia, the "National Action Plan on Combatting Violence Against Women and Domestic Violence and Measures to be Implemented for the Protection of Victims (Survivors) 2022–2024", which includes specific provisions on the primary prevention of VAWG. This National Action Plan was developed by the Inter-Agency Commission on Gender Equality, Violence against Women and Domestic Violence with UN Women

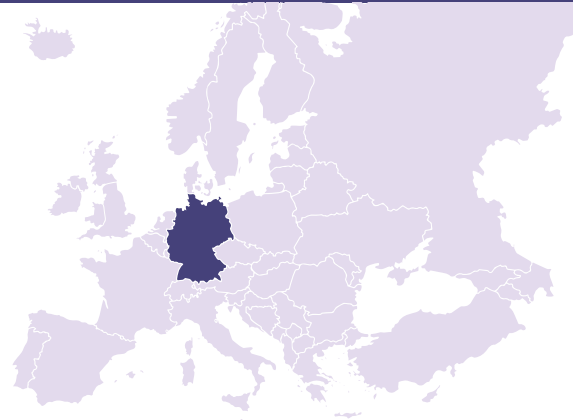
technical and financial support within the framework of the "Ending Violence Against Women and Girls in Georgia (EVAWGG)" programme. The programme is funded by the European Union and implemented jointly by UN Women and UNFPA. There is however no definition of primary prevention in the country nor in the NAP. The state does fund primary prevention activities and the available activities include awareness-raising campaigns and programmes. The beneficiary of these activities is the general public.

²² Two more state-run crisis centres opened in 2023.

GERMANY

GENERAL COUNTRY INFORMATION

Population	83,237,124
Female population	42,170,339
Member of Council of Europe (year)	1950
Member of European Union (year)	1958
Member of United Nations (year)	1973
CEDAW ratified (year)	1985
CEDAW optional protocol ratified (year)	2002
Istanbul Convention signed (year)	2011
Istanbul Convention ratified (year)	2017



SUMMARY

► There is one national women's helpline in Germany, which is free of charge, available 24/7, and offers multilingual support. Therefore, Germany **does meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. There are 380 women's shelters in Germany, with a total of 2,720 family places. With 5,604 family places missing, the country **does not meet** the IC standards for the provision of women's shelters. There are 492 women's centres, run mostly by welfare organisations and women's NGOs, and support services for survivors of sexualised violence in the country, including 183 rape crisis centres. The country currently does not have a National Action Plan on violence against women and girls; however, the current government has included a NAP in their governing agreement.

The state does not collect data on women's specialist services. However, some organisations which receive state funding, for instance, *Frauenhauskoordination e.V. (FHK)*, collect data on women's specialist services which is publicly available. FHK publishes an annual statistic of women's shelters for which approximately 50% of the shelters in Germany are providing data. The state-funded, national women's helpline, *Hilfetelefon*, also collects data on their services and publishes an annual report. In addition, some federal states require their women's specialist services to collect certain data as a precondition to receiving money from the state/public funding.²³

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	Yes	46,987 calls

📞 Germany has one national women's helpline called the Violence Against Women Helpline (*Hilfetelefon Gewalt Gegen Frauen*, tel.: +49 1160116) and is run by the Federal Ministry for Family Affairs, Senior Citizens, Women and Youth and the Federal Office for Family Affairs and Civil Society. It is free of charge, available 24/7, and offers multilingual support in German, including in easy language and sign language, as well as in 18 foreign languages (Albanian, Arab, Bulgarian, Chinese, English, French, German, Italian, Farsi/Dari, Kurdish (*Kurmanji*), Polish, Portuguese, Romanian, Russian, Spanish, Turkish, Ukrainian and Vietnamese). The funding for the national women's helpline is secured by the state through the Law for the installation and operation of a national helpline "Violence Against Women"

(*Gesetz zur Einrichtung und zum Betrieb eines bundesweiten Hilfetelefons „Gewalt gegen Frauen“*).

The women's helpline offers support & counselling for every form of violence against women, especially domestic violence (psychological, physical, or sexualised violence within relationships), psychological, physical or sexualised violence outside relationships, stalking, mobbing/bullying, digital violence, forced marriage, violence in the name of honour/honour-based violence, trafficking of women, violence against women in the context of sexual exploitation, sexual harassment at the workplace, sexual harassment in public, and violence in specific contexts such as in care/nursing. The women's helpline also offers support to

²³ At the beginning of 2023, the national monitoring body (*Berichterstattungsstelle*) which is required by the Istanbul Convention, started to operate. It is state-funded and run by the German Institute for Human Rights. The *Berichterstattungsstelle* is supposed to collect and unite data on VAW and how Germany is complying with the Istanbul Convention (also regarding women's specialist services).

relatives (friends, family, colleagues, etc.) who seek advice as well as to specialists/professionals working as counsellors themselves. In 2022, there were 74,689 contacts on the helpline. Out of these, 52,648 were contacts requiring counselling and 46,987 calls were conducted via phone. There is also the option to make contact via chat or e-mail. The most common forms of violence reported by callers were domestic violence (60% of the callers), sexualised violence (12.6%), and psychological violence (7.4%). However, it should be noted that out of the 52,648 contacts, only 75% (39,484) agreed to collect this data.

There is one regional helpline supporting survivors called the BIG Hotline (*Berliner Initiative gegen Gewalt an Frauen e.V. – BIG e.V.*, tel.: +49 306110300). It offers initial telephone consultation in cases of domestic violence, advice for shelter accommodation, and counselling services. It is a regional hotline for the capital, Berlin. In 2022, it received 8,137 calls.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
380	380	Most	2,720 ²⁴	5,604 ²⁵	67%	30,602

🏠 There are approximately 380 women's shelters in Germany with a total of 2,720 family places, which corresponds to approximately 6,800 beds. Most of the women-only shelters are available 24/7. The sources and size of funding to women-only shelters vary according to the federal state where they are located, and normally the main sources are state funding and donations. In some cases, women are expected to pay for their accommodation, depending on the region they live in. Daily fees are either covered by social benefits from the state or by the women themselves if they are not entitled to benefits, and they vary according to the region: if shelters are fully or partly financed through a daily fee covered by the social benefits of their inhabitants, all women who are not entitled to those social benefits (e.g., university students, women with their own income etc.) will have to pay for the accommodation. About two-thirds of the shelters are operated by German welfare organisations. Women-only shelters are located in most regions. Out of 400 districts, there are only 90 that do not have a women-only shelter. According to the region, the duration of the stay in the women-only shelters varies. In some cases, there is no limitation, and in other regions, there is a limit of three to six months. In addition, some shelters provide the option to extend the

stay in case of need. On average, 43% of the women stay in the shelters for less than a month (23% even only up to one week), 19% stay for one to three months, 12% stay for three to six months, 7% stay up to a year and 2% longer than a year.²⁶ Most shelters are accessible to older women and transgender women. Some are accessible to women with uncertain residence status, homeless women, women with physical and cognitive disabilities, women with substance abuse issues, and women with older sons. In addition, there are a few specialised shelters for survivors of forced marriage, refugee women, and migrant women. Moreover, there are plans to build a women-only shelter for women with substance abuse and psychological issues.

The main reasons why women-only shelters decline referrals are because there is no space for them or their children, or the shelters are not adequately equipped for the needs of the women. Domestic violence, sexual violence, and digital violence are the three most common types of violence survivors reported. Casework, counselling, and practical advice are the types of in-house services provided by women-only shelters. In 2021²⁷, 12,800 women and 15,000 children were accommodated in women-only shelters.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
492	85,712	Women's NGOs (180 centres); Welfare organisations (299 centres); other (N/A)

❖ There are approximately 492 women's centres in Germany, which include 310 Counselling centres, 130 Intervention centres, 40 Human Trafficking centres, and 12 Forced marriage centres. All centres provide counselling,

and some offer legal advice and representation at court/police. In addition, there are centres supporting specific groups of women, such as survivors of trafficking in persons, forced marriage, honour-based violence, female

²⁴ Number of family places.

²⁵ Number of missing family places.

²⁶ Annual statistics of Frauenhauskoordinierung e.V. for the year 2021, https://www.frauenhauskoordinierung.de/fileadmin/redakteure/Publikationen/Statistik/2022-11-01_Langfassung_Frauenhaus-Statistik_2021_FHK.pdf.

²⁷ This data refers to 2021, FHK statistics. The calculation of the 380 shelters is based on the data from 180 shelters, which was doubled.

genital mutilation, and women with uncertain residence status, women with disabilities, older women, transgender women, as well as non-binary people. The Federal Association of Women counselling centres and rape crisis centres (*bff: Frauen gegen Gewalt*) has 215 members of which 180 are run by women's NGOs. The Association of Women's Shelters (*Frauenhauskoordination*) coordinates

299 centres that are run by welfare organisations (83 faith-based, 200 with a feminist stand, and 16 other). Some counselling centres provide emergency housing too. Funding for the centres comes from the state and donations, and centres are available in all regions of Germany. However, the countryside lacks women's support centres, especially in the East of the country.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ In Germany, in addition to crisis/medical centres and specialised helplines, there are 183 rape crisis centres. They provide needs assessment, specialist psychological care, specialist sexualised violence advocacy services, and community awareness and education for prevention.

The funding comes from national/local authorities and donations. These services are for women only, young women/children, and the general population, and are present in all regions of Germany.

5. PRIMARY PREVENTION SERVICES

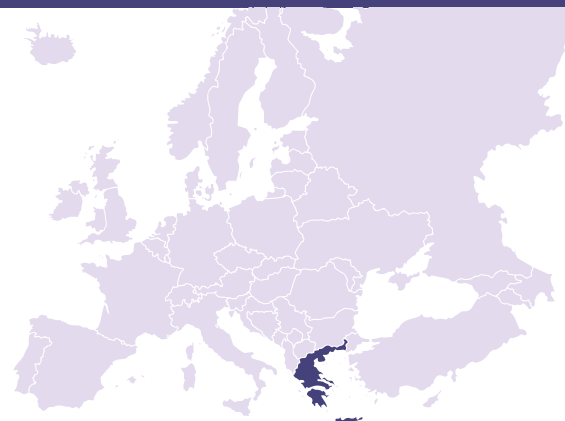
👏 At the moment, Germany does not have a National Action Plan on violence against women and girls. However, the governing coalition has approved a NAP in their coalition agreement, so there should be one in the coming years. The state does not fund primary prevention activities, and primary prevention is defined by several federal states, but not all. However, on a federal level state, there are activities funded with public money which are,

for example, feminist self-defence training, school-based primary prevention programmes, bystander intervention training, and self-care activities. These activities are carried out for the general public, girls and boys under the age of 18, women, and LGBTQI+ people. Some of the activities offered for women are explicitly LGBTQI+ inclusive. Programs developed for schools normally aim at empowering girls rather than changing male behaviour.

GREECE

GENERAL COUNTRY INFORMATION

Population	10,459,782
Female population	5,345,035
Member of Council of Europe (year)	1949
Member of European Union (year)	1981
Member of United Nations (year)	1945
CEDAW ratified (year)	1983
CEDAW optional protocol ratified (year)	2001
Istanbul Convention signed (year)	2011
Istanbul Convention ratified (year)	2018



SUMMARY

► There are two state-wide women's helplines in Greece, both of which are free of charge, available 24/7 and offer multilingual support. Greece **does meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. There are 22 women-only shelters that offer 410 beds. With 60% of the necessary beds missing, Greece **does not meet** the IC standards for the provision of women's shelters. There are 51 women's centres in Greece, 44

of which are run by the state and seven by women's NGOs. There are no specific specialised services for women and girls who have experienced sexualised violence (SV). There is a National Action Plan on violence against women and girls (VAWG) in Greece called the National Action Plan for Equality (2021–2025), which includes specific provisions on primary prevention. The state collects data on state-run women's specialist services and this data is public.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
2	Yes	Yes	Yes	11,596 calls

☎ There are two state-wide women's helplines in Greece, both of which are free of charge, available 24/7, and offer multilingual support. The main helpline is called SOS Helpline 15900 (*Γραμμή SOS*, tel.: +30 15900) and is run by the General Secretariat for Demography, Family Policy, and Gender Equality. This helpline is state-funded and offers support in Greek, English, Arabic, Farsi, Russian, and Ukrainian to women survivors of violence against women, domestic violence, sexual harassment, and rape. It received 10,324 calls in 2022, where 83% of the calls concerned domestic violence. The second state-wide helpline

is run by the Union of Women Associations of Heraklion Prefecture (UWAH) and is called Helpline Against Domestic Violence (*Γραμμή Ελπίδας*, tel.: +30 8011116000). This helpline offers support in Greek and English survivors of domestic violence, rape, emotional, psychological, physical and sexualised violence, cyber violence (such as non-consensual sexting, doxing), and violence against older women. This helpline is self-funded from donations and received 1,272 calls in 2022 concerning multiple types of violence.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
22	22	Some	410	636	60%	25,512

🏠 There are 22 women-only shelters in Greece that offer 410 beds. Some of these shelters are accessible 24/7. Women are not expected to pay for their accommodation. Nineteen shelters for emergency accommodation are run by the Greek municipalities and are state-funded.

Three women-only shelters are run by women's NGOs with a gender-specific/feminist approach and are not state-funded. Women-only shelters are in most regions of Greece and women are allowed to stay for three to six months. Women-only shelters could decline referrals if

the woman is ineligible for support, for instance, because of substance abuse. In most cases, the form of violence reported to the shelters is domestic violence. Women-only shelters provide various in-house services, including casework, counselling, referrals/ collaboration with other services, practical and legal advice as well as vocational counselling, and integration into the job market. In 2022, 223 women and 251 children were accommodated in the women-only shelters.

In terms of accessibility, all women-only shelters are accessible to women with uncertain residence status/undocumented women, homeless women, and older women. None of the shelters are accessible to women with substance abuse issues, transgender women, or women with older sons (14 years and above). There are no specific shelters for vulnerable groups or women survivors of specific forms of violence.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
51	104,805	Women's NGOs (7 centres); State (44 centres)

❖ In Greece, there are 51 women's centres, 44 of them are run by the state and seven by women's NGOs. They are present in most regions and are only for women survivors of VAW. The main sources of funding for the women's centres are state funding from national/local authorities, donations and international funding. Most women's centres provide only non-residential support apart from the Union of Women Association of Heraklion Prefecture and two more NGOs that offer also shelter. All the women's centres offer counselling/psychological support, legal advice, financial and social welfare support/advocacy, as well as referrals. Forty-four centres offer housing advice and employment, and six centres provide representation at court/police/social services etc.

All centres provide specialist support for survivors of honour-based violence, and for women with uncertain residence status/undocumented women as well as women with disabilities. Forty-four centres provide specialist support for black and minority ethnic women, four centres provide specialist support for survivors of trafficking in persons, and one centre provides specialist support for non-binary people and transgender women. Women's centres do not provide specialist support for survivors of forced marriage, or female genital mutilation. Women's centres also provide community awareness and education for prevention. Forty-five women's centres in Greece supported 5,400 women in 2022.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There are no specific services for women and girls who have experienced sexualised violence (SV). Women's centres can provide counselling to survivors of SV, but no specialist support.

5. PRIMARY PREVENTION SERVICES

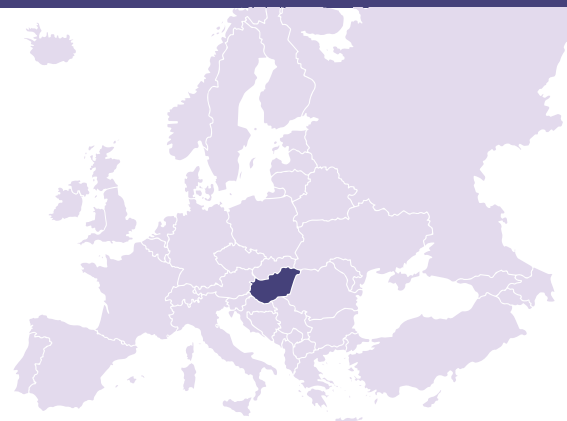
👤 There is a National Action Plan in Greece called the National Action Plan for Equality (2021–2025), which includes VAWG as a priority issue and foresees training of professionals and awareness-raising campaigns. There is no official definition of primary prevention and the state does not fund primary prevention activities. Awareness-raising campaigns or programmes are the primary prevention activities available in Greece and are carried out for the general public, women, and LGBTQI+ people.

Primary prevention is not common in Greece, apart from informational campaigns. Women's centres try to conduct primary prevention activities, but this is being done among other duties and not systematically. There are NGOs that conduct primary prevention, but they depend on European Union funds as there is no state funding, and the Ministry of Education did not introduce a systematic implementation of such programmes. The National Action Plan for Equality includes awareness raising targeting men and boys but so far there is no implementation of such activities.

HUNGARY

GENERAL COUNTRY INFORMATION

Population	9,689,010
Female population	5,044,135
Member of Council of Europe (year)	1990
Member of European Union (year)	2004
Member of United Nations (year)	1955
CEDAW ratified (year)	1982
CEDAW optional protocol ratified (year)	2001
Istanbul Convention signed (year)	2014
Istanbul Convention ratified (year)	No



SUMMARY

► There are two national women's helplines in Hungary, both are free of charge, and offer multilingual support, but are not available 24/7. Therefore, Hungary **does not meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. There are 53 shelters accessible to women survivors of violence against women (VAW) with a total capacity of 304 beds, but there are no women-only shelters. Hungary **does not meet** the IC standards for the provision of women's shelters as 53% of necessary beds are missing. There are no women's centres in Hungary, nor are there services for survivors of sexualised violence such as rape crisis centres and sexual violence referral centres. There is no National Action Plan on VAWG

in Hungary. The state does not collect data on women's specialist services and there is no National Action Plan on violence against women and girls. In Hungary, there are only a few women's specialist support services which are run by women's NGOs and undertake their own data collection. Such services are operated by two NGOs, NANE Women's Rights Association and the PATENT Association. Other services for survivors of violence are gender-neutral in their approach, and public access to basic and regularly updated data on these services constitutes a challenge. The respective state authority in charge does however provide data on request.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
2	Yes	No	Yes	1,054 calls; 2,499 callers

☎ There are two national women's helplines in Hungary, both are free of charge and offer multilingual support, but do not operate 24/7. The first helpline is run by the NANE Women's Rights Association and is called NANE Helpline (*NANE Segélyvonal*, tel.: +36 80505101). This helpline provides multilingual support, although it depends on the language skills of the helpline operators. More than half of the operators speak English well enough to provide support in this language. Furthermore, NANE can give the caller a time slot for German, French, Russian, Polish, and Romanian-speaking operators on demand. The NANE Helpline provides support to survivors of all forms and types of violence against women in either intimate partnerships/family or other settings. In 2022, NANE Helpline responded to 624 calls, 289 emails, 90 messages via chat, and 333 messages through social media. The second national women's helpline is called PATENT Legal Aid (*PATENT Jogsegély*, tel.: +36 702202505) and is run by the PATENT (People Opposing Patriarchy) Association. This helpline

also offers multilingual support and consultations depending on the language skills of the helpline operators. In general, PATENT Legal Aid offers support in English and Italian. PATENT's helpline received 430 calls and responded to 157 emails and 140 messages through its Facebook site in 2022.

In 2022, NANE Helpline received a minimum of 2,499 unique callers seeking assistance and support in dealing with domestic violence. However, it is crucial to acknowledge that this number represents only a fraction of the actual individuals reaching out for help. The true figure is undoubtedly much higher, as NANE's system does not differentiate between anonymous callers, who understandably choose to remain unidentified due to safety concerns, and account for a significant proportion of the total calls received by NANE helpline. While the PATENT Legal Aid helpline does not collect data on individual callers, in their experience they provide services to many regular callers.

While NANE Helpline does not possess the exact data on the most common forms of violence reported for the year 2022, based on historical data and trends, emotional abuse emerges as the most frequently reported form of violence. It constitutes around 90% of the calls. Verbal abuse is the second most common form reported by callers (85-89% of calls), followed by physical abuse (80-85% of calls). PATENT Legal Aid Helpline reports that emotional, financial, and physical violence are the most common forms of violence reported by callers. The helpline also receives a high proportion of cases involving forced visitation and procedural harassment cases. Funding for the operation of national women's helplines primarily comes from grants or projects supported by foreign donors or by the EU, as well as from the personal income tax offers of

individual taxpayers.²⁸ Since the start of the war in Ukraine, both NANE and PATENT started offering help and information through their helplines to those impacted by the war, and the NGOs also provided crisis intervention services and support.

There are no other helplines supporting survivors of violence against women in Hungary. The National Crisis Management and Information Telephone Service (*Országos Kríziskezelő és Információs Telefonszolgálat – OKIT*, tel.: +36 80205520) offers support to survivors of domestic violence, child abuse, sexual exploitation, and human trafficking. OKIT is available 24/7, free of charge, and offers support to all survivors of violence.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN		EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
		24/7 ACCESS				
0	53	N/A	304	665	69%	31,872

🏠 There are no women-only shelters in Hungary. However, there are different types of services providing accommodation for all survivors of domestic violence and trafficking. None of them are defined and legally regulated as women-only services. According to the information provided by the state, there are institutions/services that are available only for women. But no further exact information is publicly available. The institutional system available for survivors of violence includes 20 crisis intervention centres which provide accommodation to survivors of domestic violence (for up to six weeks); eight secret shelters (for up to six months); 21 halfway houses providing long-term housing (up to five years) and professional services for survivors of domestic violence (six specifically for survivors of human trafficking); and three temporary/protected accommodation for survivors of human trafficking.²⁹ In total, there are 52 shelters accessible to women survivors of violence with approximately 304 beds available.³⁰

The average length a woman can stay in a shelter depends on the type of service. In crisis intervention centres, survivors of domestic violence can stay for up to eight weeks, and in secret shelters for a maximum of six months. Halfway houses focus on the social reintegration of domestic violence survivors, some of which are dedicated for survivors of human trafficking, and those in need can stay up to five years. The services mentioned are regulated by the Act No. XXXI of 1997 on the protection of children and guardianship administration. The available services are regionally spread throughout the country. Furthermore,

about 90% of the services offering accommodation for survivors of domestic violence are run by civil society organisations, some of which are faith-based, and all services for survivors of human trafficking are also run by civil society organisations.³¹

None of the above-mentioned services are operated by women's rights NGOs. In fact, the establishment and development of these services has or is taking place without the involvement of or consultation with women's rights NGOs. The state claims that there is no waiting list for these services and that there are enough spaces for women survivors of violence. However, NANE Helpline has received complaints from survivors who could not find an available shelter space. There are also no specific shelters for vulnerable groups or specific forms of violence apart from survivors of human trafficking. The available services providing accommodation for survivors of domestic violence are funded by the Hungarian state and from EU development funds.

For survivors of trafficking, there are two temporary/protected accommodations, with extended capacity, and two halfway houses as well as crisis flats. Access to accommodation shelters is available through the National Crisis Management and Information Telephone Service (*Országos Kríziskezelő és Információs Telefonszolgálat – OKIT*). OKIT only facilitates/organises the immediate placement of survivor if they consider that there is an acute crisis due to violence.

28 In Hungary, taxpayers have the opportunity to donate 1% of their personal income tax to a civil society organisation of their choice.

29 Information on shelters in Hungary comes from the Ninth periodic report submitted to CEDAW by Hungary under article 18 of the Convention (2020), <https://digitallibrary.un.org/record/3900139>

30 According to the UN CEDAW, Summary record, Consideration of Ninth periodic report of Hungary, 2023

31 Information from the WAVE Country Report 2021.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
0	-	-

❖ There are no women's centres in Hungary. However, in 2018 a type of service was established for survivors of domestic violence, the so-called "crisis ambulances". They provide non-residential services such as information and counselling. The crisis ambulances are not women-only centres or services, they are available for all survivors of domestic violence, including women. There are currently nine crisis ambulances in Hungary, regionally spread throughout the country.

Women's NGOs, namely NANE and PATENT Association have several initiatives that provide specialised services and support to survivors of VAW, although not in the form of a centre. NANE operates a trauma-response and empowerment support group program called "Power to Change". This program targets women survivors of intimate partner violence and domestic violence.

The "Integrated Client Service", a joint NANE-PATENT initiative, offers trauma-sensitive support to survivors including

legal assistance, psychological support, and social counselling, by a team of experts who regularly consult with each other to ensure balanced and coordinated cooperation. In 2022, 20 survivors received counselling in the framework of the integrated client service. The "Helper's Network", introduced in 2022, further provides survivors with technical and practical support in relation to legal and administrative processes, in a trauma-informed and victim-centred manner. This network provided support to 46 clients in 2022.

As a response to the war in Ukraine, specific services and support to refugee survivors have been provided by these NGOs, in partnership with other organisations. Furthermore, PATENT Association collaborated with EMMA Association to address and respond to the needs of refugee women and girls, including violence-related issues.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There are no rape crisis centres or sexual violence referrals centres in Hungary. A specialised service for survivors of sexualised violence is available for children. It is based on the *Barnahus Model* from Iceland which was adapted and introduced in a few cities in Hungary in the last few years; first, it was introduced in the city of Szombathely, then Debrecen, followed by two places in Budapest.³² The *Barnahus Model* is recognised by the state, since the Act on Criminal Procedure now allows children to be involved in hearings, with the support of specialist services to help assess and provide therapy to child survivors of neglect and abuse, but especially of sexualised violence (SV). Women's

rights NGOs have not been involved and are not taking part in this service provision process.

The NANE Helpline and PATENT Legal Aid offer support and consultations for cases involving sexualised violence, although not in the form of a regular and specific service provision for survivors of sexualised violence. These NGOs can provide specific SV services as well, if the capacity and resources allow it. For example, NANE organises support groups for adult women survivors of childhood incest. In addition, both organisations conduct different advocacy and awareness-raising work against sexualised violence.

5. PRIMARY PREVENTION SERVICES

👏 There is no National Action Plan (NAP) on violence against women and girls in Hungary. In addition, the first plan of measures in the Action Plan developed for the European Union on strengthening the role of women in the family and in society for 2021–2030 does not include any aims or measures/tasks to respond to violence against women and girls. There are programmes related to the primary prevention of VAWG in Hungary, although those organised and supported by the state or public actors typically do not address VAWG as a societal phenomenon or do not follow a gender-sensitive approach when addressing certain forms of violence (such as domestic violence).

There are some activities which are supported by local governments and which cooperate with women's rights NGOs. Such activities include school-based primary prevention programmes, training for primary prevention practitioners, and awareness-raising campaigns or programmes. Beneficiaries of such activities are the general public, girls and boys under the age of 18, women and men. School-based prevention activities that are part of the public education system are however often dependent on the commitment of individual teachers. Following a legal amendment in 2021, any person or organisation cooperating with an educational institution is required to

³² In 2023, it will also be adapted in the city of Gyula.

receive a special authorisation by an official body designated by law. However, no such body has yet been designated, which has also limited NGOs' ability to provide violence prevention programmes in schools.

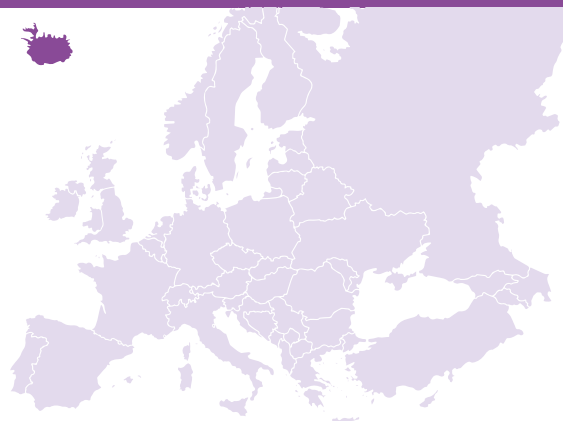
In addition, NANE and PATENT operate a joint intimate partner violence and sexualised violence prevention program for young people, composed of two stand-alone but

complementary programmes. In 2022, 203 prevention workshops for young people, and one training for violence prevention activists were organised. The two NGOs also manage a programme for teenage girls, called the "Rebellious Girl Camp", which incorporates a series of interactive empowerment activities, and workshops connected to the topic of violence prevention. In 2022, two "Rebellious Girl Camps" were organised.

ICELAND

GENERAL COUNTRY INFORMATION

Population	376,248
Female population	183,153
Member of Council of Europe (year)	1950
Member of European Union (year)	No
Member of United Nations (year)	1946
CEDAW ratified (year)	1985
CEDAW optional protocol ratified (year)	2001
Istanbul Convention signed (year)	2011
Istanbul Convention ratified (year)	2018



SUMMARY

► Iceland has one national women's helpline that is free of charge, operates 24/7, and provides multilingual support. Therefore, Iceland **does meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. There are two women-only shelters in Iceland, with a total of 28 beds. This means that Iceland **does not meet** the IC standards for the provision of women's shelters, as 26%

of beds are missing. There are seven women's centres in Iceland as well as a rape crisis centre in Reykjavik for survivors of sexualised violence. Iceland has a National Action Plan on violence against women and girls which includes specific provisions on the primary prevention of VAWG. The state does not collect information on women's specialist services.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	Yes	N/A

📞 There is one national women's helpline in Iceland called The Women's Shelters Helpline (*Neyðarsími Kvænnaathvarfsins*, tel.: +35 5611205) which is run by The Women's Shelter Association (*Samtök um Kvænnaathvarf*). The helpline is free of charge, available 24/7 and offers multilingual support in any language supported by the Language Line. The Women's Shelters Helpline provides support for

domestic violence and intimate partner violence as well as sexualised violence within intimate partner relationships. Funding for the national helpline comes from the state as well as from donations. The most common forms of violence reported in 2022 were psychological, physical, and economic violence. There are no other regional helplines supporting survivors of VAW in Iceland.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
2	2	Yes	28 ³³	10	26%	13,437

🏠 There are two women-only shelters in Iceland, one in Reykjavik and one in Akureyri, with 28 beds in total. The women-only shelter in Reykjavik has a consultant working around the clock, so it is always open. In Akureyri, there is an emergency number available through the night, in case a woman needs to come to the shelter during that time. Women are not expected to pay for their stay in women-only shelters and funding for women-only shelters in Iceland comes from the state as well as donations. Both shelters are located in major cities and are run by a women's NGO

with a feminist approach; the Women's Shelter Association (*Samtök um Kvænnaathvarf*). The two women-only shelters are located in just major cities. Women can stay for an undefined period in women-only shelters and each case is evaluated individually. The average length of stay is 30 days.

The main reasons why women-only shelters had to decline referrals were that the survivor was not eligible for support and that the shelter was not adequately equipped

³³ This number only includes the beds in the two women-only shelters in Iceland, as the other shelter accessible to women survivors of violence is not a specialised shelter and more generally for homeless women.

for the needs of the women/children. The latter is linked to the fact that there is no shelter for women with active substance abuse issues. The three most common types of violence reported in 2022 were physical, psychological, and economic violence. Counselling, referrals, and practical advice were the three in-house services most often provided by women-only shelters, with counselling being the most prominent. In 2022, 172 women were accommodated in women-only shelters.

All shelters are accessible to women with uncertain residence status, and older women, most shelters are accessible to women with physical and/or cognitive disabilities, transgender women, and women with older sons. There are no specific shelters for vulnerable groups such as

migrant/undocumented women and women with disabilities or for women victims of specific forms of violence such as trafficking, honour-based violence, forced marriage, and female genital mutilation.

There are no other shelters in Iceland that provide support to survivors of violence against women, and shelters are missing in the countryside. There is one shelter providing shelter to survivors of VAW which operates as a homeless shelter for women and is also accessible to women with substance abuse issues. This shelter has 12 available beds and is run by the NGO *Rótin*. This shelter is women-only but it is not explicitly for survivors of violence, although homeless women are very likely to be survivors of violence themselves.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
7	26,165	Women's NGOs (3 centres); Collaboration between state, municipalities, and NGOs (4 centres)

❖ There are seven women's centres in Iceland, of which two are only for survivors of violence against women and five are for all survivors, including women. All centres provide counselling, including therapy and referrals, five centres provide housing advice and three provide legal advice. Three women's centres are run by women's NGOs and four are run in cooperation between the state, municipalities, and NGOs. Two centres also operate as women-only shelters, in Reykjavik and Akureyri, and therefore provide both residential and non-residential support. Women's centres in Iceland are funded by the state as well as through

donations and are located in just the major cities.

Women's centres do not provide specialist support for survivors of forced marriage, honour-based violence, female genital mutilation, women with uncertain residence status, black and minority ethnic women, women with disabilities, transgender women, or non-binary people. One centre provides support for survivors of trafficking. Several women's centres offer specialist support to survivors of sexualised violence, including specialist psychological care and community awareness and education for prevention.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There are services for survivors of sexualised violence in Iceland, including one rape crisis centre in Reykjavik which is part of a national hospital. The rape crisis centre offers specialist forensic medical care as well as referrals to trauma psychological services. In addition, there are education and counselling centres for survivors of sexual abuse and violence including *Stígamót* in Reykjavik, *Aflið in Akureyri*, *Bjarkarhlíð* family justice centre³⁴, *Sigurhæðir* in Selfoss and Barnahús for young survivors. *Stígamót* further provides free counselling for survivors of rape, sexual molestation, sexual harassment, and sexual exploitation.

The organisation also conducts workshops and trainings on various aspects of sexualised violence and survivor support, aimed at professionals, individuals, and government officials. Funding for these services comes from the state and they are available in all regions, apart from the rape crisis centre which is just located in the capital city. Services for survivors of sexualised violence are available to all survivors, including women and girls. The national helpline can also provide support for survivors of sexualised violence, although it is not specialised for survivors of such violence.

5. PRIMARY PREVENTION SERVICES

👤 Iceland has a National Action Plan (NAP) on violence against women and girls which includes specific provisions on the primary prevention of VAWG, namely the "National Action Plan for Gender Equality for 2020–2023". The NAP includes, among other aspects, measures to combat violence against women and sexualised violence. The state funds primary prevention activities such as feminist

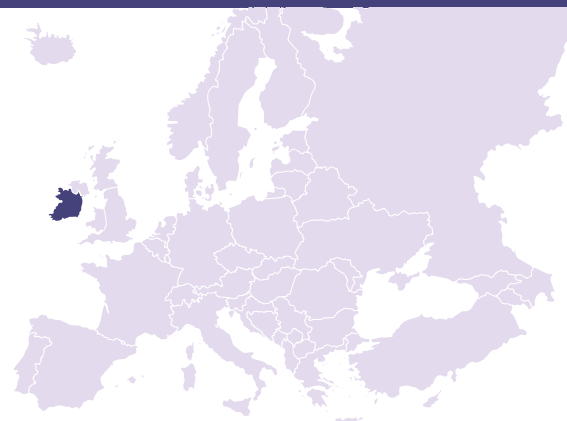
self-defence trainings, school-based primary prevention programmes, training for primary prevention practitioners, bystander intervention training, and awareness-raising campaigns or programmes. The beneficiaries of these activities are the general public, girls and boys under the age of 18, women and men, as well as LGBTQI+ people.

34 The WAVE Network does not consider family justice centers (FJs) to be women's specialist services, as they do not provide adequate survivor-centred support to women and their children.

IRELAND

GENERAL COUNTRY INFORMATION

Population	5,060,004
Female population	2,556,297
Member of Council of Europe (year)	1949
Member of European Union (year)	1973
Member of United Nations (year)	1955
CEDAW ratified (year)	1985
CEDAW optional protocol ratified (year)	2000
Istanbul Convention signed (year)	2015
Istanbul Convention ratified (year)	2019



SUMMARY

► There is one national women's helpline in Ireland which is free of charge, available 24/7, and provides multilingual support. Therefore, Ireland **does meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. There are 21 women-only shelters in Ireland with a capacity of 149 beds. Ireland **does not meet** the IC standards for the provision of women's shelters, as 71% of the necessary beds are missing. Ireland has 40 specialised domestic violence centres providing a wide range of support services. There are 16 rape crisis centres in Ireland and seven sexual assault treatment units providing support to survivors of sexualised violence. Ireland has a

National Action Plan on violence against women and girls (VAWG), which includes specific provisions on the primary prevention of VAWG as well as a definition of primary prevention. The state collects administrative data on women's specialist services and this data is available upon request. However, the state has never adequately funded NGOs to collect data on women's specialist services. The resultant fragmentation arising from this under-funding and non-collaborative attitude toward NGOs' data collection has led to the failure of the state to collect comprehensive data.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	Yes	23,566 calls

☎ There is one national women's helpline in Ireland, the Women's Aid 24hr National Freephone Helpline (tel.: +353 1800341900) which is run by Women's Aid. This helpline is free of charge, operates 24/7, and provides services in over 200 languages through the telephone interpretation service. This helpline mainly provides support for survivors of domestic and intimate partner violence. Funding for the helpline comes from a combination of state funding and donations.

In 2022, the Women's Aid Helpline received 23,566 calls in comparison to 21,156 in 2021. The three most common forms of violence reported by callers to the women's helplines in 2022 were emotional/psychological abuse, which was the most common, followed by physical abuse, economic abuse, and sexualised abuse.

Moreover, there is one helpline for survivors of sexualised violence in Ireland called the National Rape Crisis 24hr Helpline (tel.: +353 1800778888) which is run by the

Dublin Rape Crisis Centre. This helpline provides support for survivors of sexual, domestic, and gender-based violence as well as for survivors of rape.

In addition to the national helplines, there are 52 other helplines run by specialist domestic violence and rape crisis services. There are also other sector-specific helplines; one helpline specifically supports women affected by sexual exploitation or trafficking and is run by an NGO called Ruhama (tel.: +353 18360292), and another helpline is run by One in Four NGO for adult survivors of childhood sexual abuse (tel.: +353 16624070). There is another helpline that is for children survivors of sexualised violence run by the organisation CARI (tel.: +353 818924567). Since the Women's Aid National Freephone Helpline is the only accredited 24/7 service, it acts as a direct referral to all other services when required. All the other local services themselves offer helpline support to a greater or lesser extent, some of which are available 24/7. Most are funded through state funding in whole or in part.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
21	N/A	Most	149 ³⁵	357	71%	33,960

There are 21 women-only shelters in Ireland,³⁶ with 149 beds available. Most of the women-only shelters offer 24/7 access. Women are expected to pay for their accommodation; this can range from approximately €30-€60 per week, but inability to pay is commonly considered by services. The two main sources of funding for women-only shelters are state funding from national or local authorities, and donations. Currently, women-only shelter services are primarily funded by the Irish Child and Family Agency (Tusla) and are run by independent NGOs with a feminist and gender-specific approach. Women-only shelters are located in most regions of Ireland. On average, women are allowed to stay in the shelters for three to six months. The average length of stay in women-only shelters varies between services from six weeks to up to six months. Some services have a timeframe of up to three months while others will put no limit on it and instead will determine the length of stay depending on the need, or the availability of moving-on options in the locality. There is often a demand to stay longer particularly because of the current housing crisis.

The main reasons for having to decline referrals were lack of space/capacity to support the survivor or to accommodate the survivor with her children, the survivor being ineligible for support, or the shelter being inadequately equipped for the needs of the women/children. All these reasons arise depending on the situation and the capacities of each service. The most common types of violence reported by clients to women-only shelters in 2022 were emotional/psychological, physical, and economic violence. The three types of in-house services that are most often provided by women-only shelters in Ireland are case-work as well as practical and legal advice. A huge amount of the specialist support offered by all services is emotional support through non-judgemental listening and support. While therapy may not be appropriate when a woman is still actively at risk, many women say that the support that is most important to them is to be listened to and believed.

All women-only shelters are accessible to older women. Some women-only shelters can accommodate homeless women, women with physical or cognitive disabilities, women with substance abuse issues, and women with older sons (14 years and above). None of the women-only

shelters in Ireland are accessible to women with uncertain residence status/undocumented women. There are no specific shelters for vulnerable groups such as women with disabilities nor for women survivors of specific forms of violence such as forced marriage or honour-based violence. Currently, many undocumented migrant women and survivors of trafficking are accommodated in state-funded “direct provision centres” for asylum seekers. These are not gender-sensitive or trauma-informed shelters and are not appropriate for survivors of violence. Women at risk of other forms of family violence, such as forced marriage and honour-based violence can request a place in a women-only shelter which is assessed on a case-by-case basis. Some services for disabled women are available but many shelters are in older buildings that require investment for physical accessibility, and many are not designed to accommodate neurodivergent people. There is very limited specialist accommodation for women with intellectual disabilities. Furthermore, if a woman is dealing with substance abuse issues, in most situations, women-only shelters will not accommodate her. Other shelters can accommodate a woman who is in a treatment programme, provided that she is not actively using drugs and/or alcohol.

There are a number of other shelters in Ireland which can provide support to survivors of violence against women, such as homeless services that are not exclusive to women and provide accommodation more generally to families and individuals, but the exact number is unknown. There are two services that accommodate women (and their children) experiencing addiction and/or homelessness, but these are not specifically related to an experience of violence. The response to homelessness includes hostels, shelters, and supported accommodation. Some services are short-term (night by night only) and some offer more medium to long-term accommodation. These shelters are available to all survivors including women, men, non-binary people, and transgender women and transgender men. While most services support people with complex needs, including trauma, very few of these shelters are gender-sensitive and lack expertise on the dynamics of domestic violence or the risks and impacts of sexualised violence.

³⁵ The number of shelter beds are based on Q3 from 2022, as figures for the end of 2022 are not available.

³⁶ Currently, there are 21 specialist domestic violence shelters, with a government commitment to provide/further redevelop 12 more over the next 5 years.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
40	63,907	NGOs (40 centres)

❖ There are 40 domestic violence services in Ireland, 39 of which are part of Sare Ireland. 38 of these centres are only for women survivors of VAW and two also work with men on an ongoing basis. All women's centres are run by NGOs and are located in most regions of Ireland. However, there continue to be some geographical places that are poorly served, and there is an ongoing piece of work to develop into these communities whereby a national services plan is to be developed starting in 2024. Women's centres receive funding from the state as well as through donations and international funding. It should be noted that no centres are fully state funded; shortfalls, innovation and core roles not recognised by the state are funded from a variety of other sources.

Regarding residential support services, 20 women's centres offer both non-residential and residential services and operate 21 of the women-only shelters. All women's centres provide legal advice (although this may be more legal information rather than direct advice from lawyers), financial and social welfare support/advocacy, housing advice, referrals, and representation at court/police/social services. The High Risk Support Project run by Women's Aid

with the police provides support in post separation cases where there is a risk of serious harm or murder. Furthermore, 20 centres offer counselling/psychological support.

All women's centres provide specialist support for black and minority ethnic women, women with disabilities, older women, transgender and non-binary people, and traveller women. AkiDwA migrant women's organisation provides support to survivors of female genital mutilation. While all women's centres can accommodate women with uncertain residence status/undocumented women, there can be challenges to providing shelter accommodation but other support can be made available, such as casework. The Immigrant Council of Ireland and Migrant Rights Centre Ireland provide support for survivors of trafficking.

Women's centres also provide specialist support for survivors of sexualised violence (SV), including specialist forensic and medical care, needs assessment, specialist psychological care, specialist SV advocacy services and community awareness and education for prevention.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There are services for survivors of sexualised violence in Ireland including 16 rape crisis centres (RCCs), seven sexual assault treatment units, and other NGOs providing various forms of support. All 16 RCCs are located across Ireland and provide specialist forensic and medical care, needs assessment, and specialist psychological care including as well as community awareness and education for prevention. They also provide specialist SV advocacy services that relate mainly, but not exclusively, to the criminal justice system. RCCs in Ireland receive funding from the state as well as donations. Not all regions of the country have access to RCC services, although most regions have access to a service. There is one shared domestic violence/sexualised violence service under development and another merged outreach service that delivers specialist sexualised violence support alongside domestic violence and shelter support. Whilst the majority of clients are women and girls, RCCs are open to everyone from the age of 14 onwards. In 2022, seven RCCs using the Rape Crisis Network Ireland data collection system provided counselling and support services to 1,468 people (1,359 survivors and 109 people supporting survivors). This sample is estimated to be 37% of the national RCC counselling and support numbers.

The state agency, Tusla accepted this as a nationally representative sample, and national estimates can be extrapolated.

There are also seven sexual assault treatment units in Ireland, providing medical and forensic examinations and treatment to survivors of sexualised violence. All units are operated by the state Health Service Executive which is financed entirely through public funds. Clients are also offered a needs assessment which may include, for example, assessing special measures entitlements in court or an International Protection risk vulnerability assessment.

The Dublin Rape Crisis Centre runs the national helpline for survivors of rape and sexualised violence, the National Rape Crisis 24hr Helpline (tel.: +353 0800778888), which is free of charge and available 24/7. A service for those who are deaf or hard of hearing is also available via a text service from Monday-Friday between 8:00-18:30. There were 14,012 calls to the National Rape Crisis 24-hour helpline in 2021³⁷, and the most common form of violence reported were adult rape (43.5%), child sexual abuse (30%) and adult sexual assault (13.4%). The remaining 15 regional RCCs operate local specialised helplines during working hours, which offer part-time freephone services for

³⁷ Figures for 2022 are not available.

survivors of sexualised violence. Through the Rape Crisis Network Ireland (NRCI) nationally representative sample, it is estimated that approximately 45,000 to 50,000 contacts are made to all the RCCs helplines annually, however, data collection is fragmented. In 2022, 10,364 contacts were made to six RCCs' Helplines that use the RCNI data collection system. It is estimated that this is approximately one-quarter of the number of people who contacted all of the 16 RCCs. It is estimated that 74% of calls to Rape Crisis helplines go to local helplines rather than the National helpline. These helplines are not state-funded. Furthermore, there are two helplines by NGOs that specialise in services for child survivors of sexual violence. The first one is run by the organisation CARI which runs a part-time helpline (tel.: +353 1890924567) and the second is run by the NGO One in Four (tel.: +4416624070) which provides

support for adult survivors of childhood sexual abuse.

There are also a number of other specialised services offering support to children, families, and adult survivors of sexualised violence in Ireland. Namely, there is one Barnahus children's service run by the state, which also runs an adult child sexual abuse counselling service. Additionally, there are two NGOs, One in Four and Ruhama, working with survivors of sexualised violence and broadly working from a feminist and gender-sensitive approach (although not only working with women). Ruhama works specifically with women in the sex industry and survivors of trafficking for the purposes of sexual exploitation, and has a dedicated employment support service for women who have experienced commercial sexual exploitation.

5. PRIMARY PREVENTION SERVICES

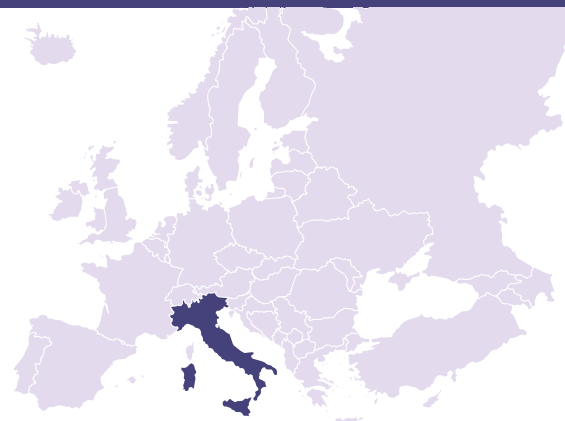
👏 There is a National Action Plan (NAP) on violence against women and girls in Ireland. The NAP includes specific provisions on the primary prevention (PP) of VAWG as well as a definition of primary prevention. The state runs and funds awareness-raising and PP programmes from the Department of Justice on a rolling basis, and NGOs advise and collaborate on these programmes. In addition, there are a range of local or sector-specific initiatives that have partial state funding. Some of the primary prevention activities available in Ireland are school-based primary prevention programmes, bystander intervention

training, and awareness-raising campaigns or programmes. The programmes in schools are partially, but not wholly, related to primary prevention. Some primary prevention initiatives are at the early stages of analysis and so fall more firmly into awareness raising rather than structural change. The beneficiaries of PP activities and initiatives are the general public, women, men, girls, and boys under the age of 18 as well as LGBTQI+ people and minority groups. Beneficiaries of sector-specific initiatives can also include higher education populations (staff and students) or the entertainment industry, for example.

ITALY

GENERAL COUNTRY INFORMATION

Population	59,030,133
Female population	30,211,177
Member of Council of Europe (year)	1949
Member of European Union (year)	1957
Member of United Nations (year)	1955
CEDAW ratified (year)	1985
CEDAW optional protocol ratified (year)	2000
Istanbul Convention signed (year)	2012
Istanbul Convention ratified (year)	2013



SUMMARY

► There is one national women's helpline in Italy, operating 24/7, free of charge, and offering multilingual support. Therefore, Italy **does meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. In Italy, there are 431 shelters accessible to women, offering approximately 3,000 beds. Italy **does not meet** the IC standards for women's shelters provision, since 49% of the required beds are missing. There are 373 women's centres in Italy. There are no rape crisis centres or sexual violence referral centres in Italy, but the 86 women's

centres members of the network D.i.Re. provide specialist and competent support for survivors of sexualised violence. There is a National Action Plan on violence against women and girls (VAWG) in Italy, which has specific provisions on the primary prevention (PP) of VAWG. The state collects data on women's specialist services and this data is public. However, the data collected does not differentiate between gender-neutral services and services with a gender-specific approach.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	Yes	32,430 calls; 11,909 callers

☎ There is one national women's helpline in Italy, called the National Helpline Against Violence and Stalking (*Numero Nazionale Antiviolenza e Stalking*, tel.: +39 1522). It is run by the NGO Difference Woman (*Differenza Donna*) and is funded by the state. The helpline is free of charge, operates 24/7, and offers multilingual support in Italian, English, French, Spanish, and Arabic. The helpline provides

support for survivors of all forms of violence against women. In 2022, the helpline received 32,430 calls from 11,909 callers. The most common forms of violence reported by callers were psychological violence, physical violence, and stalking. There are other regional and specialised helplines supporting survivors of VAW in Italy.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
431	N/A	Most	3,200	2,703	46%	18,447

🏠 There are 431 women-only shelters in Italy, with approximately 3,200 beds available.³⁸ Most women-only shelters offer 24/7 access and women are not expected to pay for their accommodation. Women-only shelters are funded

by donations and by national/local authorities, however, funding is often insufficient, and shelters have to look for different sources in order to cover their costs. Shelters are located in all regions, but mostly in major cities, leaving

38 Italian Institute for Statistics, Il Sistema di protezione per le donne vittime di violenza, anni 2021 e 2022, retrieved 21 September 2023: <https://www.istat.it/it/files/2023/08/2023-03-08-statreportprotezione-Istat-Dpo.pdf>

many areas without adequate shelter service. On average, women can stay in the shelters for three to six months but often stay for longer periods of time.

If a women-only shelter had to decline referrals, it was mainly because of the lack of space/capacity to support the survivor or to accommodate the survivor with her children, the survivor being ineligible for support, or if the shelter itself is not adequately equipped for the needs of the women/children. The three most common types of violence reported by the clients to the women-only shelters in 2022 are domestic violence, physical violence, and psychological violence. Most women-only shelters provide several in-house services such as casework, counselling, legal and practical advice as well as referrals and collaboration with other services. In 2022, approximately 2,000 women were accommodated in women-only shelters. In

terms of accessibility, all women-only shelters are accessible to older women and homeless women. Most of them accommodate women with older sons (14 years and above). Some of the shelters are accessible to women with uncertain residence status/undocumented women, women with physical disabilities, and transgender women, and none is accessible to women with substance abuse issues.

There are other shelters in Italy, besides the women-only shelters, which can provide support to survivors of VAW and are available to women, men, non-binary people, transgender women and men, as well as other groups of survivors. There are specific shelters for vulnerable groups, e.g., migrant/undocumented women, LGBTQI+ people, and women survivors of trafficking, honour-based violence, forced marriage and female genital mutilation.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
373	80,995	Women's NGOs ; Other NGOs ; State

❖ There are 373 women's centres located in all regions of Italy. They are run by the state, women's NGOs and other NGOs. Funding for women's centres comes from national/local authorities, donations, and international funding. The 87 NGOs belonging to the Women's Network against Violence D.i.Re. (*Donne in Rete contro la Violenza*) run 106 women's centres. Of the 373 women's centres, 302 centres provide counselling/psychological support, housing advice, and referrals. Most centres provide legal advice and representation at court/police/social services. Some of the centres offer employment as well as financial and social welfare support/advocacy. All the centres provide specialist support for women with uncertain residence status/undocumented women, older women, non-binary people and black and minority ethnic women. Some centres provide specialist support for women survivors of forced marriage, honour-based violence, trafficking in persons, and for women with disabilities. Most centres provide support for transgender women. Most women's NGO centres provide also residential support services. Women's centres which are run by women's NGOs, such as those belonging to the D.i.Re. Network, also provide specialist support for survivors of sexualised violence (SV). Such support includes needs assessment, specialist SV advocacy services as well as community awareness and

education for prevention. In 2022, approximately 30,000 women were supported by all women's centres in Italy. Italy has a very unequal distribution of wealth, welfare, social services and working opportunities. Hence, Italian regions differ significantly also on the provision of women's centres, with the South of Italy suffering the most, as well as some rural areas of Central and Northern Italy.

One organisation called *Trame di Terra* provides assistance in cases of forced marriage and honour-based violence. More than 23 centres run by D.i.Re members provide specialist services around trafficking in persons. However, there are no specialist support services for migrant women survivors of VAW in Italy; migrant women find themselves in generic services for migrants (with men and families), with no special competence for VAW. Women's centres provided by the D.i.Re members also provide specialist support for survivors of sexualised violence, such as needs assessment, specialist psychological care, specialist sexualised violence advocacy services, community awareness and education for prevention. Many of D.i.Re members run both centres and connected shelters, but they often lack sufficient resources to provide sufficient residential support services too.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There are no rape crisis centres or sexual violence referral centres in Italy. There are crisis/medical services for survivors of sexualised violence. 87 women's centres who are members of the network D.i.Re provide specialist and competent support for survivors of sexualised violence (SV). They offer needs assessment, specialist SV

advocacy services and community awareness and education for prevention. Specialist forensic and medical care is provided by gynaecological and emergency departments in hospitals, which are required by the Italian criminal law on sexual violence to follow a certain procedure for forensic evidence in cases of SV. Some hospitals of major cities

have specialised emergency services (*Clinica Mangiagalli* in Milan, and hospitals in Rome, Naples, Bologna, Grosseto and some other Tuscan cities, with a project called Pink Code "*Codice Rosa*"). Sexualised violence support services are funded by the state from national/local authorities as

well as by donations. There is no specialised helpline for cases of SV, but the national helpline 1522 provides support for these cases too. Support services are available in all regions of Italy and are accessible only to women over 18 years of age.

5. PRIMARY PREVENTION SERVICES

👉 There is a National Action Plan on VAWG³⁹ in Italy for the period 2021–2023, which includes specific provisions on the primary prevention of VAWG. There is an official definition of primary prevention in the NAP. The state funds primary prevention activities. Primary prevention activities in Italy include school-based primary prevention programmes, training for primary prevention practitioners,

and awareness-raising campaigns or programmes. Beneficiaries of such activities are the general public, girls and boys under the age of 18, women, men, and LGBTQI+ people. Only 14% of the NAP's funds are dedicated to PP, and few organisations can access them. School programs are not adequately funded, and PP is often not a priority.

39 Presidency of the Council of Ministers, Equal Opportunities Department, National Action Plan on Male Violence against Women 2021–2023 (2021), retrieved 21 September 2023, <https://www.pariopportunita.gov.it/media/1952/piano-nazionale-violenza-2021-2023.pdf>

KOSOVO

GENERAL COUNTRY INFORMATION

Population	1,798,188 ⁴⁰
Female population	903,544
Member of Council of Europe (year)	No
Member of European Union (year)	No
Member of United Nations (year)	No
CEDAW ratified (year)	No ⁴¹
CEDAW optional protocol ratified (year)	No
Istanbul Convention signed (year)	No
Istanbul Convention ratified (year)	No ⁴²



SUMMARY

► There is one national women's helpline in Kosovo which is available 24/7, free of charge and provides multilingual support. Kosovo **does meet** the Istanbul Convention (IC) standards for the provision of a women's helpline. There are ten women-only shelters run by women's NGOs and one additional state-run shelter in Kosovo, for a total of 180 beds available, which corresponds to the number of beds required by the IC standards. Therefore, the country **does meet** the IC standards for the provision of women's

shelters. There are three women's centres in the country run by women's NGOs and no specialist services for survivors of sexualised violence besides medical services in hospitals. There is a National Strategy on the Protection against Domestic Violence and Violence Against Women in Kosovo, and it includes specific provisions on primary prevention. The state collects data on women's specialist services, and this is available upon request.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	Yes	865 calls

☎ There is one national women's helpline in Kosovo, called Helpline Number (*Numri i Linjës Ndihmëse*, tel.: +383 80011112). The helpline is available 24/7, it is free of charge and provides multilingual support in Albanian and Serbian. The helpline is run by the State Prosecutor under the Victims' Advocacy and Assistance Office and it is funded by the state. The helpline provides support to survivors of all forms of violence. In 2022, the helpline received 386

calls and the most common forms of violence reported by callers were physical and domestic violence.

Additionally, there are also regional helplines in Kosovo, run by women's organisations. Safe House Gjakova runs a local helpline (tel.: +383 80080001 and +383 390330098), and Women Wellness Centre runs another one (tel.: +383 44278809).

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN		EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
		24/7 ACCESS				
10	11	All	180	0	0%	9,990

40 The most recent available data on Eurostat is from 2021.

41 CEDAW was signed while Kosovo was still part of former Yugoslavia, in July 1980, and ratified in February 1982. Art. 22 of the Constitution of the Republic of Kosovo includes CEDAW in the International Agreements and Instruments with direct applicability in the Republic of Kosovo and, in the case of conflict, have priority over provisions of laws and other acts of public institutions.

42 Art. 22 of the Constitution of the Republic of Kosovo includes the Istanbul Convention in the International Agreements and Instruments with direct applicability in the Republic of Kosovo and, in the case of conflict, have priority over provisions of laws and other acts of public institutions.

🏠 There are ten women-only shelters in Kosovo, offering 155 beds for women survivors of VAW. All shelters offer 24/7 access and are run by women's NGOs with a gender-sensitive approach. Women-only shelters are available in all regions and women are not expected to pay for their accommodation. On average, women are allowed to stay in the shelters for more than a year. Funding for women-only shelters comes from the state.

In terms of accessibility, all shelters are accessible to women with uncertain residence status/undocumented women, women with physical disabilities, and older women, some shelters are also accessible to homeless women, women with cognitive disabilities, women with substance abuse issues, transgender women and women with older sons (14 years and above). One of these shelters is specialised in supporting survivors of trafficking and has a

capacity of 10 beds, while another shelter supports children survivors of abuse and domestic violence, and has 12 beds available. Additionally, the state is also running a women's shelter, which offers 25 beds for high-risk victims of trafficking of human beings.

If women-only shelters had to decline referrals, this was due to the lack of space and capacity to support the survivors or the lack of space and capacity to accommodate the survivor with her children. The most common forms of violence reported by clients in 2022 were domestic, sexualised and emotional violence. The types of in-house services most often provided by shelters are counselling, referrals and collaboration with other services, practical advice, legal advice, medical services and reintegration courses. In 2022, women's shelters in Kosovo supported 1,149 survivors of VAW.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
3	301,181	Women's NGOs (3 centres)

❖ There are three women's centres in Kosovo that support women and girls affected by VAW. The services provided by women's centres include counselling and psychological support, legal advice, financial and social welfare support/advocacy, housing advice, employment, referrals, and representation at court/police/social services. Moreover, women's shelters can also provide non-residential support services, such as counselling, housing advice, referrals and representation at court/police/social services. Women's centres also provide support for survivors of

sexualised violence (SV), including specialist psychological care, community awareness and education for prevention. Women's centres are run by women's NGOs and receive state funding, donations and international funding. In 2022, 780 women were supported by women's centres. Nevertheless, women's centres face a lack of sufficient funding and resources, and this hinders the provision of specialised and long-term support services, such as assistance in finding employment and housing.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There are no SV referral centres or rape crisis centres in Kosovo, and the Institute of Forensic Medicine in Prishtina is the only institution responsible for the forensic examinations of victims of SV. In November 2022, the government of Kosovo approved the State Protocol for the Treatment of Sexual Violence Cases, which refers, among other things, to the application of a coordinated multi-sectoral

approach of the responsible institutions for the treatment of SV cases, along with the establishment of Sexual Assault Response Teams (SART).

Women's centres also support survivors of SV, but they are not equipped to provide proper long-term support to survivors.

5. PRIMARY PREVENTION SERVICES

👏 There is a National Strategy on the Protection against Domestic Violence and Violence Against Women (2022–2026),⁴³ and it includes specific provisions on primary prevention (PP), as well as a definition of PP. The state

funds PP activities, which are mostly related to awareness-raising campaigns or programmes. The beneficiaries of such activities are girls and boys under the age of 18 and women.

43 Republic of Kosovo, National Strategy on the Protection against Domestic Violence and Violence Against Women 2022–2026 (STRATEGJIA KOMBËTARE PËR MBROJTJE NGA DHUNA NË FAMILJE DHE DHUNA NDAJ GRAVE 2022–2026), January 2022, <https://kryeministri.rks-gov.net/wp-content/uploads/2022/05/ALB-Strategjia-Kombe%CC%88tare-pe%CC%88r-Mbrojtje-nga-Dhuna-ne%CC%88-Familje-dhe-Dhuna-ndaj-Grave-2022-%E2%80%932026.pdf>

LATVIA

GENERAL COUNTRY INFORMATION

Population	1,875,757
Female population	1,006,700
Member of Council of Europe (year)	1995
Member of European Union (year)	2004
Member of United Nations (year)	1991
CEDAW ratified (year)	1992
CEDAW optional protocol ratified (year)	No
Istanbul Convention signed (year)	2015
Istanbul Convention ratified (year)	No ⁴⁴



SUMMARY

► There is no national women's helpline in Latvia. Therefore, Latvia **does not meet** the Istanbul Convention (IC) standard for the provision of a women's helpline. There are 17 women-only shelters in Latvia, with no specified number of beds. Latvia therefore **does not meet** the IC requirements for the provision of women's shelters. There are three women's centres in Latvia but no specialised

services for women and girls who have experienced sexualised violence. There is no National Action Plan on violence against women and girls in Latvia. The state collects data about women's specialist services on the provision of services and clients supported, and this data is available upon request.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
0	-	-	-	-


☎ There is no national women's helpline in Latvia. There are four other helplines supporting survivors of violence against women in Latvia. The first crisis helpline is provided by the Crisis and Counselling centre "Skalbes" (*Križu un Konsultāciju Centrs "Skalbes"*, tel.: +371 116123 or +371 27722292) and operates 24/7. This is a generic crisis helpline which provides emotional and informational support for any caller or survivor of a crime. The second victim support helpline is called Victim (*Cietušajiem*, tel.: +371 116006) and operates every day from 12:00–22:00. This helpline is for all survivors of physical, mental, economic, and sexualised violence. The third helpline is run by the NGO Association "MARTA Centre" (*Biedrība "Centrs MARTA"*, tel.: +371 67378539) and provides support to women survivors of physical, emotional, sexualised, and economic violence as well as human trafficking. The helpline is free of charge but is not available 24/7 (only available weekdays

from 10:00–18:00). The helpline offers multilingual support in Latvian, Russian, and English. The fourth helpline is the Child and Adolescent Helpline (*Bērnū un pusaudžu uzticības tālrunis*, tel.: +371 116111) which is run by the State Inspection for Children's Rights. The helpline operates 24/7 and is available in Latvian. This helpline is for children under the age of 18 and youth as well as for parents, carers, teachers, and anyone who needs child-related help or advice. The helpline also provides emotional and informational support as well as the opportunity to report child right's violations. The two generic survivor support helplines (+371 116006 and +371 116123) received 6,888 calls in 2022. Only 23% of these calls related to violence. The most common forms of violence reported to these helplines was domestic violence, along with emotional violence, physical violence, and long-term violence (combining multiple forms of violence).

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN		EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
		24/7 ACCESS				
17	N/A	All	N/A	-	-	-

44 Latvia ratified the Istanbul Convention on November 30th, 2023.

 In Latvia, there are 17 women-only shelters, with an unspecified number of beds.⁴⁵ All women-only shelters have 24/7 access, and there are shelters for women with children, in case of a crisis or emergency. Women-only shelters are funded by the state as well as through donations and exist in all regions of Latvia. In most cases, women are not expected to pay for their accommodation. In trafficking cases, survivors can get accommodation paid by the state via service providers. However, if the client's costs are not covered, they are expected to pay 52 euros per day per person to stay in a shelter. This amount covers counselling, food, and lodging for a period of up to 30 days, but no longer than 50 days at a time. Women are allowed to stay for up to three months in the shelters, although they usually stay for up to 60 days at a time. One women-only shelter is run by a women's NGOs with a gender-specific/feminist approach and six women-only shelters are run by other NGOs. These shelters are for women and girls and are funded and managed by the NGO Children's Fund of Latvia. If women-only shelters had to decline referrals, it was mainly because the survivor was ineligible for support. For example, in case the survivor cannot present an ID or does not have citizenship, the first night in the shelter will be provided, but she cannot receive other services or longer-term shelter accommodation. The in-house services


most often provided by women-only shelters include counselling, legal advice, practical advice, casework, and collaboration with other services (such as the police). In 2022, approximately 640 women were accommodated in women-only shelters in Latvia and the most common type of violence reported by clients was domestic violence.

In terms of accessibility, all women-only shelters are accessible to homeless women, older women, and women with older sons (14 years and above). Most women-only shelters can accommodate women with physical or cognitive disabilities, and women with substance abuse issues. There are no specific shelters for vulnerable groups such as women with disabilities or undocumented women, or women survivors of specific forms of violence, such as survivors of trafficking or forced marriage.

In addition to the shelters mentioned above, MARTA Centre provides anonymous shelter spaces in crisis situations related to VAW and/or human trafficking. However, spaces are limited, providing only two women and/or their children with a place to stay.⁴⁶ There are no other shelters in Latvia, besides the women-only shelters, which can provide support to survivors of VAW.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
3	335,567	Women's NGOs (3 centres)


 There are three women's centres in Latvia,⁴⁷ all are run by women's NGOs and located in most regions of the country. All women's centres in Latvia provide counselling/psychological support and legal advice services to women survivors of VAW. Two women's centres provide representation at court, police, and social services.

In terms of specialist support provision, two women's centres provide specialist support services to survivors of forced marriage and trafficking, and one centre provides specialist support to women with uncertain residence status/undocumented women. There are no centres that

provide specialist support to survivors of honour-based violence or female genital mutilation, nor for black and minority ethnic women, older women, women with disabilities, transgender women, and non-binary people. Women's centres provide non-residential support only. Women's centres receive funding from the state as well as donations.


Some of the women's centres also offer support for survivors of sexualised violence including needs assessment, specialist psychological care and community awareness as well as education for prevention.⁴⁸

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

 There are no services for women and girls who have experienced sexualised violence in Latvia. Several NGOs (including Skalbes, Centre Dardedze for underaged girls, and MARTA Centre) do however offer psychological and

legal services for survivors of sexualised violence. Skalbes provides support to survivors of all forms of violence, including sexualised violence.

5. PRIMARY PREVENTION SERVICES

 There is no National Action Plan on violence against women and girls in Latvia and there is no official definition of primary prevention. The state funds some primary prevention activities, namely, school-based primary prevention programmes, awareness-raising campaigns

or programmes, and conferences on the prevention of violence. Beneficiaries of such activities are the general public, men and women, as well as girls and boys under the age of 18.

⁴⁵ This is based on research from Women's NGOs Cooperation Network of Latvia as the publicly available information by the state is incomplete.

⁴⁶ Information from the WAVE Country Report 2021.

⁴⁷ This number is based on estimates and is likely incomplete as the publicly available information is limited.

⁴⁸ Information from the WAVE Country Report 2021.

LIECHTENSTEIN

GENERAL COUNTRY INFORMATION

Population	39,308
Female population	19,812
Member of Council of Europe (year)	1978
Member of European Union (year)	No
Member of United Nations (year)	1990
CEDAW ratified (year)	1995
CEDAW optional protocol ratified (year)	2001
Istanbul Convention signed (year)	2016
Istanbul Convention ratified (year)	2021



SUMMARY

► There is one national women's helpline in Liechtenstein operating 24/7, free of charge, and offers multilingual support. Thus, Liechtenstein **does meet** the Istanbul Convention (IC) standards on the provision of a women's helpline. There is one shelter in the country offering ten-bed spaces, which is more than what is required by the IC, and therefore, Liechtenstein **does meet** the standards for the

provision of women's shelters. There is also one women's centre in the country and no specific services for survivors of sexualised violence. Liechtenstein has a National Action Plan on violence against women and girls, which includes provisions on the primary prevention of VAW. The state collects information on women's specialist services, and it is publicly available.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	Yes	94 callers

☎ There is one state-wide women's helpline in Liechtenstein, the 24-hour Emergency Number (*24 Stunden Notruf*, tel.: +423 3800203) which is run by the women's shelter *Frauenhaus Liechtenstein*. The helpline is free of charge, available 24/7, and offers multilingual support in German, Turkish, Spanish, Portuguese, Serbian, Arabic, and Croatian. Any other language can be made available upon request. The funding for the helpline comes from the state and donations. In 2022, the helpline was contacted by 94 callers. The most common forms of violence reported were psychological violence, physical violence, and violence directly or indirectly involving children. There are other national helplines that can provide support to survivors

of violence against women: the Victims Assistance Centre (*Opferhilfestelle Liechtenstein*, tel.: +423 2367696), which is a general survivors' helpline, is state-run but not free of charge, nor available 24/7, the Information and counselling centre for women – *Infra (Informations- und Beratungsstelle für Frauen – Infra*, tel.: +423 2320880), the Crisis Intervention Team – *KIT (Kriseninterventionsteam - KIT*, tel.: +423 2300506), the Office for Social Services (*Amt für Soziale Dienste*, tel.: +423 2367272) and the Helpline for Children and Teenagers in Liechtenstein (*Sorgentelefon für Kinder und Jugendliche in Liechtenstein*, tel.: +423 147) which is a national children's helpline that is available 24/7 and free of charge.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN		EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
		24/7 ACCESS				
1	1	Yes	10	0	0%	3,931

🏠 There is one women-only shelter in Liechtenstein, the *Frauenhaus Liechtenstein*, which has three rooms with ten beds in total. The shelter is accessible 24/7 and women are not expected to pay for their stay. Funding for the

shelter comes from the state and donations. Women can stay there between three to six months, but according to the case, women can also stay longer. The women-only shelter is accessible to women with uncertain residence

status, homeless women, older women, transgender women, and women with older sons. Women with disabilities can find support in a specialised organisation called LBV (*Liechtensteiner Behinderten-Verband – LBV*). The shelter is not accessible to women with physical disabilities and women with substance abuse issues can find accommodation in a specific shelter called Association for Assisted Living (*Verein für betreutes Wohnen*) which women are only allowed to access if they are able to support themselves. The main reason why the women-only shelter has

to decline referrals is that they do not have the space to accommodate survivors from other countries, as at least one-bed space must always be available for Liechtenstein residents, or they are not adequately equipped for the needs of women/children. The most common types of violence reported by clients were physical and psychological violence. In addition to accommodation, the shelter also offers counselling, referrals, and legal advice to survivors. In 2022, 12 women and 16 children were accommodated in the women-only shelter.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
1	19,812	Women's NGO (1 centre)

❖ There is one women's centre in Liechtenstein that supports women survivors of VAW called *Infra (Informations- und Beratungsstelle für Frauen – Infra*, tel. +423 2320880) and it is run by a women's NGO. The centre provides a variety of services such as counselling, referrals, legal advice, and financial and social welfare support. It is not specialised in supporting survivors of specific forms of violence (forced marriage, honour-based violence, female genital

mutilation, trafficking in person), or women from vulnerable groups (such as women with uncertain residence status, black and minority ethnic women, women with disabilities, older women, transgender women, and non-binary people). Additionally, the state runs one Victims Assistance Centre (*Opferhilfestelle*) and the women's shelter also offers counselling services. Funding for women's centres comes from the state, donations, and membership fees.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ In Liechtenstein, there are no specific support services for survivors of sexualised violence. Medical services are provided at hospitals, and women survivors of SV are

normally referred to the women's clinic of St. Gallen in Switzerland.

5. PRIMARY PREVENTION SERVICES

👏 There is a National Action Plan on violence against women and girls in Liechtenstein and it includes specific provisions on the primary prevention of VAW as well as a definition of primary prevention. In addition, the state funds primary prevention activities. Activities carried out in Liechtenstein include feminist self-defence

training, school-based primary prevention programmes, self-care activities, and awareness-raising campaigns or programmes. The beneficiaries of these activities are the general public, girls under the age of 18, women, and LGBTQI+ people.

LITHUANIA

GENERAL COUNTRY INFORMATION

Population	2,805,998
Female population	1,499,399
Member of Council of Europe (year)	1993
Member of European Union (year)	2004
Member of United Nations (year)	1991
CEDAW ratified (year)	1994
CEDAW optional protocol ratified (year)	2004
Istanbul Convention signed (year)	2013
Istanbul Convention ratified (year)	No



SUMMARY

► Lithuania has one national women's helpline which is free of charge, operates 24/7 and provides multilingual support. Therefore, Lithuania **does meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. Lithuania has 16 women's centres called specialised complex assistance centres (SKPCs) for survivors of domestic violence, that provide free of charge and proactive help throughout the country. Due to the Lithuanian help provision model, government-funded NGOs focus on women's empowerment and their human rights, providing

specialised help. There are no women-only shelters in Lithuania⁴⁹ and the country **does not meet** the IC standards for the provision of bed spaces in women's shelters. However, women's specialist services in Lithuania do provide adequate support to women survivors of violence based on the assessed needs of the country (and in accordance with the IC clause).⁵⁰ There are no specialised support services for survivors of sexualised violence in Lithuania. The state does collect data on women's specialist services and this information is publicly available.⁵¹

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	Yes	N/A

☎ Lithuania has one national women's helpline called Helpline for Women (*Pagalbos moterims linija*, tel. +370 880066366) which is free of charge, available 24/7, and offers multilingual support (in Lithuanian, Russian and English). The helpline also operates an online chat which is available Mon-Sun, 17:00-22:00. The helpline is run by the Women's Information Centre (*Moteryų informacijos centras*) in Vilnius, Klaipėda Social and Psychological Assistance Center (*Klaipėdos socialinės ir psichologinės pagalbos centras*) in Klaipėda, and Association "Kaunas Women's Line" (*Association "Kauno moterų linija"*) in Kaunas. The main

source of funding for the helpline comes from the state as well as donations. Every year, the helpline receives an average of 26,000 calls, although it is important to note that the helpline does not only provide support to women survivors of violence.

Specialised complex assistance centres (*Specializuotos kompleksinės pagalbos centras – SKPC*) also run a general emergency helpline available Mon-Fri, 8:00–20:00 (tel.: +370 870055516). SKPCs offer assistance to victims of domestic violence throughout Lithuania.

49 This information is from the WAVE Country Report 2021.

50 6 CETS 210 – Explanatory Report to the Council of Europe Convention on preventing and combating violence against women and domestic violence (coe.int) p.25.

51 Ibid.

2. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
16	93,712	Women's NGOs; Other NGOs

❖ There are 16 women's centres in all regions of Lithuania for all survivors of violence, the majority of which are run by women's NGOs and some by other NGOs. Specialised complex assistance centres (Specializuotos kompleksinės pagalbos centras – SKPCs) all provide counselling and psychological support, as well as mediation in institutions, civil empowerment, legal advice, litigation and representation at court. Specialised complex assistance consists of proactive outreach to the survivors (such as counselling and providing relevant legal and social information necessary for making informed decisions), specialised legal and psychological help, and representation at various institutions such as the police, prosecutors, courts, or children's rights agencies. SKPCs are first of all telephone services, but they also can meet their client in person upon request. The main sources of funding for women's centres are state funding, donations and international funding, although NGOs operating as SKPCs remain autonomous NGOs and carry out other projects around prevention, awareness raising and lobbying.

All survivors of domestic violence in Lithuania are entitled to receive help from SKPCs. As all 16 SKPCs are NGOs and most of them are women's NGOs, they provide gender-sensitive, specialised, long-term support free of charge. Furthermore, Vilnius Women's House (Vilniaus

Moterų Namai) provides specialised legal and psychological counselling, post-traumatic stress symptoms (PTSS) assessment, and litigation.

In 2021, the specialised complex assistance centres (SKPCs) registered 16,343 victims of domestic violence, of whom 5,184 were minor children who had experienced, witnessed or lived in an abusive environment. Eighty-nine percent of the reports of domestic violence recorded by the SKPCs were referred by police officers. In total, 11,651 survivors were assisted by SKPCs in 2021, women made up the vast majority of survivors (81%), and 88% of perpetrators were men.

There are no centres offering specialised support to survivors of sexualised violence or to vulnerable groups such as women with disabilities and black and minority ethnic women. SKPCs provide help to all survivors who turn to them or are referred by the police, according to the Lithuanian Protection from Domestic Violence law. There are also women's NGOs providing consultations and support including legal support to women survivors of domestic violence and intimate partner violence, not recognised as SKPCs. They do not get regular funding from the state as SKPCs do and are funded on project basis by the state, local authorities and private donors.

3. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
0 ⁵²	N/A	-	-	281	100%	-

🏠 Based on the assessed needs of the country, women's shelters are not the preferred support service for survivors of VAW. There are therefore no women-only shelters in Lithuania. The Lithuanian help provision model is focused on women's civic empowerment and proactive specialised complex help provision. An emphasis is placed on the legal framework that puts the responsibility on the perpetrator and strives to protect women's and their children's right to a safe home, by removing the perpetrator from the home. Women's specialist services in Lithuania do provide adequate support to women survivors of violence based on the country-specific situation (and in accordance with the

IC). There are shelters in Lithuania which are accessible to women survivors of violence, although these are generic and do not take a survivor-centred, feminist approach. Additionally, such shelters are also open to men and the exact number of available beds is unknown.

Women's crisis centres can provide temporary shelter for women who are subjected to domestic violence. Survivors can stay in municipally operated crisis centres and temporary accommodation establishments for mothers and children. In 2017, there were 49 crisis centres in Lithuania with 790 places for accommodation.⁵³

⁵² This information is from the WAVE Country Report 2021.

⁵³ Republic of Lithuania national-level review on the Implementation of the Beijing Declaration and Platform for Action (1995): For the Period from 2014 to 2019, page 31, <https://www.unwomen.org/sites/default/files/Headquarters/Attachments/Sections/CSW/64/National-reviews/Lithuania.pdf>.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There are no services specifically for women and girls survivors of sexualised violence in Lithuania. There is one centre that provides help for child survivors of sexualised violence.⁵⁴ However, this centre is not gender-specific and

provides help to both girls and boys. Occasionally, survivors of sexualised violence turn to SKPCs for help and can receive legal assistance and psychological support.

5. PRIMARY PREVENTION SERVICES

👤 Lithuania does not currently have a National Action Plan addressing violence against women and girls, although it did have one namely “The National Programme for the Prevention and Assistance of Victims of Domestic Violence 2014-2020”. This NAP included specific provisions on primary prevention. The state did fund

primary prevention activities as part of this Action Plan and financed 23 projects aimed at preventing domestic violence from 2017 to 2020.⁵⁵ More than 400 events took place that were attended by 14,000 people. Such activities included awareness-raising and campaigns as well as education programmes, among others.

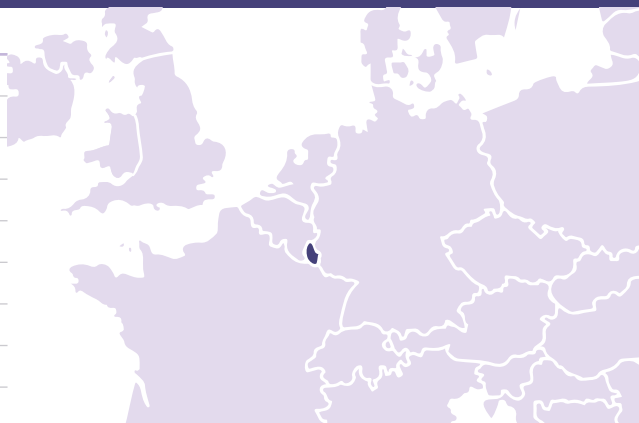
⁵⁴ This information is based on the WAVE Country Report 2021.

⁵⁵ Republic of Lithuania national-level review on the Implementation of the Beijing Declaration and Platform for Action (1995): For the Period from 2014 to 2019, page 33, <https://www.unwomen.org/sites/default/files/Headquarters/Attachments/Sections/CSW/64/National-reviews/Lithuania.pdf>.

LUXEMBOURG

GENERAL COUNTRY INFORMATION

Population	645,397
Female population	320,333
Member of Council of Europe (year)	1949
Member of European Union (year)	1957
Member of United Nations (year)	1945
CEDAW ratified (year)	1989
CEDAW optional protocol ratified (year)	2003
Istanbul Convention signed (year)	2011
Istanbul Convention ratified (year)	2018



SUMMARY

► There is a national women's helpline in Luxembourg, but it is not available 24/7, thus, the country **does not meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. There are seven women-only shelters offering 219 beds, which exceeds the requirement of the IC. Luxembourg **does meet** the IC standards on the provision of women's shelters. There are eight women's

centres, of which five are run by women's NGOs and three by other NGOs. There is no rape crisis centre in Luxembourg, however, there is one crisis/medical centre. In the country, there is a National Action Plan on VAW, including special provisions on primary prevention. The state collects data on women's specialist services, which is available to the public.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	No	Yes	N/A

☎ There is no national helpline solely dedicated to women in Luxembourg. There is, however, one helpline that supports all survivors of violence called the Domestic Violence Helpline (*Helpline Violence Domestique*, tel.: +352 20601060). The helpline was opened in 2020, during the first COVID-19 lockdown. This helpline is available every day from 12–20 p.m. and is both for men and women survivors of violence. It is free of charge and offers support

in Luxembourgish, French, German, and English. The hotline is run by the association *Fondation Maison de la Porte ouverte* and *Pro Familia*, which have signed an agreement with the Ministry of Equality between Men and Women to provide this service.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
7	7	Most	219	0	0%	2,947

🏠 There are seven women-only shelters in Luxembourg with 219 beds available. Most of the shelters offer 24/7 access. Women who have an income are expected to pay for their stay, women without an income are not. The funding for the women-only shelters comes from the Luxembourgish State and donations. Out of the seven women-only shelters, three are run by women's NGOs with a gender-specific/feminist approach and four are run by other NGOs.

Women-only shelters exist in most regions of the country and on average, women are allowed to stay there between three and six months. However, due to unaffordable housing, some women stay in the shelters for more than one year. All these shelters are accessible to older women, transgender women, and women with sons older than 14, most of them are accessible to homeless women and women with physical or cognitive disabilities, some are accessible to women with uncertain residence status

and undocumented women, and none are accessible to women with substance abuse issues. In addition, there are specific shelters for women and men survivors of trafficking that provide 10 beds in different cities of the country.

The main reasons why women were not accepted to the shelters were no space/capacity to support the survivor or to accommodate the survivor with her children, or the survivor was ineligible for support. The most common types of violence reported by survivors were psychological, physical, and economic violence. The main in-house

services provided by women-only shelters are mainly casework and counselling but sometimes also referrals/collaboration with other services. In 2022, 179 women were accommodated in women-only shelters.

There are other shelters in Luxembourg that provide support to survivors of VAW, however, it is not known how many beds they provide. These shelters are run by Caritas, the Red Cross, and Interactions. These shelters are available to women, men, non-binary people, transgender women, transgender men, and other groups of survivors. Some of these shelters offer 24/7 access.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
8	40,042	Women NGOs (5 centres); Other NGOs (3 centres)

❖ There are eight women's centres in Luxembourg, of which five are exclusively for women and three are open to all survivors. All centres offer counselling/psychological support and legal advice; six centres offer also financial and social welfare support/advocacy, housing advice, employment, and referrals. One centre offers representation at the court or police. One of the centres that is open to all survivors also supports survivors of trafficking and people with uncertain residence status. The women's centres provide only non-residential support services, but they can

also organise and finance emergency housing accommodations. Five centres are run by women's NGOs and three by other NGOs and they receive their funding from the Luxembourgish State and from donations. The women's centres are available in most regions of the country and supported 1,600 women in 2022. Additionally, there is one centre for counselling for girls and young women up to the age of 21, and there are two centres for psychological counselling for children and young people up to the age of 21.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There are services for women and girls who have experienced sexualised violence in Luxembourg, namely specialist forensic and medical care, specialist psychological care, and community awareness and education for prevention. The centre Umedo documents sexualised and physical violence and is open both for men and women.

Moreover, all hospitals provide crisis and medical care. There is no special helpline for survivors of sexualised violence. Funding for the centres is derived from the Luxembourgish State and donations. The centres are located in major cities and provide support for all survivors of sexualised violence.

5. PRIMARY PREVENTION SERVICES

👤 Luxembourg has adopted a National Action Plan on violence against women and girls which includes specific provisions on the primary prevention of VAW. In addition, the Luxembourgish State funds primary prevention activities. There is no definition of primary prevention in the NAP. The primary prevention activities available in Luxembourg are feminist self-defence trainings, school-based primary prevention programmes, training for primary prevention practitioners, bystander intervention training,

self-care activities, awareness-raising campaigns, and prevention theatre sessions for young people. The Orange Week, a community event dedicated to combating violence against women and girls, offers additional events and workshops in line with the National Action Plan. In addition, there is a National Plan on sexual and emotional health which focuses on the development of sexual and emotional education promoting the values of respect and equality between sexes.

MALTA

GENERAL COUNTRY INFORMATION

Population	520,971
Female population	250,905
Member of Council of Europe (year)	1965
Member of European Union (year)	2004
Member of United Nations (year)	1964
CEDAW ratified (year)	1991
CEDAW optional protocol ratified (year)	2019
Istanbul Convention signed (year)	2012
Istanbul Convention ratified (year)	2014



SUMMARY

► Malta currently **does not meet** the minimum standards of the Istanbul Convention (IC) for the provision of a national women's helpline, as no national women's helpline operates in the country. There are five women-only shelters covering the needs of the country. Malta **does meet** the minimum standards of the IC on the provision of women's shelters. There are eight women's centres in Malta as well as one service for women survivors of sexualised

violence. Malta currently does not have an active National Action Plan on violence against women and girls, however, the third national strategy plan which will include primary prevention is being drafted. The state collects data on women's specialist services which is available upon request.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
0	-	-	-	-

☎ Malta does not have a national women's helpline. There is a generic helpline in the country that provides support to different groups of people, including survivors of domestic violence, child abuse, human trafficking, and more. The

NGO Women's Rights Foundation provided a legal support helpline that used to operate 24/7 and was available in five languages. This helpline closed in March 2023 due to the lack of human resources.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN		EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
		24/7 ACCESS				
5	6	All	95 ⁵⁶	0	0%	5,483

🏠 There are five women-only shelters in Malta: one is run by the state, while the others are run by NGOs. Three of them are emergency shelters, while two are second-stage shelters. The state-run emergency shelter has 12 beds, one emergency shelter offers 38 beds, one second-stage shelter has nine beds and the other has 36 beds. All shelters provide 24/7 access. Women-only shelters are located only in major cities; however, due to the size of the island, shelters are easily accessible. Emergency shelters generally allow women to stay for a period between three

to six months, while second-stage shelters are available for one to two years. The main reasons why women-only shelters might have to decline referrals is because they do not have space to support the survivor or no space to accommodate the survivor with her children. Counselling, referrals, and practical advice are the three main in-house services offered by women-only shelters. In addition, the shelters collaborate with other NGOs and state services to provide legal advice. In 2022, approximately 115 women were accommodated in women-only shelters.

⁵⁶ Number of beds in four women-only shelters.

Women are expected to pay for their accommodation if they can afford it, and all women are accepted in the shelters and receive support regardless of whether they can pay or not. The fees vary, in the state emergency shelter, women are asked to pay a contribution of 50 euros per month, 25 euros for children between four and 17, while no fee is expected for children under four. In the NGO's emergency shelter, residents who have an income through employment or social assistance are asked to contribute four euros per day per adult and one euro per day per child over the age of three. In one second-stage shelter women pay for the utilities, which is an integral part of their care plan to prepare them for independent living, to support them with planning finances, and to identify any barriers that may exist. Women and families are then supported with donations of food, toiletries, and household needs. The other second-stage shelter has a monthly fee of 85

euros. Shelters receive some funding from the state, but it does not cover all their costs, and the rest is covered by donations and fundraising.

All women-only shelters are accessible to women with uncertain residence status, homeless women, women with physical and/or cognitive disabilities, older women, and transgender women. Most are accessible to women with older sons. Moreover, there is a shelter for survivors of trafficking and for LGBTQI+ people.

Additionally, there is one homeless shelter in Malta that has a capacity of 48 beds as well as a one-night shelter. The homeless shelter is run by the YMCA, and they host all groups including men, women, and families. The night shelter is called Dar Papa Frangisku and they support all groups of women.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
8	31,363	Women's NGOs (1 centre); Other NGOs (5 centres); Police (1 centre)

❖ There are both women-only centres and centres accessible to all survivors of violence in Malta, for a total of eight centres.⁵⁷ Centres are run by different entities: one of them is run by a women's NGO, one state-run social work service supports survivors of domestic violence, one police-run centre supports survivors of crime, including domestic violence survivors, and other centres are run by NGOs.

Women's centres provide referrals, the state-run and two NGO-run centres provide counselling, while one NGO and the state-led centre offer legal advice for survivors of domestic abuse, financial and welfare support, housing advice, employment, and one centre offers representation at

court/police. Four of the centres also provide residential support. One centre offers support for survivors of trafficking in persons, one supports transgender women and non-binary people including survivors of VAW. No centres are specialised in supporting survivors of forced marriage, honour-based violence, female genital mutilation, women with uncertain residence status, black and ethnic minority women, women with disabilities, or older women. Funding for women's centres comes from state funding from national/local authorities, donations, and national projects. Women's centres are available in most regions of the country. Women's centres also provide specialist sexualised violence advocacy services.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ The NGO Victim Support Malta, in collaboration with the state social work service, runs the Care for Victims of Sexual Assault service. This centre also collaborates and liaises with medical staff, police, and legal NGOs. There is no crisis/medical centre and no specialised helpline for survivors of sexualised violence. The centre provides

specialist psychological care, specialist sexualised violence advocacy services, and community awareness and education for prevention. Their funding comes from the state and donations. The centre is easily accessible and is supporting both women and men who have experienced rape.

5. PRIMARY PREVENTION SERVICES

👤 Malta currently does not have an active National Action Plan on violence against women and girls but is in the process of drafting its third NAP which should include primary prevention provisions. Malta has a definition of primary prevention in the law since it adopted the Istanbul Convention. Primary prevention activities available in the country include school-based prevention programmes, training for primary prevention practitioners, bystander

intervention training, and awareness-raising campaigns or programmes. In addition, a national campaign on primary prevention runs during the 16 days of activism, and primary prevention activities have been conducted in the educational and media sectors. The beneficiaries of these activities are the general public, girls and boys under the age of 18, women and men as well as LGBTQI+ people.

⁵⁷ Information from WAVE Country Report 2021.

THE REPUBLIC OF MOLDOVA

GENERAL COUNTRY INFORMATION

Population	2,603,729
Female population	1,357,200 ⁵⁸
Member of Council of Europe (year)	1995
Member of European Union (year)	No
Member of United Nations (year)	1992
CEDAW ratified (year)	1994
CEDAW optional protocol ratified (year)	2006
Istanbul Convention signed (year)	2017
Istanbul Convention ratified (year)	2022



SUMMARY

► There is one national women's helpline in the Republic of Moldova, which is available 24/7, free of charge and provides multilingual support. The country **does meet** the Istanbul Convention (IC) standards for the provision of a women's helpline. There are eight women-only shelters providing 181 beds in the Republic of Moldova. With 30% of the necessary beds missing, the country **does not meet** the IC standards for the provision of shelters. There are ten women's centres in the Republic of Moldova, which are run by women's NGOs and other NGOs, and one rape crisis centre and one helpline for survivors of sexualised violence (SV). There is a National Action Plan against VAW

in the country. The state does not collect data on women's specialist services.

The region of Transnistria is presented in a separate section since the Moldovan government exercises no direct control over the territory of Transnistria. In Transnistria there are two women's helplines which are free of charge, but not available 24/7, one women's shelter providing 12 beds for adults and three cot beds for children, 13 women's centres run by women's NGOs and no specialised services for survivors of SV.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	Yes	1,530 calls

📞 There is one national women's helpline in the Republic of Moldova called Trust Line for Women and Girls (*Telefonul de Încredere pentru Femei și Fete*, tel.: +373 80088008), operating 24/7, free of charge and offering multilingual support in Romanian and Russian.⁵⁹ The helpline is run by the International Centre for Women's Rights Protection and Promotion La Strada and it receives state funding as

well as international funding. It supports survivors of different forms of VAW, and in 2022 it received 1,530 calls. The most common forms of violence reported by callers were physical violence, psychological violence, and a combination of different forms of violence (economic, physical and psychological). There are no other regional helplines supporting survivors of VAW in the Republic of Moldova.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
8	8	Some	181	79	30%	14,385

🏠 In the Republic of Moldova, there are eight women-only shelters providing a total of 181 beds, and they are located

in the major cities of the country. Some of them, which operate as crisis centres, provide 24/7 services for survivors

⁵⁸ The last Eurostat data available for the female population in the Republic of Moldova are from 2021.

⁵⁹ Information about the available languages from WAVE Country Report 2021.

of VAW, and women are not expected to pay for their accommodation. One shelter is run by a women's NGO with a gender-sensitive approach, which relies solely on funding from foundations, national and international organisations and donations from individuals. The other shelters are run by the state and other NGOs and receive funding from national and local authorities. NGOs play a crucial role in providing assistance to women and children survivors of VAW, but they are often operating with limited financial resources, which poses challenges in terms of geographical presence and accessibility, legal representation and long-term support of survivors.

The duration of a woman's stay in a shelter depends on her individual circumstances, including the nature of her case. However, the length of her stay is primarily determined by the policies set by the shelter itself, which normally offer accommodation from three to six months. In addition to providing shelter, organisations in Moldova offer different in-house services, including assistance with healthcare,

facilitating the placement of children in kindergartens and schools, as well as providing support in finding employment and housing once they leave the shelter. The main reasons for having to decline referrals are the lack of space and capacity to support the survivor, to accommodate the survivor with her children, the ineligibility of the survivors for support, the shelter not being adequately equipped for the needs of the women/children and language barriers. In 2022, approximately 640 women found support in women's shelters.

All women's shelters are accessible to women with uncertain residence status and undocumented women, older women, and transgender women; some of them can also accommodate homeless women, women with cognitive disabilities, and victims or potential victims of trafficking, while there are no shelters accessible for women with physical disabilities, with substance abuse issues, and women with older sons (14 years and above).

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
10	135,720	Women's NGOs; Other NGOs

❖ There are ten women's centres in the major cities of the Republic of Moldova, most of which are run by women's NGOs. The types of services provided by women's centres include referrals, legal advice, counselling and psychological support, financial and social welfare support, and in some cases housing advice, employment, and representation at court/police/social services. Women's centres also assist women in developing safety plans to help protect themselves and their children, they organise support groups with survivors, and offer skills training and empowerment programmes to facilitate employment and economic independence. In 2022, more than 5,000 women found support in women's centres, including many refugee women.

Funding for women's centres comes from donations and international funding: women's centres often apply for grants from national and international organisations, foundations and development agencies. These grants can be

project-based or provide general support for the centres' operations. Funding can be received also from NGOs specialised in women's rights, gender equality or social justice, which provide financial support, but also technical assistance and capacity-building initiatives.

The majority of services in the Republic of Moldova are not adjusted to the needs of survivors of specific forms of violence or to women belonging to vulnerable groups. Nevertheless, women's centres also support women belonging to these groups, within their possibilities: all centres are accessible to older women and transgender women, about half of them can support survivors of honour-based violence, women with uncertain residence status and undocumented women and two centres can also support women with disabilities and survivors of trafficking. Women's centres also provide support to survivors of SV, including specialist forensic and medical care, specialist psychological care and community awareness.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ In 2022, there was one rape crisis centre and one helpline for survivors of sexualised violence in the Republic of Moldova, which are supported by donations and international funding. Additionally, in 2023 two sexual violence referral centres have been established as part of the EVA Project, supported by UN Women and UNICEF, and funded

by the European Union. These centres are located within medical institutions and have been designed to provide comprehensive and survivor-centred services, including medical care, post-traumatic assistance, counselling and psychological support, risk assessment, and legal advice.

5. PRIMARY PREVENTION SERVICES

👉 There is a National Action Plan in the Republic of Moldova that supports the implementation of Law No. 45/2007 on the prevention and combating of domestic violence and Law No. 144/2021 on the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention). Primary prevention activities conducted in the country include school-based primary prevention programmes, to educate students about healthy relationships, consent, gender

equality and the prevention of VAW; training for primary prevention practitioners involved in various sectors, such as education, healthcare and law enforcement; awareness-raising campaigns and programmes to promote gender equality and challenge harmful stereotypes. The main beneficiaries of such activities are the general public, women, professionals and service providers, and girls and boys under the age of 18.

TRANSNISTRIA

1. NATIONAL WOMEN'S HELPLINES

📞 There are two state-wide women's helplines in Transnistria. The Free informational line on domestic violence in Transnistria (*Приднестровская платформа по предотвращению насилия в семье и продвижению прав женщин*, tel.: +373 80044000) is run by the non-profit Centre for Support and Development of Civic Initiatives Resonance, it is free of charge, but it is not available 24/7. The helpline does not offer multilingual support and provides assistance for domestic, physical, psychological, sexual and economic violence. The other helpline is a trust line provided by the organisation Interaction (*Телефон Доверия по вопросам насилия в семье*, tel.: +373

80099800), which is free of charge, but it does not provide 24/7 support nor multilingual support. As the other helpline, it supports survivors of different forms of violence: domestic, physical, psychological, sexual and economic violence. The helplines in Transnistria are supported by international funding, and in 2022 they received 3,533 calls. This represents an increase from the previous years (1,499 calls in 2020), as refugees from Ukraine were also contacting these helplines. The most common forms of violence reported by callers were physical, psychological and economic violence.

2. SHELTERS ACCESSIBLE TO WOMEN

🏠 There is one shelter in Transnistria providing 12 beds for adults and three cot beds for children up to the age of three. The shelter offers 24/7 support and women are not expected to pay for their accommodation. The shelter is run by a women's NGO with a gender-specific approach and it is supported by international funding. Women can stay in the shelter for a period of one to three months, but in case of need, their stay can be extended up to one year. The shelter is accessible to women with uncertain residence status and undocumented women, women with physical disabilities, older women, and transgender women. The shelter has to decline referrals in cases in which it is not adequately equipped to support the specific needs


of the survivor. In these cases, the staff helps to find another organisation that can provide adequate support. The most common forms of violence reported by the clients of the shelter are physical, psychological and economic violence. Besides providing accommodation, the shelter also offers casework, counselling, practical and legal advice, women's economic programmes, and training and seminars for women. In 2022, 26 women found support in the shelter. Additionally, in Transnistria, there is a maternity centre run by the Ministry of Health, Labour and Social Protection, which offers five beds, and a shelter for migrants.

3. WOMEN'S CENTRES


❖ There are in total 13 women's centres in Transnistria. They are run by women's NGOs that do not receive national funds and need to apply for international funding. Centres are located in most regions. Most of the centres provide counselling and psychological support, legal advice and employment services. A few centres also provide financial

and social welfare support, housing advice, and representation at court/police/social services. Three centres can provide specialist support to survivors of trafficking in persons. In 2022, 272 women found support in women's centres in Transnistria.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

 There are no sexualised violence services in Transnistria, and survivors find support in women's shelters and centres. There is one initiative group that organises forum-theatre performances on the topic of sexualised violence and provides basic counselling for survivors.

5. PRIMARY PREVENTION SERVICES

 There is no National Action Plan against VAW available in Transnistria. Women's NGOs run primary prevention activities, in particular during the 16 days of activism against gender-based violence. Such activities include discussions with students, film screenings, advertising on local television about women's specialist services and awareness-raising campaigns.

MONTENEGRO

GENERAL COUNTRY INFORMATION

Population	617,683
Female population	312,509
Member of Council of Europe (year)	2007
Member of European Union (year)	No
Member of United Nations (year)	2006
CEDAW ratified (year)	2006
CEDAW optional protocol ratified (year)	2006
Istanbul Convention signed (year)	2011
Istanbul Convention ratified (year)	2013



SUMMARY

► There is one national women's helpline in Montenegro which is free of charge, operates 24/7, and offers multilingual support. Therefore, Montenegro **does meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. There are three women-only shelters with a total of 42 beds in Montenegro, meaning that 20, or 32%, of the necessary beds are missing. Thus, Montenegro **does not meet** the IC standards for the provision of

women's shelters. There are seven women's centres run by women's NGOs and one national support helpline for survivors of sexualised violence (SV). The country does not have a National Action Plan on violence against women and girls. The state does not collect data on women's specialist services.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	Yes	2,364 calls; 404 callers

📞 There is one national women's helpline in Montenegro called National SOS Hotline for Victims of Domestic Violence (*Nacionalna SOS linija za porodično nasilje*, tel.: +382 80111111) run by the organisation SOS Hotline for Women and Children Victims of Violence *Niksic*. The helpline is free of charge, available 24/7, and offers multilingual support in Albanian, Ukrainian, and Russian, and offers support for all forms of VAW. It is funded by national/local authorities, donations, as well as international funding. In 2022, the

helpline received 2,364 calls from 404 callers. The most common forms of violence reported were psychological, physical, and economic violence. In addition, there are six other helplines that can provide support to survivors of violence against women and there is a mobile app called Be-Safe which allows survivors of violence to easily contact the national helpline. The app is free of charge and was launched during the COVID-19 pandemic because of the increase in violence against women during the lockdown.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
3	3	All	42	20	32%	14,707

🏠 There are three women-only shelters in Montenegro with a total of 42 beds available for survivors of violence which are accessible 24/7 and free of charge. Funding for the women-only shelters comes from national/local authorities, donations, and international funding and they are run by women's NGOs with a gender-specific/feminist approach. There are no other shelters for survivors

of violence against women in Montenegro. Women-only shelters are located in the centre of Montenegro, in the two largest cities Podgorica and Niksic, meaning that there are no shelters in the northern and southern regions of the country. Accommodation contracts are signed for a year, but they can be extended according to the needs of the survivor. Women-only shelters are accessible to all

women with uncertain residence status/undocumented women, homeless women, women with substance abuse issues, and older women. Some women-only shelters are accessible to women with physical and cognitive

disabilities. There are no women-only shelters accessible to women with older sons (above the age of 14) and there are no shelters specialised in supporting women from vulnerable groups.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
7	44,644	Women's NGO (7 centres)

❖ There are seven women's centres for survivors of violence against women in Montenegro and they are run by women's NGOs. Funding for women's centres comes from donations as well as international funding and they are located in most regions of the country. In 2022, approximately 1,200 women were supported by women's centres. Four centres provide counselling/psychological support, legal advice, and representation at court/police. No women's centres provide financial and social welfare support, housing advice, employment, or referrals. In terms of specialist support to survivors of specific forms of violence or from vulnerable groups, all women's centres can support

women with uncertain residence status, women with disabilities, and older women. In addition, four women's centres support survivors of trafficking in persons, three can provide specialist support to black and minority ethnic women and one centre supports survivors of forced marriage. No women's centre is able to provide specialist support to survivors of female genital mutilation and/or honour-based violence. Women's centres also provide specialist support to survivors of sexualised violence, such as needs assessment, specialist psychological care, specialist sexualised violence advocacy services, and community awareness and education for prevention.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There are no specific support services such as rape crisis centres for women and girls who have experienced sexualised violence in Montenegro. There is a helpline

providing specialist support for survivors of SV and it is run by the NGO Montenegrin Women's Lobby (tel.: +382 20250750).

5. PRIMARY PREVENTION SERVICES

👋 Montenegro does not have a National Action Plan on violence against women and girls and the state does not fund primary prevention activities.

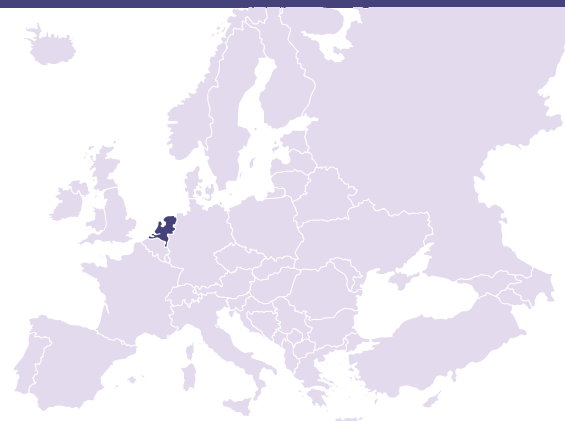
Women's NGOs in Montenegro conduct multiple prevention activities, for instance during the 16 days of activism against gender-based violence. The activities include campaigns on hate speech, misogyny, and sexism in the media, increasing community awareness about the obligations under the Istanbul Convention, increasing community awareness on stalking, psychological violence, online violence, sexual harassment, women's employment, and economic empowerment, and informing about the right to

free legal aid. Moreover, women's NGOs organise licenced training for professionals on various topics, such as the prevention of child marriages, and training on the topic of GBV for high school students, employees of social welfare centres, employees of reception centres for refugees from Ukraine, and for young people from the Roma and Egyptian communities. The SOS Helpline Nikšić organised outreach teams in local communities for women in rural areas, Albanian-speaking women, and refugee women from Ukraine to engage in conversations and distribute promotional materials about women's rights and the available services in the country.

THE NETHERLANDS

GENERAL COUNTRY INFORMATION

Population	17,590,672
Female population	8,845,204
Member of Council of Europe (year)	1949
Member of European Union (year)	1952
Member of United Nations (year)	1945
CEDAW ratified (year)	1991
CEDAW optional protocol ratified (year)	2002
Istanbul Convention signed (year)	2012
Istanbul Convention ratified (year)	2015



SUMMARY

► The Netherlands does not have a national women's helpline and therefore **does not meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. There are 25 women-only shelters with 500 beds as well as 48 other organisations that provide shelter accommodation for all victims of violence, with approximately 800 beds. The country **does not meet** the IC standards for the provision of women's shelters as 26% of the required beds are missing. There are no women's centres in

the Netherlands, however, all 25 women-only shelters also provide non-residential support. In the Netherlands, there are 16 rape crisis centres supporting survivors of sexualised violence, which are part of the network of the Sexual Assault Center (SAC). The Netherlands does not have a National Action Plan on violence against women and girls, but the state does fund primary prevention activities. The Netherlands does not collect data on women's specialist services on a state-wide level.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
0	-	-	-	-

☎ There is no national women's helpline in the Netherlands, but there is a national helpline for domestic violence and child abuse, Safe Home (*Veilig Thuis*, tel.: +31 8002000), which has existed since 2015. While the helpline is available 24/7 and is free of charge, it does not provide specialist support to women; rather, it is available to all survivors of violence and has a gender-neutral framework. The helpline is an initiative of the Dutch government and is run by regional NGOs who know the local service providers and can refer survivors to the appropriate services. There is also the possibility to use the national interpretation centre, which is funded by the state and decentralised via

municipalities, to receive support in any language when calling the helpline. The number of calls registered with Safe Home in the first half of 2022 was 59,985.

There are other helplines in the Netherlands that can support women survivors of violence, including regional helplines that are run by five women-only shelter organisations, which are available 24/7 in cases of emergency. These include Fier (tel.: +31 882080000), Strong House (*Sterk Huis*, tel.: +31 8008013), Stay Group (*Blijf Groep*, tel.: +31 882342450), and *Moviera* (tel.: +31 883744744).

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
25	73	Most	1,300	459	26%	13,531

🏠 There are 25 women-only shelters in the Netherlands with approximately 500 beds run by women's NGOs with a gender-specific/feminist approach. Organisations

running these shelters vary in size, number of locations, and number of beds (from around 10 to 150 beds per shelter). These shelters are all part of Valente, the National

Network of Women's Shelters. The actual number of beds in women-only shelters is unknown as the shelter system is decentralised and exact figures on a national level are lacking. Several factors play a role in this, including that there is no shared definition in use and shelters and the municipalities that fund them use different terms in different regions, for example, emergency beds, crisis shelter beds, and assisted independent living locations, among others. Secondly, beds are sometimes used flexibly in women-only shelters that are part of a larger NGO, meaning they can be used for emergency situations for women other than women survivors of domestic violence, if available. It is important to note that most women-only shelters have focused the last couple of years on expanding their ambulatory services instead of the number of beds and those services have increased in most regions. Shelters have been advocating for more non-residential services and independent assisted living facilities that better meet the needs of clients. Only some regions, such as the metropole of Amsterdam, have successfully advocated for an increase in the number of beds.

Most women-only shelters offer 24/7 access and there are women's shelters in all regions covering the whole country. Some women-only shelter organisations have more than one location and cover several regions, while others only have one location. Women can stay between three to six months, but averages can vary depending on the services provided by the different shelters (emergency beds, crisis shelters, or long-stay shelters) as well as the funding provided by the municipalities. Women are expected to pay for their accommodation in women-only shelters if they can afford it, and if they do not earn an income then they can receive social welfare in order to cover their costs. Funding for women-only shelters comes from the Ministry of Health, Welfare, and Support and regional municipalities can, and in the majority of cases do, contribute extra funding to the women-only shelters for ambulatory care and sometimes other services offered by shelters. The three main reasons for having to decline referrals to women-only shelters are no space to support the survivor,

no capacity to support the survivor with her children, and the survivor being ineligible for support. Spaces in shelters are generally reserved for the most complex and unsafe situations. Non-residential specialised services have been developed to assist women who want to escape their abusive situation but have options other than going to a women-only shelter. A safety assessment is always conducted to determine whether this is a safe option. The most common types of violence reported by survivors in women-only shelters are intimate partner violence, and a mix of physical, psychological, and sexualised violence. The types of in-house services most often provided are counselling, referrals, and practical advice. In 2022, around 3,800 women were accommodated in women-only shelters.

All women-only shelters are accessible to women with cognitive disabilities, women with substance abuse issues, older women, and women with older sons (14 years and above). Most shelters are accessible to women with uncertain residence status and transgender women. Some shelters are accessible to homeless women and women with physical disabilities. Some members of Valente offer specialised shelter facilities for undocumented women and LGBTQI+ people. There are specialised shelters for women survivors of trafficking and for women and girls survivors of honour-based violence. All shelters accept women who have been in marital captivity if there is acute violence/unsafety.

In addition, there are 48 shelters that can provide support to all survivors of violence, homeless persons, and people with psychological disabilities with an estimated 800 beds, all part of Valente. The national network of women's shelters is one of the three founding networks of Valente, together with the network for homeless people's shelters and the network for protected living which offers shelter and assisted living for people with various psychological vulnerabilities. These shelters are available to women, men, non-binary people, transgender women and men, as well as other groups of survivors.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
25	353,808	Women's NGOs (9 centres); Other NGOs (16 centres)

❖ There are no specialised women's centres in the Netherlands, however, all the women-only shelters which are members of Valente provide both residential and non-residential services, such as individual or group counselling. Most centres also offer services to male survivors of domestic violence and LGBTQI+ survivors, and some also offer services to survivors of human trafficking. All centres provide counselling, legal advice, representation at court/police, and referrals. Approximately, five centres provide employment, but none provide financial and social welfare support or housing advice. If centres do not

provide legal advice themselves, they closely collaborate with specialist services in this area. Housing advice is not offered specifically, but there are close connections to local organisations offering those services, so referrals and collaboration are in place. Only a limited number of centres offer services or programmes on employment, as structural funding for these programs is inadequate. Most of the funding for women's centres comes from the state from 35 municipalities, and a modest and varying amount comes from donations by foundations and trusts and is generally aimed at specific projects. In the decentralised

Dutch system, the Ministry of Health, Welfare, and Sport finances 35 central municipalities that administer funds to women's centres. The 35 central municipalities collaborate with all regional municipalities, both of which can, and in the majority of cases do, contribute extra funding to the women's shelters for ambulatory care and sometimes for more beds and other services. Nine women's centres are run by women's NGOs and the remaining 16 centres are run by other NGOs, covering most regions of the Netherlands.

In terms of specialised support, there are two centres offering support to high-risk survivors of honour-based violence

under 18. All other centres provide risk assessment on all forms of domestic violence including honour-based violence. There has been a specialised centre for survivors of forced marriage and abandonment since 2015, which provides information, advice and support for professionals dealing with such cases. The centre collaborates with women-only shelters, in the case a shelter is needed upon return to the Netherlands after abandonment, the national helpline and other relevant stakeholders. In addition, women's centres provide specialised support to survivors of trafficking, women with uncertain residence status, black and minority ethnic women, women with disabilities, older women, transgender women, as well as non-binary people.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There are services for women and girls who have experienced sexualised violence in the Netherlands, including 16 rape crisis centres that are part of the network of the Sexual Assault Center (SAC). All centres offer referrals, crisis, and medical services, and run their own regional specialised helpline (tel.: +31 8000188). At the Sexual Assault Center, a team of doctors, nurses, police officers, psychologists, social workers, and sex therapists work together to provide specialist care to survivors of sexual assault and

rape. Ideally, help is provided within seven days after the event, as this timeframe reduces the chances of medical and psychological issues considerably and gives police a better chance of finding the perpetrator if forensic investigations are carried out. Funding for sexualised violence support services comes from the state and they are located in all regions of the Netherlands. Services are available to all survivors of sexualised violence.

5. PRIMARY PREVENTION SERVICES

👏 There is no National Action Plan on violence against women and girls in the Netherlands. The national programme "Violence Does Not Belong Anywhere" ended in 2022. The programme "Future Scenario Child and Family Protection" started in 2021, but from a gender-neutral perspective and focusing primarily on children, with a secondary focus on families. The national action programme "Combating Sexual Transgressive Behaviour and Sexual Violence" shows that the Dutch government can develop an approach that is both gender-specific and human-rights oriented, and this programme also contains specific prevention activities. A plan for the 'approach to gender-related violence' is currently being developed.

The state, however, funds primary prevention activities such as feminist self-defence trainings, school-based primary prevention programmes, training for primary prevention practitioners, bystander intervention trainings, self-care activities, and awareness-raising campaigns. None of these activities are systematically or sustainably implemented nationwide. Most prevention activities are project-based or depend on the initiative of local, and sometimes national, stakeholders. These activities are designed for the general public, girls and boys under the age of 18, women and men, and LGBTQI+ people.

NORTH MACEDONIA

GENERAL COUNTRY INFORMATION

Population	1,837,114
Female population	926,099
Member of Council of Europe (year)	1995
Member of European Union (year)	No
Member of United Nations (year)	1993
CEDAW ratified (year)	1994
CEDAW optional protocol ratified (year)	2003
Istanbul Convention signed (year)	2011
Istanbul Convention ratified (year)	2017



SUMMARY

► There are three national women's helplines in North Macedonia, which are free of charge, but are not available 24/7. Therefore, the country **does not meet** the Istanbul Convention (IC) standards for the provision of a women's helpline. There are nine women-only shelters and three crisis centres for emergency accommodation, providing approximately 50 beds. The country **does not meet** the IC standards for the provision of bed spaces, as 73% of the necessary beds are missing. There are approximately 20 women's centres in the country, ten of which are run by women's NGOs, one by another NGO and nine by the state.

There are three sexual violence referral centres and one centre supporting survivors of trafficking and sexualised violence. There is a National Action Plan on VAW in the country, which includes provisions on the primary prevention of VAW.

The state collects data only about services that are state-run, while there is no data collected about all women's specialist services in the country.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
3	Yes	No	No	1,349 calls ⁶⁰

☎ There are three national women's helplines in North Macedonia, supporting survivors of domestic violence (DV). The helplines are free of charge but do not operate 24/7 and do not provide multilingual support. The SOS Mobile National Line (*СОС мобилна национална линија*, tel.: + 389 70/75/77 141700) is run by the National Council for Gender Equality, the National SOS Line – Telephone of Trust (*Национална СОС линија – Телефон на доверба*, tel.: +389 15315) is run by the crisis centre HOPE and the National SOS Line 15 700 (*Национална СОС линија 15 700*,

tel.: +389 15700) is run by the Organisation of Women of the City of Skopje. Only the SOS Mobile National Line receives state funding, while the other two helplines receive international funding and otherwise work on a voluntary basis. Due to the lack of continuous and sustainable funding, the helplines cannot afford to be operational 24/7 and they do not offer support in all the languages spoken in the country. In 2022, two helplines received a total of 1,349 calls.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN		EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
		24/7 ACCESS				
9	14	Some	50	134	73%	36,742

🏠 There are nine women-only shelters in North Macedonia and three crisis centres which provide emergency

accommodation for 24-48 hours. There are approximately 50 beds, which is not enough to meet the country's needs.

⁶⁰ Data available for two of the three helplines.

Only crisis centres offer 24/7 access, and women can find accommodation only if they report the violence to a centre for social welfare. Women are not expected to pay, and in the shelters, they receive food, hygiene products, and medicine for themselves and their children. On average, women stay in the shelters for up to three months. Only two shelters and one crisis centre are run by women's NGOs. The other seven shelters and two crisis centres are run by the state. Funding for these services comes from national and local authorities in the case of two shelters and one crisis centre and from international funding. Women's shelters and crisis centres are available in most regions, but although according to the Ministry of Labour and Social Policy, they exist in six regions out of eight, there is no evidence that all of them are fully functioning.

Women's shelters had to decline referrals due to the lack of space/capacity to support the survivor, to accommodate the survivor with her children, if the survivor was ineligible for support or if the shelter was not adequately equipped

for the needs of the women and children. The most common forms of violence reported by clients in 2022 were psychological and physical violence, while sexualised and economic violence are rarely reported. Shelters mostly provide accommodation, but they can support with referrals and collaboration with other services and with legal advice.

In terms of accessibility, all shelters can support older women, but there are no shelters that are accessible to women with uncertain residence status/undocumented women, women with physical or cognitive disabilities, women with substance abuse issues, transgender women, and women with older sons (14 years and above).

Additionally, there is a safe house for LGBTQI+ survivors of GBV and DV, which provides five beds and is run by the NGO Helsinki Committee for Human Rights, and a shelter for survivors of trafficking and sexualised violence, which provides approximately six beds.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
10	92,610	Women's NGOs (9 centres); Other NGOs (1 centre)

❖ There are nine specialised women's counselling centres run by women's NGOs in North Macedonia and one specialised women's counselling centre run by another NGO. Additionally, women's NGOs also have ten offices, which take care of referrals and do not provide counselling. The state is meant to run ten other counselling centres, but these are not operative.

Women's centres are available only in major cities and they provide counselling and psychological support, legal advice, and referrals. Five centres can provide financial and social welfare support and employment, and four can

provide representation at court/police/social services too. Supported housing for women survivors of violence is provided in Skopje by the Women Support Centre, and this service is in a pilot phase in three additional municipalities: Tetovo, Kavadarci and Bitola. Only a few women's centres that are run by women's NGOs receive public funding: the two centres in Skopje are partially funded by the City of Skopje, and the centres in Bitola and Kavadarci are fully funded by local authorities. Additionally, the shelters that support LGBTQI+ people and survivors of trafficking also provide non-residential services.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ In North Macedonia, there are three sexual violence referral centres located in Tetovo, Kumanovo and Skopje, which only provide urgent forensic and medical care for all survivors of sexualised violence and rape. These centres should be funded by the Ministry of Health, but no budget

is allocated for them. There is a shelter for survivors of SV and human trafficking that provides specialist forensic and medical care, needs assessment and specialist psychological care. It is funded by the Ministry of Labour and Social Policy.

5. PRIMARY PREVENTION SERVICES

👏 There is a National Action Plan for the implementation of the Istanbul Convention covering the years 2018–2023,⁶¹ which has a specific section on prevention activities. The state does not fund primary prevention (PP) activities and there is no official definition of PP in the country. PP activities carried out in North Macedonia include school-based

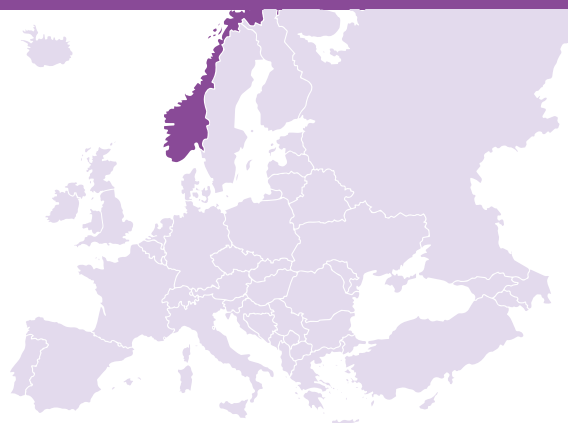
programmes and awareness-raising campaigns or programmes, which mostly address the general public and in some cases specifically girls and boys under the age of 18. These activities are not run on a regular basis but depend on the availability of funds.

61 Action plan for implementation of the Convention on Preventing and Combating Violence against Women and Domestic Violence of the Republic of Macedonia 2018-2023, https://mtsp.gov.mk/pocetna-ns_article-nacionalniot-plan-za-sproveduvanje-na-konvencijata-za-spreccuvanje-i-borba-priv-nasilstvoto-vrz-zen.nsp.x.

NORWAY

GENERAL COUNTRY INFORMATION

Population	5,425,270
Female population	2,687,938
Member of Council of Europe (year)	1949
Member of European Union (year)	No
Member of United Nations (year)	1945
CEDAW ratified (year)	1981
CEDAW optional protocol ratified (year)	2002
Istanbul Convention signed (year)	2011
Istanbul Convention ratified (year)	2017



SUMMARY

► There is one national women's helpline in Norway which is free of charge, available 24/7, and offers multilingual support. Norway therefore **does meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. Norway does not have any women-only shelters, but there are 43 crisis centres providing shelter accommodation which are accessible to women survivors of violence, with a total of 969 beds. This means that Norway **does meet** the IC standards for the provision of women's shelters. All 43 crisis centres also offer non-residential support, and there are a number of other women's centres

in Norway, although the exact figures are not available. There are services for survivors of sexualised violence in Norway, including 23 sexual violence referral centres, 21 centres for victims of incest and sexual abuse, and a specialised helpline. Norway has a National Action Plan addressing violence against women and girls, which does include specific provisions on primary prevention. The state does collect data on women's specialist services and this information is publicly available. However, there is a lack of updated information on available services, and this information is not always easily available.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	Yes	2,762 calls

☎ There is one national women's helpline in Norway called the VO-helpline - National Domestic Violence Helpline (*Vold-og overgrepslinjen*, tel.: +47 116006) funded by the Ministry of Children and Families. The helpline is part of a three-year pilot program by the Ministry of Justice and Public Security which began in 2019, and in 2021 an online chat option was also made available. It is operated by the Secretariat of the Shelter Movement (*Krisesentersekretariatet*) and the Oslo Crisis Centre. It is free of charge, available 24/7, and offers multilingual support (in Norwegian and English). The helpline provides support for anyone experiencing domestic violence as well as relatives or friends of survivors and those working with survivors of domestic violence. In 2022, the helpline received 2,762 calls (85% of callers were women and 13% men) and 1,299 chat support requests (90% of chat users were women and 5% men). The most common forms of violence reported by survivors to the helpline were physical, psychological, and sexualised violence.

There are other national helplines in Norway supporting survivors of specific forms of violence. The helpline ROSA: Re-establishment – Places of residence – Security – Assistance (*Reetablering – Oppholdssteder – Sikkerhet – Assistanse*, tel.: +47 22331160) provides support to survivors of trafficking in Norwegian, English, Spanish, Arabic and Thai. The helpline is free of charge and available 24/7. Additionally, the Red Cross operates a specialised helpline (tel.: +47 81555201) for victims of forced marriage, female genital mutilation and honour-based violence on weekdays from 9:00–16:00. The Expert Team against Forced Marriage, FGM and Negative Social Control also operate a helpline (tel.: +47 47809050), available on weekdays from 9:00–15:00, which offers guidance to adult survivors and professionals in contact with survivors. All crisis centres in Norway also operate a helpline for all survivors of violence looking for support.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
0	43	Most	969 ⁶²	0	0%	5,599

There are 43 shelters accessible to women in Norway,⁶³ referred to as crisis centres, 23 of which are part of the Secretariat of the Shelter Movement (*Krisesentersekretariatet*), the umbrella network of shelters for victims of domestic violence. Of the 23 crisis centres that are part of the umbrella network, 12 are run by municipalities, six by NGOs, and five by foundations. These centres offer survivors of violence a safe place to stay as well as non-residential support services. The latest available data regarding number of shelter beds is from 2019 and estimates that crisis centres had 969 permanent beds.⁶⁴ Most shelters offer 24/7 access, and women are not expected to pay for their accommodation, although some must pay for food. The main funding for shelters comes from the state and local municipalities. Women can stay in the shelters for more than a year. The most common types of in-house services provided by shelters in Norway are casework, counselling, referrals/collaboration with other services, practical advice and legal advice. While the Crisis Centre Act outlines that accommodation for women and men should be separated, women's NGOs have noted that in some cases women and men are accommodated in the same facilities although with separate entrances.

In terms of accessibility, many crisis centres do not provide shelter accommodation to vulnerable groups of survivors. Only eight crisis centres can offer shelter accommodation to women with cognitive disabilities, ten to women with psychosocial issues and 29 to women with physical disabilities. Furthermore, only eight shelters are accessible to women with substance abuse issues. Only some crisis

centres are accessible to women with uncertain residence status/undocumented women, despite the state obligation that crisis centres should be able to provide services to all survivors. According to Norwegian authorities, some shelter accommodation is available in five municipalities for adults who are exposed to forced marriage and honour-based violence, with around 30–40 bed spaces. The Secretariat of the Shelter Movement is also responsible for running ROSA, which is a crisis centre that works with survivors of human trafficking for the purposes of sexual exploitation. In 2022, ROSA provided support to 50 adult survivors of presumed human trafficking and two children.

The Crisis Centre Act (2010) is meant to ensure the provision of a good, comprehensive crisis service centre for women, men and children who are subjected to domestic violence or threats of such violence in Norway. The Act related to municipal crisis centres uses gender-neutral language. Requirements for crisis centres regarding services provided stipulate that the centres may be used by any person who is subjected to domestic violence or threats of such violence and are in need of counselling or safe, temporary accommodation. Municipalities are required to ensure that users have access to a qualified interpreter and comprehensive follow-up through a coordinated response by other parts of the public service system. Crisis centres have been mandatory in Norway since the Act came into force in 2010, but it has nevertheless not been implemented in all municipalities, and the number crisis centres in rural parts of the country remain sparse.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
43	62,510	State; Women's NGOs; Other NGOs

There are 43 crisis centres in Norway providing a range of services to all survivors of domestic violence including psychosocial counselling, referral to health and other support services, information about survivor's rights and legal counselling. The services are funded and supervised by state municipalities. All of these centres also provide shelter accommodation and thus operate both as a women's shelter and centre.

There are also a number of other public services and NGOs providing specialised support to women survivors of violence in Norway, but the exact number is not known. For

example, the NGO-run Mira Centre in Oslo provides psychosocial support to migrant and minority ethnic women. Therese's House in Oslo offers emergency accommodation as well as medical and social assistance to women with substance abuse issues, as most crisis centres are not accessible to women with substance abuse issues. Furthermore, the NGO JURK in Oslo offers free legal aid and advice in criminal and civil proceedings to women victims of violence. ROSA centre also provides support and information for survivors of trafficking such as legal advice, counselling and healthcare. There is however a lack of specialised support services for Sámi⁶⁵ survivors

⁶² Number of available beds based on state data from 2019.

⁶³ According to the Comments submitted by Norway on GREVIO's final Baseline Evaluation Report (2022), <https://rm.coe.int/grevio-inf-2022-37-eng-comments-of-the-norwegian-government/1680a9227d>.

⁶⁴ State Report from Norway to GREVIO (2020), <http://vhttps://rm.coe.int/grevio-inf-2020-15/16809f9e09>.

⁶⁵ The Sámi are a group of indigenous people who inhabit Sápmi, their preferred name for Lapland, and adjacent areas of northern Norway, Sweden, and Finland as well as the Kola Peninsula of Russia.

of violence, and a lack of expertise from professionals on the Sámi language and culture. A number of centres also

provide support to survivors of sexualised violence.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There are support services for survivors of sexualised violence in Norway, including Sexual Assault Centres and Centres for Victims of Incest and Sexual Abuse (SMISO, which are also called NOK). There are 23 Sexual Assault Centres which operate as sexual violence referral centres, located in clinics and hospitals around the country. These centres offer immediate medical support and crisis intervention, can be accessed without a referral and are free of charge. Survivors will receive help regardless of whether or not they wish to report the assault to the police. These centres are located throughout Norway, and most of them operate 24/7. Services provided include counselling, medical examinations, pregnancy and STI testing, forensic examinations, help in contacting the police, help in contacting a lawyer regardless of report, and information about follow-up services, crisis shelters and other places to receive specialised support.

Additionally, there are 21 Centres for Victims of Incest and Sexual Abuse (SMISO) offering support to survivors of sexualised violence, including psychological counselling. The centres are primarily for adults who have been subjected to incest, sexual abuse or rape, as well as for their relatives. They provide services free of charge, function as a supplement to the public sector support system, and do not require a referral. Services provided by these centres include telephone counselling, one-on-one counselling, participation in self-help groups, and other thematic courses. SMISO are funded by national and local authorities and are run by inter-municipal agencies or NGOs. Some SMISO do provide services to children, and there are 13 centres

employing professionals who have the expertise to work with children and youth. In addition, 16 centres provide specialist support to survivors with an immigrant background.⁶⁶

The DIXI Resource Center against Sexual Assault is another free service for survivors of rape, as well as their relatives, located in Oslo. The centre does not offer treatment but offers emotional support and help to survivors by teaching them to draw on their own resources, take control of their lives and steer them in the desired direction. DIXI supplements the treatment services offered by the public sector support system, offering individual and group counselling sessions for rape survivors and their relatives, free legal aid, counselling by phone and guidance via e-mail and SMS, help with contacting health and support services, as well as lectures and information to health and support services and others who may be interested. DIXI is funded by the state and local authorities and also operates a helpline available on weekdays (tel.: +47 22444050).

Finally, there is a specialised helpline for survivors of sexualised violence in Norway, the helpline for victims of sexual abuse (Hjelpetelefonen for seksuelt misbrukte, tel.: +47 80057000) which is free of charge, available 24/7, and offers multilingual support (in Norwegian and English). The helpline is run by the Support Centre for Victims of Incest and Sexual Assault (SMISO) in Vestfold under the supervision of the Norwegian Directorate for Children, Youth and Family Affairs.

5. PRIMARY PREVENTION SERVICES

👏 Norway has a National Action Plan (NAP) addressing violence against women and girls, the “Freedom from Violence: Action Plan against Domestic Violence (2021–2024)”, which does include specific provisions on primary prevention. The NAP includes a dedicated chapter on targeted prevention and a number of preventative measures on early detection of domestic violence, treatment programmes for perpetrators and education initiatives for children. Norway also has separate NAPs for specific forms of violence against women including the prevention of rape (2019–2022), honour-based violence, forced marriage, and female genital mutilation (2021–2024)⁶⁷, and online sexual abuse (2021–2025)⁶⁸. The NAP on rape includes preventative measures and specifically targets groups which may be more vulnerable to sexualised violence such as Sámi women, women with physical or cognitive disabilities, and older women. The state in Norway

does fund primary prevention activities which include awareness-raising campaigns and programmes, training for primary prevention practitioners, bystander intervention training, and school-based primary prevention programmes, among others.

Specifically, sexualised violence has been included in secondary school curricula since 2013, aiming to provide students with knowledge on the difference between consensual sexual acts and sexual abuse. Specific training courses also exist for professionals likely to come into contact with victims of VAW, including police officers, healthcare professionals, and social workers. However, as has been noted by GREVIO, the training programmes reflect a gender-neutral approach to the topic of domestic violence.⁶⁹

66 Information from the GREVIO Baseline Evaluation Report Norway (2022).

67 Freedom from Negative Social Control and Honour Based Violence (2021–2024), <https://www.regjeringen.no/en/dokumenter/freedom-from-negative-social-control-and-honour-based-violence/id2861094/>.

68 Strategy against internet-related abuse (2021–2025).

69 GREVIO Baseline Evaluation Report Norway (2022), pg. 28.

POLAND

GENERAL COUNTRY INFORMATION

Population	37,654,247
Female population	19,443,954
Member of Council of Europe (year)	1991
Member of European Union (year)	2004
Member of United Nations (year)	1945
CEDAW ratified (year)	1980
CEDAW optional protocol ratified (year)	2003
Istanbul Convention signed (year)	2012
Istanbul Convention ratified (year)	2015



SUMMARY

► There is one national women's helpline in Poland which is available 24/7 but is not free of charge and does not offer multilingual support. Poland, therefore, **does not meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. There are 37 shelters accessible to women, with approximately 633 available beds, one of which is a women-only shelter with 20 available beds. Currently, Poland **does not meet** the IC standards for the provision of women's shelters as 3,163 or 83% of beds are missing. There are women's centres in Poland and all shelters accessible to women offer non-residential support to all survivors of violence against women. There are

however no support services for survivors of sexualised violence in the country. Poland does not have a National Action Plan on violence against women and girls. There is no available data on women's specialist services as the government does not distinguish between women's specialist services and general services providing support to survivors of domestic violence or other crimes. The available data presents all institutions and organisations available to survivors of violence as specialised services for women, although most services are gender-neutral and do not have a gender-specific approach.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	No	Yes	Yes	N/A

☎ There is one national women's helpline in Poland called the Emergency Helpline for Women Victims of Violence (tel.: +48 800107777) which is run by the NGO Women's Rights Center (*Centrum Praw Kobiet – CPK*). It provides immediate specialist support to women victims of violence, especially psychological, physical and sexualised violence, and offers advice to witnesses of these forms of violence. The helpline is available 24/7 but it is not free of charge and does not offer multilingual support. There is also a national emotional support helpline (tel.: +48 116123) which is available 24/7 and is for all people in a crisis situation and victims of crime, including survivors of domestic violence. The helpline does not specifically focus on violence against women, although its website does provide information on available support services for survivors in Poland, including a chat function.

Poland has another national helpline, the "Blue Line" – Polish National Helpline for Victims of Domestic Violence (tel.: +48 800120002), run by the NGO "Blue Line" of the

Institute of Health Psychology of the Polish Psychological Association. The helpline is funded by the State Agency for the Prevention of Alcohol-Related Problems as well as through donations. The helpline is free of charge and available 24/7, although it is gender-neutral and provides support to all survivors of domestic violence. It does offer multilingual support at specific times in Polish, English, and Russian. Additionally, the police headquarters run at selected hours a "Police Family Violence Hotline" (tel.: +48 800120226), that is free of charge and provides information on domestic violence, including on police procedures. The helpline is available on working days from 9:30 to 15:30.

There are other helplines for survivors of domestic violence operating at a local level, which are run by city halls, local support services and NGOs. For example, *Feminoteka Foundation* runs a free helpline (tel.: +48 888883388), available Monday to Friday from 11.00-19:00 for all women seeking support, including legal and/or psychological advice. They

also offer support in Ukrainian and Russian from Monday to Friday from 14:00-17:00 (tel.: +48 888887988). However, not all other helplines focus on domestic violence, but violence more broadly, and may not be specifically for women

survivors of violence. It is difficult to collect data on regional women's helplines in the country because the list of institutions running helplines is not publicly available.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
1	37	Most	633 ⁷⁰	3,132	83%	59,485

🏠 In Poland, there are 37 shelters accessible to women which are referred to as specialised support centres for victims of domestic violence⁷¹, with approximately 633 beds.⁷² These shelters were established by the National Program to Combat Domestic Violence and are financed by the state and local governments as well as through donations. One of these shelters is a women-only shelter which is run by the Women's Rights Center in Warsaw, with 20 available beds. All other shelters follow a gender-neutral approach and can accommodate both men and women, although survivors in these shelters are predominantly women. All shelters are meant to be accessible 24/7, free of charge, and do not require a referral, although in practice this is not always the case and depends on the shelter. Women usually stay in a shelter for up to three months, but it is possible to extend it up to a year. Most shelters are run by the state and only a few are run by NGOs, mainly Caritas, two are run by faith-based organisations, and one by a women's NGO with a gender-specific approach (Women's Rights Centre). The shelters are mainly present in major cities, although some also exist in smaller cities. The types of in-house services most often provided by shelters are casework, counselling and referrals, as well as practical, legal, psychological, and social advice. The most common forms of violence reported by clients are

psychological, physical, economic and sexualised violence. The main reasons for having to decline referrals are no space or capacity to support the survivor alone or with her children. The quality standards and services provided do vary across shelters, and most are not accessible to women with disabilities.⁷³ There is also a specific shelter for survivors of human trafficking, but no other specific shelters for women from marginalised groups.

Apart from the shelters mentioned above, there are homes for single mothers with children and pregnant women with approximately 408 beds, as well as a number of Crisis Intervention Centres with 1,403 available beds.⁷⁴ These shelters are managed by local authorities and often run by church organisations or NGOs. They offer shelter places for up to one year to mothers with underage children, pregnant women and other people caring for underage children. Crisis Intervention Centres provide support to all people in crisis situations, not just survivors of violence against women, but mainly accommodate survivors of domestic violence for up to three months.⁷⁵ There are also 228 beds available in so-called local support centres and 322 beds at a regional level, although these are also not specialised for women survivors of violence.⁷⁶

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
37	525,512	State; Women's NGOs (one centre); Other NGOs

❖ There are women's centres in Poland and all of the 37 specialised centres for victims of domestic violence offer non-residential support. Most of these centres are run by the state and local governments, and only the Women's Rights Centre in Warsaw runs its centre with a feminist and gender-specific approach. Types of services provided include counselling, legal, housing and employment advice, advocacy, and other support services such as

representation at court. Poland also has centres such as Crisis Intervention Centres, but these are not specialised in supporting women survivors of violence and their children. Additionally, most social welfare centres offer some psychosocial support to survivors of domestic violence, although the type of services provided differs widely across municipalities. The National Programme on Combating Family Violence in Poland has also encouraged local

70 Number of shelter beds from the WAVE Country Report 2021.

71 According to information provided by the Polish Government, <https://www.gov.pl/web/rodzina/baza-kontaktowa-specjalistyczne-osrodki-wsparcia-dla-ofiar-przemocy>.

72 Number of shelter beds from the WAVE Country Report 2021.

73 From the GREVIO Baseline Evaluation Report on Poland (2021), <https://rm.coe.int/grevio-baseline-report-on-poland/1680a3d20b>.

74 Number of shelter beds from the WAVE Country Report 2021.

75 According to the GREVIO Baseline Evaluation Report on Poland, there are 219 Crisis Intervention Centres (CIK).

76 Number of shelter beds from the WAVE Country Report 2021.

authorities to develop ‘consultation points’ for survivors of domestic violence, mostly located in social welfare centres. In rural municipalities, these services are often the only public services providing psychosocial support to

survivors of domestic violence.⁷⁷ However, these services are available to all survivors of domestic violence, and there are no specialist services for women survivors of various forms of violence.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There are no support services for survivors of sexualised violence, such as rape crisis centres, sexual violence counselling centres, crisis and medical services or specialised helplines in Poland. Some organisations, such as the Women’s Rights Centre, offer services to women who have experienced sexualised violence. Services are however only present in big cities like Warsaw, Gdańsk, Łódź, Wrocław, and Zyrardó. In Poznan, there is the “Intimate

Prevention Point” which provides free gynaecological consultations and examinations 24/7, including for survivors of sexualised violence. General intervention centres may provide some form of psychological counselling to survivors of sexualised violence, but these services are not equipped to provide specialist trauma-informed support. Furthermore, these services cannot provide support to children and young people.

5. PRIMARY PREVENTION SERVICES

👏 There is no National Action Plan on violence against women and girls in Poland, although the government adopted the “National Programme for Counteracting Violence in the Family”, in 2022 and 2023.⁷⁸ This Programme does not include a definition of primary prevention nor any specific provisions relating to primary prevention. Regarding prevention activities, the programme does include some initiatives including awareness-raising campaigns, limiting violence in the media, and preventative actions addressing parents. However, the activities only address domestic violence and do not take into account the gendered nature of violence against women. Additionally, the “National Programme for Combatting Family Violence” was in place from 2014–2020, but it also only addressed domestic violence committed by a current intimate partner or a family member. The GREVIO Baseline Evaluation Report on Poland also notes that there is a need for the Polish government to increase primary prevention measures by addressing structural inequalities between women and men and the need to promote programmes and activities for the empowerment of women more widely.⁷⁹ There are also no specific teaching materials relating to violence against women and equality between men and women on a national level, and no formal curricula in schools relating to the prevention of VAWG.

Under the 2005 Law on Combating Family Violence, a systematic multisectoral framework was set up to train various professionals who respond to domestic violence at the local level, although it operates on a limited scale and focuses solely on domestic violence.

There are however numerous civil society organisations in Poland carrying out primary prevention activities on a grassroots and small-scale level, some of which are run by women’s NGOs. These include anti-discrimination education, feminist-self-defence training (WenDo workshops and training of trainers; there are around 50 WenDo trainers in Poland and 18 WenDo trainers speaking Ukrainian who live in the Ukraine, Poland, Czech Republic and Estonia), empowerment programmes for girls (Girl’s Empowerment Centres), and programmes specifically aimed at boys and young men (such as the Sztama Project). Many WenDo trainers are part of NGOs and those NGOs now offer WenDo training (some of them in Ukrainian): for example, Autonomy Foundation, Feminoteka Foundation, Foundation for Women and Family Planning FEDERA, The Polish Migration Forum Foundation, and Women’s Rights Center.

⁷⁷ According to the GREVIO Baseline Evaluation Report on Poland, pg. 43. The report also notes that in 2019, there were 503 such consultation points.

⁷⁸ Available on the Polish Government’s website (in Polish), <https://www.gov.pl/web/uw-mazowiecki/krajowy-program-przeciwdzialania-przemocy-w-rodzinie-na-rok-2023>.

⁷⁹ Ibid, pg. 8.

PORTUGAL

GENERAL COUNTRY INFORMATION

Population	10,352,042
Female population	5,428,941
Member of Council of Europe (year)	1976
Member of European Union (year)	1986
Member of United Nations (year)	1955
CEDAW ratified (year)	1980
CEDAW optional protocol ratified (year)	2002
Istanbul Convention signed (year)	2011
Istanbul Convention ratified (year)	2013



SUMMARY

► There is one national women's helpline in Portugal, free of charge and available 24/7. Therefore, the country **does meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. There are 35 women-only shelters in Portugal with 631 beds available. The country **does not meet** the IC standards for the provision of women's shelters, since 39% of the necessary beds are missing. There are a total of 200 women's centres

in Portugal, 194 centres are only for women survivors of violence against women (VAW.) There are two rape crisis centres in Portugal, which offer support to women and girls who have experienced sexualised violence. Portugal has a National Action Plan on VAWG for the period 2019-2022. The state, through the Commission for Citizenship and Gender Equality, collects data on women's specialist support and this data is public.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	No	993 calls

☎ There is one national women's helpline in Portugal called Information Service for Domestic Violence Victims (*Serviço de Informação a Vítima de Violência Doméstica – SIVVD*, tel.: +351 800202148, SMS 3060), which is run by the Commission for Citizenship and Gender Equality. The helpline is free of charge, available 24/7 and provides support in Portuguese only. The helpline supports all survivors of domestic violence (DV) and operates from a gender-neutral perspective. The helpline is funded by the state from national/local authorities and has received 993 calls, 243 emails and 178 SMS in 2022. The most common forms of violence reported by callers to the national helpline were psychological, physical, and economic violence.

There are also other helplines available in the country, such as the Line for Social Emergency (*Linha de Emergência Social*, tel.: +351 144) which is run by the Social Security Services. This helpline gives support to all survivors of VAW and DV, is free of charge and operates 24/7. Some NGOs provide local helplines: the Association for the Support of Victims (*Associação de Apoio à Vítima – APAV*, tel.: +351 116006) has a helpline for all survivors of crimes including survivors of domestic violence. This helpline is free of charge and operates from Mondays to Fridays from 8:00

to 22:00. Most Centres supporting survivors of VAW and DV are accessible by phone, video calls or email. They can provide remote support to survivors, but mostly only during working day hours. It also possible to use a telephone translation service run by the High Commission for Migration. The Association of Women Against Violence (*Associação de Mulheres contra a Violência – AMCV*, tel.: +351 213802160, SMS 962048272) can be contacted by survivors during working hours and provides multilingual support in Portuguese, English, French and German, according to the staff available. There are two other helplines provided by the Women's Alternative and Response Union's helpline (*União de Mulheres Alternativa e Resposta*, tel.: +351 218873005) as well as Victim Support Portugal's helpline (*Apoio a Vítima – APAV*, tel.: +351 116006).

The Portuguese government provides a mobile app (Ap-pVD) linked to the Resource Guide in the area of Domestic Violence (*Guia de Recursos na área da Violência Doméstica*, www.guiaderecursosvd.cig.gov.pt), that localises all services providing support in cases of VAW and domestic violence, divided by regions.⁸⁰

80 <https://www.cig.gov.pt/area-portal-da-violencia/portal-violencia-domestica/rnavvd/guia-de-recursos/>

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
35	37	None	631	404	39%	16,406

There are 35 women-only shelters in Portugal, where 631 beds are available. None of the women-only shelters provide 24/7 access. Women are not expected to pay for their accommodation in the women-only shelters, which are funded by the state from national/local authorities and donations as well as from the National Lottery according to the protocols with the State Secretariat for Equality and Migration. Seven women-only shelters are run by women's NGOs with a gender-specific/feminist approach, 12 of the shelters are run by general NGOs and 16 shelters are run by faith-based organisations. The Portuguese Association for Victim Support (*APAV Associação de Apoio à Vítima*) runs a women-only shelter.

Women-only shelters are located in all regions of Portugal, both in continental districts and in the autonomous regions of Azores and Madeira. According to Portuguese legislation, women and their children can stay in women-only shelters for three to six months, but it is possible to extend this timeframe if the risk persists or if the woman's transition toward autonomy is not sustainable by that time. If women-only shelters had to decline referrals, it would be mainly because there is no space/capacity to support the survivor or to accommodate the survivor with her children or the shelter is not adequately equipped for the needs of the women/children (e.g. in cases of women with disabilities). In 2022, the total number of women that were accommodated in women-only shelters was 3,254 women and 2,909 children. The most common types of violence reported by the clients to the women-only shelters are psychological, physical, and economic violence and the in-house services provided by the women-only shelters include casework, counselling, referrals/collaboration with other services as well as practical and legal advice.

All women-only shelters are accessible to women with uncertain residence status/undocumented women, homeless women, women with cognitive disabilities, older women, and transgender women. Some women-only shelters are accessible to women with physical disabilities and some are accessible to women with older sons (14 years and above). There is one shelter in Portugal that offers nine beds for LGBTQI+ people, and one shelter for women survivors of trafficking.

In Portugal, there are 25 emergency accommodations with a total of 260 beds. These emergency shelters are run by NGOs and other community associations that are part of the national support network for victims of DV and operate in accordance with Portugal's national legislation on domestic violence, which states that emergency accommodations are services for DV survivors aimed at the urgent reception of survivors accompanied or not by minor children, for the period necessary to assess their situation and to ensure the protection of their physical and psychological integrity. In the case of an emergency, the National Line for Social Emergency is responsible for finding a place for women and children's survivors of domestic violence, most often in emergency accommodations, and for providing safe transportation to this accommodation. The emergency accommodations are free of charge, accessible 24/7, and should have a minimum of a counsellor and three home assistants for 15 clients. They provide support for the victims for a period of 72 hours, but in exceptional cases, for a maximum of 30 days.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
197	27,558	Women's NGOs (2 centres); others (N/A)

There are 200 centres for survivors of VAW and DV, including sexual violence. There are 194 women's centres only for women survivors of VAW and three centres for LGBTQI+ people. Women's centres are located in all regions of Portugal. Two women crisis centres are run by women's NGOs: AMCV in Lisbon and EIR (UMAR) in Porto. The state does not run any women's centres. The funding for women's centres comes from the state from national/local authorities, donations, and international funding. The National Lottery provides funds to the women's centres

according to the protocols of the State Secretariat for Equality and Migration.

Women's centres provide only non-residential support services, such as counselling/psychological support, legal and housing advice, financial and social welfare support/advocacy, referrals, employment and representation at court/police/social services, and specialist support for survivors of sexualised violence (SV), including needs assessment, psychological care, specialist SV advocacy

services as well as community awareness and education for prevention. Most centres are specialised in DV and work with a community network approach with other public or private entities, according to the needs assessment of the survivors. This approach applies to cases of survivors of different forms of violence and from vulnerable groups: survivors of forced marriage, honour-based

violence, female genital mutilation and trafficking in persons, as well as older women, women with disabilities, black and minority ethnic women, LGBTQI+ people or women with uncertain residence status/undocumented women. In 2022, 20,305⁸¹ women were supported by all women's centres in Portugal.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☔ There are two rape crisis centres in Portugal, one located in Lisbon and the other in Porto. They provide specialist forensic and medical care, needs assessment, specialist psychological care, specialist SV advocacy services as well as community awareness and education for prevention. Sexualised violence services are for women and girls

above the age of 16 and are funded by the state from national/local authorities and they receive funding from the National Lottery. Hospitals provide health care and crisis/medical services for survivors of sexual violence. There are no specialised helplines.

5. PRIMARY PREVENTION SERVICES

👤 Portugal has a National Action Plan on VAWG for the period 2019–2022.⁸² There is an official definition of primary prevention in Portugal. The state funds some primary prevention activities. Activities carried out in the country include school-based primary prevention programmes, training for primary prevention practitioners, bystander

intervention training as well as awareness-raising campaigns or programmes. Beneficiaries of these activities are the general public, girls and boys under the age of 18, women, men as well as LGBTQI+ people.

81 This number refers to the total number of survivors supported by the 200 centres including SV and LGBTQI+ centres.

82 On 14 August 2023, the Portuguese Government published the Action Plan to Prevent and Combat Violence against Women and Domestic Violence 2023-2026, which is the second Action Plan in this area integrated into the National Strategy for Equality and Non-Discrimination 2018-2030: <https://files.diariodarepublica.pt/1s/2023/08/15700/0001200092.pdf>.

ROMANIA

GENERAL COUNTRY INFORMATION

Population	19,042,455
Female population	9,802,644
Member of Council of Europe (year)	1993
Member of European Union (year)	2007
Member of United Nations (year)	1955
CEDAW ratified (year)	1982
CEDAW optional protocol ratified (year)	2003
Istanbul Convention signed (year)	2014
Istanbul Convention ratified (year)	2016



SUMMARY

► There is one national women's helpline in Romania which is free of charge, available 24/7 and offers multilingual support. Therefore, the country **does meet** the Istanbul Convention (IC) standards on provision of a national women's helpline. There are 114 women-only shelters with a total of 1,260 beds as well as 42 other shelters accessible to women. Romania **does not meet** the IC standards for the provision of women's shelters, as 34% of beds are missing. There are 38 women's centres in Romania, of which 31 centres are for all survivors of domestic violence

and seven centres focus on awareness-raising and advocacy. There are 10 crisis/medical centres for survivors of sexualised violence in which are located in emergency hospitals and operate as referral centres. The state does collect data on women's specialist services and this data is only available upon request. There is a National Action Plan on violence against women and girls in Romania, which does not include specific provisions on primary prevention.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	Yes	3,754 calls; 3,518 callers

☎ There is one national helpline in Romania, called the National Helpline for Victims of Domestic Violence (*Număr unic național de urgență pentru victimele violenței domestice*, tel.: +40 800500333). The helpline is free of charge, available 24/7 and is run by the National Agency for Equal Opportunities between Women and Men. The helpline provides multilingual support in Romanian, Italian, Hungarian, English, and Ukrainian. The helpline is funded by the state and provides support for survivors of violence against women, human trafficking, and gender discrimination. The National Helpline for Victims of Domestic Violence received a total of 3,754 calls in 2022, of which 2,162

calls were related to domestic violence, 21 calls to human trafficking and 16 calls to gender discrimination. The most common forms of violence against women (VAW) reported to the helpline in 2022 were psychological, physical, and verbal violence.

There is another regional helpline in Romania, provided by the Centre for Mediation and Community Security (*Construim comunități mai sigure împreună*, tel.: +40 800070017, emergency number tel.: +40 787878806), which provides psychological and social counselling to all survivors of violence.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
114	156	Some	1,260 ⁸³	644	34%	15,113

⁸³ This number only includes the beds in women-only shelters.

🏠 Romania has 114 women-only shelters with 1,260 beds available. Some of the women-only shelters have 24/7 access and women are not expected to pay for their accommodation in the shelters. Funding for women-only shelters comes from the state from national/local authorities as well as international funding. Of the total 114 women-only shelters, 101 shelters are run by the state. Eight women-only shelters are run by women's NGOs with a gender-specific/feminist approach while five women-only shelters are run by faith-based organisations. Women-only shelters exist in major cities only and include emergency centres, where women can stay for a short period of time and recovery centres for a longer period of stay, up to 180 days. There has been an increase in the number of women-only shelters in Romania as a result of the continuous funding received through the European Union VENUS project that was launched in 2019. There are 42 protected houses established through European funds, in which women can stay up to one year. The in-house services that are most often provided by women-only shelters are counselling, referrals/collaboration with other services and

practical advice. In 2021, the total number of women that were accommodated in women-only shelters was 1,482 women.

According to national authorities, all women-only shelters are accessible to women with uncertain residence status/undocumented women, homeless women, women with physical and/or cognitive disabilities, women with substance abuse issues, older women, transgender women, and women with older sons (14 years and above). However, in reality this is not always the case.

There are other shelters that provide support for survivors of VAWG and are accessible to women. Forty-two shelters are available for mothers/pregnant person, with six beds. Some of these other shelters offer 24/7 access. However, there are no specific shelters for vulnerable groups, such as migrant/undocumented women or women survivor of specific forms of violence such as, trafficking and honour-based violence.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
38	257,964	Women's NGOs (13 centres); State (25 centres)

❖ There are 38 women's centres in Romania, of which 31 centres are for all survivors of domestic violence and seven centres focus on awareness-raising. Thirteen women's centres are run by women's NGOs and 25 are run by the state. Women's centres are found in just the major cities and are funded by the state from national/local authorities, donations as well as international funding.

centres provide non-residential support services only. Other support services provided by women's centres include counselling for survivors' own safety and security and information on how to access services in order to obtain a forensic medical certificate and medical care.

All 38 women's centres provide financial and social welfare support/advocacy, as well as referrals. Thirty-one women's centres provide counselling/psychological support, legal and housing advice, and employment. Women's

Women's centres do not provide specialist support for survivors from vulnerable groups such as women with uncertain residence status/undocumented women and women with disabilities, nor for specific forms of violence such as forced marriage.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There are no rape crisis centres or sexual violence referral centres in Romania. There are 10 crisis/medical services centres, which were founded in 2021 and operate as referral centres. These are integrated services located in emergency hospitals around the country and provide specialist forensic and medical care. The services have received 15 beneficiaries since 2021 and five of these centres have not had any beneficiaries since they opened. Sexualised violence services are located in major

cities only and are not only for women, but all population groups (including children). The SV support services are not funded by the state or from donations, and there is no specialised paid staff working; their operation depends on the emergency hospital's budget/fund. There are no specialised helplines for survivors of sexualised violence in Romania.

5. PRIMARY PREVENTION SERVICES

👉 There is a National Action Plan on VAWG in Romania, namely the National Strategy for Preventing and Combating Sexual Violence “SINERGIE” 2021-2030⁸⁴ and a National Strategy for Promoting Equality of Opportunities and Treatment between Women and Men and for Preventing and Combating Domestic Violence 2022–2027.⁸⁵ These however does not include specific provisions on primary

prevention. There is no official definition of primary prevention. The state does not fund primary prevention activities. Some of the primary prevention activities that take place in Romania are school-based primary prevention programmes, training for primary prevention practitioners and awareness-raising campaigns or programmes. Beneficiaries of these activities are the general public.

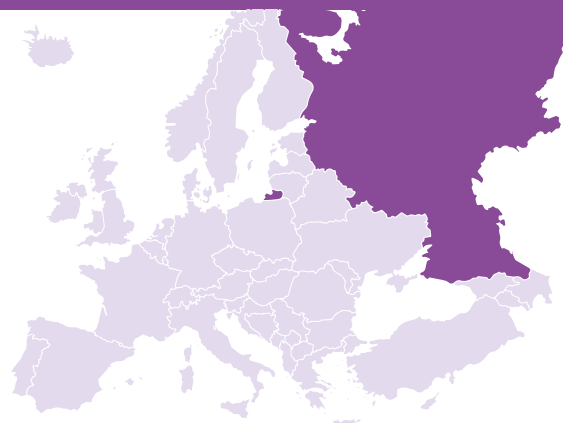
84 Government of Romania, National Strategy for Preventing and Combating Sexual Violence “SYNERGY” 2012-2030, <https://lege5.ro/gratuit/haydqmbwgyyq/strategie-nationala-pentru-prevenirea-si-combaterea-violentei-sexuale-sinergie-2021-2030-strategie-inovativa-si-integrata-interventie-multidisciplinara-nonstereotipuri-egalitate-de-sanse-intre-femei-s?dp=gm4tomrwgyydomi>.

85 Government of Romania, National Strategy for Promoting Equality of Opportunities and Treatment between Women and Men and for Preventing and Combating Domestic Violence 2022-2027, <https://anes.gov.ro/wp-content/uploads/2023/01/Monitorul-Oficial-Partea-I-nr.-1239Bis.pdf>.

THE RUSSIAN FEDERATION

GENERAL COUNTRY INFORMATION

Population	143,666,931 ⁸⁶
Female population	77,120,043 ⁸⁷
Member of Council of Europe (year)	1996
Member of European Union (year)	No
Member of United Nations (year)	1945
CEDAW ratified (year)	1981
CEDAW optional protocol ratified (year)	2004
Istanbul Convention signed (year)	No
Istanbul Convention ratified (year)	No



SUMMARY

► The Russian Federation has one national women's helpline which is free of charge and operates 24/7, although it does not offer multilingual support. The Russian Federation **does meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. There are an estimated 30 women-only shelters in the Russian Federation, as well as an estimated 86 other shelters accessible to women survivors of violence with 448 available beds. However, there are no official statistics on the number of shelters and beds available, and the Russian Federation **does not meet** the IC standards for the provision of women's

shelters. The country has approximately 150 women's centres providing a variety of support to survivors of violence against women. There are two sexual violence referral centres in the Russian Federation for survivors of sexualised violence as well as a specialised helpline. There is a National Action Plan which does not focus on, but does address violence against women and girls, but which does not include specific provisions on primary prevention. The state does collect data on women's specialist services, although this data refers to governmental services only

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	No	61,224 calls

☎ In the Russian Federation, there is one national women's helpline called the National Helpline for Women Suffering from Domestic Violence (*Всероссийский круглосуточный телефон доверия для женщин, пострадавших от домашнего насилия*, tel.: +7 800 7000600). This helpline is run by ANNA, the National Centre for Prevention of Violence, in collaboration with other regional NGOs. The helpline is free of charge and operates 24/7, but does not offer multilingual support. This helpline provides support mainly to survivors of domestic violence. It is funded primarily through donations and international funding. According to the data published by the ANNA centre, the total number of calls to the national helpline in 2022 was 61,224 and the most common form of violence reported by callers to the helpline was physical violence.

There is another state-wide women's helpline in Russia called INGI/Crisis Centre for Women hotline (*горячая*

линия кризисного центра для женщин ИНГО, tel.: +7 8123273000) which is run by the Institute of Non-discriminative Gender Interrelations/Crisis Centre for Women. This helpline is free of charge but not available 24/7 nor does it offer multilingual support. This helpline provides psychological and legal support for women survivors of any form of domestic or sexualised violence, including commercial sexual exploitation, and also supports women experiencing cyberviolence and stalking. The helpline is primarily funded through international funding and donations. This helpline received a total number of 7,049 requests in 2022, which includes 1,570 calls and 5,479 online requests. The most common forms of violence reported by callers were physical violence, psychological violence, and stalking. There are other regional helplines supporting survivors of violence against women in Russia, but the exact number is unknown. It is important to note that in 2022, many Russian women's organisations that

86 Latest available data on Eurostat's database is from 2014.

87 Ibid.

continue to operate in Russia have reported a decreased number of calls, due to a sharp reduction in funding as well as a number of call operators having to leave the country. On the other hand, the number of help requests via chat

and online channels has increased year after year as this service is more flexible, and allows operators to cover a wider geographical area.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
30 ⁸⁸	116 ⁸⁹	Some	N/A	N/A	N/A	N/A

There are an estimated 30 women-only shelters across the country, most of which are run by the municipality, but the exact number of beds is unknown. There are no official statistics on the number of shelters and beds available for women survivors of violence in Russia and the numbers reported are based on unofficial information provided by services supporting women in crisis situations. The number of beds is drastically insufficient to meet the needs for women survivors of violence, even in major cities, and in most other regions shelter accommodation is not an available option. Moreover, most of the shelters have a set of strict requirements (for example, the survivors must be registered locally to access the shelter), which makes the available services even less accessible. Some women-only shelters offer 24/7 access and women are not expected to pay for their accommodation in most shelters. In some state-run shelters, a woman must provide a document proving her income. If her income is higher than the official subsistence rate, she needs to pay for her accommodation. The main source of funding for shelters comes from the state as well as donations. Women-only shelters exist in major cities only and women are allowed to stay there for up to three months. If women-only shelters had to decline referrals, the three main reasons were lack of space/capacity to support the survivor, the survivor being ineligible for support, or the shelter not being adequately equipped for the needs of the women and/or children. According to the available restricted information, physical violence, often combined with psychological and emotional violence, economic violence, and death threats were the most common types of violence reported by the clients to the women-only shelters in 2022. The three types of in-house services that are most often provided by women-

only shelters in Russia are counselling, practical advice, and legal advice.

In terms of accessibility, women may face obstacles in accessing shelters, as in some cases shelters can only provide accommodation to women who reside in the same region where the shelter is located. Some women-only shelters are accessible to women with uncertain residence status/undocumented women, homeless women, older women, and women with older sons (14 years and above). There is no concrete information on specific shelters for vulnerable groups such as women with disabilities, or women victims of specific forms of violence such as forced marriage and female genital mutilation, as such shelters are often run by grassroots initiatives rather than registered NGOs. Additionally, as state oppression against civil society representatives grows, many services offering support to vulnerable groups of survivors are underfunded and receive no governmental support.

In Russia, there are an estimated 86 other shelters that can provide support to survivors of violence against women (VAW), with an estimated capacity of 448 beds.⁹⁰ However, there are no official statistics on the number of shelters and beds available. Most of the other available shelters are run by faith-based organisations and are accessible to all survivors of violence. There are also state-run and non-governmental shelters for homeless people, which can also provide accommodation for women in difficult life situations. While shelters are open to all survivors, gender affirming medical procedures are banned in Russia, meaning that transgender and non-binary people face serious risks when accessing shelters, and there is a lack of services for LGBTQI+ survivors to receive support.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
150–180	514,134 ⁹¹	N/A

88 This is just an estimation based on the situation in St. Petersburg. It is estimated that there are about 30 women-only shelters all over the country, most of them run by municipalities.

89 This is based on data from the WAVE Country Report 2021 and an estimation of the current number of women-only shelters for women survivors of violence. Accurate and updated numbers are not available.

90 Information from the WAVE Country Report 2021. This number is an estimation as exact and current numbers are not available.

91 Estimate based on the latest available data on female population in 2014. Number of female population per centre based on an estimate of 150 women's centres in the Russian Federation.

❖ There are women's centres in Russia, although the exact number is unknown, but different estimations give an approximate number of 150–180 centres across the country. Women's centres in Russia are located only in major cities and are funded by the state, donations, and through international funding. Information on which entities are running women's centres is not available, and it is furthermore not the case that all women's centres take a feminist and gender-sensitive approach. In fact, some centres may reinforce negative gender stereotypes and use victim-blaming language. Services provided by women's centres include counselling and psychological support, legal advice, financial and social welfare support, and housing advice. Most women's centres provide only

non-residential support services, although all women-only shelters offer both residential and non-residential support. It is not known how many women survivors of violence were assisted by the women's centres in 2022.

Women's centres provide specialist support for survivors of trafficking and for women with uncertain residence status/undocumented women as well as older women. There are grassroots initiatives which provide support for transgender women and non-binary people. Some women's centres also provide specialist support for survivors of sexualised violence in Russia, including specialist psychological care and community awareness and education for prevention.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There are two sexual violence referral centres in Russia, the Sexual Assault Recovery Centre Sisters (*Syostrri*), which opened in 1994, and We Believe You (*Tebe Poveryat*), which provides psychological and legal help to child sexual abuse survivors, both female and male (working offline in St. Petersburg and online across Russia and other countries for Russian-speaking survivors). The centres are located in major cities only and support provided by these centres includes specialist psychological care, and community awareness and education for prevention. Additionally, some women's crisis centres also provide online

counselling and support to adult female survivors of SV, although these centres are not specialised centres for SV survivors. There are no rape crisis centres or crisis/medical services in Russia for women and girls who have experienced sexualised violence. There is a specialised helpline run by the Sexual Assault Recovery Centre Sisters (tel.: +7 49990102019), which can answer requests regarding sexualised violence. Funding for sexualised violence support services comes from donations as well as international funding.

5. PRIMARY PREVENTION SERVICES

👏 There is no National Action Plan specifically addressing violence against women and girls in Russia, but there is a national strategy aimed at women, namely the National Action Strategy for Women (2017–2022). This strategy focuses on the interests of women and contains actions aimed at safeguarding the health of women of all ages, promoting the economic advancement of women, preventing social disadvantage and violence against women, enhancing women's participation in political and public life and advancing official statistics related to matters of

women's position in society. However, the issue of violence against women is not directly addressed in the strategy but is rather blurred under the broad term of "social disadvantage". Moreover, it incorrectly states that the rates of domestic violence are decreasing, which is the consequence of underreporting of domestic violence cases as a result of legislative changes. There is no official definition of primary prevention in Russia and the national strategy does not include specific provisions on the primary prevention of VAWG.

SERBIA

GENERAL COUNTRY INFORMATION

Population	6,797,105
Female population	3,489,070
Member of Council of Europe (year)	2003
Member of European Union (year)	No
Member of United Nations (year)	2000
CEDAW ratified (year)	2001
CEDAW optional protocol ratified (year)	2003
Istanbul Convention signed (year)	2012
Istanbul Convention ratified (year)	2013



SUMMARY

► There is one national women's helpline in Serbia, which is free of charge and operates 24/7 but does not provide multilingual support. Serbia **does meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. There are 14 shelters accessible to women in Serbia with approximately 190 available beds. With 72% of the necessary beds missing, Serbia **does not meet** the IC standards for the provision of women's shelters. There are approximately 29 women's centres, most of which are run by women's NGOs, and four sexual violence crisis centres

in Serbia. There is a National Strategy for preventing and combating gender-based violence against women and domestic violence for the period 2021–2025, which includes specific provisions on prevention. The state does collect data on women's specialist services and this data is public. Since 2016, the Republic Institute for Social Protection has been collecting data on all licensed social protection services, but this does not include all specialist services available in the country and the data is not easy to disaggregate.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	No	N/A ⁹²

☎ Serbia has one national women's helpline called SOS Helpline for women who experience violence (*SOS telefon za žene sa iskustvom nasilja*, tel.: +381 0800222003). It is run by the Centre for Protection of Infants, Children and Youth in Belgrade and it is supported by the state. The helpline is free of charge and available 24/7 but does not offer multilingual support. This helpline provides support to all survivors of domestic violence, not only women; women's rights organisations and experts are not involved in the helpline, and it is not clear if the staff is adequately trained and providing a gender-sensitive approach.

There is another women's helpline in Serbia, run by The Association of Roma Women 'Osvit' in Niš and is called SOS Helpline for women with experience of violence (*SOS telefon za žene sa iskustvom nasilja*, tel.: +381 0800100909). This helpline is free of charge, operates 24/7, and provides multilingual support for survivors of domestic and intimate partner violence in Serbian and Romanian. However, it does not have all the technical conditions or approvals

to serve as a national SOS Helpline nor is it funded by the state. This helpline is funded by donations. In 2022, it received 673 calls from 142 callers. The most common forms of violence which are normally reported by clients are physical and psychological violence.

In Serbia, there are 30 other regional, women-led SOS helplines that are part of the network Women Against Violence.⁹³ In 2022, these other helplines received 8,657 calls from 2,696 women. All helplines belonging to the Women Against Violence Network provide emotional and informational support as well as legal consultations to women. Those who have psychologists on their teams provide also psychological support, while other organisations refer women to other available services. A very small number of women's groups within the network provide legal representation for survivors in court due to the very rigorous regulations applied in Serbia, which practically excludes NGOs from this field.

⁹² In 2021, the national helpline received a total of 2,869 calls from 627 women and 78 men, and 25% of these calls were related to violence. Data for 2022 is not available.

⁹³ The full list can be consulted at www.zeneprotivnasilja.net/o-nama/spisak-organizacija

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
N/A	14	All	190	490	72%	35,774

There are 14 shelters accessible to women in Serbia, although a few of them do not always provide accommodation. All shelters offer 24/7 access. The majority of shelters are free of charge for women. Shelters are located in major cities only and there are no shelters in the western and eastern parts of Serbia. Eight shelters for women and children survivors of domestic violence are run by the Centre for Social Welfare and five shelters are established by the local Centres for Development of Social Services. These shelters are funded by national and local authorities. One shelter in Belgrade is run by a women's NGO with a gender-specific/feminist approach and provides counselling against domestic violence. Women are allowed to stay in the shelters for a period of three to six months. However, in some cases women stay longer than six months. The reasons for having to decline referrals are the lack of space and capacity to accommodate the survivor with her children, the survivor being ineligible for support, or the shelters not adequately equipped for the needs of the women/children. Shelters usually accommodate women who have survived severe acute physical and/or sexual violence and are at a high risk of recurrence. However, there is no data available about the most common forms of violence reported by women to the shelters.

Shelters mainly provide three types of in-house services: legal advice, counselling, and referrals/collaboration with other services.

In terms of accessibility, a survey conducted by NGO Atina⁹⁴ shows that 21% of employees in shelters consider them partially or completely not accessible to refugees and migrants, transgender persons and some other persons from vulnerable groups, while 79% said that shelters are accessible to all categories of women. The accessibility of shelters for women with disabilities and the provision of suitable accommodation can be provided in 36% of the shelters, although 86% of the shelters do not have beds adjusted for women with physical disabilities. Around 91% of employees in shelters, consider them accessible to women from different nationalities. However, the data collected from the focus groups show that undocumented women or those who submitted a request for documents or are foreigners cannot use shelters despite the law guaranteeing their access because of procedural reasons. There are specific shelters for survivors of human trafficking, which are state shelters and are located in Sremska Mitrovica and Zrenjanin. The NGO Atina provides accommodation for migrant and undocumented women and survivors of trafficking. There are no other shelters in Serbia that can provide support to survivors of VAW.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
30	116,302	Women's NGOs; State

There are 30 women's centres in Serbia,⁹⁵ which includes 20 women-only specialised services that are run by members of the Women Against Violence Network. Women's centres are located in most regions of the country. There are also many local centres that provide support for different groups of people, including women, and which, among other services, provide some protection services against violence. These local centres are available in most of the regions of Serbia. Most women's centres are run by women's NGOs. Funding for women's centres comes from donations as well as international funding opportunities (such as UN Women and OAK Foundation). Women's centres provide non-residential support, such as counselling/psychological support, legal advice, financial and social

welfare support/advocacy as well as referrals. Approximately, five centres provide housing advice and very few centres provide representation at court/police/social services, etc. Seven women's centres provide specialist support for survivors of forced marriage. The Centre for Protection of Victims of Human Trafficking, Atina NGO, and ASTRA (Anti-trafficking Centre) provide specialist support for survivors of trafficking in persons. Two centres run by NGO Astra and Atina are providing support to women with uncertain residence status/undocumented women. Additionally, there are seven collective centres that provide accommodations for migrants and refugees as well as 12 reception centres which are funded by the state. There are four Roma women's centres that provide support for black

94 Atina, Functioning and operation of shelters for women victims of violence in Serbia (Funkcionisanje i rad prihvatilišta za žene žrtve nasilja u Srbiji), 2023, <http://atina.org.rs/sites/default/files/Funkcionisanje%20i%20rad%20prihvatilista%20za%20zene%20zrtve%20nasilja%20u%20Srbiji%20-%20Analiza%20zate%20C4%8Denog%20stanja.pdf>.

95 List of NGOs providing support to women survivors of male violence, retrieved on 13 October 2023: <https://www.zeneprotivnasilja.net/o-nama/spisak-organizacija>.

and minority ethnic women. At least two centres, Out of Circle (Iz Kruga) in Vojvodina and in Belgrade are specialised in supporting women with disabilities. One centre established by the Caritas Organisation provides support to older women in Belgrade. At least five centres support LGBTQI+ people.

For survivors of sexualised violence, women's centres provide specialist support in the form of specialist forensic and medical care, specialist psychological care and community awareness and education for prevention.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There are four crisis centres for survivors of sexualised violence (SV) in Serbia, situated in the hospitals of Zrenjanin, Sremska Mitrovica, Kikinda, and the Hospital Clinical Centre of Vojvodina Province in Novi Sad. The centres can also be reached through helpline numbers (tel.: +381 069 3043 007/008/009/010). Support provided to survivors of SV includes specialist forensic and medical care, specialist psychological care, community awareness, and education for prevention. When survivors of SV contact the police, an order to the Health Centre is issued, to carry out an examination. In the event that the woman goes to the health care institution first, the institution is obliged to report the violence to the police. Women's centres also respond to calls from women survivors of sexualised violence and redirect them depending on the case and in agreement with the woman who called. Nevertheless, most women's centres are able to provide long-term psychological and/or emotional and informational support to women survivors of sexualised violence. Sexualised violence services are located in the major cities only in the northern part of Serbia and are available to girls and women from the age of 15. Funding for sexualised violence services comes from

the state as well as international funding. These centres were established and were working with the support of the Province of Vojvodina's government from 2016 till 2018. Currently, they are working thanks to the support from foreign donors (OAK Foundation and UN Women).

In Serbia, there are no specific national action plans/national strategies that address SV. However, it is addressed within the National Strategy for Preventing and Combating Gender-based Violence against Women and Against Violence in Family for the period of 2021-2025. The challenges noted in the Strategy are related to defining the legal basis for financing the support service for survivors of SV (e.g., to provide emergency contraception within 72-120 hours after unprotected sexual intercourse, in cases of rape, at the expense of mandatory health insurance). According to the Autonomous Women's Centre, forensic medical examinations of survivors of SV are not uniformly available throughout the territory of Serbia, and where they are available, the limiting factor is the financial availability of the survivor, as forensic examinations are not covered by health insurance.

5. PRIMARY PREVENTION SERVICES

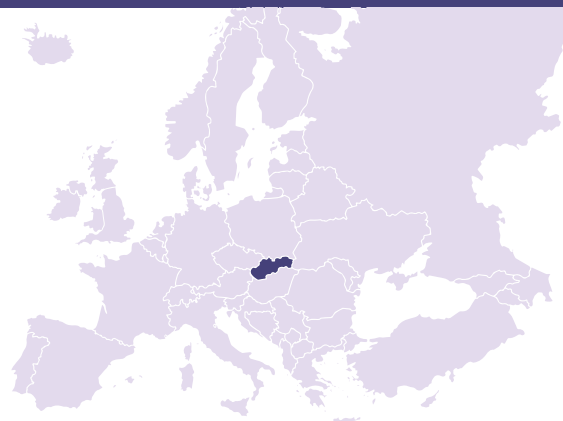
☞ In Serbia, there is a National Strategy for Preventing and Combating Gender-based Violence against Women and Against Violence in Family for the period 2021-2025. In the Strategy, there is a specific provision on the primary prevention of VAWG, even though the term "primary" is not used. The strategy talks about the importance of and the forms of prevention, campaigns, information, and raising public awareness, as well as education, and training of experts to act against various forms of violence, including that in the digital sphere. It also emphasises that raising public awareness about all forms of violence against women and domestic violence is one of the most important tasks in terms of violence prevention. The state funds primary prevention activities. Prevention activities are done by the state and NGOs, in particular during the 16 days of Activism against VAW. A certain number of organisations focus on primary prevention in Serbia, and the activities

carried out include feminist self-defence training, training for primary prevention practitioners, bystander intervention training, self-care activities, and awareness-raising campaigns or programmes. Beneficiaries of such activities are the general public, men, women and LGBTQI+ people. For example, for several years the Autonomous Women's Centre in cooperation with other women's groups has been running a campaign for young people against violence against women called "I can say I won't – love is not violence". Local women's groups, e.g., Women for Peace, Oasis of Security, Sandglass, and Impuls, work to inform and raise awareness about VAW among women in rural areas. Roma organisations have campaigns to empower Roma women to recognise violence and ask for help and protection. The NGO Out of Circle in Belgrade and Vojvodina carries out preventive activities focusing on women with disabilities.

SLOVAKIA

GENERAL COUNTRY INFORMATION

Population	5,434,712
Female population	2,776,809
Member of Council of Europe (year)	1961
Member of European Union (year)	2004
Member of United Nations (year)	1993
CEDAW ratified (year)	1993
CEDAW optional protocol ratified (year)	2000
Istanbul Convention signed (year)	2011
Istanbul Convention ratified (year)	No



SUMMARY

► There is one national women's helpline in Slovakia, it is free of charge, and available 24/7, therefore, the country **does meet** the Istanbul Convention (IC) standards for the provision of a women's helpline, although it currently does not offer multilingual support. There are nine women-only shelters in Slovakia, and the data available shows that seven of them offer 183 beds. Although the total number is slightly higher, Slovakia **does not meet** the IC standards for the provision of women's shelters. There are 27 counselling centres in the country. Out of 27 counselling centres, 10 are also intervention centres. Fourteen centres are

run by women's NGOs, 11 by other NGOs, one by a law firm and one is run by a regional government. There are no specific services for survivors of sexualised violence (SV). There is a National Action Plan on VAW in Slovakia for the years 2022–2027, which includes specific provisions on primary prevention of VAW. The state collects data through the Institute for Labour and Family Research and the Coordinating Methodical Centre for the Prevention of Violence against Women. In 2022, the collection of administrative data in social services was piloted and should take place on an annual basis.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	No	1,959 calls; 567 callers

☎ There is one national women's helpline in Slovakia called National Helpline for Women Experiencing Violence (*Národná linka pre ženy zažívajúce násilie*, tel.: +421 800212212) run by the Institute for Labour and Family Research. The helpline is free of charge and operates 24/7 but does not offer multilingual support. The European Social Fund was the main source of funding in 2022, with the state co-financing part of the costs: in the country's capital, Bratislava, the co-funding is 50%, while in other regions it is 15%. The helpline provides support to women survivors of intimate partner violence, rape, SV, and domestic violence. In 2022, it received 1,959 calls from 567 women. The most common forms of violence reported by callers were psychological, economic and physical violence.

In Slovakia, most counselling centres for women also operate crisis helplines, for a total of 24 helplines. They are not free of charge, although some of them offer callbacks so that women do not have to pay. Only four of them are available 24/7, while the others are available during workdays. Regional and local helplines usually provide information, crisis intervention, basic risk assessment and safety planning, as well as referrals to other services. The approximate number of calls to the regional helplines in 2022 was 10,882 (data was provided by 17 helplines, as not all of them collect data).

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
9	N/A	Most	183 ⁹⁶	360	66%	29,698

96 Number of beds in seven women-only shelters, data about the other shelters is not available.

🏠 There are nine women-only shelters in Slovakia. Data about the number of beds and additional information about the shelters are available for seven of them. Seven women-only shelters offer in total of 183 beds. Four organisations operating women-only shelters reported that the number of beds is insufficient to meet the demand of survivors, especially when it comes to accommodating survivors with more children. Four shelters out of seven offer 24/7 access, one is available at night for emergency cases, while the other two are not accessible at night and at weekends. Women-only shelters are mostly funded by the state, and in some cases, they also receive international funding and donations. Women are expected to pay for their accommodation according to their income. In two of the shelters, accommodation is free for the first three months. Out of seven women-only shelters, four are run by women's NGOs with a gender-sensitive perspective, two by other NGOs and one by a regional government. Women-only shelters are available in all regions except for the region of Trnava. In most shelters, women can stay for more than a year. The main reasons why women's shelters had to decline referrals were the lack of space and capacity to support the survivors, the survivors were ineligible for support and the shelters were not adequately equipped for the needs of the women/children. Additionally, some shelters require a prior interview with the woman and medical

proof that she has no contagious disease. Some shelters even require proof that the violence occurred, such as a criminal complaint filed by the police. In general, it is very difficult to find accommodation for women with five or more children.

The most common forms of violence reported by the clients were psychological, physical and economic violence, and the types of in-house services provided by shelters include casework, counselling, practical advice and legal advice. In 2022, 163 women were accommodated in women-only shelters in Slovakia.

In terms of accessibility, all shelters are accessible to women with physical disabilities, while most shelters are accessible to women with uncertain residence status/undocumented women, homeless women, women with cognitive disabilities, with substance abuse issues, older women, transgender women and women with older sons (14 years and above). There are no specific shelters specialised in supporting women from vulnerable groups.

There are other generic shelters accessible to women in Slovakia, but there is no data available about their numbers and accessibility.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
27	102,845	Women's NGOs (14 centres); Other NGOs (11 centres); Other (2 centres)

❖ There are 27 counselling centres predominantly for women survivors of violence in Slovakia. Out of 27 counselling centres, 10 are also intervention centres. This is a result of the Victims of Crime Act from 2017 and the creation of intervention centres in 2021: many organisations that previously only supported women are now accredited under this Act. This implies that they receive state funding and have to provide support to all victims of domestic violence. Fourteen centres are run by women's NGOs, 11 by other NGOs, one by a law firm and one is run by a regional government. The main source of funding for women's centres is state funding, followed by donations from foundations and international funding (such as Norway Funds and the European Social Fund). Women's centres are available in all regions, and in 2022 they supported approximately 4,500 women.

All counselling centres provide counselling, psychological support, legal advice, and referrals. Most of the centres can provide also housing advice, employment, representation

at court/police/social services, referrals, and financial and social welfare support. Additionally, one counselling centre also provides psychotherapy, two centres have self-help groups for women experiencing violence, one centre organises family support groups, four centres provide support and activities also for children of women experiencing violence, and one centre specifically provides psychological counselling for children, services of a special educator, reconstruction of the mother-child relationship and organises leisure activities for women and their children. Some centres are providing specialist support to women from vulnerable groups, such as migrant and refugee women and Roma women and girls. One counselling centre can also provide specialist support to survivors of sexualised violence (SV), including needs assessment, specialist psychological care, SV advocacy services and community awareness and education for prevention. Five organisations also provide apartments for emergency accommodation.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There are no specific services for survivors of sexualised violence in Slovakia. One women's counselling centre provides specialist support for survivors of rape.

5. PRIMARY PREVENTION SERVICES

👏 There is a National Action Plan on VAW in Slovakia for the years 2022–2027, which includes specific provisions on how to implement comprehensive and coordinated prevention of VAW at all three levels of prevention. In terms of primary prevention (PP), the NAP identifies specific aims such as: implementing awareness-raising campaigns, developing methodological guidelines for the prevention of secondary victimisation, developing training courses, developing materials for education about VAW, implementing public prevention activities, and providing advice on how to prevent violence. Additional PP activities are to be carried out on the International Day for the Elimination of Violence against Women (e.g. public campaigns, development of professional training materials, training of police officers, awareness-raising campaigns, etc.). The state does not directly fund primary prevention activities, which in the NAP are associated with the Financial Mechanism of the European Economic Area or are meant not to require funding.

Primary prevention programmes are absent from the education system. In general, it is women's rights and human rights NGOs that carry out primary prevention programmes, such as educational activities in the field of gender equality, lectures, workshops, and study materials. The Ministry of Justice has established a grant scheme for the promotion of human rights, which is also intended to promote the education of children and young people and supports some NGO activities at the local level. In the last five years, the state has implemented four campaigns, primarily focused on sexualised violence, domestic violence, and assistance to victims of crimes, but most actions related to PP are undertaken by NGOs. The beneficiaries of such activities are the general public and girls and boys under the age of 18.

SLOVENIA

GENERAL COUNTRY INFORMATION

Population	2,107,180
Female population	1,049,485
Member of Council of Europe (year)	1993
Member of European Union (year)	2004
Member of United Nations (year)	1992
CEDAW ratified (year)	1992
CEDAW optional protocol ratified (year)	2004
Istanbul Convention signed (year)	2011
Istanbul Convention ratified (year)	2015



SUMMARY

► There is one national women's helpline in Slovenia, which is free of charge, operates 24/7, and offers multilingual support. Therefore, Slovenia **does meet** the standards of the Istanbul Convention (IC) for the provision of a national women's helpline. There are 26 women-only shelters with 432 beds available, which means that Slovenia **does meet** the standards of the Istanbul Convention for

women-only shelter provision. There are 16 women's centres in the country, one rape crisis centre, and one helpline specialised in sexualised violence (SV). There is no National Action Plan on violence against women and girls in the country. The state does collect data on women's specialist services and the information is publicly available.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	Yes	2,184 calls

☎ Slovenia has one national women's helpline called SOS Helpline for Women and Children – Victims of Violence (*SOS telefon za ženske in otroke - žrtve nasilja*, tel.: +386 801155) and is run by the Association SOS Helpline for Women and Children – Victims of Violence and funded by the Slovenian Ministry of Labour, Family, Social Affairs and Equal Opportunities. The helpline is free of charge, operates 24/7, and offers multilingual support in Slovenian,

English, Serbian, Croatian, and Bosnian. The helpline provides support to survivors of psychological, physical, sexual, and economic violence as well as to survivors of stalking and cyberbullying. The most common forms of violence reported by callers are psychological, physical, and sexual violence. In 2022, the helpline received 2,184 calls.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
26	29	Some	432	0	0%	4,878

🏠 There are 26 women-only shelters with a total of 432 beds in Slovenia. Only some of them are accessible 24/7. Funding for the women-only shelters comes from national/local authorities and donations. In some cases, women are expected to pay for their stay in the shelters, but these costs are very low and depend on the women's financial abilities. Nine women-only shelters are run by NGOs, eight are run by the state, five are run by faith-based organisations, and four are by women's NGOs with a

gender-specific/feminist approach. Women-only shelters exist in all regions of Slovenia and women can stay there for up to one year. All shelters are accessible to women with uncertain residence status, homeless women, women with cognitive disabilities, and older women. Some shelters are accessible to women with physical disabilities, women with substance abuse issues, and transgender women. If shelters had to decline referrals, this was due to the lack of space/capacity to support survivors or

to support the survivors with their children. The three main common types of violence reported by clients in 2022 were psychological, physical, and sexualised violence. Women-only shelters provide counselling, referrals, and practical advice. Approximately, 300 women were accommodated in women-only shelters in 2022.

There are three other shelters accessible to women survivors of violence in Slovenia: one shelter for all survivors of violence, a safe house for survivors of trafficking, and a safe house for women with substance abuse issues who are survivors of violence.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
16	65,593	Women's NGOs (11 centres); Other NGOs (4 centres); State (1 centre)

❖ Slovenia has 16 women's centres, of which are 11 centres run by women's NGOs, four centres are run by other NGOs and the state runs one centre. They provide both non-residential support services as well as residential support services. Women's centres provide counselling, legal advice, financial and social welfare support, housing advice, employment, referrals, and representation at court/police. There is no centre specialised in supporting survivors of forced marriage, honour-based violence, female genital mutilation, women with uncertain residence status, black and minority ethnic women, women with disabilities, older women, transgender women, or non-binary people.

Stigma Safe House assists women with substance abuse issues and women who are doing substitution therapy and who have experienced or are experiencing violence in the family, in a relationship, or in the streets and need a safe environment for fulfilling their basic and more complex needs. Women's centres also provide specialist support for survivors of sexualised violence, namely specialist psychological care, specialist sexualised violence advocacy services, and community awareness and education for prevention. They are funded by national/local authorities and donations and are located in most regions of the country.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ Slovenia has one rape crisis centre for survivors of sexualised violence called Reclaim the Power Association (*Združenje za moč*, tel.: +386 41204949), which also provides support for minors who are experiencing sexual abuse. Reclaim the Power Association has a 24/7 helpline for survivors of sexualised violence that is free of charge.

Services for survivors of sexualised violence include specialist psychological care, specialist sexualised violence advocacy services, and community awareness and education for prevention. Funding for SV support services comes from national/local authorities as well as donations.

5. PRIMARY PREVENTION SERVICES

👏 Slovenia currently does not have a National Action Plan on violence against women and girls. However, as of 2023 one is being drafted and should be accepted by the Slovenian Parliament. The state funds primary prevention (PP) activities. PP activities carried out in Slovenia include feminist self-defence training, school-based

primary programmes, bystander intervention training, self-care activities, and awareness-raising campaigns or programmes. These activities are for the general public, girls and boys under 18, women and men, as well as LGBTQI+ people.

SPAIN

GENERAL COUNTRY INFORMATION

Population	47,432,893
Female population	24,195,741
Member of Council of Europe (year)	1977
Member of European Union (year)	1986
Member of United Nations (year)	1955
CEDAW ratified (year)	1984
CEDAW optional protocol ratified (year)	2001
Istanbul Convention signed (year)	2011
Istanbul Convention ratified (year)	2014



SUMMARY

► Spain has one national women's helpline, which is free of charge, operates 24/7, and provides multilingual support. Therefore, Spain **does meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. There are approximately 276 women-only shelters in Spain with 3,639 beds available. With 23% of the necessary beds missing, Spain **does not meet** the IC standards for the provision of women's shelters. There are approximately 920 women's centres and eight rape crisis centres in Spain as well as two specialised helplines for

survivors of sexualised violence (SV). There is a National Action Plan on violence against women and girls (VAWG) in Spain called the State Strategy to Combat Gender Violence 2022–2025, which includes specific provisions on primary prevention. The state does collect data on women's specialist services and this data is public. However, the data mainly focuses on services run by the state, whereas services provided by NGOs are not included in the official statistics, which are therefore incomplete.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	Yes	102,391 calls

☎ There is one national women's helpline in Spain called Telephone service for information, legal advice and immediate psychosocial care by specialised personnel for all forms of violence against women (*Servicio telefónico de información, de asesoramiento jurídico y de atención psicosocial inmediata por personal especializado a todas las formas de violencia contra las mujeres*, tel.: +34 016). This helpline is run by the organisation *Atenzia - Servicios de Teleasistencia SA*, and it also provides a WhatsApp number for chats (tel.: +34 600000016) and is accessible to women with hearing disabilities through different channels, such as the application TOBMOVIL (tel.: +34 900116016), SVisual (www.svisual.org) and Telesor (www.telesor.es). The helpline is free of charge, operates 24/7 and is available in Spanish, Catalan, Basque, Galician, English, French, German, Portuguese, Mandarin Chinese, Russian, Arabic, Romanian, Bulgarian, Tamazight and 39 other languages through a tele-translation service. In addition, 24-hour support is provided through e-mail and an online chat in 16 languages. Since 2022, the helpline has addressed survivors of all forms of VAW including survivors of trafficking and sexual exploitation, but the personnel is not fully

trained yet to provide specialist support for specific forms of violence. The helpline receives funding from the state and has received 102,391 calls in 2022, as well as 2,167 requests for support through online chat, 1,499 emails, and 6,063 messages on WhatsApp.

Additionally, there are 17 regional helplines supporting women survivors of VAW in Spain. Among them is the helpline of the ANAR Foundation (*Fundación ANAR*, tel.: +34 900202010) which provides psychological, social, and legal assistance for children of women in intimate partner violent relationships or children in abusive relationships themselves, and a helpline for survivors of trafficking for the purpose of sexual exploitation (tel.: +34 900105090). Other regional helplines, which operate 24/7, include *Andalusia's Teléfono de atención a la mujer 24 Horas* (tel.: +34 900200999), Aragon's helpline (tel.: +34 900504405), Balearic Islands' 24-hour social assistance number which is run by *Institut Balear de la Donna* (tel.: +34 971178989) and has a WhatsApp number (tel.: +34 639837476), Canary Islands' *Servicio de Atención a Mujeres Víctimas de Violencia de Género en el Centro Coordinador de Emergencias y*

Seguridad (CECOES) which is run by the Canary Institute for Equality (tel.: +34 112), Catalonia's regional helpline (tel.: +34 900900120) which is free and confidential, and *Castille – La Mancha's* emergency helpline (tel.: +34 900100114). Moreover, the community of Madrid has a helpline (tel.: +34 012), similarly, the community of Valencia has a helpline (tel.: +34 900 58 08 88) which operates 24/7 and is run by the *Centro Mujer*. Some autonomous communities

have their own helplines such as Castille and León (tel.: +34 012), Navarra (tel.: +34 112), Galicia's women's helpline which operates 24-hours (tel.: +34 900400273), La Rioja's information helpline for women (tel.: +34 900711010) and Basque Country's *Servicio de Atención Telefónica a las Mujeres Víctimas de la Violencia contra las Mujeres (SATEVI)* (tel.: +34 900840111).

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN		EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
		24/7 ACCESS				
276	N/A	Most	3,639	1,104	23%	13,035

There are 276 women-only shelters in Spain with 3,639 beds available⁹⁷ and they are located in most regions of the country. There are three different kinds of shelters: emergency shelters/crisis centres (*Centros de Emergencia*), which have 24/7 access, temporary shelters/houses (*Casas de Acogida*) and the supervised housing which allows for a longer period of stay. The length of the stay in the different shelters vary across regions, for instance, in Madrid women can stay in crisis shelters up to two months, and in temporary shelters and supervised housing for up to 18 months. In many cases, women who have a court order get priority and gain access to the shelters, whereas women who have reported and do not have a court order or have decided not to report, might not be able to gain access to safe accommodation. Generally, the children of women staying in shelters are only accepted until the age of 18 years old. After staying at the crisis shelters, if needed, a woman can be referred to a women's shelter or to the supervised homes. The referral to other services, after staying in the crisis/emergency shelter, differs on a case-by-case basis, depending on the woman's needs and the availability of medium-term shelters and supervised flats. There are some regions that only have medium-term shelters and others which only have supervised flats.

Women are not expected to pay for their accommodation in the shelters, which are funded by the state. There is no information available on which entities run women-only shelters, however, the majority of the women-only shelter services that belong to the state are run by companies

following public calls for proposals, which smaller NGOs usually cannot apply for due to the complex requirements. The main reasons for having to decline referrals include the lack of space and capacity to support the survivor or to accommodate the survivor with her children, the survivor's ineligibility for support or the shelter not being adequately equipped for the needs of the women/children. Women-only shelters in Spain provide in-house services including counselling/psychological support, social and practical advice, and legal assistance. The most common types of violence reported by clients were intimate partner violence, sexual violence, and trafficking.⁹⁸

In terms of accessibility, all women-only shelters can accommodate women with uncertain residence status/undocumented women, homeless women, older women, and women with substance abuse issues. Most women-only shelters are accessible to women with physical disabilities, women with cognitive disabilities, and women with older sons (14 years and above). There are specific shelters for vulnerable groups such as the LGBTQI+ community, refugees, and older people as well as specific shelters for women with substance abuse issues and women with disabilities. There are other shelters that provide support to survivors of violence in Spain. These shelters are accessible to women, men, non-binary people, transgender women, and transgender men and are run by different NGOs. However, there are no official statistics or data regarding these shelters or their number.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
920	26,300	N/A

Spain has a total of 920 women's centres,⁹⁹ which are located in most regions of the country. Funding for women's centres comes from the state, as well as from international funding.

Women's centres are only accessible to women, and 889 of them attend to the children of women survivors of VAW as well. Support provided by women's centres in Spain includes counselling and psychological support, legal advice,

97 The data about women's shelters refer to national statistics about the year 2020, published in 2022.

98 In 2020, the last year for which data is available, women's shelters supported 1,247 women.

99 In 2020, 57,257 women were supported by the women's centres.

financial and social welfare support and advocacy, housing advice, referrals, employment and representation at court/police/social services, etc. The available data shows that 439 centres provide specialist support to survivors of female genital mutilation, 632 women's centres provide specialist support for survivors of trafficking in persons, and 626 centres attend to survivors of sexualised violence. When it comes to women from vulnerable groups, 805 centres are equipped to support women with disabilities, all women's centres provide specialist support for older women, and most centres also provide support for women with uncertain residence status/undocumented women and black and ethnic minority women. Although this is the

information provided by national statistics, it is not clear if centres are fully accessible to the abovementioned groups of women. Some women's centres also provide residential support services, but the exact number is not available.

Women's centres also provide specialist support for survivors of sexualised violence (SV), such as needs assessment, specialist psychological care, and community awareness and education for prevention. Specific 24-hour emergency centres for survivors of sexualised violence are still being opened throughout the country. So, there are only very few centres functioning at the moment.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There are services for women who have experienced sexualised violence in Spain. There are 13 rape crisis centres which are located in major cities only: Madrid, Asturias, Andalusia, Cantabria, Castilla León, Murcia, and Valencia. There are no sexual violence referral centres in Spain. Most of the public hospitals and medical centres have specific protocols to respond to sexualised violence cases and can offer forensic and medical care for women survivors of sexualised violence, but they do not have special areas or specific personnel to carry out these procedures. There are two specialised helplines belonging to the two 24-hour rape crisis centres in Spain. The national

helpline also attends to survivors of sexualised violence. Support provided by rape crisis centres includes needs assessment, specialist psychological care, specialist SV advocacy services as well as community awareness and education for prevention. Funding for sexualised violence support services comes from the state, as well as from donations. These services are for girls and women aged 12 years and above. There is an uneven distribution of SV services in Spain, and it is difficult for women from rural areas to access the centres. By 2024, all autonomous communities must have one 24-hour rape crisis centre.

5. PRIMARY PREVENTION SERVICES

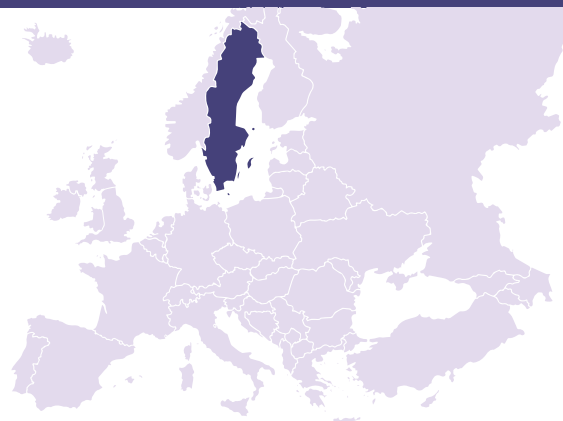
☞ There is a National Action Plan on VAWG in Spain, called the State Strategy to Combat Gender Violence 2022–2025. It is a new instrument for planning and organising actions in the field of public policies to decisively contribute to the prevention, detection, eradication, and reparation of all forms of violence against all women. It addresses all forms of male violence, in compliance with the Istanbul Convention. There is an official definition of primary prevention in Spain and the state funds primary prevention activities. Funding for the prevention of violence against women in 2022 amounted to 209 million

euros, which corresponds to a 16.1% increase since 2021. Primary prevention activities carried out in Spain include feminist self-defence training, school-based primary prevention programmes, training for primary prevention practitioners, bystander intervention training, self-care activities, and awareness-raising campaigns or programmes. The beneficiaries of these activities are the general public, women, men, girls, and boys under the age of 18 as well as LGBTQI+ people and professionals such as police, administration workers, etc.

SWEDEN

GENERAL COUNTRY INFORMATION

Population	10,452,326
Female population	5,191,619
Member of Council of Europe (year)	1949
Member of European Union (year)	1995
Member of United Nations (year)	1946
CEDAW ratified (year)	1980
CEDAW optional protocol ratified (year)	2003
Istanbul Convention signed (year)	2011
Istanbul Convention ratified (year)	2014



SUMMARY

► There is one national women's helpline in Sweden which is free of charge, operates 24/7, and provides multilingual support. Therefore, Sweden **does meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. According to the National Board of Health and Welfare, there are 282 shelters accessible to women, with a total of 1,653 beds. Sweden **does meet** the IC standards for women's shelter provision, although the exact number of women-only shelters is unknown. The number

of women's centres is also unknown but taking into account only *Unizon's* and *Roks'* member organisations, there are over 200 centres providing support to women and girls. Sweden does have services for women and girls who have experienced sexualised violence. Sweden has a National Action Plan on violence against women and girls, which includes specific provisions on primary prevention. The state collects data on women's specialist services and this data is publicly available.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	Yes	44,678 calls

☎ Sweden has one national women's helpline called Sweden's National Women's Helpline (*Kvinnofridslinjen*, tel.: +46 20505050), which is run by The National Centre for Knowledge on Men's Violence Against Women (NCK). The NCK is a knowledge and resource centre based at Uppsala University, which is commissioned by the Swedish government. This helpline is free of charge, available 24/7, and offers multilingual support, namely in Swedish and English. If survivors speak neither English nor Swedish, the National Women's Helpline offers interpretation in other languages. The helpline provides support for women survivors of physical, psychological, sexualised, and

economic violence. The helpline is funded by the Swedish State and on average, there were 122 calls per day in 2022.

In addition, there are other helplines supporting survivors of violence in Sweden, such as *Terrafem* (tel.: +46 20521010) which is a feminist women's organisation that offers support primarily to immigrant women of all ages, including legal support. Moreover, women's crisis centres provide support via phone and chat; they get support requests not only from their regions but also from other regions in Sweden.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN		EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
		24/7 ACCESS				
N/A	282	Some	1,653	0	0%	6,323

🏠 The mapping of shelters published in Sweden in 2020 does not divide shelters into women-only and others. All in all, the National Board of Health and Welfare identified 282

shelters that are accessible to women survivors, of which 38% are available to men. According to this report from 2020, there were 1,653 places for adults and 2,385 places

for children. Again, there is no specific data on women-only shelters. The shelters available for men point out that they never place men together with women – men are instead placed in separate apartments. Of the 213 shelters that took part in the mapping report, 54% were run by NGOs, 37% by private actors, and 9% by municipalities. Some of the shelters in Sweden offer 24/7 access and beneficiaries are not expected to pay for their stay. Funding comes from the Swedish State and donations. However, it should be highlighted that donations are not common and that only very few shelters have donations as their main source of funding.

There are no aggregated national statistics on women-only shelter services for women affected by violence in Sweden. There are however a couple of women's NGOs with a gender-specific approach that provide women-only shelter services and operate within two women's networks, namely *Unizon* and *Roks* (*Riksorganisationen för kvinnojourer och tjejjourer i Sverige*). In 2022, Unizon had 146 member organisations of which 95 are crisis centres and shelters for women, 40 are crisis centres for young women and youth, 10 are specialised support services for survivors of sexualised violence and one other organisation. The last update on the number of shelters and crisis centres within *Roks'* membership was published in their annual report in 2018. *Roks* currently has around 100 women and young women shelters within its network, consisting of around 60 crisis centres for women and around 30 crisis centres for young women and girls, which all offer shelter accommodation. The average number of nights spent by women at *Unizon's* women's shelters in 2022 was 50. In comparison, the average number of nights was 53 in 2021 and 66 in 2018

which indicates a 24% decrease since 2018. According to the data collected from 72 shelters within Unizon's membership in 2022, 897 women, 937 children, and 15 men stayed in the member organisations' shelters in 2022.

The shelters identified by the National Board of Health and Welfare are available to women, men, non-binary people, transgender women, and men, as well as other groups of survivors such as children who stay together with their mothers. These shelters are located in most regions of Sweden. Most shelters in Sweden are accessible to older women, while some are accessible to women with uncertain residence status, homeless women, women with physical and/or cognitive disabilities, women with substance abuse issues, transgender women, and women with older sons (14 years and above). In addition, there are specific shelters for women with substance abuse problems, women survivors of trafficking for the purpose of sexualised exploitation,¹⁰⁰ and women survivors of honour-based violence. Many shelters cannot accommodate/provide support to women with active substance abuse and severe problems with mental health as for these shelters, it is very difficult to meet their needs. The main reasons why shelters in Sweden had to decline referrals were the lack of space/capacity for the survivor and that the survivor was not eligible for support. Unizon's statistics show that the most common types of violence reported by clients were physical and psychological violence. The most common issues reported by survivors were long-term housing and child custody. Shelters in Sweden provide a range of in-house services including casework, counselling, referrals, practical advice, and legal advice (although the extent of the services provided varies by shelter).

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
200	25,958	State; Women's NGOs; Other NGOs

❖ There are women's centres in Sweden, some of which are available only to women survivors of VAW and others for all survivors of violence, including women. There are no accurate aggregated national statistics on the number of women's centres, and there are both state-run and non-governmental women's centres. Taking into account only Unizon's and Roks' member organisations, there are over 200 centres providing support to women and girls. Services provided by the women's centres include counselling, legal advice, financial and social welfare support, housing advice, employment, referrals, and representation at court/police. Funding for women's centres comes mainly from the Swedish State and donations. There is no aggregated data available on the national level. In 2022, Unizon's member organisations had 194,000 support contacts, which is 4% more than in 2021. The majority of

support seekers (94%) were women and girls.

Women's centres in Sweden offer specialist support to survivors of forced marriage, honour-based violence, female genital mutilation, and trafficking as well as for women with uncertain residence status, black and minority ethnic women, women with disabilities, older women, transgender women, and non-binary people. In addition, support is provided to women subjected to prostitution and other forms of sexualised exploitation¹⁰¹ as well as women with substance abuse issues. Women's centres also provide specialised support for survivors of sexualised violence, including needs assessment, specialist psychological care, specialist sexualised violence advocacy series, and community awareness and education for prevention.

¹⁰⁰ Specialised women's services in Sweden define prostitution as a form of sexualised violence.

¹⁰¹ Ibid.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ In Sweden, rape crisis centres, sexual violence referral centres, crisis/medical services, as well as specialised helplines which are run by women and young women's crisis centres, are available to survivors of sexualised violence. There are 10 specialised support services for survivors of sexualised violence in Unizon's network, providing services such as needs assessment and specialist psychological care. Sexual violence referral centres exist in some dedicated hospital settings; two are located in Stockholm, such as an in-and-outpatient clinic run by the

National Centre for Knowledge on Men's Violence against Women. There are plans to establish two rape crisis centres in Sweden, but no specific timeline has yet been developed. Funding for sexualised violence services comes from the Swedish State and donations. That said, donations as the main source of funding are not common. Sexualised violence services are located just in major cities and are available to women, young women/children, and other survivors of sexualised violence.

5. PRIMARY PREVENTION SERVICES

👏 Sweden has a National Action Plan on violence against women which includes specific provisions on the primary prevention of violence against women, namely the National Strategy to Prevent and Combat Men's Violence against Women for the period of 2017–2026, which also led to the introduction of a new Gender Equality Agency.¹⁰² It should be highlighted that there is no official definition of primary prevention on the national level. Nevertheless, the Ministry of Gender Equality, other authorities, and organisations use different definitions that overlap to a large extent. The state does fund primary prevention activities which include feminist self-defence trainings, school-based primary prevention programmes, trainings

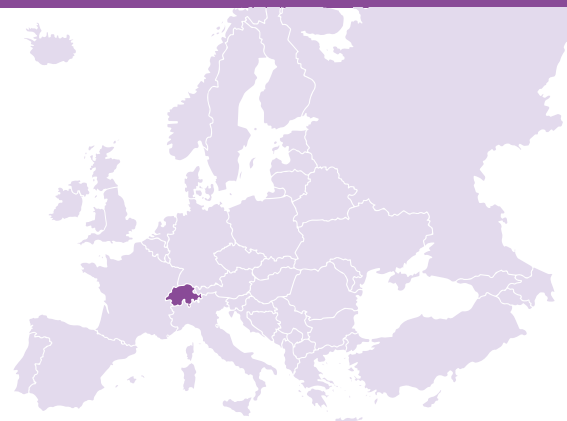
for primary prevention practitioners, bystander intervention training, and awareness-raising campaigns. In addition, different activities and programmes on violence prevention are common in Sweden, especially in schools. The programmes are usually run by NGOs, and NGOs also train schoolteachers and other professionals working with children and youth to perform preventive work themselves. There are also programmes that specifically focus on consent-based and pornography-critical sex education. Beneficiaries of primary prevention activities are the general public, including girls and boys under the age of 18, women and men, and LGBTQI+ people.

102 Swedish Government Office, Power goals and authority – feminist policy for an equal future (2016), available in Swedish, <https://www.regeringen.se/rattsliga-dokument/skrivelse/2016/11/skr.-20161710/>.

SWITZERLAND

GENERAL COUNTRY INFORMATION

Population	8,738,791
Female population	4,400,588
Member of Council of Europe (year)	1993
Member of European Union (year)	No
Member of United Nations (year)	2002
CEDAW ratified (year)	1997
CEDAW optional protocol ratified (year)	2008
Istanbul Convention signed (year)	2013
Istanbul Convention ratified (year)	2017



SUMMARY

► There is no national women's helpline in Switzerland, therefore the country **does not meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. There are 24 women-only shelters with 437 beds. The country is missing 50% of the necessary beds and therefore **does not meet** the IC standards for the provision of women's shelters. There are women's centres supporting survivors of violence and support services for

survivors of sexualised violence in Switzerland. Switzerland has a National Action Plan on the implementation of the IC for the period of 2022–2026, which includes provisions on primary prevention. The state in Switzerland does not collect data on women's specialist services, but only on general outpatient victim services. The umbrella organisation of women's shelters compiles annual statistics on the offer of women's shelters.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
0	-	-	-	-

☎ There is no state-wide women's helpline in Switzerland, but there is a plan to establish one and its implementation is currently in the hands of the different cantons. Details about its availability are still to be confirmed. There are 26 regional helplines that support survivors of violence

against women, and they are run by either the women's shelters or outpatient victim counselling centres. Out of the 23 helplines run by women's shelters, 18 are available 24/7.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
24	N/A	Most	437	437	50%	19,997

🏠 There are 24 women-only shelters in Switzerland with 437 beds available and 19 of these shelters are accessible 24/7. Women-only shelters are located in the major cities. All women-only shelters are run by women's NGOs with a gender-specific/feminist approach. Women are not expected to pay for their accommodation; the first 35 days are usually financed through canton victim assistance, and after this initial time span, the form of funding varies between victim assistance, social assistance, and the income of the survivor if she has sufficient financial resources. The shelters are funded by the state and donations,

however, only three women's shelters are adequately funded by the public sector and the vast majority are dependent on donations. Women can stay in the shelters for up to three months and the average duration of stay in 2022 was 49 days. All the women-only shelters are accessible to women with uncertain residence status, and homeless women, most of the shelters can accommodate older women and women with older sons, and some can host women with physical disabilities, women with cognitive disabilities, women with substance abuse issues, and transgender women. In addition, there are three shelters

for women survivors of trafficking and two shelters for all survivors of trafficking.

Almost 70% of the women's requests for shelter had to be declined: in 30% of these cases, the reason was the lack of space in the shelter, while in other cases the shelters were not adequately equipped to support women, for instance, due to high-risk cases, health issues, or lack of financial

support from the canton. The main types of violence reported by survivors in 2022 were psychological, physical, or sexualised violence. Besides accommodation, shelters also provide casework, counselling, and referrals. In addition, there are other shelters in Switzerland that provide support to survivors of violence, and they are available to women, men, and other groups of survivors.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
N/A	N/A	N/A

❖ In Switzerland, there are government-run information centres for gender issues and survivors of violence, and they are located in all cantons. Additionally, there are NGO-run counselling centres for women survivors of domestic violence. The women's centres provide counselling, legal advice, financial and social welfare, referrals, and representation at the court/police. They do not provide housing advice or employment. They also provide specialist support

for survivors of forced marriage, honour-based violence, female genital mutilation, trafficking in persons, and women with uncertain residence status. No specialist support is available for black and minority ethnic women. Women's centres also provide support to survivors of sexualised violence, for instance, specialist psychological care and community awareness and education for prevention. Women's centres in Switzerland are funded by the state.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There are multiple support services in Switzerland supporting survivors of sexualised violence. These services offer specialist forensic and medical care, specialist sexualised violence advocacy services, and community awareness and education for prevention. Funding for sexualised violence support services comes from the state and donations. Sexualised violence services are located in just the

major cities and are accessible to women, young women, and other population groups. The association Violence Que Faire manages a website that offers free and anonymous online counselling services,¹⁰³ which are available to survivors, perpetrators, or witnesses. A specific section of the website is dedicated to young people and LGBTIQ+ people.

5. PRIMARY PREVENTION SERVICES

👤 There is a National Action Plan for the implementation of the Istanbul Convention in Switzerland for the years 2022–2026.¹⁰⁴ It focuses on three main topics: Informing and raising awareness among the population, training and further education of professionals and volunteers, and preventing and combating sexualised violence. The state funds primary prevention activities, but there is no official definition of primary prevention in the NAP. The primary prevention activities available are school-based primary prevention programmes, and awareness-raising

campaigns or programmes.¹⁰⁵ The beneficiaries of primary prevention activities are the general public as well as girls and boys under the age of 18. The Association Violence Que Faire conducts prevention campaigns for young people ages 16–20 years old on social networks. These campaigns are mainly aimed at the French-speaking public. In 2022, the Association Violence Que Faire launched a campaign on social networks to raise awareness about psychological violence within romantic relationships.

103 Website address: <http://www.violencequefaire.ch/>.

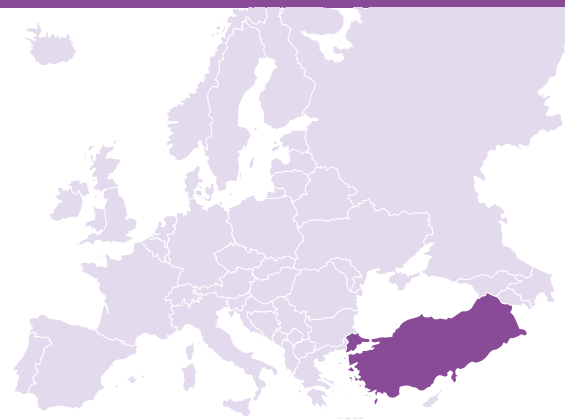
104 Federal Council of the Swiss Confederation, Nationaler Aktionsplan der Schweiz zur Umsetzung der Istanbul-Konvention 2022–2026 (2022), retrieved 21 September 2023, <https://www.ebg.admin.ch/ebg/de/home/themen/recht/internationales-recht/euoparat/Istanbul-Konvention.html>.

105 Since 2023 the state is funding national campaigns against violence. Every year there will be a campaign on a specific topic.

TÜRKİYE

GENERAL COUNTRY INFORMATION

Population	84,680,273
Female population	42,252,172
Member of Council of Europe (year)	1949
Member of European Union (year)	No
Member of United Nations (year)	1945
CEDAW ratified (year)	1985
CEDAW optional protocol ratified (year)	2002
Istanbul Convention signed (year)	2011
Istanbul Convention ratified (year)	2012
With effect of 1 July 2021, Türkiye withdrew from the Istanbul Convention and is no longer a state party.	



SUMMARY

► There is one national women's helpline in Türkiye, which operates 24/7 and provides multi-lingual support but is not free of charge. The State runs a national social support helpline, which does not comply with the standards of a women's helpline. Türkiye **does not meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. There are 146 women-only shelters in Türkiye that offer 3,534 beds. Türkiye **does not meet** the IC standards for women's shelters provision as 58% of the necessary beds are missing. In Türkiye, there are 434 women's centres. These centres provide support for survivors of sexualised violence since there are no specialist

services for women and girls who have experienced sexualised violence. Türkiye has a National Action Plan on VAWG for the period 2021–2025, which is intended to serve as a replacement for the Istanbul Convention. The National Action Plan (NAP) includes specific but limited provisions on the primary prevention (PP) of violence against women and girls (VAWG). The state collects data on women's specialist services and only limited data is available upon request. Since 2014, no comprehensive official data has been shared with the public regarding the scope of domestic violence.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	No	Yes	Yes	5,015 calls

☎ In Türkiye, there is one state-wide women's helpline called Emergency Domestic Violence Hotline (*Aile İçi Şiddet Acil Yardım Hattı*, tel.: +90 2126569696) which is available 24/7 but not free of charge. It is run by the Federation of Women Associations of Türkiye (*Türkiye Kadın Dernekleri Federasyonu Aile İçi Şiddet Acil Yardım Hattı*) and is funded by international funding. It provides support for survivors of all forms of VAW, especially domestic violence, in Turkish, English, Arabic, Persian, and Kurdish. In 2022, 5,015 calls were made to the Emergency Domestic Violence Hotline. Two of the most reported forms of violence were psychological and physical violence.

The Ministry of Family and Social Services runs a helpline called Social Support Line (*Sosyal Destek Hattı*, tel.: +90 183), which offers support to different groups and is not specialised in supporting women survivors of violence. This helpline is free of charge, available 24/7 and provides

support in Turkish, Kurdish, and Arabic, as well as for people with hearing impairments, and a WhatsApp service. This helpline received 44,847 calls in 2022, and the three most reported forms of violence are physical violence, psychological violence, and sexual violence.

The Istanbul Metropolitan Municipality runs another women's helpline called the Woman Support Line (*Kadın Destek Hattı*, tel.: 4448086). This helpline provides support for survivors of all forms of VAW, especially survivors of domestic violence in Turkish, Kurdish, English, and Arabic, it is available 24/7, but not free of charge.

There are five other helplines supporting survivors of VAW in Türkiye: one provided by *Mor Çatı Women's Shelter Foundation* (tel.: +90 2122925231), which received 3,345 calls in 2022 and provides social, legal, and psychological support. The KAMER Foundation provides a helpline

(tel.: +90 5306644410) as well as social, legal, and psychological support. It also currently provides disaster relief support. The third helpline is provided by The Foundation for Women's Solidarity (tel.: +90 3124304005 and +90 3124320782). This helpline received 840 calls in 2022. The

last two helplines are the Women's Solidarity Foundation's helpline (tel.: +90 5464786917) and *Mor Salkım* Women's Solidarity Association's helpline (tel.: +90 5310338844). All these NGOs provide, in addition to helpline services, also social, legal, and psychological support.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
146	146	All	3,534	4,934	58%	23,962

🏠 In Türkiye, there are 146¹⁰⁶ women-only shelters with 3,534 beds available. One shelter is independently run by a women's NGO, *Mor Çatı* Women's Shelter Foundation, and is funded by donations and international projects funds. The other 145 women-only shelters are run and funded by the state. All women-only shelters have 24/7 access, and they are located across all regions of Türkiye. Women are not expected to pay for their accommodation in the women-only shelters. In state-run shelters, women can stay up to six months with a possible extension to one year. In *Mor Çatı*'s shelter, the duration of stay is determined according to the women's needs and conditions. If women-only shelters decline referrals, it is due to the lack of space/capacity to accommodate the survivor with her children or the survivor being ineligible for support, while in other cases, the shelters are not adequately equipped for the needs of the women/children. Women-only shelters offer in-house services such as counselling, practical advice, and referrals/collaboration with other services. In 2022, 48,018 women were accommodated in women-only shelters and the three most common types of violence reported by the women were physical, psychological, and sexual violence.

In Türkiye, all women who apply for a shelter must stay at "First Step Stations" which tend to be overcrowded and

provide basic accommodation and meals, but often with no additional social support. Women stay in these stations for a period of 15 days or more. Afterwards, the staff decides whether a woman needs shelter or not. Security measures are often inadequate, as some law enforcement officers provide information about the survivor's location to the perpetrators.

In terms of accessibility, all state-run women-only shelters can accommodate homeless women, some of the shelters are accessible to women with physical and/or cognitive disabilities, women with substance abuse issues, transgender women, and women with older sons (14 years and above). Fifteen state-run shelters in 17 cities are meant to be accessible to children above the age of 12 and to high-security risk cases. However, there is no available information about their actual functioning. There are no women-only state-run shelters that can accommodate women with uncertain residence status/undocumented women or transgender women who did not undergo gender-affirming surgery and do not have the related identity card. The only independent shelter in Türkiye, *Mor Çatı*, does not apply such criteria of acceptance. There are no other shelters in Türkiye, besides the women-only shelters, that provide support to survivors of VAW.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
434	97,355	State (81); Municipalities (303); Women's NGOs (50)

❖ There are 434 women's centres in Türkiye; 353 centres are only for women survivors of VAW, and 81 centres are for all survivors, including women. The 81 Violence Prevention and Monitoring Centres are funded and run by the state, 303 Municipal Women's Counselling Centres are run and funded by municipalities, and 50 centres are run by women's NGOs and are funded by donations and international funding. Women's centres are located in all regions of Türkiye. All women's centres provide counselling/psychological support, legal advice, financial, and social welfare support/advocacy, as well as referrals and representation

at court/police/social services. Only a handful of women's organisations can provide support for housing, and public organisations would refer to social welfare mechanisms when women are searching for housing. Women's organisations and public-led centres sometimes collaborate with employers to provide employment opportunities.

There are some support centres run by NGOs that provide specialist support for transgender women, non-binary people, older women, women with disabilities, black and minority ethnic women, and women with uncertain residence

¹⁰⁶ In 2023, three shelters run by an NGO and the Directorate General of Migration were closed due to funding reasons. Furthermore, some municipality shelters are not actively operating due to construction reasons (renovation, place maintenance, etc.) for several months/years.

status/undocumented women as well as for survivors of forced marriage. There are no centres that provide specialist support for survivors of female genital mutilation and human trafficking.

Regarding specialist support for survivors of sexualised violence, women's centres offer support in the form of needs assessment, specialist psychological care, specialist SV advocacy services as well as community awareness and education for prevention.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ There are no services for women and girls who have experienced sexualised violence in Türkiye. Some women's centres can provide support in cases of sexualised violence.

5. PRIMARY PREVENTION SERVICES

👏 There is a National Action Plan on VAWG in Türkiye for the period 2021–2025. The NAP includes specific provisions on the primary prevention (PP) of VAWG. However, the action plan defies the gender equality approach and does not use the term on purpose. While the expression “gender equality” appeared 30 times in the previous action plan, this expression is not used at all in the most recent action plan. The NAP's provisions on primary prevention are mostly limited to the programs for perpetrators, including anger management classes, rehabilitation programs and training for public service providers. The National Action Plan was announced in July 2021, the official date of Türkiye's withdrawal from the Istanbul Convention, therefore it was aimed to “replace” the Convention, yet the text is far from providing effective provisions on primary prevention compared to the Istanbul Convention.

There is no official definition of primary prevention in Türkiye and in the NAP. The state funds some primary prevention activities which are mostly focused on training for practitioners and awareness-raising activities/campaigns,

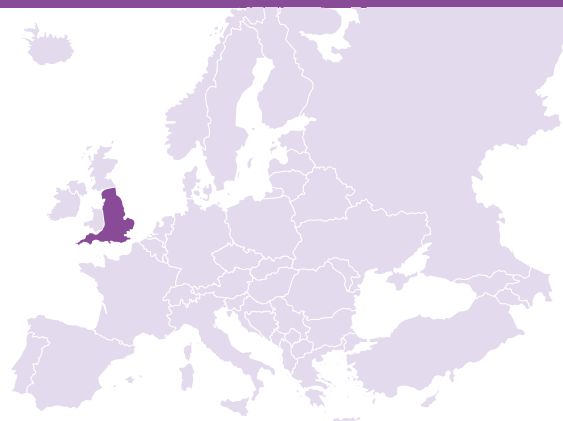
as well as school-based primary prevention programmes. Yet, these activities are not monitored and evaluated, therefore there is no valid information about their effectiveness. The State also focuses on perpetrator programmes. These activities are far from being effective solutions considering that they reproduce the idea that violence against women derives from alcoholism, addiction, anger issues, etc.

NGOs, including women's, feminist, LGBTQI+, and children's organisations, frequently conduct prevention activities, but mostly without using the term primary prevention. They conduct prevention by informing women about their rights, informing the public about male violence, about the link between gender equality and violence against women, and conducting workshops with children and youth. Beneficiaries of such activities are the general public, girls and boys under the age of 18, women, men, and LGBTQI+ people. Some of these groups, in particular LGBTQI+ people, are only reached by activities organised by NGOs, as the state has an “anti-gender” approach.

UNITED KINGDOM – ENGLAND

GENERAL COUNTRY INFORMATION

Population	56,536,419 ¹⁰⁷
Female population	28,854,074 ¹⁰⁸
Member of Council of Europe (year)	1949
Member of European Union (year)	No
Member of United Nations (year)	1945
CEDAW ratified (year)	1986
CEDAW optional protocol ratified (year)	1984
Istanbul Convention signed (year)	2012
Istanbul Convention ratified (year)	2022



SUMMARY

► In England, there is one national domestic abuse helpline, which is free of charge, available 24/7, and offers multilingual support. Therefore, England **does meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. There are a total of 270 shelters, 227 of which are women-only, with a total of 4,344 beds available, meaning that England **does not meet** the IC standards for women's shelter provision, as 23% of the necessary beds are missing. England has 278 women's centres for all survivors, including women. Of these centres, the majority are

run by women's NGOs and 103 are women-only centres. In England, there are 38 rape crisis centres and 47 sexual violence referral centres that provide support to survivors of sexualised violence as well as a specialised helpline. There is a National Strategy on violence against women and girls in England which applies to the entire United Kingdom and includes specific provisions on primary prevention. The state collects data on women's specialist services and this information is publicly available. However, this data collection is not comprehensive and consistent.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	Yes	132,433 callers

☎ In England, there is one national women's helpline called the National Domestic Abuse Helpline (tel.: +44 8082000247) that is specifically for survivors of domestic violence and is run by the organisation Refuge. The helpline is free of charge, available 24/7, and offers multilingual support on video calls during weekdays from 10:00 to 18:00. Funding for this national helpline comes from the state as well as donations. In 2022, the helpline had 132,433 callers and the three most common forms of violence reported by them were psychological violence, physical violence, and threatening/intimidating behaviour.


There are 137 other helplines supporting survivors of domestic violence in England. These helplines are run by various organisations covering local or regional areas. There are also national helplines supporting survivors of specific forms of violence including the National Stalking helpline (tel.: +44 808 8020300, available Monday to Friday from 9:30 to 16:00 and Wed until 20:00), the modern slavery and exploitation helpline (tel.: +44 8000121700, available 24/7), the 24 hour FGM helpline (tel.: +44 8000283550) for survivors of female genital mutilation, and the Galop's free helpline (tel.: +44 8009995428, available Mon-Thurs from 10:00–20:30 and Fri from 10:00–16:30) for LGBTQI+ people experiencing abuse or violence.

¹⁰⁷ Population data from the UK Office for National Statistics, <https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/datasets/populationestimatesforukenglandandwalesandscotlandandnorthernireland>.

¹⁰⁸ Ibid.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
227	270	Some	4,344	1,310	23%	13,015

 In England, there are a total of 270 shelters with 4,344 beds available. Of these shelters, 227 are women-only shelters with 4,037 available beds. Some women-only shelters are accessible 24/7. Women are not required to pay for their accommodation in shelters. State or local authority welfare payments fund women's accommodation, although a small fee or contribution may be requested for shelter accommodation. Additionally, if housing benefits cannot be accessed by women who have been denied recourse to public funds due to their immigration status, they are not able to access shelters or refuges unless special provisions are made. Funding for women-only shelters comes from the state as well as donations. Women's NGOs with a gender-specific/feminist approach are the dedicated providers of 159 women-only shelters. Other NGOs run 67 women-only shelters and one women-only shelter is run by the state. Women-only shelters are in all regions of England. Most women stay in women-only shelters between three to six months. There is, however, a lot of variation depending on individual circumstances and differences in the shelters' policies and availability of move-on accommodation and support. If women-only shelters had to decline referrals, the main reason was a lack of space/capacity to support the survivors. The three types of in-house services that are most often provided by women-only shelters in England are casework, referrals/collaboration with other services, and practical advice. Many shelters also offer re-settlement support to help women move on from shelters, through group work and dedicated services for children and young people. In 2022, 10,502 women were accommodated in women-only shelters and the most common types of violence reported by clients were emotional violence, jealousy or controlling behaviour, and physical violence.


In terms of accessibility, all women-only shelters can accommodate homeless women. Some women-only shelters are accessible to women with uncertain residence status/undocumented women, women with physical or cognitive disabilities, women with substance abuse issues, transgender women, and women with older sons (14 years and above). Most women-only shelters can accommodate older women. In practice, space for some women can be very limited. For example, less than 1% of shelter spaces made available from April 2021 to March 2022 were suitable for a woman requiring wheelchair access.

There are 45 specialised shelters in England for specific groups of women. Availability of these services is very low; spaces in dedicated services make up just 11.8% of all beds in all the shelters in England. Not all these services are 'by and for' expert organisations, meaning they are not led by women from the group they support. There are 33 shelters specifically for black and minority ethnic women and one shelter for refugee women, trafficked women, or women with insecure immigration status. There are four shelters specifically offering support to women with substance abuse issues. Two shelters are for young women and there is one specialised shelter for older women. There are also two shelters providing specialised support to women with learning disabilities and two shelters for LGBTQ+ individuals.

There are 43 other shelters that are accessible to women, men, non-binary people, transgender women, and transgender men. Of the total number of beds, 22 spaces are dedicated to men and 285 beds can be made available to men or women. Many shelters (including women-only shelters) can accommodate transgender individuals. This can be in shared accommodation or dispersed accommodation. Some of these other shelters offer 24/7 access.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
278 ¹⁰⁹	103,792	Women's NGOs (202 centres); Other NGOs (68 centres); State (8 centres)

 There are 278 women's centres for all survivors of violence in England. Of these, 103 women's centres are only for women survivors of VAW. Eight of the women's centres are run by the state, 68 centres are run by other NGOs and 202 women's centres are run by women's NGOs. Women's

centres are funded by national and local authorities as well as through donations. They are located in all regions of England. However, geographical coverage is uneven. Women's centres provide several support services, including legal advice, financial and social welfare support/advocacy,

¹⁰⁹ This number is calculated according to the number of individual local services offering different service types (for example, a local service offering legal support and outreach was counted as one centre).

housing advice, employment, referrals, representation at court/police/social services, as well as counselling/psychological support, which is provided by 109 women's centres. Women's centres also offer residential support. Of the 278 women's centres, 166 are also running a shelter.


Women's centres are more commonly referred to as "Community-Based Services" and usually offer services such as outreach, domestic abuse advocacy, floating support services, and prevention/education work. Other types of services provided by women's centres in England include group/peer-support work, children and young peoples' support, independent domestic violence advisors, independent sexualised violence advisors, "target hardening" or the provision and fitting of personal and home security devices/equipment, and provision of basic subsistence items (foodbank vouchers, clothing, and household items). In 2022, women's centres supported an estimated 131,094 women in England.

Some women's centres provide specialist support for survivors of forced marriage, honour-based violence, female genital mutilation (FGM), and trafficking, and for women

with uncertain residence status/undocumented women. Twenty-three centres provide specialist support to black and minority ethnic (BME) women. Even though they are not exclusively supporting this group of survivors, some centres also offer specialist support for BME women, by, for example, having a dedicated BME specialist worker. Two centres provide specialised support to deaf women and another two centres support women with learning disabilities. One centre specifically supports women aged over 45 years. Two centres provide specialised support to survivors from the LGBTQI+ community, including non-binary people. Other centres, although not specialised in supporting the LGBTQI+ community, also offer support for LGBTQI+ individuals.


Women's centres also provide specialist support to survivors of sexualised violence (SV). Most women's centres will offer some level of support around SV, and some run specific initiatives, such as a sexual violence advocacy project. Centres provide specialist forensic and medical care, needs assessment, specialist psychological care, and specialist SV advocacy services along with community awareness, and education for prevention.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

 In England, there are 38 rape crisis centres and 47 sexual violence referral centres offering crisis and medical services for survivors of sexualised violence. There is also the 24/7 Rape and Sexual Abuse Support Line (tel.: +44 8085002222) which is free of charge, operates 24/7 and offers support on rape, sexual assault, and SV. The helpline was opened in December 2022 and is run by the NGO Rape Crisis England and Wales. Furthermore, most SV services provide local and confidential helplines during business hours. Support provided by specialist services

includes forensic and medical care, specialist psychological care, specialist SV advocacy services and community awareness and education for prevention. Support services for survivors of SV are funded by the state and by donations. Services may be commissioned by state or local authorities and receive funding and grants from charitable organisations and trusts. Sexualised violence services are located just in major cities of England and offer support to women, young women, and children as well as other population groups, which varies depending on the centre.

5. PRIMARY PREVENTION SERVICES

 England has a National Strategy on violence against women and girls which covers all of the United Kingdom, namely the "Tackling Violence against Women and Girls Strategy". The government's VAWG strategy includes a focus on prevention and there are a number of primary prevention activities taking place including school-based primary prevention programmes, training for primary prevention practitioners and awareness-raising campaigns or programmes. However, these require significant further investment and are not comprehensive nor consistent in

addressing the root causes of VAWG for all women. Sexist and misogynistic attitudes that tolerate and underpin domestic violence continue to be prevalent,¹¹⁰ so these services need to be joined up with other areas, for example tackling systemic racism and sexism in the police.¹¹¹ Beneficiaries of such activities are the general public, and there are some limited activities with specific target groups run by NGOs, for example, the White Ribbon's campaign aimed at men.

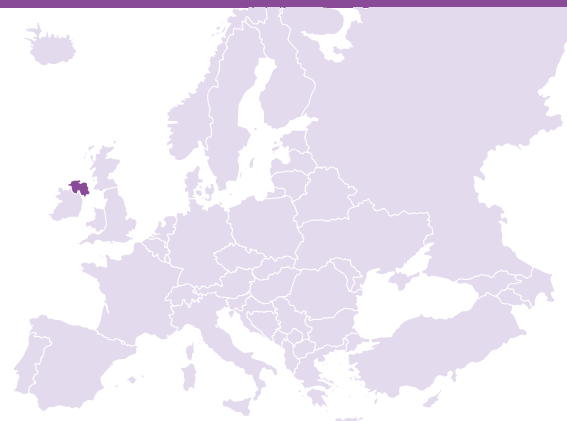
110 Evidence for this can be seen in the "Come Together to End Domestic Abuse: a survey of UK attitudes to domestic abuse 2022" (Women's Aid, 2022), <https://www.womensaid.org.uk/evidence-hub-come-together-to-end-domestic-abuse-a-survey-of-uk-attitudes-to-domestic-abuse-2022/>.

111 More information on this in The Baroness Casey Review on the standards of behaviour and internal culture of the Metropolitan Police Service (Met, 2023): <https://www.met.police.uk/police-forces/metropolitan-police/areas/about-us/about-the-met/bcr/baroness-casey-review/>.

UNITED KINGDOM – NORTHERN IRELAND

GENERAL COUNTRY INFORMATION

Population	1,904,600 ¹¹²
Female population	967,750 ¹¹³
Member of Council of Europe (year)	1949
Member of European Union (year)	No
Member of United Nations (year)	1945
CEDAW ratified (year)	1986
CEDAW optional protocol ratified (year)	1986
Istanbul Convention signed (year)	2012
Istanbul Convention ratified (year)	2022



SUMMARY

► There is one national women's helpline in Northern Ireland that is free of charge, available 24/7, and provides multilingual support. Therefore, Northern Ireland **does meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. There are 14 women-only shelters in Northern Ireland with approximately 332 beds, which **does meet** the IC standards for the provision of women's shelters. There are eight women's centres in Northern Ireland that provide support to all survivors of

violence, including women, as well as one sexual violence referral centre. Northern Ireland does not have a National Action Plan on violence against women and children. The state does collect data on women's specialist services and this data is available upon request. Women's Aid Federation Northern Ireland, as the largest provider of services for survivors of violence against women in the country, make their figures publicly available.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	Yes	N/A

☎ There is one national helpline in Northern Ireland; the Domestic and Sexual Abuse Helpline (tel.: +44 8088021414) which offers support for domestic and sexual abuse. The helpline is run by Nexus Northern Ireland and was previously run by the Women's Aid Federation Northern Ireland. The helpline is free of charge, available 24/7,

and multilingual support is available on request for any language. Funding for the helpline comes from the state as well as donations. There is no other state or regional women's helpline supporting victims of VAW in Northern Ireland, although women survivors routinely contact Women's Aid services directly.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
14	14	Most	332	0	0%	5,737

🏠 There are 14 women-only shelters in Northern Ireland with approximately 332 beds. Northern Ireland is a small region with only two major cities, Belfast and Derry, both of which have 24/7 shelters and most other women-only shelters offer 24/7 access. All women-only shelters are run by women's NGOs with a gender-specific and feminist

approach and are funded by the state. Women who have recourse to public funds have their shelter place funded through public housing benefits. For women with no recourse to public funds, women-only shelters try to cover the costs through specific pots of funding or swallow the cost of their stay in the shelter. Women-only shelters are

¹¹² Northern Ireland Statistics and Research Agency, population estimates for mid-2021, <https://www.nisra.gov.uk/publications/2011-21-rebased-mid-year-population-estimates-northern-ireland>.

¹¹³ Ibid.

located in all regions of Northern Ireland, and women are allowed to stay on average up to 3 months. In some individual cases, women may need to stay longer due to a number of factors, including the chronic shortage of housing in Northern Ireland.

The three main reasons for having to decline referrals to women-only shelters were no space/capacity to support the survivor, no space/capacity to accommodate the survivor with her children, and the survivor being ineligible for support. The three types of in-house services most often provided by women-only shelters are casework, referrals/collaboration with other services, and practical advice. The three most common forms of violence reported by clients to the women-only shelters in 2022 were domestic abuse, sexual abuse, and physical violence. Approximately 513 women were accommodated in women-only shelters in Northern Ireland in 2022.

In terms of accessibility, most women-only shelters are accessible to women with uncertain residence status/undocumented women, homeless women, women with physical disabilities, older women, and women with older sons (14 years and above). Some women-only shelters can accommodate women with cognitive disabilities, women with substance abuse issues, and transgender women. There are no specific shelters for survivors from vulnerable groups in Northern Ireland, or survivors of specific forms of violence.

There are no other shelters in Northern Ireland, besides the women-only shelters, which can provide support to survivors of VAW.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
8	120,969	Women's NGOs (8 centres)

❖ There are eight women's centres in Northern Ireland run by the Women's Aid Movement Northern Ireland. Two specialised support services merged in 2021 and they have one main centre now but the other one is still operational as a satellite building. All women's centres are run by women's NGOs and are funded by the state as well as through donations. These centres are located in all regions of Northern Ireland. Women's centres offer a range of services including counselling/psychological support, financial and social welfare support, housing advice, employment, referrals, and representation at court/police/social services. Women's centres only provide non-residential

support services, however, all centres are linked to shelters run by the same organisation. Therefore, if women need a place in a shelter, the necessary arrangements can be made. In 2022, 4,677 women were supported by women's centres.

Women's centres provide specialist support for survivors of trafficking, women with uncertain residence status/undocumented women, women with disabilities, and older women. However, no specialist support is available for survivors of forced marriage, honour-based violence, female genital mutilation, BME women, and non-binary people.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ Northern Ireland has one sexual violence referral centre, the Rowan Sexual Assault Referral Centre, which is located in Antrim. The centre provides crisis and medical services to all survivors of sexualised violence and operates a specialised helpline (tel.: +44 8003894424). Other

services offered include specialist forensic and medical care, specialist psychological care, and specialist advocacy services. This centre is funded by the state and provides support to all survivors of sexualised violence.

5. PRIMARY PREVENTION SERVICES

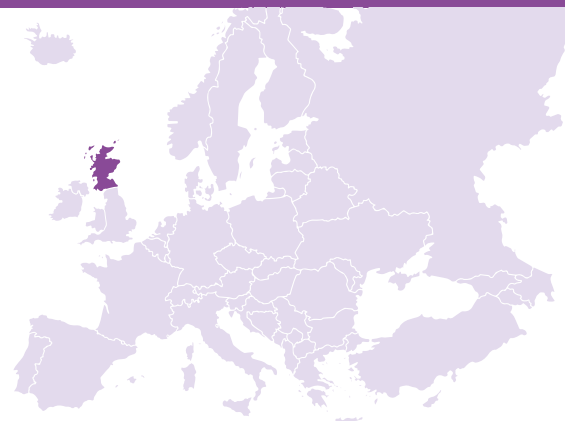
👤 Northern Ireland does not have a National Action Plan on VAWG. The state does however fund primary prevention activities. Such activities include school-based primary prevention programmes, training for primary prevention

practitioners, and awareness-raising campaigns or programmes. The beneficiaries of these activities are the general public as well as girls and boys under the age of 18.

UNITED KINGDOM – SCOTLAND

GENERAL COUNTRY INFORMATION

Population	5,479,900 ¹¹⁴
Female population	2,807,338 ¹¹⁵
Member of Council of Europe (year)	1949
Member of European Union (year)	1973
Member of United Nations (year)	1945
CEDAW ratified (year)	1986
CEDAW optional protocol ratified (year)	1986
Istanbul Convention signed (year)	2012
Istanbul Convention ratified (year)	2022



SUMMARY

► Scotland has one national women's helpline which is free of charge, operates 24/7 and provides multilingual support. Scotland therefore **does meet** the Istanbul Convention (IC) standards for the provision of national women's helplines. There are 36 women-only shelters with a total of 423 beds, meaning Scotland **does not meet** the standards of the IC for women's shelter provision, as 23% of beds are missing. There are at least 41 women's centres run by women's NGOs and other NGOs in all regions of the

country. Scotland also does have services for survivors of sexualised violence, including 17 rape crisis centres and a specialised helpline all offering free support and information. There is a National Action Plan on violence against women and girls in Scotland, which includes specific provisions on primary prevention. The state collects data on women's specialist services and this data is available upon request.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	Yes	13,000

☎ There is one national women's helpline in Scotland called Scotland's Domestic Abuse and Forced Marriage Helpline (tel.: +44 8000271234) which is run by Scottish Women's Aid. The helpline is free of charge, available 24/7 and offers support to survivors of domestic abuse and forced marriage. The helpline also offers multilingual support, and a confidential interpreter service (Language Line and Contact BSL for sign language) is used to provide support in a wide variety of languages. The helpline is funded by the Scottish government and received around 13,000 calls in 2022. The three most common forms of violence

reported by callers to the helpline were emotional, physical and economic violence.

There are other helplines supporting survivors of violence against women in Scotland, including the Scottish Women's Rights Centre (tel.: +44 8088010789) run by Rape Crisis Scotland and Justright Scotland. The helpline provides legal support and advocacy services around all forms of violence against women including domestic violence, stalking, forced marriage, honour-based violence, and sexualised violence. In 2022, the helpline received 596 calls.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
36	36	Some	423 ¹¹⁶	125	23%	12,955

114 National Records of Scotland, mid-year population estimates 2021, <https://www.nrscotland.gov.uk/statistics-and-data/statistics/statistics-by-theme/population/population-estimates/mid-year-population-estimates/mid-2021>.

115 Ibid.

116 This is based on the number of beds for 34 services, totally 419 beds, plus an estimated 4 extra beds in one other service. There is one service with no available number of beds.

🏠 There are 36 women-only shelters in Scotland with approximately 423 available bed spaces, which are run by Women's Aid groups that all apply a gender-specific and feminist approach. Since 2020, one service that previously provided shelter accommodation was dissolved and another remains but has stopped providing shelter services. A number of communal shelters also had to reduce the number of available rooms due to COVID-19 restrictions. Funding for women-only shelters comes from the state as well as donations. Only some women-only shelters provide 24/7 access, and for those that do, out-of-hours requests for shelter accommodation are managed by the local authority (due to housing legislation in Scotland). Women are expected to pay for their accommodation in a shelter, although the majority of clients receive housing benefits and use this to cover their costs. Those who are not a recipient of state benefits need to pay.

There is a women-only shelter in all regions of Scotland, and on average, women stay in a shelter for up to one year, although there is no set time limit on how much longer women can stay in a shelter. The three main reasons for declining referrals are no space/capacity to support the survivor, the survivors being ineligible for support, and the

shelter not being adequately equipped for the needs of the women/children. The types of in-house services most often provided by women-only shelters include casework, practical advice, and legal advice. In 2022, the three most common types of violence reported by clients to women-only shelters were emotional, economic and physical violence. Approximately 1,300 women were accommodated in women-only shelters in Scotland in 2022.

In terms of accessibility, all women-only shelters are accessible to homeless women and older women, most are accessible to women with uncertain residence status/undocumented women and women with substance abuse issues, and some are accessible to women with physical or cognitive disabilities, transgender women, and women with older sons (14 years and above). There are two shelter services which provide specialist support to black and minority ethnic (BME) women, who also specialise in trafficking, honour-based violence, forced marriage and female genital mutilation.

There are no other shelters in Scotland which can provide support to survivors of violence against women.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
41	68,472	Women's NGOs (39 centres); Other NGOs (2 centres)

❖ There are approximately 41 women's centres in Scotland, 40 only for women survivors of violence and one for all survivors, which are part of the Scottish Women's Aid and Rape Crisis Scotland networks. A range of services are offered by women's centres: 15 centres provide counselling/psychological support, 25 legal advice, 33 financial and social welfare support/advocacy, 39 employment, and 33 representation at police and social services. Additionally, all women's centres provide referrals and housing advice. Women's Aid is not allowed to represent survivors in court as they are considered biased in favour of survivors of violence against women. Thirty-nine women's centres are run by women's NGOs and two centres are run by other NGOs. In total, 36 centres also provide shelter accommodation in addition to non-residential services. Women's centres are located in all regions of Scotland and are funded by the state as well as through donations, for example through the Lottery Fund. In 2022, approximately 6,000 women were supported by women's centres.

Specialist support is provided by women's centres to survivors from vulnerable groups and specific forms of violence. Thirty-one centres provide specialist support to survivors of forced marriage, 17 to survivors of honour-based violence, 13 to survivors of female genital mutilation, 39 to women with uncertain residence status/undocumented women, two to BME women, and 40 to older women. Specialist support is also provided to survivors of trafficking, women with disabilities, transgender women, and non-binary people, but the exact number of centres offering such support is not known. Women's centres can provide specialist support to survivors of SV in the form of needs assessment. There are other women's centres that do provide specialist services for survivors, such as the Women's Support Project (for survivors of sexual exploitation), TARA (for trafficked women), DAISY project and SAY Women (for young women).

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ here are services for survivors of sexualised violence in Scotland, including 17 Rape Crisis Centres (RCCs), all offering free and confidential support and information. A range of services are offered by these centres, including specialist forensic and medical care, needs assessment,

specialist psychological care, specialist SV advocacy services, and community awareness and education for prevention. RCCs also offer one-to-one emotional support and group support to survivors of SV. Funding for SV services in Scotland comes from the state as well as

donations. Rape Crisis Centres are located in all regions of the country, and some centres cover more than one local authority area. Most services are available to all survivors of sexualised violence, although some RCCs are only for women and girls.

Furthermore, the National Advocacy Project, funded by the Scottish Government, was launched by Rape Crisis Scotland (RCS) in February 2016. This project provides dedicated advocacy support from RCS-trained advocacy workers to survivors of rape and SV throughout the criminal justice

process. The National Advocacy Project is coordinated by Rape Crisis Scotland and overseen by a National Advisory Group comprising representatives from RCS, Police Scotland and the Crown Office and Procurator Fiscal Service (COPFS). There is also a specialised helpline for survivors of sexualised violence, the Rape Crisis Scotland Helpline (+44 8088010302). It provides telephone advice, support and signposting for all survivors of rape and sexual assault, and received 5,407 calls in 2022. The helpline is free of charge and offers multilingual support, although it is not available 24/7.

5. PRIMARY PREVENTION SERVICES

👏 There is a National Action Plan on violence against women and girls in Scotland, namely “Equally Safe: Scotland’s strategy for preventing and eradicating violence against women and girls” which was published in 2018.¹¹⁷ The NAP includes specific provisions on the primary prevention of VAWG, and one of the main priorities of the strategy is intervening early and effectively to prevent violence and maximising the safety and wellbeing of women, children and young people. The state in Scotland does fund primary prevention activities which include school-based primary prevention programmes, training for primary prevention practitioners, bystander intervention training, and awareness-raising campaigns or programmes. The beneficiaries of these activities are the general public as well as girls and boys under the age of 18, women and men, and LGBTQI+ people.

In relation to training and school-based primary prevention programmes, Rape Crisis Scotland work closely with

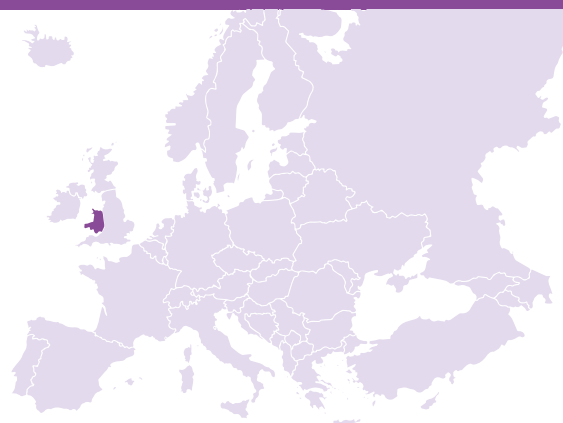
local RCCs delivering a national prevention programme. In 2021–22 centres delivered workshops to 27,952 young people across 181 schools, which is approximately half of the secondary schools in Scotland. In 2021–22, RCCs also supported 415 young people to help prevent SV, focusing on what they want to change in their school, community and wider society. In addition, Equally Safe at School (ESAS) was launched in August 2021. Developed in partnership with Rape Crisis Scotland and the University of Glasgow, ESAS is a school-wide approach to responding to violence against women which supports primary prevention in schools and young people. Rape Crisis also delivers the Equally Safe in Colleges and Universities (ESCU) programme which provides specialist training to local colleges and universities to improve responses for survivors. In 2021–22, First Responder training, which focuses on providing trauma-informed responses to students who disclose violence, was provided to staff in 10 universities and three colleges.

117 Scottish Government, Equally Safe Strategy, retrieved on 25 October 2023, <https://www.gov.scot/policies/violence-against-women-and-girls/equally-safe-strategy/>.

UNITED KINGDOM – WALES

GENERAL COUNTRY INFORMATION

Population	3,105,410 ¹¹⁸
Female population	1,585,674 ¹¹⁹
Member of Council of Europe (year)	1949
Member of European Union (year)	1973
Member of United Nations (year)	1945
CEDAW ratified (year)	1986
CEDAW optional protocol ratified (year)	2004
Istanbul Convention signed (year)	2012
Istanbul Convention ratified (year)	2022



SUMMARY

► There is one national helpline in Wales which is free of charge, operates 24/7, and provides multilingual support. Wales **does meet** the Istanbul Convention (IC) standards on the provision of a national women's helpline. There are 19 women-only shelters in Wales with approximately 272 beds, which **does not meet** the IC standards on the provision of women's shelters, as 12% of beds are missing. There are five women's centres offering support to women survivors of violence, although these are not VAW

specialist centres. There are services for women and girls who have experienced sexualised violence in Wales, including one rape crisis centre and eight sexual violence referral centres. There is a National Action Plan on VAW in Wales, which does include specific provisions on primary prevention. Data on women's specialist services is collected by Welsh Women's Aid on behalf of the state, and this information is available upon request.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
1	Yes	Yes	Yes	35,000 calls

☎ There is one national women's helpline in Wales called Live Fear Free Helpline (*Llinell Gymorth Byw Heb Ofn*, tel.: +44 8088010800) which is run by Welsh Women's Aid. This national helpline is free of charge, available 24/7, and offers multilingual support in English, Welsh, British sign language, and all other languages supported via Language Line translation. The helpline provides support for all types of violence against women and received a total of 35,000 calls in 2022. The Live Fear Free Helpline is funded by the Welsh Government. The three most common forms of violence reported by callers to the helpline in 2022 were domestic abuse, historic sexual abuse, and sexual assault.

There are other helplines supporting survivors of VAW in Wales, including the BAWSO Helpline (tel.: +44 8007318147) which provides 24/7 support to minoritised women survivors. Cardiff Women's Aid also runs a regional helpline (+ 44 2920460566) which connects to the Live Fear Free Helpline when local staff is unavailable. Other helplines include the National Stalking Helpline (+44 8088020300) and Revenge Porn Helpline (+44 345 6000459) which cover both England and Wales.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN		EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
		24/7 ACCESS				
19	N/A	All	272	39	12%	11,417

118 Office for National Statistics, *Estimates of the population for the UK, England, Wales, Scotland and Northern Ireland*, mid-2021 edition, <https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/datasets/populationestimatesforukenglandandwales-scotlandandnorthernireland>.

119 Ibid.

🏠 There are 19 specialist organisations in Wales which provide emergency women-only shelter services to survivors of violence against women, with an estimated total of 272 beds. Of these, 16 women-only shelter services are run by women’s NGOs with a gender-specific and feminist approach, and two by NGOs which do provide gender-specific services but do not have a specific feminist approach. All women-only shelters provide 24/7 access to survivors in need however, for current residents, many of the shelter facilities will have a curfew. Women-only shelters exist in all regions of Wales. Women are expected to pay for their accommodation in women-only shelters, but survivors can claim universal credit housing costs or housing benefits to help cover the shelter costs. Funding for women-only shelters comes from the state as well as donations.

Shelter support in Wales is a combination of shared refuge accommodation and dispersed housing units that are classed as Emergency Supported Accommodation. Ten of the 19 organisations providing shelter accommodation can also provide shelter support to male survivors, although an estimated number of households is currently not available. Since 2020, some organisations have merged with others in order to deliver services over larger areas or to meet funding requirements. The current number of available beds does not fully meet the country’s needs; there were at least 181 women (and their children) who were unable to access support due to lack of refuge availability in 2021–2022.

On average, survivors will stay in a shelter for six months or less. A significant issue for women in shelters is to find accommodation. There is a significant housing shortage in Wales which means that while the planned maximum stay is six months some shelters will allow women to stay for up to twelve months. Many shelters have a crisis house and second stage accommodation which provides

further accommodation for survivors but is not a permanent home.

In terms of accessibility, all women-only shelters can accommodate older women and transgender women, most can accommodate homeless women, women with physical or cognitive disabilities, and some can accommodate women with uncertain resident status/undocumented women, women with substance abuse issues, and women with older sons (above 14 years). The organisation BAW-SO provides specific shelter services to BME women survivors of VAW.

The main reasons for having to decline referrals included no space/capacity to support the survivors, the survivor being ineligible for support, and being unable to meet the survivor’s needs around drugs and alcohol. The three most common types of violence reported by the clients to the women-only shelters in 2022 were psychological/emotional abuse, physical abuse, and coercive control. The three types of in-house services most often provided were casework, practical advice, and risk planning as well as institutional advocacy. In total, 1,326 women were accommodated in women-only shelters in Wales from April 2022 to March 2023.

There are other shelters in Wales besides women-only shelters which can provide support to survivors of VAW, offering various forms of temporary and emergency accommodation, but the total number is not known. Such shelters include mental health crisis houses, probation-approved premises, residential women’s centres (criminal justice related), and young people’s supported accommodation. None of these services are provided because a client is a survivor of VAW, but if a client has experienced such violence, they will be supported in a coordinated community response.

3. WOMEN’S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN’S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
5	317,135	Women’s NGOs (5 centres)

❖ There are five women’s centres in Wales offering support to survivors of violence against women, however, these are not VAW specialist centres. These centres are run by women’s NGOs and provide support to women who have been through the criminal justice system and the majority of their referrals come from probation services and the police. The centres provide support, therapy, group work and one-to-one support which is very similar to the support that women’s specialist services provide. A lot of the women supported in these centres have complex needs and have experienced VAW.


Two of these centres are only for women survivors of violence, and three are for all survivors, including women. Services provided by these centres include counselling/psychological support, financial and social welfare support/advocacy, housing advice, employment, referrals, representation at court/police/social services, and prevention and awareness-raising work. Women’s centres are funded by the state as well as through donations and are located in most regions of Wales.

Women's centres can provide specialist support to survivors of forced marriage, honour-based violence, female genital mutilation, and trafficking, as well as women with uncertain status/undocumented women, BME women, women with disabilities, older women, transgender women, and non-binary people. All specialist services have the ability to provide support to all survivors, but there is not a

dedicated centre for most forms of violence and the different groups described above.


There are also a number of other specialist VAW services in Wales that deliver community-based support and have their own 'drop-in' centres or have a 'One Stop Shop' where those experiencing VAW can access support.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

 There are services for women and girls who have experienced sexualised violence (SV) in Wales, including one rape crisis centre and eight sexual violence referral centres (SARCs). Medical services are also available at SARCs but also on request at genitourinary medicine (GUM) or at sexual health clinics and hospital emergency departments. A range of support is provided by these services including specialist forensic and medical care, needs assessment, specialist psychological care, specialist SV advocacy services, community awareness and education for prevention. Funding for these services comes from the state as well as donations. Specialist support services for

survivors of SV are located in all regions, although the services vary by region in relation to counselling and support. Emergency rape forensic support via a SARC is however available in all regions. These services are available for all survivors of SV and in 2022, approximately 1,015 survivors were supported. There is also a specialist service for survivors of historic sexual violence (e.g., adults who experienced abuse as a child). The 24/7 Rape & Sexual Abuse Support Line run by Rape Crisis England & Wales (+44 8085002222) provides specialised helpline support to survivors of SV.

5. PRIMARY PREVENTION SERVICES

 There is a National Action Plan on VAW in Wales, the Violence Against Women, Domestic Abuse and Sexual Violence: Strategy 2022 to 2026,¹²⁰ which does include specific provisions on primary prevention. Primary prevention activities are funded by the state. There is a definition of primary prevention in Wales, which is included in the

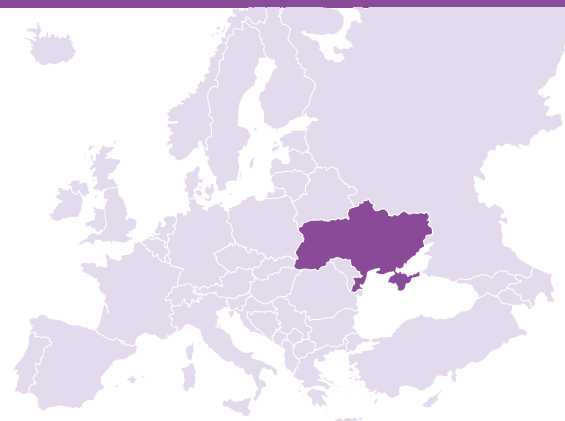
NAP. Available primary prevention activities are school-based primary prevention programmes, bystander intervention training, and awareness-raising campaigns or programmes. Beneficiaries of these activities include the general public, girls and boys under the age of 18, women, men, and LGBTQI+ people.

120 Welsh Government, "Violence Against Women, Domestic Abuse and Sexual Violence: Strategy 2022 to 2026", <https://www.gov.wales/sites/default/files/pdf-versions/2022/5/2/1653392517/violence-against-women-domestic-abuse-and-sexual-violence-strategy-2022-2026.pdf>

UKRAINE

GENERAL COUNTRY INFORMATION

Population	40,997,698
Female population	21,990,719
Member of Council of Europe (year)	1995
Member of European Union (year)	No
Member of United Nations (year)	1945
CEDAW ratified (year)	1981
CEDAW optional protocol ratified (year)	2003
Istanbul Convention signed (year)	2011
Istanbul Convention ratified (year)	2022



SUMMARY

► There are two national women's helplines in Ukraine which are free of charge, available 24/7 and offering multilingual support. Ukraine therefore **does meet** the Istanbul Convention (IC) standards for the provision of a national women's helpline. There is no centralised information on the existing number of women-only shelters and beds in Ukraine. According to the state, there are at least 46 women-only shelters and 46 crisis rooms available to survivors of violence against women, as well as 73 shelters which

are available to all survivors, including women. There are women's centres and services for survivors of sexualised violence in Ukraine although there is no available information on the overall number of such services. There is a National Action Plan on violence against women and girls in Ukraine, which includes specific provisions for primary prevention. The state does collect data on women's specialist services, although this information refers to services for all survivors of domestic violence and gender-based violence.

WOMEN'S SPECIALIST SERVICES

1. NATIONAL WOMEN'S HELPLINES

TOTAL NUMBER	FREE OF CHARGE	24/7 SERVICE	MULTILINGUAL SUPPORT	TOTAL NUMBER OF CALLS/CALLERS IN 2022
2	Yes	Yes	Yes	38,472 calls ¹²¹

☎ There are two national women's helplines in Ukraine, the first one is the National Toll-Free Hotline on domestic violence prevention, human trafficking and gender discrimination (*Національна "гаряча" лінія з попередження домашнього насильства, торгівлі людьми та гендерної дискримінації*, tel.: +380 800500335 or +380 116123). This helpline is run by the women's organisation *La Strada-Ukraine* and has worked since 1997. It is free of charge, available 24/7, and offers multilingual support (in Ukrainian, Russian, and English, upon request). Consultations are also available via online channels such as Telegram, Instagram, Skype, e-mail, and Facebook Messenger. The helpline provides support to survivors of domestic violence, sexualised violence, conflict-related sexual violence, sexual harassment, discrimination, and human trafficking/exploitation. The helpline is funded by international organisations based abroad and in Ukraine as well as through donations. The three most common forms of violence reported by callers to the helpline in 2022 were domestic violence, war-related violence, and human trafficking and exploitation.

The second state-wide helpline in Ukraine is the State Call Center on the prevention of human trafficking, domestic violence, gender-based violence, and violence against children (*Урядова "гаряча лінія" для осіб, постраждалих від торгівлі людьми, домашнього насильства, насильства за ознакою статі, насильства стосовно дітей, або про загрозу вчинення такого насильства*, tel.: +380 1547 or +38 442841943) which was opened in 2020. This helpline is run by the State Call Center and is also free of charge, available 24/7, and offers multilingual support (in Ukrainian and Russian). This helpline is financed by the state and provides support to survivors of domestic violence, human trafficking, and gender-based violence.

Both helplines provide assistance to all survivors of violence, although more than 80% of the calls the National Toll-Free Hotline received were from women.

In Ukraine, there are also other helplines supporting survivors of violence against women, although there is no cumulative data on the number of such helplines. There

¹²¹ This only includes the number of calls to the National Toll-Free Hotline on domestic violence prevention.

are a number of initiatives, including local ones, and those providing assistance online. Some examples of available helplines include *Jurfem* (tel.: +38 681455590, available via Telegram, Viber, and Signal) which is an initiative of the Ukrainian Women Lawyers Association to support survivors of sexualised violence, rape, and sexual harassment as well as survivors of all forms of gender discrimination.

Additionally, Marsh Zhinok (@Marshzhinok_bot) provides psychological support and support in finding shelter accommodation for survivors. The NGO *Divchata* also provides helpline support (tel.: +38073-4603860 or help@divchata.org) such as psychological and legal aid or referrals.

2. SHELTERS ACCESSIBLE TO WOMEN

TOTAL NUMBER OF WOMEN-ONLY SHELTERS	TOTAL NUMBER OF ALL SHELTERS ACCESSIBLE TO WOMEN	24/7 ACCESS	EXISTING NUMBER OF BEDS	NUMBER OF BEDS MISSING	% OF BEDS MISSING	CURRENT NUMBER OF POPULATION PER BED
N/A	73	Some	N/A	-	-	-

There is currently no centralised information on the existing number of women-only shelters and beds in Ukraine. According to the data of the National Social Service of Ukraine, in 2022, there were 46 shelters (for stays up to 90 days) and 46 crisis rooms (for stays up to 10 days) available to survivors of violence against women. There is however no general data on the number of women-only shelters operated by NGOs. Only some women-only shelters offer 24/7 access as it is often necessary for a survivor to contact an institution or organisation before they can be referred to a shelter, and these operate only during regular working hours. Women are not expected to pay for their accommodation in women-only shelters, although it can be the case that only basic food items are covered, and the rest needs to be covered by the survivor. There are no official statistics on the sources of funding for women-only shelters, which comes from a combination of state funding, donations, and international funding. On average, women are allowed to stay in women-only shelters for up to three months. Women-only shelters exist in most regions of Ukraine, although the situation has changed with the full-scale invasion as some shelters are located in occupied territories, were destroyed or damaged in the conflict, are too close to active conflict zones, or have been repurposed to accommodate internally displaced people.

Reasons for having to decline referrals in women-only shelters included no space/capacity to support the survivor, no space/capacity to accommodate the survivor with her children, the survivor being ineligible for support, and not being adequately equipped for the needs of the women/children. The three types of in-house services most often provided were casework, counselling, and referrals/collaboration with other services. The most common type of violence reported by clients to women-only shelters in 2022 was domestic violence.

In terms of accessibility, some women-only shelters are accessible to women with uncertain residence status/undocumented women, homeless women, women with physical and cognitive disabilities, women with substance abuse issues, older women, transgender women, and women with older sons (14 years and above). There are specific shelters for vulnerable groups such as LGBTQI+ survivors and survivors of human trafficking. Some feminist NGOs provide semi-specific shelters for older women and women with cognitive disabilities.

There are other shelters in Ukraine which can provide support to survivors of VAW, including at least 73 shelters according to national statistics. These shelters are available to all survivors of domestic and gender-based violence, including men, non-binary people, and transgender women and men, but in the majority of cases, these shelters accommodate women. There are different types of shelters run by the state (also on a local level), NGOs, international organisations, and religious organisations. These include shelters predominantly accommodating internally displaced women (and children and older people), survivors of conflict-related sexualised violence, women with substance abuse issues, women survivors of human trafficking, and LGBTQI+ survivors.

A number of factors influenced the composition of shelter service provision in Ukraine in the last several years; the COVID-19 pandemic, subventions granted by the state to regions for developing new shelters for survivors (which led to an increase in the number of shelters, although not all of them are fully functioning), and the full-scale invasion of Russia in Ukraine. The war has had a major impact on all services including shelters accessible to survivors of VAW in terms of infrastructure, as many shelters were either closed or destroyed, some new ones opened, and a number of shelters also re-oriented their work to accommodate internally displaced people and others who were relocated due to the war.

3. WOMEN'S CENTRES

TOTAL NUMBER OF CENTRES	CURRENT NUMBER OF FEMALE POPULATION PER CENTRE	ENTITIES RUNNING WOMEN'S CENTRES (INCLUDING NUMBER OF CENTRES PER ENTITY WHEN AVAILABLE)
N/A	-	N/A

❖ There are women's centres in Ukraine although there is no available information on the overall number of centres for women survivors of violence or for all survivors. Before the full-scale invasion, regions in Ukraine received state subventions in order to develop services for survivors of domestic violence and gender-based violence, including centres providing assistance to women. However, the full-scale invasion impacted the situation of services drastically. There are now a number of different centres/services for women, many of which are funded by international organisations. According to the data of the National Social Service of Ukraine, there are 43 day centres for domestic violence survivors providing social and psychological assistance. Some centres are run by international organisations but exact numbers are not available, as well as information on centres run by NGOs. Funding for women's centres in Ukraine comes from the state, donations as well as through international funding. Women's centres are located in most regions of Ukraine.

At least 46 centres provide counselling/psychological support (as reported by the state), and some provide legal advice, financial and social welfare support/advocacy, housing advice, employment, referrals, and representation at court/police/social services.

Specialist support is provided by centres to survivors of trafficking, women with uncertain residence status/undocumented women, women with disabilities, older women, transgender women, non-binary people, internally displaced women, and women who have experienced conflict-related sexualised violence. Women's centres also provide specialist support to survivors of sexualised violence (SV) including needs assessment, specialist psychological care, specialist SV advocacy services, and community awareness and education for prevention.

4. SUPPORT SERVICES FOR SURVIVORS OF SEXUALISED VIOLENCE (SV)

☂ Ukraine has services for women and girls who have experienced sexualised violence, but there is no available data on the exact number of services. Since the full-scale invasion in Ukraine, more services (including specialised helplines) for women survivors of conflict-related sexualised violence have been established. Some of these have been opened by new actors or those already working in the field who extended or specified their services for women survivors of such violence. Available services include sexual violence referral centres, crisis/medical services,

and specialised helplines. Support provided by sexualised violence services includes specialist forensic and medical care, needs assessment, specialist psychological care, specialist SV advocacy services, and community awareness and education for prevention. Funding for these services comes from the state, donations, and international funding. The majority of services are for women over the age of 18, some are for minors, and very few are for male survivors of SV (in most cases related to the war).

5. PRIMARY PREVENTION SERVICES

👏 There is a National Action Plan on violence against women and girls in Ukraine, as well as a definition of primary prevention. Specific provisions on primary prevention are included in national documents including the National Action Plan on the realisation of the 1325 resolution, the Framework Cooperation between the Government of Ukraine and the UN on prevention and response to conflict-related sexual violence and the Action Plan on its implementation, the State Social Program on prevention and counteraction of domestic violence and gender-based violence, and the Law on Equal Rights and Opportunities for Men and Women. The state does fund primary prevention activities, although such funding is limited. Primary

prevention activities are primarily run by NGOs with the support of philanthropic organisations or funding from international organisations. Such activities include feminist self-defence training, school-based primary prevention programmes, training for primary prevention practitioners, self-care activities, and awareness-raising campaigns or programmes. These activities are implemented by various actors including NGOs, the state, and international organisations, sometimes in collaboration. Beneficiaries of primary prevention activities are the general public, girls and boys under the age of 18, women and men, and LGBTQI+ people. Some activities also target specific groups such as internally displaced people.

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Glossary

Additional services

All other services which are **not specialised or gender-specific**, but that **still provide some level of support for women** survivors of violence, are considered in the WAVE Report as additional services. Services that qualify as additional can be, for example, centres that specialise in supporting survivors of trafficking.

By-and-For

By women and for women (by-and-for) distinguishes specialist organisations tackling violence against women (VAW) from generic organisations. By and for organisations have the following features: they are gendered, meaning that they deliver services to women and girls only in women and girls safe space; the by and for ethos is organic to these organisations meaning that they developed historically as VAW organisations under diverse feminist perspectives addressing patriarchy, structural inequality, oppression, disadvantage, marginalisation and exclusion; they centre the voices and representations of women and girls in governance, service delivery and development; the by and for identity is embedded historically in the vision, policy and practice of these organisations and form the fundamental principles around which governance frameworks are developed; leadership and management of by and for organisations as well as staffing structures address structural inequality by ensuring that they reflect the women and girls who use services; and, a key feature of diverse feminism is addressing structural inequality and patriarchy (sexism and misogyny). Within by and for, there are also specific and nuanced specialisms such as organisations working with black and minority ethnic women and girls, women with disabilities and the many other categories of women that make up protective characteristics. These by and for organisations work under an intersectional framework where all forms of violence against women and girls (VAWG) are recognised and oppression is viewed as interlocking. By and for is not an add-on or a label that can be used for convenience in funding. It does not describe generic organisations whose main function is activity that is not centred around VAWG.

Centres for child sexual abuse

Centres for minors experiencing sexual abuse are facilities that provide specialist support, among others, to minors up to the age of 18, who have experienced any form of sexual abuse at some point in their lives.

Centres for survivors of human trafficking

These are specialist services for survivors of human trafficking, which provide a comprehensive, human-rights

and gender-based approach to meet their specific needs. Services provided by such centres may include but are not limited to the following: counselling, legal advice and assistance concerning the survivor's migration process and legal status in the country, accompaniment within the justice system, empowering support and assistance to improve the survivor's living and working conditions including training and education.

Coercive control

Coercive control is a form of psychological violence. Legislation is moving towards the explicit inclusion of coercive control within the definition of domestic violence and can be defined as a persistent and deliberate pattern of behaviour by a partner/ex-partner designed to achieve obedience and create fear, which may include coercion, emotional/psychological abuse, isolation, physical violence, degradation and control.

Domestic violence (DV)

Domestic violence (DV) means all acts of physical, sexual, coercive, psychological, or economic violence that occur within the family or domestic unit or between former or current spouses or partners, whether or not the perpetrator shares or has shared the same residence with the survivor.¹

Femicide

The term 'femicide' refers to the gender-related killing of women and girls. In broad terms, these can be understood as **killings of women and girls perpetrated by men because they are women**. These crimes are ultimately connected to stereotyped gender roles associated with women and historically unequal power relations between women and men, which instil a sense of possessiveness and superiority in men over women.

Gender-based violence (GBV)

Gender-based violence against women means violence that is directed against a woman because she is a woman or that affects women disproportionately.² Gender-based violence is understood to be a form of discrimination and a violation of the fundamental freedoms of the victim and includes violence in close relationships, sexual violence (including rape, sexual assault and harassment), trafficking in human beings, slavery, and different forms of harmful practices, such as forced marriages, female genital mutilation and so-called 'honour crimes'. Women survivors of gender-based violence and their children often require special support and protection.³

1 Article 3(b) of the Council of Europe Convention on preventing and combating violence against women and domestic violence (Istanbul Convention).

2 Article 3(d) of the Council of Europe Convention on preventing and combating violence against women and domestic violence (Istanbul Convention).

3 Recital 17, Directive 2012/29/EU of the European Parliament and of the Council of 25 October 2012 establishing minimum standards on the rights, support and protection of victims of crime, and replacing Council Framework Decision 2001/220/JHA.

Gender-neutral practices

Gender-neutral practices are those sets of policies and regulations governing funding and service provision required by the state and governments to provide services that have been funded through public money to both men and women. Gender-neutral practices and policies hide or diminish the root causes of gender inequality and gender-based violence by placing women-only services under threat. Moreover, they obscure the prevalence rates and different impacts on/needs of women and men who are survivors. Gender-neutral is a way of thinking that specifically targets women-only organisations to provide access to services to both men and women without consideration of historically unequal power relations between men and women. Gender neutrality threatens to dismantle the ethos of women-only organisations that challenge patriarchy as a root cause of women's inequality and violence against women. Gender neutrality denies women access to safe women-only spaces.

Gender-specific approach

Article 18 §3 of the Istanbul Convention recognises violence against women as gender-based violence. As such, all measures to eliminate violence against women must be implemented using a gender-specific approach, meaning a gendered understanding of the violence experienced by women, its specific dynamics and consequences, and should focus on victims' empowerment.

Independent Domestic Violence Advisors (IDVAs)

The main purpose of independent domestic violence advisors (IDVAs) is to **address the safety of victims at high risk of harm** from intimate partners, ex-partners or family members to secure their safety and the safety of their children. They serve as a **victim's primary point of contact** and regularly work with their clients from the point of crisis to assess the level of risk. They also discuss the range of suitable options leading to the creation of a workable safety plan.

Independent Sexual Violence Advisors (ISVAs)

Independent sexual violence advisors (ISVAs) **offer specialist support to victims of rape and sexual assault**, including legal counselling. They are an independent, non-judgemental and confidential service. They work closely with relevant agencies to ensure survivors get the advice, information and support they need. Survivors have access to an ISVA from the point of referral through to any case that arises and in the aftermath of one. Support is given either through face-to-face visits, telephone contact or both.

Intervention centres with a proactive approach

These are organisations that support women survivors of

violence and their children, if any, in all matters concerning their protection and the securing of their rights, in civil as well as criminal lawsuits. Intervention Centres also have the task to take a variety of legal and social measures in order to prevent further violence. By taking a proactive approach, it means that rather than waiting for the survivors to contact them, the staff from the intervention centre write letters or make phone calls to the survivor to offer help. Of course, it is up to the survivors to decide whether they want to accept the help being offered.

National women's helpline

A helpline qualifies as a national women's helpline if it is a service provided specifically for women and if it only, or predominantly, serves women survivors of violence. A women's helpline **should operate 24/7, should be free of charge, should serve survivors of various forms of violence against women, and should provide assistance in several languages**. The latter can enable survivors of violence to overcome any language barriers. It should operate state-wide and provide adequate support to women from all regions; this means staff must be properly trained, have effective communication skills and be knowledgeable about regional situations and all relevant provisions.

Other shelters

Shelters included under this category **do not have to be specialised or gender-specific**, but they should still provide some level of support to all survivors of violence. Shelters under this category **can also include services that provide temporary housing and general shelters**.

Prevention

Prevention refers to actions that prevent GBV from occurring by addressing its root causes, namely gender inequality, systemic discrimination and unequal power relations between women and men, as well as people with diverse sexual orientations and gender identities.⁴

Primary prevention refers to all approaches that aim to prevent violence before it occurs, secondary prevention encompasses the approaches that focus on the more immediate responses to violence, and tertiary prevention includes the approaches that focus on long-term care in the wake of violence and seek to lessen trauma.⁵

Rape crisis centres (RCC)

Rape crisis centres are understood to be specialist centres for sexualised violence that offer immediate, medium and long-term specialist support to survivors of rape, sexual assault, or any form of sexual violence. They offer survivor-centred empowerment, advocacy and counselling for survivors, both in terms of personal wellbeing and in providing advice, information and accompaniment, including

4 UNHCR, *UNHCR Policy on the Prevention of, Risk Mitigation and Response to Gender-based Violence* (2020), pag. 9, <https://www.unhcr.org/media/unhcr-policy-prevention-risk-mitigation-and-response-gender-based-violence-2020-pdf>

5 Krug, E.G., Dahlberg, L.L., Mercy, James A., et al., *World report on violence and health*. World Health Organization (2002), <https://apps.who.int/iris/handle/10665/42495>

accompaniment to the police, the court and throughout legal proceedings. They may also engage with the community and in an interagency manner to ensure a better response for survivors and to effect prevention.

They may also have a helpline that provides specialist counselling to the aforementioned types of survivors, gives them relevant information about their rights and refers them to other specialist support services, as required by the situation. The minimum standards from the Istanbul Convention recommend that one RCC/sexual violence referral centre should be provided per every 200,000 inhabitants, and in terms of geographical coverage, they should also be accessible in rural areas as much as in cities.

Sexual violence referral centres (SVRC)

A sexual violence referral centre (SVRC) may specialise in **immediate medical care, forensic practice, storage of evidence and crisis intervention**, and can be placed in hospital settings to respond to survivors of recent sexualised violence. These centres can also carry out medical assistance and refer survivors to other specialist community-based centres.

Support services for survivors of sexualised violence

Support services for survivors of sexualised violence may include **rape crisis centres (RCC)**, offering long-term support including counselling and therapy, support groups and support in contact with other services, and **sexual violence referral centres (SVRC)**, specialised in immediate medical care, high-quality forensic practice and crisis intervention, as well as other services for women survivors of sexualised violence.

Survivor/victim

This report uses the term “survivor” as a preferred term, to empower women by recognising that the woman has survived the violence and is not defined by it. The term victim is a legal term, which means a natural person who has suffered harm (including physical, mental or emotional harm or economic loss) that was directly caused by a criminal offence.⁶

Violence against women (VAW)

Violence against women is understood as a violation of human rights and a form of discrimination against women and shall mean all acts of gender-based violence that result in or are likely to result in, physical, sexual, psychological or economic harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or private life.⁷

Women’s centres

The term “women’s centre” includes all **women’s services**

that provide non-residential specialist support to survivors, serving only or predominantly women survivors of violence and their children (if any). Women’s centres provide empowering short and long-term support, based on a gender-specific approach to violence and focusing on the human rights and safety of survivors. The following services are subsumed under the term: women’s counselling and women crises centres, supporting women survivors of all forms of gender-based violence; regional crises centres on domestic violence; pro-active intervention centres serving survivors as a follow-up to police interventions; specialist services for black, minority ethnic women, migrant and refugee women survivors of violence; outreach services; services providing independent domestic or sexual violence advisors, and other newer types of services. These centres usually provide the following kinds of support: information, advice, advocacy and counselling, practical support, court/police/social services accompaniment, pro-active support, outreach, and other services.

Women’s specialist services (WSS)

Women’s specialist services is a collective term used to define **feminist services that support women and their children experiencing gender-based violence.** These services include but are not limited to women’s support centres, women’s shelters, helplines, rape crisis or sexual violence referral centres, as well as primary prevention services.

WSS empower and support women and girls throughout the cycle of violence by putting their needs at the centre of all interventions, applying an intersectional approach, and working together with them, recognising their agency. WSS are typically run by non-governmental feminist organisations that aim to advance women’s and girls’ human rights to enjoy a life free from all forms of violence.

WSS have for decades been agents of social, cultural, and political change promoting women’s equality in the wider society and challenging the patriarchal system which is the root cause of violence against women and girls. Not only do WSS provide vital services to women and their children, but they also serve as a laboratory for continuous innovation and development of practices and are the first to identify gaps in legislation and policy that affect women and areas for improvement. They are, therefore, vital partners to governments, policymakers, as well as to all other stakeholders working to end violence against women.

Women-only shelters

The term “women-only shelters” refers to shelters that are **specialist support services for women survivors of violence and their children (if any) and ensure immediate access to safe accommodation.** These provide empowering support, **based on a gender-specific approach to**

⁶ Directive 2012/29/EU of the European Parliament and of the Council of 25 October 2012 establishing minimum standards on the rights, support and protection of victims of crime, and replacing Council Framework Decision 2001/220/JHA.

⁷ Article 3(a) of the Council of Europe Convention on preventing and combating violence against women and domestic violence (Istanbul Convention).

violence and focus on the human rights and safety of survivors, therefore the functions of women's shelters go beyond providing an emergency safe place to stay. They **also offer long-term support** in order to provide women and their children, if any, with the opportunity and resources necessary to resume their lives free from violence. Some examples of services provided by women's only shelters include counselling, legal advice and assistance throughout legal proceedings, support to enter/re-enter the labour market, and move-on support to find long-term accommodation after staying in the women's shelter. To qualify as a women-only shelter, the service must serve exclusively women and their children. The minimum standards from the Istanbul Convention recommend that safe accommodation in specialised women's shelters should be available in every region, with one shelter place per 10,000 head of population. One shelter place is equivalent to one bed in WAVE's methodology.

List of national women's helplines

The following is a table of the national women's helplines available in 46 European countries. If there is no national helpline for survivors of VAW, a regional or general helpline is listed (these countries are marked with a *).

It is important to note that some of the following phone numbers cannot be called from abroad, as they are strictly

national helplines and can only be used within the country. In such instances, we invite you to get in touch directly with the WAVE Members in the relevant country. If you are calling within the country with a national SIM card, it is not necessary to add the prefix (e.g., +43) when calling the available helpline(s).

COUNTRY	NAME	PHONE NUMBER
Albania	National Counselling Line for Women and Girls (Linja Kombetare e Keshilimit për gra e vajza)	+355 116/117 + 0 800 40 20
Armenia*	Ministry of Social Affairs' Helpline	+374 114/119
	Spitak Human rights	+374 93252017
	Women's Rights House	+374 77570870
	Arevamanouk	+374 77159470
	Women's Community (Martuni)	+374 94876502
	Gavar	+374 94876505
	Sose	+374 98848453
	Women's Empowerment Resource Center NGO	+374 77380053
	You Are Not Alone	+374 98886077
	Young Tavush	+374 099788770
	Young Avanguard	+374 93574657
	Talin-Huys	+374 91482035
	Women's Rights Center	+374 91416249
	Women's Support Center	+374 99887808
Austria	Women's Helpline Against Violence (Frauenhelpline gegen Gewalt)	+43 800222555
Azerbaijan*	A helpline run by the Ministry of Internal Affairs	+994 12151
	"Clean World" Social Union ("T miz Dünya" Qadınlara Yardım İctimai Birliyi)	+99 4124085669 +994 125111151
	+994 125111151	0800 333 883
Belarus*	Hotline for victims of domestic violence (Горячая линия для пострадавших от домашнего насилия)	+375 173173232
Belgium*	Domestic violence helpline (Écoute violences conjugales)	+32 80003030
	Helpline of the Collective against Family Violence and Exclusion (Ligne d'écoute du CVFE – Collectif contre les Violences familiales et l'Exclusion)	+32 42234567
	SOS Rape (SOS Viol)	+32 80098100
	Centres for General Welfare Work and Child Abuse Trust Centres helpline (Centra voor Algemeen Welzijnswerk en Vertrouwenscentra kindermishandeling)	+32 1712
Bosnia and Herzegovina	SOS helpline for survivors of domestic violence (SOS telefon za žrtve nasilja)	+387 1265
	SOS line for domestic violence (SOS telefon za žrtve nasilja)	+387 1264
	Unique telephone line for support and help to survivors of war rape and sexual violence and their family members (Jedinstvena telefonska linija za pomoć i podršku preživjelim ratno silovanje i seksualno nasilje i članovima njihovih porodica)	+387 80022334
	Unique telephone line for support and help to survivors of war rape and sexual violence and their family members (Jedinstvena telefonska linija za pomoć i podršku preživjelim ratno silovanje i seksualno nasilje i članovima njihovih porodica)	+387 80022334

COUNTRY	NAME	PHONE NUMBER
Bulgaria	Alliance for Protection against Gender-Based Violence (Алианс за защита от насилие, основано на пола)	+359 80011977
	National Helpline for Survivors of Violence (Национална гореща телефонна линия за пострадали от насилие)	+359 80018676
	Association Demetra (Асоциация Деметра)	+359 56815 618
Croatia	Autonomous Women's House Zagreb (Autonomna ženska kuća Zagreb)	+385 800 5544
	Women's Help Now – SOS Telephone for Women and Children Victims of Violence (Ženska pomoć sada – SOS telefon za žene i djecu žrtve nasilja)	+385 800655222
Republic of Cyprus	Helpline 1440 (1440)	+357 1140
Czech Republic	ROSALIN	+420 800 60 50 80
	White Circle of Safety - Victims Helpline (Bílý kruh bezpečí - Linka Pomoci Obetem)	+420 116006
Denmark	Live Without Violence's National Hotline (Lev Uden Volds nationale hotline)	+45 1888
Estonia	Victim's Crisis Helpline (Ohvriabi Kriisitefon)	+372 116006
Finland	Zeroline against domestic violence and violence against women (Nollalinja)	+358 80005005
France	Women Violence Info (Violence Femmes Info)	+33 3919
Georgia	Agency for the State Care and Assistance to Victims of Trafficking (სახელმწიფო ზრუნვისა და ტრეფიკინგის მსხვერპლთა დაზარალებულთა დახმარების სააგენტო)	+995 322395111
Germany	Violence Against Women Helpline (Hilfetelefon Gewalt gegen Frauen)	+49 80001160116
Greece	SOS Helpline (Γραμμή SOS)	+30 15900
	Helpline against domestic violence (Γραμμή Ελπίδας)	+30 8011116000
Hungary	NANE Helpline (NANE Segélyvonal)	+36 80505101
Iceland	The Women's Shelters Helpline (Neyðarsími Kvænnaathvarfsins)	+354 5611205
Ireland	Women's Aid 24hr National Freephone Helpline	+353 1800341900
	National Rape Crisis 24 Hour Helpline	+353 1800 77 8888
Italy	National helpline against violence and stalking (1522 - Numero nazionale antiviolenza e stalking)	+39 1552
Kosovo	Helpline Number (Numri i Linjës Ndihmëse)	+383 80011112
Latvia*	Crisis and Counselling Centre "Skalbes" (Križu un Konsultāciju Centrs "Skalbes")	+371 116123 +371 67222922 +371 27722292
	NGO Association "MARTA Centre" (Biedrība "Centrs MARTA")	+371 67378539
Liechtenstein	Women's Shelter Liechtenstein (Frauenhaus Liechtenstein)	+423 3800203
Lithuania	Helpline for Women (Pagalbos moterims linija)	+370 880066366
Luxembourg*	Domestic Violence Helpline (Helpline-Violence domestique)	+352 621612774
Malta*	APPOGG Agency within the Foundation for Social Welfare Services	+356 179
	Victim Support Malta	+356 2122 8333
The Republic of Moldova	Trust Line for Women and Girls (Telefonul de Încredere pentru Femei și Fete)	+373 80088008
Montenegro	National SOS Hotline for Domestic Violence (Nacionalna SOS linija za porodično nasilje)	+382 80111111
Netherlands*	Safe At Home (Veilig Thuis)	+31 8002000
	Fier	+31 882080000
	Sterk Huis	+31 8008013
	Stay Group (Blijf Groep)	+31 882342450
	Moviera	+31 883744744

COUNTRY	NAME	PHONE NUMBER
North Macedonia	SOS Mobile National Line (Национална СОС мобилна линија за жртви на семејно насилство)	+389 70/75/77 141700
	National SOS Line – Telephone for Trust (Национална СОС линија - Телефон на доверба)	+389 15315
	National SOS Line 15 700 (Национална СОС линија 15 700)	+389 15700
Norway	National Domestic Violence Helpline (Vold- og overgrepslinjen)	+47 116006
Poland	Emergency Helpline for Women Victims of Violence (Telefon Interwencyjny)	+48 600070717
Portugal	Information Service for Domestic Violence Victims (Serviço de Informação a Vítima de Violência Doméstica – SIVVD)	+351 800202148
	Victim Support Portugal's helpline (Apoio a Vítima – APAV)	+351 116006
	Association of Women against Violence's helpline (Associação de Mulheres contra a Violência – AMCV)	+351 213802160
	Women's Alternative and Response Union's helpline (União de Mulheres Alternativa e Resposta)	+351 218873005
Romania	National Helpline for Victims of Domestic Violence (Număr unic național de urgență pentru victimele violenței domestice)	+40 800500333
Russia	National helpline for women suffering from domestic violence (Всероссийский телефон для женщин, пострадавших от домашнего насилия)	+7 88007000600
Serbia	SOS Helpline for women with experience of violence (СОС Телефон за жене са искуством насиља)	+381 800222003
Slovakia	National Helpline for Women Experiencing Violence (Národná linka pre ženy zažívajúce násilie)	+421 800212212
Slovenia	SOS Helpline for Women and Children - Victims of Violence (Društvo SOS telefon za ženske in otroke - žrtve nasilja)	+386 801155
Spain	Telephone service for information, legal advice and immediate psychological attention by specialised personnel for all forms of violence against women (Servicio telefónico de información, de asesoramiento jurídico y de atención psicosocial inmediata por personal especializado a todas las formas de violencia contra las mujeres)	+34 016
Sweden	Sweden's National Women's Helpline (Kvinnofridslinjen)	+46 20505050
Switzerland*	Rape and sexual assault helpline (Association Viol-Secours)	+41 223452020
	General crisis helpline (Dargebotene Hand)	+41 143
Türkiye	Emergency Domestic Violence Hotline (Aile içi Şiddet Acil Yardım Hattı)	+90 2126569696
Ukraine	National hotline on prevention of domestic violence, trafficking and gender discrimination (Національна "гаряча" лінія з попередження домашнього насильства, торгівлі людьми та гендерної дискримінації)	+380 800500335 or +380 116123
	State Call Center on the prevention of human trafficking, domestic violence, gender-based violence, and violence against children (Урядова "гаряча лінія" для осіб, постраждалих від торгівлі людьми, домашнього насильства, насильства за ознакою статі, насильства стосовно дітей, або про загрозу вчинення такого насильства)	+380 1547
United Kingdom	ENGLAND: Freephone 24hr National Domestic Violence Helpline	+44 8082000247
	NORTHERN IRELAND: 24hr Domestic and Sexual Violence Helpline	+44 8088021414
	SCOTLAND: Scotland's Domestic Abuse and Forced Marriage Helpline	+44 8000271234
	WALES: Live Fear Free Helpline (Llinell Gymorth Byw Heb Ofn)	+44 8088010800

List of WAVE Members (Status: 2023)

NAME OF ORGANISATION (ENGLISH)	NAME OF ORGANISATION (NATIONAL LANGUAGE)	COUNTRY
1. Albanian Women Empowerment Network (AWEN)	Rrjeti i Fuqizimit të Grave Shqiptare	Albania
2. Counselling Line for Women and Girls	Linja e Këshillimit për Gra dhe Vajza	Albania
3. Gender Alliance for Development Center (GADC)	Qendra Aleanca Gjinore për Zhvillim	Albania
4. Human Rights in Democracy Center (HRDC)	Qendra "Të Drejtat e Njeriut në Demokraci" (QDNJD)	Albania
5. Women's Association "Refleksione"		Albania
6. Women's Forum Elbasan	Forumi i Gruas Elbasan	Albania
7. Woman to Woman	Gruaja tek Gruaja	Albania
8. Center for Legal Civic Initiatives	Quendra per Nisma Ligjore Qytetare	Albania
9. Psycho-Social Centre "Vatra"	Quendra Psiko-Sociale "Vatra"	Albania
10. Women Center "Light Steps"	Qendra-Sociale "Hapa te Lehte"	Albania
11. Women's Support Center (WSC)	Կանանց աջակցման կենտրոնը (ԿԱԿ)	Armenia
12. Women's Rights Center (WRC)	Կանանց իրավունքների կենտրոնը (ԿԻԿ)	Armenia
13. Sexual Assault Crisis Center (SACC)	Սեռական բռնության ճգնաժամային կենտրոն	Armenia
14. Women's Resource Center NGO	Կանանց ռեսուրսային կենտրոն ՀԿ	Armenia
15. Impact Innovations Institute's Initiatives Foundation (IMINI)	Իմփակտ Ինովացիաների Ինստիտուտի Նախաձեռնություններ Հիմնադրամ	Armenia
16. Women's Rights House NGO	Կանանց իրավունքների տուն ԿՀ (ԿԻՏ)	Armenia
17. Association of Austrian Autonomous Women's Shelters (AÖF)	Autonome Österreichische Frauenhäuser (AÖF)	Austria
18. Gewaltschutzzentrum Wien		Austria
19. Network of Austrian Counselling Centres for Women and Girls	Netzwerk österreichischer Frauen- und Mädchenberatungsstellen	Austria
20. Nilil – Empowerment and Counselling for Women with Disabilities	Empowerment und Beratung für Frauen mit Behinderung	Austria
21. FEM.A – Association of Feminist Single Mothers	Verein Feministische Alleinerzieherinnen	Austria
22. Renate Egger (Individual Member)		Austria
23. Rosa Logar (Honorary Member)		Austria
24. Clean World AID to WOMEN Social Union		Azerbaijan
25. International Public Association "Gender Perspectives"	Международное общественное объединение «Гендерные перспективы»	Belarus
26. Legal Initiative – Commission on Women's Rights	Правая ініцытыва	Belarus
27. Collective Against Family Violence and Exclusion (CVFE)	Collectif contre les Violences Familiales et l'Exclusion (CVFE)	Belgium
28. Garance ASBL		Belgium
29. Foundation "United Women" Banja Luka	"Udružene žene" Banja Luka	Bosnia and Herzegovina
30. "Medica" Zenica Association	Udruženje "Medica" Zenica	Bosnia and Herzegovina
31. Alliance for Protection against Gender-Based Violence	Алианс за защита от насилие, основано на пола	Bulgaria
32. Bulgarian Gender Research Foundation	Български център за джендър изследвания	Bulgaria
33. DA Foundation – united against violence	Фондация „Джендър алтернативи“	Bulgaria
34. Autonomous Women's House Zagreb	Autonomna Ženska Kuća Zagreb	Croatia
35. B.a.B.e. Be active. Be emancipated	Budi aktivna. Budi emancipiran.	Croatia
36. Centre for Women War Victims – ROSA	Centar za Žene Žrtve Rata (CŽŽR) – ROSA	Croatia
37. Women's Room	Ženska Soba	Croatia
38. domine – Organization for the Promotion of Women's Rights	Udruga domine – Organizacija za promicanje ženskih prava	Croatia
39. Mediterranean Institute of Gender Studies (MIGS)		Cyprus
40. Association for the Prevention and Handling of Violence in the Family (SPAVO)	Συνδέσμου για την Πρόληψη και Αντιμετώπιση της Βίας στην Οικογένεια (ΣΠΑΒΟ)	Cyprus
41. Association of Women to Support Living (KAYAD)	Kadından Yaşama Destek Derneği (KAYAD)	Northern Cyprus
42. ProFem – Center for Victims of Domestic and Sexual Violence	Centrum pro Oběti Domácího a Sexuálního Násilí	Czech Republic

	NAME OF ORGANISATION (ENGLISH)	NAME OF ORGANISATION (NATIONAL LANGUAGE)	COUNTRY
43.	ROSA Centre for Women	ROSA Centrum pro Ženy	Czech Republic
44.	L.O.K.K – National Organization of Women’s Shelters in Denmark	Landsorganisation af Kvindekrisecentre	Denmark
45.	Danner		Denmark
46.	Center for the Analysis of Power Relations	Center for Magtanalyse (CMA)	Denmark
47.	The Joan-Sisters	Joan-Søstre	Denmark
48.	Women’s Support and Information Centre	Naiste Tugi- ja Teabekeskus	Estonia
49.	Pärnu Women’s Support Centre	Pärnu Naiste Tugikeskus	Estonia
50.	Women’s Line Finland	Naisten Linja – Kvinnolinjen	Finland
51.	Federation of Mother and Child Homes and Shelters	Ensi-ja Turvakotien Liitto	Finland
52.	National Federation of Women Solidarity	Fédération Nationale Solidarité Femmes (FNSF)	France
53.	Women for Women France		France
54.	The Maison des Femmes of Saint-Denis	La Maison des Femmes de Saint-Denis	France
55.	Association Protect Children	Protéger l’enfant	France
56.	Anti-Violence Network of Georgia (AVNG)	ძალადობისგან დაცვის ეროვნული ქსელი	Georgia
57.	Women Fund Sukhumi (WFS)	ქალთა ფონდი “სოხუმი”	Georgia
58.	Sakhli Advice Center for Women	ქალთა საკონსულტაციო ცენტრი “სახლი”	Georgia
59.	Democrat Women’s Organization of Samtskhe-Javakheti		Georgia
60.	Sapari	საფარი	Georgia
61.	Association Merkuri	ასოციაცია „მერკური“	Georgia
62.	BIG e.V. – Berlin Initiative against Violence against Women	Berliner Initiative gegen Gewalt an Frauen	Germany
63.	Association of Women’s Shelters	Frauenhauskoordinierung e.V.	Germany
64.	bff – Federal Association of Rape Crisis Centres and Women’s Counselling Centres	Bundesverband Frauenberatungsstellen und Frauennotrufe – Frauen gegen Gewalt e.V.	Germany
65.	GESINE Network “Gesundheit.EN”	GESINE Netzwerk Gesundheit.EN	Germany
66.	kofra – Communication Center for Women’s Life and Work Situation	Kommunikationszentrum für Frauen zur Arbeits- und Lebenssituation	Germany
67.	papatya – Crisis Facility for Young Migrant Women	Kriseneinrichtung für junge Migrantinnen	Germany
68.	ZIF – Central Information Center for Autonomous Women’s Shelters	Zentrale Informationsstelle Autonomer Frauenhäuser	Germany
69.	Prof. Carol Hagemann-White (Honorary Member)		Germany
70.	Karin Heisecke (Individual Member)		Germany
71.	European Anti-Violence Network (EAVN)	Ευρωπαϊκό Δίκτυο κατά της Βίας (Ε.Δ.κ.Β.)	Greece
72.	Union of Women Associations of Heraklion Prefecture	Σύνδεσμος Μελών Γυναικείων Σωματείων Ηρακλείου	Greece
73.	NANE – Women’s Rights Association	Nők a Nőkért Együtt az Erőszak Ellen	Hungary
74.	PATENT Association	PATENT Egyesület	Hungary
75.	Stigamót – Counselling and Information Centre on Sexual Violence		Iceland
76.	Women’s Shelter Association	Samtaka um Kvennaathvarf	Iceland
77.	Sexual Violence Centre Cork		Ireland
78.	Rape Crisis Network Ireland		Ireland
79.	Safe Ireland		Ireland
80.	Women’s Aid Ireland		Ireland
81.	D.i.Re – National Women’s Network against Violence	Donne in Rete contro la Violenza	Italy
82.	National Association of Volunteers of the Telefono Rosa Onlus	Associazione Nazionale Volontarie Telefono Rosa Onlus	Italy
83.	Differenza Donna – Women and Girls against Violence		Italy
84.	BeFree Social Cooperative against trafficking, violence, and discrimination	BeFree Cooperativa Sociale contro tratta, violenza e discriminazioni	Italy
85.	Paola Degani (Individual Member)		Italy
86.	Dr. Cristina Gamberi (Individual Member)		Italy

	NAME OF ORGANISATION (ENGLISH)	NAME OF ORGANISATION (NATIONAL LANGUAGE)	COUNTRY
87.	Silvia Menecali (Individual Member)		Italy
88.	Women's Wellness Centre (WWC)	Qendra për Mirëqenien e Gruas (QMG)	Kosovo
89.	Kosovar Gender Studies Center	Qendra Kosovare për Studime Gjinore	Kosovo
90.	Kosovo Women's Network	Rrjeti i Grave të Kosovës	Kosovo
91.	Crisis and Counselling Centre "Skalbes"	Krīžu un Konsultāciju Centrs "Skalbes"	Latvia
92.	Women's NGO Cooperation Network of Latvia	Latvijas Sieviešu nevalstisko organizāciju sadarbības tīkls	Latvia
93.	Association "MARTA Centre"	Biedrība "Centrs MARTA"	Latvia
94.	Women's Shelter Liechtenstein	Frauenhaus Liechtenstein	Liechtenstein
95.	Women in Distress ASBL	Femmes en Détresse A.S.B.L	Luxembourg
96.	Commission on Gender-Based Violence and Domestic Violence		Malta
97.	Network Forum Malta		Malta
98.	Migrant Women Association Malta		Malta
99.	Dr. Marceline Naudi (Individual Member)		Malta
100.	Association against Violence "Casa Marioarei"	Asociația Împotriva Violentei în Familie „Casa Mărioarei”	Moldova
101.	Center for Support and Development of Civic Initiatives "Resonance"	Центр развития и поддержки гражданских инициатив «РЕЗОНАНС»	Moldova
102.	Women's Law Centre	Centrul de Drept al Femeilor	Moldova
103.	National Coalition "Life without Violence in the Family"	Coaliția Națională "Viața fără Violență în Familie"	Moldova
104.	SOS Hotline for Women and Children Victims of Violence Nikšić	SOS Telefon za Žene i Djecu Žrtve Nasilja Nikšić	Montenegro
105.	Women's Safe House	Sigurna Ženska Kuća	Montenegro
106.	Association "Valente"	Vereniging "Valente"	Netherlands
107.	Femmes for Freedom		Netherlands
108.	National Council for Gender Equality (NCGE)	Национален совет за родова рамноправност (СОЖМ)	North Macedonia
109.	National Network to End Violence against Women and Domestic Violence – Voice against Violence	Националната мрежа против насилство врз жени и семејно насилство	North Macedonia
110.	Women's Rights Centre	Centrum Praw Kobiet	Poland
111.	Autonomy Foundation	Fundacja Autonomia	Poland
112.	Juniper Foundation	Fundacja Juniper	Poland
113.	AMCV – Association of Women against Violence	Associação de Mulheres contra a Violência	Portugal
114.	A.L.E.G Association for Liberty and Equality of Gender	Asociația pentru libertate și egalitate de gen	Romania
115.	Anais Association	Asociația Anais	Romania
116.	Necuvinte Association	Asociația Necuvinte	Romania
117.	Filia Center	Centrul Filia	Romania
118.	Sensiblu Foundation	Fundația Sensiblu	Romania
119.	ANNA – National Center for Prevention of Violence	Центр "АННА"	Russia
120.	Crisis Center "Ekaterina"	Кризисный центр "Екатерина"	Russia
121.	Nizhny Novgorod Women's Crisis Center	Нижегородского Женского Кризисного Центра	Russia
122.	Interregional Non-Governmental Organization for the Support of Family, Motherhood, and Childhood "Doctors to Children"	"Врачи детям"	Russia
123.	Crisis Center for Women – Institute of Non-Discriminative Gender Interrelations (INGI)	Кризисный центр для женщин – Институт недискриминационных гендерных ирреляций	Russia
124.	We Believe You	Tebe Poveryat «Тебе поверят»	Russia
125.	Nasiliu.Net	Центр по работе с проблемой насилия «НАСИЛИУ.НЕТ»	Russia
126.	Autonomous Women's Center (AWC)	Autonomi Zenski Centar Beograd	Serbia
127.	Association FenomenA	Udruženje Fenomena	Serbia
128.	Oasis of Safety	Oaza Sigurnosti Kragujevac	Serbia
129.	The Association of Women Sandglass	Pescanik Udruzenje Zena	Serbia
130.	Daje - Roma Center for Women and Children	Romski Centar za Žene i Decu	Serbia

	NAME OF ORGANISATION (ENGLISH)	NAME OF ORGANISATION (NATIONAL LANGUAGE)	COUNTRY
131.	Human Rights Committee Vranje	Odbor za Ljudska Prava Vranje	Serbia
132.	...IZ KRUGA - VOJVODINA, organization for the support of women with disabilities	IZ KRUGA – VOJVODINA organizacija za podršku ženama s invaliditetom	Serbia
133.	Alliance of Women in Slovakia	Aliancia Zien Slovenska	Slovakia
134.	Fenestra		Slovakia
135.	Association SOS Helpline for Women and Children – Victims of Violence	Društvo SOS	Slovenia
136.	Association for Nonviolent Communication	Društva Za Nenasilno Komunikacijo	Slovenia
137.	Association Another Time	Asociación Otro Tiempo	Spain
138.	Aspacia Foundation	Fundacion para la Convivencia Aspacia	Spain
139.	HELIA – Women Association	Associació de suport a les Dones que pateixen Violència de Gènere	Spain
140.	Federation of Women’s Associations Arena and Laurisilva	Federacion de Asociaciones de Mujeres Arena y Laurisilva	Spain
141.	Association of Feminist Psychotherapy and Psychology	Asociación de Psicología y Psicoterapia Feminista	Spain
142.	For You Woman Association	Asociación Por Ti Mujer	Spain
143.	Unitary platform against gender violence	Plataforma unitària contra les violències de gènere	Spain
144.	Roks – National Organisation for Women’s and Young Women’s Shelters in Sweden	Riksorganisationen för kvinnojourer och tjejjourer i Sverige	Sweden
145.	Unizon		Sweden
146.	Uppsala Women’s Shelter	Uppsala Kvinnojour	Sweden
147.	Women’s Shelter Jämtland county	Kvinnojouren Jämtlands län	Sweden
148.	Women’s Solidarity Organization of Switzerland and Liechtenstein	Dachorganisation der Frauenhäuser der Schweiz und Liechtenstein	Switzerland
149.	Violence What to do?	Violence que Faire	Switzerland
150.	Brava – Together against Violence Against Women	Brava – Gemeinsam gegen Gewalt an Frauen	Switzerland
151.	Foundation for Women’s Solidarity	Kadın Dayanışma Vakfı	Türkiye
152.	Mor Çatı Women’s Shelter Foundation	Mor Çatı Kadın Sığınağı Vakfı	Türkiye
153.	Mor Salkım Women’s Association	Mor Salkım Kadın Dayanışma Derneği	Türkiye
154.	Kadriye Bakırcı (Individual Member)		Türkiye
155.	Civil Society Organization “La Strada-Ukraine”	Ла Страда-Україна	Ukraine
156.	Women’s Information Consultative Center (WICC)	Інформаційно-консультативного жіночого центру (ІКЖЦ)	Ukraine
157.	Women’s Perspectives Center	Центр Жіночі Перспективи	Ukraine
158.	Imkaan		United Kingdom
159.	Latin American Women’s Aid (LAWA)		United Kingdom
160.	London Black Women’s Project		United Kingdom
161.	Refuge		United Kingdom
162.	Scottish Women’s Aid		United Kingdom
163.	Welsh Women’s Aid		United Kingdom
164.	Women’s Aid Federation of England		United Kingdom
165.	Women’s Aid Federation Northern Ireland		United Kingdom
166.	Latin American Women’s Rights Service (LAWRS)		United Kingdom
167.	Standing Together against Domestic Abuse		United Kingdom
168.	Rape Crisis Scotland		United Kingdom
169.	Against Violence and Abuse - AVA		United Kingdom
170.	Women’s Support Project		United Kingdom
171.	Greta Squire (Individual Member)		United Kingdom
172.	Shazia Choudhry (Individual Member)		United Kingdom
173.	Beverley Gilbert (Individual Member)		United Kingdom
174.	Lily Greenan (Individual Member)		United Kingdom



The Women Against Violence Europe (WAVE) Network is a European-wide network of over 170 members (including women's NGOs, NGO networks and individual members) in 46 European countries, who are dedicated to addressing and preventing violence against women and girls. Since its foundation in 1994, WAVE has been working to promote and strengthen the human rights of women and children, and to enable women and their children to live free from violence, particularly through building and sustaining a strong European network of women's specialist services, experts and survivors.

WAVE Network and European Information Centre Against Violence

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