



MAPPING OF SEXUAL VIOLENCE SERVICES IN THE WESTERN BALKANS AND TURKEY

EXECUTIVE SUMMARY



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Women against Violence European Network (WAVE) is a European-wide network of more than 150 members (including NGOs, NGO networks and 12 individuals) in 46 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 specialized support services, experts and survivors.

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Sexual violence services in the Western Balkans & Turkey

INTRODUCTION

This mapping was carried out as part of the EU/UN Women project “Support the establishment and strengthening of regional platforms of civil society organisations (with a special focus on organisations representing women from minority and disadvantaged groups) to advocate for the development and implementation of laws and policies in line with CEDAW and the Istanbul Convention,” under the EU/UN Women regional programme “Ending Violence against Women: Implementing norms, changing minds.” This programme aims to end gender-based discrimination and violence against women in the Western Balkans and Turkey and encompasses the countries of Albania, Bosnia and Herzegovina, Kosovo, Montenegro, the Republic of North Macedonia, Serbia and Turkey.

International legislation calls for adequate support services for victims of sexual violence. Article 25 of the Council of Europe Convention on preventing and combating violence against women and domestic violence (also known as the Istanbul Convention) is entirely dedicated to ensuring that states provide adequate support for victims of sexualised violence¹ and calls upon states to ensure that these services are set up and easily accessible for victims of sexual violence. Furthermore, the Istanbul Convention Explanatory Report acknowledges that, since sexual violence is especially traumatising, it requires a particularly sensitive response by trained and specialised staff. Such support can include immediate medical care, trauma support, forensic examinations, therapy, the provision of adequate information, and sensitive guidance. It

might also include accompaniment to different social services or to the police to file a complaint or guidance through potential legal cases, including navigating secondary victimization through judicial decisions.²

Throughout the implementation process of the three-year EU/UN Women programme, one specific key regional challenge has been identified by all partners of the project: the serious gap in sexual violence services in the region. Only **three of the seven partner countries** have identified some sort of specialised sexual violence services, which are often poorly implemented due to a lack of government support and funding. This research is therefore an attempt to map the existing services in the region and how they are implemented.

PURPOSE, SCOPE AND METHODOLOGY

All seven partners in the Western Balkans and Turkey (Albania, Bosnia and Herzegovina, Kosovo, Montenegro, North Macedonia, Serbia, Turkey) have identified the lack of, or only rudimentary provision of, specialised sexual violence services in their respective countries.

There is no holistic data available regarding the number of support services accessible to victims of sexual violence, nor about the type of institutions that might be providing these services. Additionally, if support systems do exist, it is important to look at which types of violence are considered to be “sexual violence” and what, if any, related service provisions exist.

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

2 Council of Europe (2011). Council of Europe Convention on preventing and combating violence against women and domestic violence. Explanatory Report, Council of Europe publishing, Strasbourg, pg. 82

Therefore, these executive summaries aim to provide an overview of the number of support services for victims of sexual violence currently available in the project's partner countries. They will assess who provides these services, what services are available, and where they are located. Furthermore, the mapping also seeks to better understand how government and NGOs collaborate in the provision of these services and to identify any referral pathways and multi-agency cooperation between existing services and state agencies.

The present research project is a joint effort between the WAVE office, all project partners, and consultants who were tasked with interviewing different women's NGOs and national stakeholders. A questionnaire, which can be found at the end of this executive summary, was designed by the WAVE office in collaboration with all project partners. Consultants from each partner country were selected to carry out desk research and interviews with national stakeholders, local contacts or other women's NGOs, culminating in a short final report to be submitted to the WAVE office. The WAVE office gathered and summarized all received data into this summary report.



Executive Summary for Albania

Introduction

Albania signed the Istanbul Convention in 2011 and ratified it in 2013. It entered into force one year later. The legal framework in Albania has seen significant improvements through the ratification of international instruments such as CEDAW and the Istanbul Convention. When it comes to sexual violence legislation, the Albanian Criminal Code now criminalizes offences such as stalking; non-consensual sexual acts (irrespective of the relationship between the perpetrator and the victim); sexual harassment; and the encouragement of, offering a pecuniary reward for, or intermediating acts of prostitution. Furthermore, the Criminal Code classifies any forced sexual intercourse without the consent of the victim as sexual violence. However, it remains problematic that Article 102 of the Criminal Code (which criminalizes sexual violence) only recognises sexual assault using force against women. This places the burden of proof on the victim and not on the perpetrator.³

In the 2017 GREVIO Baseline Evaluation Report for Albania,⁴ GREVIO identified the need to ensure stable and sustainable funding for women's NGOs, and to set up rape crisis centres and/or sexual violence referral centres, addressing sexual violence through a holistic and comprehensive approach. Following up on GREVIO's recommendations and the new amendments of the law on measures against domestic violence, the Ministry of Health and Social Protection (with

the support of UNDP) launched the Lilium Centre. This centre is the first crisis management centre for cases of sexual violence in Albania, intended to provide a whole range of services to victims of sexual violence.

Sexual violence against women and girls is still a taboo topic in Albania and usually underreported. Data from the latest National Population Survey, conducted by the Albanian Institute of Statistics (INSTAT 2019) highlights that 8,6% of women have experienced sexual violence in their lifetime, and 3,6% are currently experiencing sexual violence in their marriages or intimate relationships.⁵ In a 2018 study on sexual harassment,⁶ findings show that women and girls in public spaces face many forms of harassment (particularly verbal), while almost half of the respondents (44%) report having a friend or a family member who has been sexually harassed or abused. This includes acts such as "whistling after them (or honking from a car) or calling them names", "unwanted sexual comments or comments on their appearance" or "watching or staring at them". Confirming previous research and analyses, the study reinforces the belief that the rate of reporting violence, especially sexual harassment and sexual violence, continues to be low. The general findings show an equally alarming situation, where 38% of the respondents have been exposed to harassment or sexual assault during their lifetime.⁷

Despite various efforts by different stakehold-

3 Lubani M.2018. Mapping of Policies and Legislation on Violence against Women and the Istanbul Convention in Albania. European Women's Lobby publications

4 <https://rm.coe.int/grevio-first-baseline-report-on-albania/16807688a7>

5 INSTAT, 2019, National Population Survey on Violence Against Women and Girls in Albania. Retrieved on August 15th 2019 from <http://www.al.undp.org/content/albania/en/home/library/poverty/national-population-survey--violence-against-women-and-girls-in-.html>

6 UN Women Albania & IDRA Research & Consulting (2018). Report: Sexual harassment and other forms of gender-based violence in the public spaces of Albania.

7 Some have experienced both.

ers to create mechanisms that encourage victims to report acts of sexual violence, there is a common belief that women and girls experiencing sexual violence prefer to keep these acts of violence private. Victim blaming and stigma against victims of sexual violence are still very much encountered in the Albanian society and need to be urgently addressed. Furthermore, the first national survey on intimate partner violence among adolescents conducted by Albanian Women's Empowerment Network⁸ found that 22% of the boys and girls interviewed have experienced one form of violence from their partner, with intimate partner violence higher among girls than boys; additionally, pressuring or forcing a partner to have a sexual relationship is considered acceptable by 1 out of 10 adolescents.

Previous opinion polls on violence against women paint a picture in which sexual violence is either unreported due to perceptions that it belongs to the private sphere, or is not even recognized, especially between intimate partners. Over 30% of the respondents believe that engaging in non-consensual sexual relations between partners is not a crime; another 30% report having experienced some form of sexual violence.⁹ According to official statistics from 2017, there were 114 total reported cases of sexual violence. Most strikingly, 102 of those (89.5%) were women.¹⁰

Methodology

This brief research was conducted between July – September 2019, and it involved desk research and conducting interviews with **43 participants** in six different municipalities in Albania (Durrës, Shkodra, Vlora, Korça, Saranda and Elbasani). The interviewees currently work for the state directorate police, social services run by the state and municipalities, regional hospitals, and women's NGOs.

Types of violence considered sexual violence

All interviewees (100%) recognized rape and child sexual abuse as forms of sexual violence, while 41 out of 43 respondents recognized sexual assault as a form of sexual violence. Only 2 out of 43 respondents did not consider sexual harassment a form of sexual violence. Nearly 90% of interviewees considered human trafficking for sexual purposes/sex trafficking, incest, sexting, pornography (including revenge porn), and stripping as forms of sexual violence. In general, interviewees have a good understanding of what constitutes sexual violence.

Support services exclusively supporting victims of sexual violence

While there is awareness of different types of sexual violence, a considerable number of interviewees have significantly less information about services available. 72% of respondents did not have any information about the existence of any services exclusively supporting victims of sexual violence, while 11% were knowledgeable about local helplines. Only 28% of the interviewees reported being aware of the existence of the newly established rape crisis centre, Liliu Centre.

There are no other rape crisis or sexual violence referral centres in Albania. According to the Ministry of Health and Social Protection, local hospitals and health care providers are expected to be informed and ordered to collaborate with the police.

Liliu Centre, opened in December 2018, is the first sexual assault crisis management centre in Albania. The centre operates 24 hours a day, seven days a week, as one-stop centre where

8 Arqimandriti, M., Bulku, A., Lena O. 2019. Intimate Partner Violence in Albania. Albanian Women Empowerment Network (AWEN) publications. Retrieved from <https://awenetwork.org/wp-content/uploads/2019/05/Research-report-in-English-INTIMATE-PARTNER-VIOLENCE-IN-ADOLESCENCE-IN-ALBANIA.pdf>

9 Counseling Line for Women and Girls. 2013. Study about victims of domestic violence and sexual assault in Albania. Online: http://www.cp-project.al/archive/wp-content/uploads/2014/01/DOMESTIC_VIOLENCE.pdf

10 INSTAT. 2018. Men and Women in Albania 2017.

victims receive medical, social, and legal services for up to 72 hours. After the 72 hours have passed, the victim receives necessary services on a case-by case basis through the Referral Mechanism (CRM), established at a local level. The centre has **one social worker and five nurses** as permanent staff. It provides its services through a multidisciplinary approach, involving gynaecologists, police officers, psychologists, social workers/case managers, depending on the case. These service providers have a cooperation agreement with the centre and are available 'on call'. Capacity building interventions targeting all relevant actors have been ongoing throughout 2019. The centre is compliant with both Albanian Law 47/2018, as well as with Istanbul Convention standards.

Between December 2018 and August 2019, the Liliun Centre dealt with 23 sexual violence cases. 11 of them were children (four boys and seven girls) and 12 of them were adults (two men and 10 women).

Apart from the Liliun Centre, there are no private or public centres that offer services exclusively for victims of sexual violence in Albania. However, for many years victims of sexual violence have been referred to and have received psychological, social and counselling services from several CSOs working with trafficking and domestic violence victims (minors included). These are:

- Counselling Line for Girls and Women (National helpline 116–117),
- Vatra'Psycho-social Centre
- Different and Equal
- Shelter for Victims of DV in Tirana
- Albanian National Child Helpline (ALO 116–111)
- Tjeter vision (Another Vision)
- Woman to Woman
- Shkoder
- Woman Forum Elbasan

The National Centre for the Treatment of Victims of Domestic Violence, operating as a public institution since 2011, has also served as shelter for victim of sexual violence.

The interviewees also reported that they are aware of several services offered to victims of sexual violence, including social reintegration services, psychological services, forensic examination services, and legal services. Only 7% of the respondents are of the opinion that the institutions in charge have the capacity to provide these types of services, as they lack appropriate financial resources. Another 7% of respondents highlight that while NGOs running shelters or centres have the necessary capacity and experience in working with victims of sexual violence, most of them lack the financial capacity.

Women's specialist support services supporting victims of sexual violence

All participants interviewed reported that women's specialist support services generally support victims of sexual violence in Albania. Among the services most frequently offered by women's NGOs to victims of sexual violence are social and psychological support, medical assistance, legal support, economic assistance, housing, emergency housing, and accommodation. The main sources of funding for women's support services come from donors, followed by the national government and local government. 37% of respondents believe that women's support services have the capacity to cater to the needs of victims of sexual violence, but they are limited due to project-based funding. 51% of respondents believe that women's support services only offer services on a short-term basis, while 37% reported that long term support services are only available at shelters that offer extended rehabilitation.

Geographical coverage of sexual violence support services

44% of respondents believe that services for victims of sexual violence are only located in the capital city; 19% believe they are located in major cities; 9% believe they can be found in most regions; and 14% believe they can be found in all regions. The remaining interviewees did not have any knowledge about the geographical coverage.

Cooperation and referral pathways between WSS and state institutions/ services

77% of respondents reported being aware of referral pathways from state institutions to women's support services and believe that collaboration exists between these two actors. The rest of the respondents do not think that this is the case, while others do not have any information in this regard.

Recommendations

Addressing sexual violence in Albania must be done through amending national legislation, particularly by harmonizing the Criminal Code with Article 36 of the Istanbul Convention. Furthermore, it is important to raise the awareness of the Albanian population about the gravity of sexual violence in all its forms; this is particularly critical within intimate partner relationships, where this phenomenon seems to be less recognized. The state should use national media to further disseminate both the emergency numbers for gender-based violence and information about the Liliu Centre and/or other support centres. National authorities should also inform service providers through an executive order about the existence of the Liliu Centre.

In accordance with Article 25 of the IC, authorities should set up rape crisis centres and/or sexual violence referral centres in all regional hospitals in Albania. In doing so, it is important to build on the experience of newly-established sexual violence centres and offer capacity building to the actors involved in the process. Capacity building should focus on the different forms of sexual violence, the national legislation in place, the necessary steps to be followed when supporting a victim, and information about the available services at central and local levels.

CSOs should focus their lobbying and advocacy efforts to push forward the implementation of Article 25, holding states accountable to fulfil the necessary criteria. Furthermore, it is important to conduct information sessions with the wider population, especially women from rural areas, on existing support services available for victims of violence.

Lastly, stable state funding for women's NGOs is a prerequisite for support services to be able offer both adequate short term and long-term care to victims of violence as part of their core services.

Executive Summary for Bosnia and Herzegovina



Introduction

Bosnia and Herzegovina (BiH) is a country with fragmented jurisdiction, non-harmonized legislation and a widespread lack of recognition of violence against women as a form of human rights violation. The divided political system in BiH implies three levels of governance responsible for adopting and implementing legislation related to sexual violence: at the state level of BiH, the entity level (including Republika Srpska and Federation of BiH), and the Brčko District of BiH.

Bosnia and Herzegovina ratified the Istanbul Convention in 2013 with no reservations, and it entered into force on 1 August 2014. In 2015, the BiH Ministry for Human Rights and Refugees adopted the Framework Strategy for Implementation of the Istanbul Convention for 2015–2018,¹¹ which aimed to establish multidisciplinary and coordinated systems of protection for victims of violence against women and domestic violence in line with the standards of the Istanbul Convention. Despite these actions, the latest official report¹² on the implementation of the Framework Strategy indicates that BiH has not legally mandated informing women survivors of violence about available services of support and assistance, and there are no designated specific public institutions that have the obligation to provide this information. Furthermore, the report also highlights that there are no rape crisis centres that provide services such as medical and forensic examination or support and counselling, as stipulated by the Istanbul Convention.

Acts of sexual violence have been recognized as criminal offences in four criminal codes:

at the state level of BiH, in the two entities of Republika Srpska and the Federation of BiH, and the Brčko District of BiH. Out of the four jurisdictions, only Republika Srpska has harmonized its provisions with the Istanbul Convention through recognizing the crimes of sexual violence regulated by the Convention as criminal offences (by introducing sexual harassment). In addition, the Criminal Code of Republika Srpska introduced other criminal acts against life and body - female genital mutilation, forced sterilization, and under criminal acts against citizens' rights and freedoms, the introduction of stalking. At the two entities level and Brčko District, there are no public policies that specifically regulate support and assistance for victims of sexual violence. Laws on Protection from Domestic Violence in Republika Srpska and Federation BiH do also recognize sexual violence as a form of violence in the marriage or between intimate partners who share the same household.

Methodology

For the purpose of this report **14 interviews** were conducted with government and public institutions (at the entity level, the Brčko District of BiH, cantonal and municipal levels), including ministries in the sectors of health protection, labour, social welfare and protection policy, police, family and youth and women's NGOs. The collected responses were analysed and compared

11 The Framework Strategy for Implementation of the Convention on Prevention and Fighting Violence Against Women and Domestic Violence (Istanbul Convention) in Bosnia and Herzegovina (2015-2018), Official Gazette of B&H, no. 75/1. Available here: <https://bit.ly/2jUaO6M>

12 The Report on the implementation of the Framework Strategy for Implementation of the Convention on Prevention and Fighting Violence Against Women and Domestic Violence (Istanbul Convention) in Bosnia and Herzegovina (2015-2018) for the period July 2015-December 2016, adopted by the BiH Council of Ministers in June 2017. Available (in Bosnian) under the following link: <https://bit.ly/2ltvWkU>

against each other, underlining significant differences between responses. Additionally, the “Resource package for service providers of health services on gender-based violence in the Republika Srpska,”¹³ published by the Ministry of Health and Social Care of Republika Srpska, served as a source of information.

Types of violence considered sexual violence

All interviewees recognized rape, sexual assault, sexual harassment, human trafficking for sexual purposes/sex trafficking, incest, child sexual abuse, sexting/sexual cyber violence, and pornography (including revenge porn) as sexual violence. It is relevant to note that 64% of the interviewees did not recognize stripping as a sexual violence form and 36% did not recognize sex as self-destructive behavior as a sexual violence form. 36% of the interviewees did not recognize prostitution as a form of sexual violence. One women’s human rights NGO listed sexual bribery, unwanted/forced touching, female genital mutilation, forcing masturbation, watching masturbation, and unwanted sexual comments as additional types of sexual violence. Lastly, one health care professional identified marriage with a minor as a form of sexual violence, and one government representative highlighted that “any form of unwanted verbal, non-verbal or physical behavior of any sexual nature should be recognized as sexual violence.”

Support services exclusively supporting victims of sexual violence

When it comes to the existence of support services exclusively supporting victims of sexual violence (e.g. national helplines, local helplines, rape crisis centres, referral centres, forensic examination facilities etc), the data highlights that such **services, focusing exclusively on victims**

of sexual violence, and as part of a systemic response of state institutions, **do not exist in Bosnia and Herzegovina**. 50% of the participants were not able to identify support services focusing exclusively on victims of sexual violence in the country. However, participants did identify support services that cater to the needs of sexual violence victims, in particular two support services: the Citizens’ Association ‘Medica’ in Zenica that offers support for women and children victims of violence, including victims of sexual violence,¹⁴ and the Centre for Supporting Children Victims of Violence (part of the University Hospital in Foča). Specific support services for victims of sexual violence are very limited, and mainly provided by women’s human rights NGOs through women’s specialized services during periods of acute violence.

These services are not comprehensive and **lack systemic support**. There is a need for a sufficient number of trained professionals that can provide specialized assistance to victims of sexual violence, as well as sufficient funding allocated from public budgets to ensure sustainability. 36% of the respondents believe that the services provided by the state are long-term support services, though they do not know details on implementation; conversely, 21% of the respondents identified that there is not enough systemic state support services provided to victims of sexual violence. **Women’s NGOs typically can only offer short-term support** to victims of sexual violence and during acute periods of violence, as many of the women’s NGOs are dependent on foreign donations. The rest of 36% of the respondents did not answer this question.

Lastly, when it comes to guidelines on how to support victims of sexual violence, the “Resource package for service providers of health services on gender-based violence in Republika Srpska” provides guidelines for health professionals on how to conduct forensic examinations and collect evidence for judicial proceedings, but does

13 The Resource Package for Service Providers of Health Services on Gender Based Violence in the Republika Srpska, UNFPA and the Ministry of Health and Social Care of the Republika Srpska, June 2015. Available (in Serbian) under the following link: <https://bit.ly/2IVF1mK>

14 Citizens’ Association Medica Zenica has a rape crisis centre as part of their existing support services, and meets specific standards of the Istanbul Convention (such as accommodation, hygiene, safe place, adequate treatment).

not mention any special facilities for forensic examination for victims of sexual violence.

Women's specialist support services supporting victims of sexual violence

The majority of respondents (93%) identified that all women's support services (WSS) offer support for sexual violence victims. **Only three women's NGOs in BiH provide complete free legal assistance services for victims of sexual violence, including free legal aid, counselling, and court accompaniment.** There are **nine safe houses for women survivors of violence**¹⁵ run by NGOs, where victims of sexual violence can get support.

Although some professionals in public institutions and governmental officers state that there are long term support services for victims of sexual violence provided by the state, it is clear from the overall responses that specific support services for victims of sexual violence are very limited, and **mainly provided by women's human rights NGOs through women's specialized services during periods of acute violence.** These women's specialized services have trained staff members and experts to support women victims of all forms of violence, but they are mostly available in major cities, and lack public budget support. For example, the Foundation "Women's Centre" in Trebinje provides support to women victims of all forms of violence, but there is no local NGO that provides support services only for victims of sexual violence. This absence of specific care may be explained by the lack of legal differentiation between sexual violence and other forms of violence, which eliminates the need to establish specific support services. Additionally, one interviewee stated that sources of funding for support services for victims of sexual violence are not separated from the overall funding allocated to all victims of violence.

Geographical coverage of sexual violence support services

50% of the respondents stated that sexual violence support services are only available in major cities, while government officials from the Brčko District of BiH stated that these services can only be found in the district. One respondent mentioned that the safe houses are located in eight cities in BiH, covering mostly all regions.

Cooperation and referral pathways between WSS and state institutions/ services

Cooperation between governmental institutions and WSS, and referral mechanisms for supporting victims of sexual violence, exist in Bosnia and Herzegovina only as a part of a general response to prevention and combating violence against women. Women's CSOs throughout Bosnia and Herzegovina, including members of the Safe Network of BiH, have developed and signed local protocols on cooperation with governmental institutions, largely focusing on prevention and combating domestic violence, and without specific referral mechanisms for victims of sexual violence. At the level of the Zenica Dobož Canton, the Citizens' Association Medica from Zenica has signed protocols on sheltering victims of domestic violence, including victims of sexual violence, and cooperates with local public institutions. However, this cooperation is largely due to pressure on governmental institutions from women's NGOs to ensure assistance, protection and support for victims of violence in accordance with the standards of the Istanbul Convention.

¹⁵ Six safe houses are located in the Federation of BiH and three are located in Republika Srpska.

Recommendations

Regarding the different forms of sexual violence, there should be better capacity building activities for all stakeholders that provide support services for victims of sexual violence. The emphasis should be placed on forms of sexual violence that are hidden or combined with other forms of violence against women (trafficking, abuse and exploitation, domestic violence, economic violence, etc.).

Furthermore, governmental institutions at all levels in Bosnia and Herzegovina should plan for and allocate sufficient financial resources in order to establish support services that exclusively and sustainably support victims of sexual violence. These resources should be available both to public institutions that already work with victims of violence and are recognized as institutions of protection (police, centres for social work, health care centres, including centres for mental health), as well as women's human rights NGOs that provide women's specialized services.

Existing WSS throughout Bosnia and Herzegovina should be strengthened to become sustainable and to be able to offer long-term support to women victims of sexual violence. This includes regular planning and allocation of financial resources at all levels in Bosnia and Herzegovina to strengthen WSS capacities (including additional staff members and access to regular professional training) and to establish rape crisis centres and sexual violence referral centres in all regions across the country. Parallel with the process of establishing support services exclusively for victims of sexual violence, referral mechanisms should be developed and/or updated to be able to provide efficient, timely, and sensitive support to victims. These mechanisms should include the obligation of all stakeholders (public institutions and WSS) to inform victims of sexual violence about their rights and available support so they can get support without any difficulties, regardless of their status or residence.

Executive Summary for Kosovo



Introduction

The prevalence of gender-based violence remains alarmingly high in Kosovo. In the past decade, there has been an increase in the reported numbers of femicide.¹⁶ Furthermore, in 2015, 68% of women reported experiencing some form of violence in their lifetime. In 2017 there were 1,299 cases of domestic violence reported to the police. Rape, sexual assault and other forms of gender-based violence continue to be underreported, and it is estimated that 64% of women in Kosovo have been sexually harassed in their lifetime.¹⁷

The legal system in Kosovo prohibits direct or indirect discrimination based on one's sexual orientation and gender identity in employment, healthcare and education. Furthermore, the new Criminal Code, which entered into force in January 2019, includes the definition of domestic violence and marks it as a separate criminal offence, in accordance with the standards of the Istanbul Convention.

Kosovo has Standard Operating Procedures to assist victims of domestic violence and victims of trafficking, but Kosovo does not yet have Standard Operating Procedures exclusively designed for sexual violence victims. Therefore, the services offered to these victims do not offer a coordinated approach when it comes to offering an adequate support.

Sexual violence (and more precisely rape) is still seen as a taboo topic of discussion in Kosovo. Sexual violence crimes remain highly under-

reported due to factors such as fear of stigma, victim blaming attitudes both in society but also from service providers, fear of revenge from the perpetrator, and others. Cases of sexual harassment, especially involving young women at their workplace, remain unreported due to fears of losing their job. A recently published report by Kosovo Women's Network highlights that an estimated 48,5% of Kosovars have experienced some form of sexual harassment¹⁸ in their lifetime. The concept of sexual violence between partners is included in national legislation but is not clearly defined, leading to violence remaining taboo and unreported.

Methodology

The external experts involved in this assessment conducted **26 interviews**, including with the most relevant state institutions working in the field of sexual violence and women's NGOs. Special attention was given to shelters for victims of domestic violence, child abuse, and human trafficking as they remain the only safe places to accommodate the needs of victims of sexual violence. All interviews were conducted in August 2019.

Types of violence considered sexual violence

All respondents recognized rape, sexual assault, and sexual harassment, human trafficking for sexual purposes/sex trafficking, incest, child sexual abuse, sexting/sexual cyber violence and

16 See for example <https://www.koha.net/arberi/74567/rasti-i-vdekjes-se-antigona-morines-tri-ditepas-marteses-skishte-shkuar-fare-ne-apel> ; <https://www.koha.net/kronike/119602/aktakuze-per-vrasesin-ebashkeshortes-dhe-vajzes-ne-gjakove/>

17 Civil Society for Human Rights Website, Tracking Mechanism, Website Accessed in August 2018, at: <http://www.cshr-ks.org/en/kosovo-police/?v=2017&id=1> Kosovo Women's Network, Sexual Harassment in Kosovo, 2016, at: <https://womensnetwork.org/publications/sexual-harassment-in-kosovo/>

18 Kosovo Women's Network report "Sexual Harassment in Kosovo," 2016, pg. 8–10

pornography (including revenge porn) as forms of sexual violence. Stripping was considered sexual violence by five respondents only if performed by girls under 18 years old.

Support services exclusively supporting victims of sexual violence

There are no rape crisis centres or sexual referral centres in Kosovo. There is one Medical Forensic Institute operational in Pristina, available to examine victims of sexual violence, running in accordance with international human rights standards. However, this institute is the only one of its kind in the whole country; victims from outside Pristina must be transferred here, causing delays when it comes to immediate examination.

The respondents coming from state institutions (around 20% of the interviewees) maintained that there are support services exclusively supporting victims of sexual violence, identifying the helpline for domestic violence as “enough” to also support victims of sexual violence. Furthermore, they were not aware of any rape crisis centres or referrals exclusively for victims of sexual violence and considered the shelters for domestic violence victims and child abuse as enough to cover this type of support.

NGO representatives, the municipal gender service for shelter providers, and the local gender expert interviewed did not have any knowledge of services exclusively supporting victims of sexual violence.

When asked to identify the support services for victims of sexual violence, respondents identified state institutions such as the police, prosecution, social workers, victim advocates, NGOs running the shelters and health care services. Respondents highlighted that there are no NGOs involved in offering specialized support to victims of sexual violence.

Shelter providers have identified the lack of funding as the main problem in further supporting victims of sexual violence, and almost 20% of respondents mentioned that there is no long-term support offered for victims of sexual violence.

Women’s specialist support services supporting victims of sexual violence

Most respondents were not sure what these services are, some of them replying that there are no such services in Kosovo. Other respondents identified the shelters for domestic violence and child abuse as being equipped to support victims of sexual violence. The state supports these shelters with 50% of the funding, but this is not enough to run a sustainable service and shelters are often obliged to find other means of funding (such as international donors).

When asked if the support is offered on a short-term or long-term basis, respondents could only mention the support offered to victims of domestic violence (typically six months, but up to three years, depending on the case).

Geographical coverage of sexual violence support services

Sexual violence services are located in all regions, according to state institution respondents, except for the Medical Forensic Institution in Pristina. The rest of the respondents think that shelters, including forensic examination, should be available in all regions of Kosovo.

Cooperation and referral pathways between WSS and state institutions/ services

State institution respondents acknowledged that they refer victims of violence to shelters when victims are in need of a safe space.

Recommendations

When it comes to Standard Operating Procedures, it is necessary to define the roles and responsibilities of each institution involved in supporting victims of sexual violence. The lack of such standards often leads to delays in both forensic examinations and adequate access to justice.

As Kosovo lacks any services dealing exclusively with victims of sexual violence, an exclusive sexual violence helpline should be established, not only to serve as a system for reporting sexual violence cases, but also to provide relevant information about this type of violence. Furthermore, it is vital for Kosovo to establish rape crisis centres and sexual referral centres. Establishment of these centres is very much needed to streamline the forensic response to victims of sexual violence, raise awareness, and conduct long-term advocacy campaigns.

There is an urgent need for capacity building and specialized trainings for all relevant stakeholders involved in supporting victims of sexual violence. Furthermore, the establishment of so-called “friendly rooms” in police stations is a prerequisite for victims of sexual violence in order to feel safe and empowered to report the violence. Capacity building of NGOs, especially women’s NGOs, is another important element that the state should focus on.

Awareness raising campaigns on the importance of reporting sexual violence and harassment cases, as well as for state institutions to promptly react to such crimes, are needed in Kosovo.

Appropriate funding to establish sustainable specialized centres for victims of sexual violence and specifically for women’s NGOs, who are already involved in supporting victims of violence, should be allocated by the Kosovar state.

Executive Summary for Montenegro



Introduction

Montenegro is in the process of stabilizing and joining the European Union, and since Montenegro's Stabilization and Association Agreement with the EU entered into force in 2012, the country has ratified important human rights legislation, including the Istanbul Convention.

Under Montenegro's national legislation on sexual violence, rape is defined in Article 204 of the Criminal Code. Article 205 and 206 criminalise rape of a helpless person as well as child rape. However, Article 204 of the Criminal Code remains problematic, requiring the proof of the use of force or threat instead of placing the emphasis on victim's consent, as is stipulated by Article 36 of the Istanbul Convention.

Montenegro does not provide any specific institutional support for victims of sexual violence. Women's NGOs provide specialized assistance and support services for victims of violence in general, and specific limited support to victims of sexual violence. Even though cooperation between women's NGOs and state institutions does exist, it is very much limited to acts of domestic violence.

Methodology

The data for the present research was collected through the questionnaire prepared by the CSSP platform, and was further distributed to local security centres, centres for social work, health care centres, judiciary, women's NGOs, prosecutors' offices and the media (e.g., journalists working in the human rights field). A total of **22 responses** were received between August and September 2019. The interviewees were selected from the northern, central, and southern regions of Montenegro. The vast majority of participants interviewed are from Niksic and Podgorica, as these

two cities house more than half of the Montenegrin population.

Types of violence considered sexual violence

All respondents to the questionnaire identified the following forms of sexual violence: rape, sexual assault, sexual harassment, incest and child sexual abuse. When it comes to human trafficking for sexual purposes, only one respondent did not recognize this form as sexual violence. Opinions were also divided when it came to sex as self-destructive behaviour; only half of the respondents recognized this as a form of sexual violence. Prostitution was not recognized as a form of sexual violence by roughly 16% of the participants, with one participant noting that this depended on if women engaged in prostitution on voluntary basis. Sexting was perceived by almost all respondents as a form of sexual violence, while one respondent highlighted that sexting can only be considered a form of sexual violence if it involves abuse. Stripping was perceived by 60% of the respondents as a form of sexual violence, while one respondent highlighted that stripping can be perceived as a sexual violence form when minors are involved, as minors may not be aware of the consequences of their actions. Other forms of sexual violence identified by the participants were: child marriage, female genital mutilation, or degrading sex.

Marital rape was also recognized as a particular form of sexual violence. This is due to the fact that marital rape is not legally defined in the Montenegrin Criminal code. Marital rape is still perceived as a taboo topic among the Montenegrin society, and representatives of national institutions highlighted that in all reports filed for domestic violence, there were no acts of sexual violence reported.

Support services exclusively supporting victims of sexual violence

When asked if any support services exclusively supporting victims of sexual violence exist in Montenegro, **60% of the participants stated that there are no support services exclusively supporting victims of sexual violence.** Respondents from national institutions reported that they do not have any specialized staff to support victims of sexual violence. Furthermore, it was noted that Montenegro lacks specialized professionals who can recognize this type of violence, and there are no opportunities for current staff to attend this type of trainings, as these trainings are expensive and cannot be offered without the support of international donors.

40% of the participants recognized the role that women's NGOs play in supporting victims of sexual violence. One example is the **Montenegrin Women's Lobby, which established a support line for survivors of sexual violence.**

Women's specialist support services supporting victims of sexual violence

As mentioned above, **Montenegrin Women's Lobby established a support line for survivors of sexual violence.** Montenegrin Women's Lobby is a women's NGOs that has been active for several decades in Montenegro, mainly focusing on providing assistance to survivors of trafficking. There is some information regarding the functioning of the support line; most respondents indicated that they were aware of the existence of the line but did not know what kind of assistance this line is providing. The line is not a long-term support service but rather a pilot project that faces many funding challenges. The funding comes from international donors and is currently available until May 2020. The line was opened in June 2019 and is licensed for six years to operate as a specialized help and support service in all regions in Montenegro, in accordance with the Law on Child and Social Protection. The service is available 24 hours a day, including on weekends and public holidays. The services they provide are related

to survivors' empowerment, referral information, and expert assistance from a lawyer and a psychologist. The SOS line received a total of 36 calls in the first two months, out of which three reports were further filed: two for sexual harassment and one for incest.

Moreover, all respondents agreed that women's support services do offer services to victims of sexual violence, particularly two women's NGOs: Safe Women's House in Podgorica and SOS Hotline for Women and Children Victims of Violence from Niksic. Women's support services funding mainly comes from foreign donors, as the state finances only a small percentage of their work. The dominant perception is that women's support services do not have the necessary capacities (in terms of staff, funding or adequate training) to provide assistance to victims of violence. This lack of trained staff is highlighted as a critical issue, as staff have limited knowledge about working with different types of trauma or offering long-term support to survivors of sexual violence.

Geographical coverage of sexual violence services

Even though resources are limited, women's NGOs strive to offer long-term support and provide assistance for victims of violence in all regions in Montenegro.

Cooperation and referral pathways between WSS and state institutions/ services

Three quarters of the respondents recognized that cooperation does exist between state institutions and women's support services. However, women's NGOs highlighted that, although cooperation does exist, there is still a lack of trust when it comes to their expertise.

The survey did not identify the existence of any formal referral pathways. However, all respondents mentioned the "Protocol on the Treatment and Prevention of Violence against Women and

Domestic Violence,” a document that establishes formal channels of referral from state institutions to women’s NGOs.

Recommendations

The present analysis identified that most of the forms of sexual violence recognized by the participants are those that are most frequently reported and prosecuted. In order to recognize and prosecute all types of sexual violence, it is necessary to improve the level of knowledge among professionals and the wider public. Respondents stated that additional attention should be paid to identifying and prosecuting sexual violence in marriage and between intimate partners, as well as sexual violence against girls from the Roma and Egyptian communities, who are victims of early and forced marriages.

The research shows that in Montenegro there is only one specialized service for women and children survivors of sexual violence. An SOS line was established two months ago, and it is necessary to further improve its capacities. It is necessary to ensure national funding for the long-term funding of services, rather than relying on project funding from foreign donors.

It is necessary to ensure specialized training for the staff who will further support victims of sexual violence. Furthermore, in accordance with the Istanbul Convention, the State is obligated to establish additional specialized help and support services, primarily centres for rape survivors.

For the existing WSS dealing with the protection of women survivors of violence and domestic violence, it is necessary to ensure specialized trainings for working with women and children survivors of sexual violence.

The analysis did not identify the rules and procedures for cooperation and joint actions between national institutions and women’s support services when it comes to sexual violence cases, so their development is necessary in the coming period.

Executive Summary for the Republic of North Macedonia



Introduction

According to the OSCE-led survey on violence against women, “Well-being and safety of women,”¹⁹ sexual violence is both one of the most common forms of violence against women in North Macedonia, and one of the least reported ones. 14% of the women interviewed were victims of physical or sexual violence by the age of 15; 30% of the women were harassed by the age of 15; and 10% were harassed in the past 12 months. Although the numbers presented in the study might suggest a low prevalence rate of sexual violence in North Macedonia in comparison to other countries, it is important to note that the number of women who still believe domestic violence is a private matter that should be addressed in the family is three times higher than in other countries. Almost one in ten women have been victims of physical violence from a partner, and 44% have been victims of psychological violence. Some forms of physical violence, such as slapping, and sexual violence in intimate relationships are still considered normal by society, and psychological violence is not seen as violence at all.

National legislation only partially covers some forms of sexual violence. Rape and forced prostitution are recognized as criminal offences. Rape is criminalized in Article 186 of the Criminal Code, which forbids coercion to intercourse or other sexual acts, and acts that include both the use of force and threat, as well as threat of harming the honour and reputation of the victim or another close person. In this case, prosecution is ex-officio, regardless of the relationship between the victim and the perpetrator. Other forms of rape are also criminalized, more precisely the rape of a helpless person (Article 187), and rape by abusing one’s position (Article 189).

Prostitution is criminalized in Article 191 of the Criminal Code, specifically defined as the act of forcing a person to provide sexual services; acts of engaging voluntarily in any prostitution acts are also criminalized. Other types of violence, such as sexual abuse, are not clearly defined and are left to the interpretation of the criminal courts and prosecutors.

The Republic of North Macedonia ratified the Istanbul Convention in December 2017 and further developed the National Action Plan for the implementation of the Convention, which was adopted by the national government in October 2018.

Since the ratification of the Istanbul Convention, there have been three National Action Plans in place for North Macedonia that include the issue of sexual violence. The National Action Plan for the Implementation of the Istanbul Convention (2018 – 2023) foresees changes in the Criminal Code’s legal definition of rape and marital rape, as well as the criminalization of sexual harassment as a form of gender-based violence. The National Action Plan on Gender Equality (2018–2020) includes activities on raising awareness and improving the level of knowledge among professionals when it comes to sexual violence, as well as establishing accessible support services for victims of gender-based violence. The third Action Plan on Sexual and Reproductive Health (2018–2023), has a separate section on gender-based violence, where planned activities include: the development of standard procedures for inter-sectorial cooperation and coordination and referral for victims of sexual violence, trainings for health care professionals, development of procedures for treatment of sexual violence victims, and the adoption of medical guidelines when working with victims of sexual violence.

19 <https://www.osce.org/secretariat/413237?download=true>

Methodology

Five interviews were conducted over the phone with different stakeholders from women’s NGOs, other NGOs, the Ministry of Health, and the Ministry of Labour and Social Policy. Additionally, a desk review was conducted to highlight existing legislation on sexual violence, examine the actual context in North Macedonia after the ratification of the Istanbul Convention, and produce statistics to showcase the prevalence of sexual violence in the country.

Types of violence considered sexual violence

Rape, sexual assault, sexual harassment, human trafficking, incest, child abuse, and sexting/sexual cyber violence are recognized as forms of sexual violence, but there are not enough organizations at a national level working on these issues or raising awareness about the different forms of violence.

Support services exclusively supporting victims of sexual violence

In 2018, North Macedonia opened the first three referral centres for victims of rape in Skopje, Tetovo, and Kumanovo. These centres are part of the gynaecological-obstetric clinics in these three cities and are run by the Ministry of Health. These centres are referral centres, meaning that when a victim of rape is admitted, medical care is provided, and the case will be reported to the police. If there is no medical indication of serious

injuries after the initial examination, the victim must leave the centre. There is only one person employed for each of the centres, whose main task is to call health care professionals to examine the victim and to report the case to the police and the Centres for Social Welfare. Doctors and gynaecologists are trained to provide health care and support for the victims. Standard operating procedures for providing comprehensive multi sectoral response in referral centres for victims of rape were developed when the centres were established, but these procedures are not in compliance with internal police protocols and criminal procedure protocols. In short, when a victim of rape comes to the centre, she will receive healthcare, but forensic evidence will be collected only if the victim wants to report the case to the police.

These three referral centres are the only ones at a national level exclusively designed to support women victims of rape. Unofficial statistics showed that only 6 women visited the centre in Skopje, and centres in Kumanovo and Tetovo have had no reports since their establishment. This is likely because there is no public awareness about the type of support these services provide, nor any national campaigns about the different forms of sexual violence that women might experience.

There are no centres in the Republic of North Macedonia that provide temporary accommodation for victims of sexual violence.

The following table offers an overview of the existing support services for victims of sexual violence in North Macedonia:

Type of service	Council of Europe minimum standards	Situation in North Macedonia	What is lacking in North Macedonia
Sexual violence referral centres	Minimum 1 per 200.000 women	3 Referral centres for victims of rape	Minimum of 5 sexual violence referral centres
Shelters for victims of sexual violence	Minimum 1 per 400.000 women	Only 1 exists	Minimum of 2 shelters for victims of sexual violence
Counseling centres (crisis intervention, psychological counseling, free legal aid)	Minimum 1 per 50.000 women	1 counselling centre* and 5 centres for free legal aid * This service is provided within the shelter for victims of trafficking.	Minimum 20 counseling centers

Women's specialist support services supporting victims of sexual violence

In North Macedonia, there are a few organizations that work on the topic of sexual violence. The Open Gate Macedonia (La Strada) organization runs the shelter for victims of trafficking, and Health Education and Research Association (HERA), together with the Ministry of Health and with financial support from UNFPA, organizes trainings for health care professionals.

Respondents from the Ministry of Labour and Social Policy highlighted that in cases where sexual violence happens between family members, victims of sexual violence can make use of domestic violence services. This means that women victims of sexual violence can be accommodated in one of the five existing shelters for victims of domestic violence.

There is one centre in North Macedonia that provides long-term accommodation for victims of sexual violence and psycho-social support, but this shelter also accommodates victims of trafficking. This shelter has a capacity of 10 beds. The centre is run by Open Gate Macedonia (La Strada), located in Skopje. The shelter is partially financed by the state, and other funds are secured by other donors.

Geographical coverage of sexual violence support services

Existing services for sexual violence victims are located in Skopje (one referral centre for victims of rape and a shelter for trafficking and sexual violence), Kumanovo and Tetovo (two referral centres for victims of rape are located in each city).

No other services for victims of different forms of sexual violence, including rape, exist in the country.

Cooperation and referral pathways between WSS and state institutions/services

As mentioned previously, the shelter for victims of trafficking and sexual violence, which is run by Open Gate Macedonia, is the only existing women's specialist service. They closely cooperate with all relevant institutions (Ministry of Labour and Social Policy and Ministry of Interior) and have developed internal protocols for cooperation and referrals that are not publicly accessible because this document is not officially adopted.

Recommendations

It is important that North Macedonia increases its efforts to support victims of sexual violence by establishing sufficient and accessible specialist support services for women and girls who are victims of sexual violence. In accordance with the minimum standards established in the Istanbul Convention, the Republic of North Macedonia needs to establish at least five more referral centres for victims of rape, two more shelters that provide long-term accommodation and at least 20 rape crisis centres that provide psycho-social and legal support. Furthermore, the state must promote the existence of these services, as well as disseminate information on the type of support these services provide.

Specialist support services must be run by women's NGOs and funded by national governments. Specific trainings for professionals working in these services should be organized on a regular basis such as trainings for police officers, social and health care workers at a local and national level.

National campaigns against different forms of sexual violence should be organized on a regular basis and using different means of communication, so that the information can also reach women living in rural areas and small cities. Additionally, all campaign materials should be produced in a way that takes into consideration the different needs of the population (for example, women living with different types of disabilities).

Executive Summary for the Republic of Serbia



Introduction

The legislation of the Republic of Serbia defines sexual violence and rape as only through the use of force and threat (Criminal Code, Article 178) and does not reflect the absence of consent, as required by Article 36 of the Istanbul Convention, despite ratifying it in October 2013. CEDAW Convention was ratified in 1981 by Yugoslavia, and is valid based on the Law on succession. Table 1 highlights the wide legal framework related to suppression of sexual violence and protection of victims in the Republic of Serbia. It is worth noting that all legislation relevant to sexual violence is gender-neutral. Finally, and despite significant legislative improvements, Serbian legislation still must be developed in order to be fully aligned with international treaties.²⁰ For example, new criminal punishments have been introduced in the Criminal Code for forms of violence such as stalking, forced marriage, female genital mutilation and sexual harassment; however, the legislation still lacks the introduction of the concept of consent, including within the definition of marital rape. Additionally, punishments must clearly showcase the willingness of the state to protect victims and prevent acts of sexual violence.

LAW	ARTICLES
The Constitution ²¹	Art 25 – guarantees the inviolability of physical and mental integrity
Criminal Code ²²	Articles from 178 to 185 – defining criminal acts against sexual freedom
Family Law ²³	Art 197 – defines violence in the family including forcing sexual intercourse and/or persuasion to sexual intercourse a minor under 14 years of age or a person with a disability
The Law on Prevention of Domestic Violence ²⁴	Art 3 – includes sexual violence as a form of domestic violence
Labour law ²⁵	Art 21 – prohibits sexual harassment at the workplace or in the process of employment

Table 1. – Legal framework related to suppression of sexual violence and protection of victims in the Republic of Serbia²⁶

There is no official data collection on various forms of violence against women, including sexual violence, in the Republic of Serbia. However, Table 2 highlights information on the prevalence of sexual violence, as presented in the 2019 OSCE-led survey on VAW, "Wellbeing and Safety of Women". According to this research, 5% of women have experienced sexual violence with their intimate partners, while two in five women surveyed disclosed that they have experienced sexual violence since the age of 15.

20 Drobnjak et al., (2017) http://preugovor.org/upload/document/ostvareni_napredak_i_nedostaci_krvinopravnog_sist.pdf

21 Available at: <http://www.ustavni.sud.rs/page/view/139-100028/ustav-republike-srbije>

22 Available at: https://www.paragraf.rs/propisi/krivicni_zakonik.html

23 Available at: <https://www.minrzs.gov.rs/files/doc/porodica/Porodicni%20zakon.pdf>

24 Available at: https://www.paragraf.rs/propisi/porodicni_zakon.html

25 Available at: https://www.paragraf.rs/propisi/zakon_o_radu.html

26 Analysis of Serbian legislation related to suppression of sexual violence is provided with the courtesy of Ms. Jasna Kolaković Smiljanić, *pro bono* lawyer for SOS service Kraljevo

FORM OF SEXUAL VIOLENCE	PERCENTAGE	EXPLANATION
IPV (physical or sexual)	17%	One in six women surveyed who has ever had a partner say they have experienced physical and/or sexual violence at the hands of an intimate partner.
IP sexual violence	5%	Women who were surveyed and who have, or have had, an intimate partner say they have experienced sexual violence in intimate partner relationships.
Non-partner GBV (physical or sexual)	9%	Almost one in ten women surveyed say they have experienced physical and/or sexual violence at the hands of a non-partner since the age of 15.
Sexual harassment	42%	Two in five women surveyed say they have experienced sexual harassment since the age of 15.

Table 2. – Prevalence of sexual violence against women in Serbia²⁷

Support services exclusively supporting victims of sexual violence

Methodology

For the purpose of this report, the collection of data was conducted in three parts: desk research, structured interviews with **eight participants**, and a case study, presented as a good practice example.

Types of violence considered sexual violence

All eight interviewees found rape, sexual assault, sexual harassment, human trafficking, incest, prostitution, sexting/sexual cyber violence, and pornography (including revenge porn) to be forms of sexual violence. Stripping, however, was only perceived by 37% of the respondents as a form of sexual violence, and 25% of the participants did not recognize sex as self-destructive behaviour as a form of sexual violence. Two participants further highlighted other forms of sexual violence (also included in Serbian legislation), such as: rape of children and disabled people, rape by abusing one's work/office position, illegal sexual acts, exploitation of minors for pornography purposes, stalking and sending explicit sexual content to minors via mobile phone.

In accordance with Article 25 of the Istanbul Convention, the Republic of Serbia is required to set up and provide support services for survivors of sexual violence, as well as crisis centres that offer adequate medical examinations and counselling. In the state report submitted to GREVIO by the Republic of Serbia in 2018, it was reported that there are “no special services for victims of sexual violence” and no established procedures for treatment of victims of rape in the Republic of Serbia.²⁸ Moreover, services for survivors of sexual violence are not permanently provided nor funded from public budgets.

Nevertheless, the crisis and support pilot centres, Centres for Victims of Sexual Violence (CVSV), have been established in seven districts of the Autonomous Province of Vojvodina (North of Serbia), as part of the project “Stop-Care-Cure”, run by the Provincial Secretariat of Health Care in partnership with women's NGO Centre for Support of Women Kikinda.²⁹ CVSVs are specialized in providing immediate medical care, high-quality forensic practices, and intervention in situations of crisis. In these centres, victims receive services such as medical aid, legal counselling, psychosocial support and psychotherapy. This project ran from 2016–2019, funded by the UN Trust Fund to end Violence

²⁷ OSCE-led survey on violence against women, (2019) Available at: <https://www.osce.org/secretariat/413237>

²⁸ Official Report of the Republic of Serbia submitted to GREVIO Committee (July 2018), pp. 37, Available at: <https://rm.coe.int/state-report-serbia/pdfa/168094afec>

²⁹ More information about the project is available at: <http://projekti.zdravstvo.vojvodina.gov.rs/o-projektu/>

against Women, and represents a good practice example for creating short-term or long-term sexual violence crisis centres.³⁰ These services are currently functioning in Kikinda, Zrenjanin and Novi Sad. They are provided in facilities within two general hospitals and one clinic,³¹ and their number was reduced from seven CVSs to three after the end of the project in 2019.

Apart from the CVSs mentioned above, no other support services that exclusively support victims of violence have been identified in the Republic of Serbia.

All research participants have identified health care services, women's NGOs and state institutions as the main service providers for victims of sexual violence in Serbia. When referring to the adequate capacities and resources in providing these services, most respondents have identified women's NGOs funding as limited and insufficient. Generally, the funding for specialized services for sexual violence survivors has been identified as inadequate when it comes to long-term support. Furthermore, Serbia lacks training in capacity building, expertise and applying a victim-centred approach when working with victims of sexual violence.

Women's specialist support services supporting victims of sexual violence

All interview respondents have identified women's support services as the prime service providers for victims of sexual violence. There are currently 24 women's specialist support services in Serbia³², out of which only six have obtained a state licence to run a SOS helpline. All respondents note that even though women's support

services offer support to all victims of gender-based violence, no women's support services have been identified that only support victims of sexual violence. Furthermore, all interviewed stakeholders agreed that sexual violence is never isolated from other types of gender-based violence; in their view, this holistic way of providing services should be further maintained.

Geographical coverage of sexual violence support services

The research identified active sexual violence services in three cities in the Vojvodina region. However, as noted by some of the answers, services available to all victims of violence are also considered as services available to sexual violence survivors. Hence, a small number of cities and most regions in Serbia have also been identified as locations for specialized support services.

Cooperation and referral pathways between women's support services and state institutions/services

The multiagency approach is a concept recognized in Serbia since 2013, as part of the integrated response to violence against women.³³ The Law on Prevention of Domestic Violence mandates cooperation among state institutions in order to tackle violence against women, but cooperation with women's support services is optional and is left to the discretion of each local community. In practice, women's support services are not integrated into the work of the coordination and cooperation group (law enforcement, police, prosecutors' office, and centres for social work).

30 External evaluation project report is available at: https://www2.unwomen.org/-/media/field%20office%20unf/publications/2019/final%20evaluations/provincial%20secretariat%20-%20serbia%20-%20final%20evaluation%20report_stop-care-cure_secons_pdf-compressed.pdf?la=en&vs=2049

31 Clinical Centre of Vojvodina, Gynaecology and Obstetrics Clinic

32 The list is available at the official website of Women Against Violence Network in Serbia: <https://www.zeneprotivnasilja.net/en/about-us/list-of-ngos>

33 General and Special Protocols for Action and Cooperation of Institutions, Bodies and Organizations in the Situations of Violence against Women within the Family and in Intimate Partner Relationship. Available at: https://www.undp.org/content/dam/serbia/Publications%20and%20reports/English/UNDP_SRB_Multisectoral_Cooperation_-_Institutional_Response_to_Violence_against_Women.pdf

Cooperation between women's support services and public institutions is poor. Respondents believe that this is due to state institutions failing to treat NGOs as equal partners, variations in practice from one community to another, and the willingness of the individual representing the public authority.

When it comes to referral mechanisms, the Law on Prevention of Domestic Violence establishes the rule that beneficiaries must be informed about the availability of all existing services. In practice, this is lacking, and no specific referral mechanisms are established in this regard.

Recommendations

It can be concluded that the different forms of sexual violence are well understood by stakeholders, including NGOs, police, public prosecutors, medical staff, and other public administration representatives. However, the analysis shows that service providers do not apply a victim centred approach when working with victims of sexual violence, and lack the capacity to deal with their specific needs. Moreover, the distinction between specialized support services for SV survivors and general services traditionally provided by the state does not exist. Therefore, further awareness-raising and training of relevant service providers and public administration representatives should be provided in accordance with the Istanbul Convention standards.

The CVSVs currently functioning in the Autonomous Province of Vojvodina can be used as good practice examples to further establish specific services for victims of sexual violence throughout the country. Service providers' capacity building in other parts of Serbia must be directed to the establishment of future "appropriate, easily accessible rape crisis or sexual violence referral centres". Availability and accessibility of CVSVs must also be adapted to suit the needs of marginalized groups of women.

All future endeavours towards setting up CVSVs in other parts of Serbia must be acknowledged by both sectors (public authorities and NGOs) and must involve all actors in the process, as part of a multidisciplinary approach. Additionally, referral pathways must be standardized with internal institutional regulations and procedures, their implementation should be monitored, and they should be facilitated with women's NGOs when required.

It is of the utmost importance that sexual violence services receive at least 60% funding from public budgets (at local, provincial, and national levels). Advocacy actions should target national institutions to implement gender responsive budgeting.

Executive Summary for Turkey



Introduction

In Turkey, sexual violence is discussed under the broader topic of violence against women; consequently, specialized mechanisms working on this issue do not exist. According to the Research on Domestic Violence against Women in Turkey conducted in 2014, 12% of married women have been exposed to sexual violence and 38% have experienced physical and/or sexual violence.³⁴

Turkey has made important improvements at a legal level and has implemented multiple policies on VAW, by signing and ratifying international documents such as the Istanbul Convention. However, despite being the first country to sign this convention, Turkey has not shown the same drive when it comes to the implementation of the Convention.

Turkey does not have any comprehensive services in place to offer support for victims of sexual violence; however, there are some mechanisms established to support sexual violence victims. The institutions providing these services are the following:

- **Judicial institutions** (the Domestic Violence Crime Investigation Bureau, and the Bureau for Crimes against Sexual Immunity and Discrimination)
- **Medical institutions** (Child Monitoring Centres and hospitals)
- Under the **Ministry of Family, Labour and Social Services** (violence and prevention monitoring centres, women's shelters, and the 'ALO 183' helpline)

- **Law enforcement agencies** (police and gendarmerie stations, departments of combating DV and VAW, sections on combating DV and violence against children, gendarmerie and police emergency hotlines)
- Under **municipalities**
- **Bar associations** (legal aid offices, women's counselling centres)
- **Universities** (support units against sexual abuse and assault³⁵)
- **NGOs** (women's NGOs)

According to the GREVIO Baseline Evaluation Report for Turkey, Turkish authorities must set up sufficient numbers of rape crisis and/or sexual violence referral centres, given that one such centre should be available per every 200.000 inhabitants, and that their geographic distribution should make them accessible to victims in rural areas as well as in cities. Furthermore, these centres should provide short-term support, forensic examination and medical care, as well as long-term counselling and support. Turkey should further develop and enhance the capacities of Child Monitoring Centres to provide support to child victims of sexual violence and forced marriage and ensure the cases of underage and possibly forced marriage are detected by health care personnel.

Methodology

A desk review on existing services related to sexual violence was conducted, primarily on which

34 http://www.hips.hacettepe.edu.tr/siddet2014/rapor/english_main_report.pdf

35 These units are present in 16 universities. In some of the universities they were established with the purpose of changing the academic culture and support and inform those exposed to sexual abuse.

institutions provide services in the country, and whether sexual violence is covered in the national legislation. The Baseline Evaluation Report for Turkey was also included. There were also **seven interviews** conducted with respondents from municipalities, women's NGOs and universities. It was not possible to conduct further interviews since the assessment period coincided with summer and religious holidays in Turkey, and staff and representatives of public institutions were mostly on annual leave. Furthermore, it is important to highlight that government's increasing distance from women's organizations working from a feminist perspective negatively impacts the communication and dialogue between public institutions and women's NGOs. All seven interviewees were women.

Types of violence considered sexual violence

Rape, sexual assault, sexual harassment, incest and child sexual abuse were recognized as forms of sexual violence by all respondents. One interviewee from a women's NGO stated that they do not recognize consensual sexual relations between adult blood relatives as incest. Five interviewees stated that marital rape is the most common form of sexual violence they have encountered in their work.

Two interviewees recognized human trafficking for sexual purposes/sex trafficking as sexual violence, while five interviewees referred to sexting/sexual cyber violence as a form of sexual violence.

None of the interviewees recognized prostitution as a form of sexual violence, stating that prostitution is a form of sexual violence only if the woman is forced into this act. Stripping was also not recognized as a form of sexual violence.

Other forms of sexual violence mentioned by the interviewees were forcing women to work at

nightclubs, violence when dating, gaslighting³⁶ and forced BDSM.³⁷

Support services exclusively supporting victims of sexual violence

Five respondents noted that there are no specialized support services exclusively supporting women victims of sexual violence. However, there were other support services recognized, such as the Children Monitoring Centres and the Support Units against Sexual Abuse and Assault in universities.

All respondents recognized that existing services do not have the capacity to offer appropriate support to victims of sexual violence, due to lack of staff, lack of expertise and appropriate trainings, lack of equipment and lack of financial resources. All services provide short-term support.

Women's specialist support services supporting victims of sexual violence

All respondents stated that WSS support victims of sexual violence in Turkey. Four interviewees (two women's NGOs and two municipalities) stated that they provide psychological and legal counselling to victims of sexual violence. Women's NGOs also provide support related to social counselling, online counselling services, and healthcare support (units in the universities).

Women's support services are usually funded by foreign donors such as the EU or different UN bodies. Municipalities and one of the units in one university are self-funded.

Due to limited resources, staff positions are precarious, and women's NGOs must rely on the help they get from volunteers. Limited personnel and lack of appropriate training have been identified by most of the respondents as major problems in providing these services.

³⁶ Gaslighting is a form of psychological manipulation and harassment that makes the victim question her own perceptions, memory, mental health etc.

³⁷ Forcing into BDSM is forcing into unwanted sado-maso sexual acts.

Geographical coverage of sexual violence support services

Four respondents mentioned that even though they do not directly support victims of sexual violence, their services in the area of combating violence against women cover most of the regions.

Cooperation and referral pathways between WSS and state institutions/service

All answers show that there is an ongoing collaboration with several state institutions, regarding all forms of VAW.

Since there is no public institution providing services specifically on sexual violence other than the Child Monitoring Centres, there are no referral pathways identified in the field. Women victims of sexual violence are usually referred to support services for all types of VAW. Only one respondent (a women's NGO in Ankara) recognized the referrals from the Support Units Against Sexual Abuse and Assault in universities for their psychological and legal support.

Recommendations

Sexuality is still regarded as a taboo topic in Turkey, which makes it hard for crimes of sexual violence to be disclosed. Rape, sexual harassment, sexual assault, child sexual abuse, and incest are among the most common forms of sexual violence encountered in Turkey.

As the interviewees have stated, all parties working in this field need to increase their capacity of human resources, expertise, training, and financial resources. These deficiencies should be targeted by the government by preparing unified programs and granting the necessary financial resources in order to eliminate the deficiencies in the system. Most of the work of women's NGOs and other NGOs in this field are carried on via the work of their volunteers. These NGOs, who are experienced in the field and possess the necessary knowledge and expertise, should also be supported by the government. The government should urgently fulfil its responsibility to effectively implement national action plans on combating VAW in Turkey and other national and international conventions, most importantly, the Istanbul Convention.

Conclusion

This executive summary depicts the situation of the existing or non-existing services exclusively supporting victims of sexual violence in Albania, Bosnia and Herzegovina, Kosovo, Montenegro, North Macedonia, Serbia and Turkey.

A range of interviews were conducted in the seven countries, along with desk research to determine the number of sexual violence services, how these services function, their capacity to run these services, and lastly if there was any cooperation between different stakeholders supporting victims of sexual violence.

Firstly, understandings on sexual violence were perceived differently in all interviewed countries and among stakeholders. Some of the respondents (Bosnia and Herzegovina, Montenegro, Serbia or Turkey) did not consider prostitution or stripping as forms of sexual violence. Most of the respondents did recognize rape, child sexual abuse, sexual harassment and incest as forms of sexual violence. The questionnaires clearly demonstrate that there are many different opinions and approaches to sexual violence among the seven countries. This is true at both the European level and at country level, which makes it challenging to effectively determine categories of sexual violence on a regional level that can be inclusive of all countries. According to the Explanatory Report of the Istanbul Convention, the most important element in establishing if an offence is a form of sexual violence is to determine if the sexual acts which are performed on another person are without her or his freely given consent, and if they are carried out intentionally.

Only three countries (Albania, North Macedonia and Serbia) out of seven have established specific services supporting victims of sexual violence, while four countries (Bosnia and Herzegovina, Kosovo, Montenegro and Turkey) out of seven have some or no specific services established for victims of sexual violence.

The sexual violence services established in Albania, North Macedonia and Serbia are newly founded support services, and most of the respondents answering the questionnaires had no information about the existence of these type of services (see the case of the Lilium Centre in Albania). It is to be noted that the centres established in North Macedonia are referral crisis centres, meaning that after the victim is admitted and receives the appropriate medical care, her case is usually referred to the police. The services in these countries are either established by national governments, or by women's NGOs and national governments with the support of international donors (see the case of Serbia). However, many of these services only cover parts of the country's territories. Additionally, they lack sufficient funding to be able to offer long-term support, and staff lacks the necessary capacity to support victims of sexual violence. Most of the respondents' answers from the respective countries showcase that, even though these services do exist, there is little knowledge of them among state institutions, women's NGOs or the general public. Where such services do exist, service providers and state institutions need to engage in both awareness raising campaigns on the issue of sexual violence and the promotion of these services.

There is a clear absence of services exclusively supporting victims of sexual violence in Bosnia and Herzegovina and Kosovo. Victims of sexual violence are supported mainly by women's NGOs running domestic violence shelters, counselling centres or hotlines. This mapping identified two countries that have some sort of support services: Montenegro and Turkey. In Montenegro, there is one support line for survivors of sexual violence established by the women's NGO Montenegrin Women's Lobby. Most respondents from Montenegro were aware of the existence of the helpline but they were not sure what kind of support services the line provides. Turkey has the Children Monitoring Centres, which exclusively support children. The Support Units

against Sexual Abuse and Assault established in universities only offer limited support. These services are insufficient, and women's NGOs working with survivors of violence in general, are the ones who offer support to survivors of sexual violence.

Even though the majority of the respondents have not been able to identify support services exclusively supporting victims of sexual violence (even in countries where these services do exist), respondents have identified women's NGOs (working with survivors of violence or domestic violence in general) or other state institutions (such as hospitals, police stations, and social centres) as the main providers for these types of services. In many cases, respondents did not find it necessary to have specialized services for survivors of sexual violence (see the case of Kosovo).

It is necessary for national governments to recognize that the traumatic nature of sexual violence, requires, as the Explanatory Report of the IC notes, "a particularly sensitive response by trained and specialized staff."³⁸ Article 25 of the IC stresses that parties to the Convention should implement specialised support that offers immediate medical care and trauma support combined with immediate forensic examinations to collect the evidence needed for prosecution.

Furthermore, there is a need to establish specific centres that offer psychological counselling and therapy for victims of sexual violence. State parties are required to set up accessible rape crisis or sexual violence referral centres in sufficient numbers that can offer long-term support.

Although efforts from national governments to establish these services have been observed, these services are precarious and lack specific funding allocated to offer long-term support. Moreover, there is an increased need to supply capacity building and systematic training to all parties involved in supporting victims of sexual violence, including women's NGOs who exclusively support victims of sexual violence, women's NGOs working on violence against women in general, state institutions and other front-line professionals (police, doctors, and social workers). The failure of authorities and institutions to protect and support victims of sexual violence goes hand in hand with the challenges of 1) the lack of knowledge on sexual violence among institutions working with survivors and 2) victim blaming. Patriarchy, gender stereotypes and traditional values were also mentioned as significant obstacles to addressing sexual violence, along with stigma and the unwillingness of women to report violence.

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Mapping Questionnaire to identify sexual violence support services in the Western Balkans and Turkey

The purpose of the questionnaire is to map and provide an overview of the number of support services for victims of sexual violence currently available in: Albania, Bosnia and Herzegovina, Kosovo, North Macedonia, Montenegro, Serbia and Turkey. Furthermore, the questionnaire also assesses who provides these services, in which regions are these services provided, if governments and women's NGOs collaborate in the provision of these services and to identify any existing referral pathways and multi-agency cooperation between existing services and state agencies.

Consultants are requested to fill out the name & organisation of the interviewee, and to collect data from as many and as diverse sources as possible. Furthermore, data has to be as comprehensive as possible and consultants are asked to include all possible details.

	Interviewer	Interviewee	Country
Name			
Organisation			
Name			
Organisation			
Name			
Organisation			

1. What type of violence is considered (by interviewee) being sexual violence?

- Rape³⁹
- Sexual assault
- Sexual harassment⁴⁰
- Human trafficking for sexual purposes/sex trafficking
- Incest
- Child sexual abuse
- Sex as self-destructive behaviour
- Prostitution
- Sexting/Sexual cyber violence
- Pornography (including revenge porn)
- Stripping
- Other – please specify:

2. Are there any support services that exclusively support victims of sexual violence (e.g. national helpline, local helpline, rape crisis centres, referral centres, forensic examination facilities etc)?

- yes no

2.1. If yes, how many?

³⁹ Definition in accordance with Article 36 IC.

⁴⁰ Any form of unwanted verbal, non-verbal or physical conduct of a sexual nature (Article 40 IC).

<p>2.2. If yes, what kind of support services?</p> <p>.....</p>
<p>2.3. If yes, who provides these support services?</p> <p><input type="checkbox"/> State institutions</p> <p><input type="checkbox"/> Health care services</p> <p><input type="checkbox"/> Women's NGOs</p> <p><input type="checkbox"/> Other NGOs</p> <p><input type="checkbox"/> Other – please specify:</p> <p>.....</p>
<p>2.4. Do the above-mentioned support services have the necessary capacity (number of staff, funding sources, adequate training etc.) to provide these type of services? Please detail:</p> <p>.....</p> <p>.....</p>
<p>2.5. Are these services provided on a short-term basis or are they part of a long-term support system provided by the state? Please detail:</p> <p>.....</p> <p>.....</p>
<p>3. Do women's specialist support services (WSS) support victims of sexual violence in your country?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No – please, specify why:</p> <p>.....</p> <p><input type="checkbox"/> Not yet, but planning to – please specify how:</p> <p>.....</p> <p>.....</p>
<p>3.1. If, yes: how many services are currently provided? Please specify number:</p> <p>.....</p>
<p>3.2. If the answer is 'Yes' do they solely support victims of sexual violence or also support female victims affected by other types of VAW (e.g. DV)?</p> <p>.....</p>
<p>3.3. Sources of funding: If WSS provide support to victims of SV, where does the funding come from?</p> <p><input type="checkbox"/> National government</p> <p><input type="checkbox"/> Local government</p> <p><input type="checkbox"/> Foreign donors</p> <p><input type="checkbox"/> Other – please specify:</p> <p>.....</p> <p>.....</p>

<p>3.4. Do WSS have the necessary capacity (staff, funding, adequate training etc) to provide these types of services?</p> <p>.....</p> <p>.....</p>
<p>3.5. Are these services provided on a short-term basis or are they part of a long-term support system provided by WSS? Please detail:</p> <p>.....</p> <p>.....</p>
<p>4. Geographical coverage: are sexual violence services located in:</p> <ul style="list-style-type: none"> <input type="checkbox"/> All regions <input type="checkbox"/> Most regions (over 50%) <input type="checkbox"/> Just major cities <input type="checkbox"/> Capital city only <input type="checkbox"/> Other: <p>.....</p> <p>.....</p>
<p>5. Is there any collaboration between state institutions (e.g. police, healthcare services, local governments, other agencies etc.) and WSS when providing sexual violence services?</p> <p>.....</p> <p>.....</p>
<p>6. Are there referral pathways from state institutions/services to WSS providing sexual violence services?</p> <p>.....</p> <p>.....</p>
<p>7. Are there referral pathways from WSS providing sexual violence services to state institutions/ services?</p> <p>.....</p> <p>.....</p>
<p>8. Any other information:</p> <p>.....</p> <p>.....</p> <p>.....</p>



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