MAPPING SUPPORT SERVICES FOR VICTIMS OF VIOLENCE AGAINST WOMEN IN LINE WITH THE ISTANBUL CONVENTION STANDARDS

METHODOLOGY AND TOOLS





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Methodology and tools

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Strasbourg, November 2018

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CONTENTS

CONTENTS
BACKGROUND
GUIDELINES
Istanbul Convention requirements
What is support?
Specialist and general support services7
Forms of violence against women
Forms of provision
Types of support
PROPOSED METHODOLOGY
Roundtable 1: Specialist services11
Roundtable 2: General services
DATA TEMPLATES
1. Data template for specialised violence against women services
Integrated services on violence against women13
Shelters14
Non-residential domestic violence support services
Sexual violence support services17
Helplines
Other forms of violence against women 20
Other forms of service provision 20
2. Data template for specialist provisions within general services
Shelters within general housing services
Support for victims of sexual violence within social/health services
Other forms of provision
3. Data template for general services
Health services
Social services
Police
Other general services
Appendix: RELEVANT ARTICLES FROM THE ISTANBUL CONVENTION

BACKGROUND

A mapping methodology and tools were developed within the framework of the Council of Europe multi-country Project "Violence against Women" which focused on increasing the knowledge of professionals and facilitating exchanges and promising practices in the implementation of international and European standards, in particular the Council of Europe Convention on preventing and combating violence against women and domestic violence, known as the Istanbul Convention.

The original methodology and tools were developed between 2012 and 2014 in co-operation with UN Women. They have been used research projects to map support services for women victims of violence in several countries, including Albania, Bosnia and Herzegovina, Kosovo¹, Serbia, the former Yugoslav Republic of Macedonia and Turkey.

The original design was developed before the Istanbul Convention came into force, and with the specific aim of examining provision in a set of countries where services were less well developed. It was a research instrument rather than an aid to reporting against the Istanbul Convention. Increasingly GREVIO (Group of Experts on Action against Violence against Women and Domestic Violence monitoring the implementation of the Istanbul Convention) will be examining compliance among countries with more developed support services, and the shape of service provision has changed in many countries over the last decade. The tools need to reflect these variations.

This revision has been undertaken having regard to:

- four² published GREVIO reports;
- the feedback from country researchers using the previous version, including the need to make the distinction between specialist and general services clearer;
- shifts in the shape of support services in some member states, with some now being provided by larger organisations, encouragements to cover multiple forms of violence against women or in other cases a range of forms of 'family violence';
- a presumption that it should be the responsibility of a Ministry/state official to compile this data in reporting to GREVIO, whilst doing this in partnership with NGOs and other relevant stakeholders.

In addition, it was agreed that the key dimensions which need to be addressed are:

- > definitions of violence against women and domestic violence in line with the Istanbul Convention;
- the distinction between specialised and generic services;
- the forms of violence for which support is offered;
- the types of support available.

In the revised methodology there is less emphasis on multi-agency coordination than previously, and more on the extent to which there is training and resources for identification in generic services, since this is the route through which support might be accessed. Work with perpetrators has not been included as this is not a support service and is more appropriately reported on within the prevention sections of the Istanbul Convention.

The aim of the revised methodology and tools is to help member states to gather data and to prepare for the GREVIO monitoring process. However, they do not necessarily cover all the information GREVIO may request from member states or assess in its monitoring process. Whereas this methodology focuses only on protection and support for victims covered especially in Chapter IV, during the baseline evaluation process the state parties are requested to submit information covering the entirety of the Chapters.

^{1.} All references to Kosovo, whether the territory, institutions or population, in this text shall be understood in full compliance with United Nation's Security Council Resolution 1244 and without prejudice to the status of Kosovo.

^{2.} Albania, Austria, Denmark and Monaco

With the above in mind the 'package' of resources for this revised methodology comprises:

- > guidelines for the use of the tools, which include definitions of key terms and concepts;
- a suggested participatory methodology for gathering data on support services for victims of violence against women and domestic violence;
- three data templates addressing specific support sectors;
- > an appendix with relevant articles of the Istanbul Convention.

GUIDELINES

These guidelines support the tools for collating data on support services. They cover:

- the requirements of the Istanbul Convention;
- > an exploration of the meaning of support services and the different sectors they are located in;
- definitions of the forms of violence covered by the Istanbul Convention;
- the forms of provision and types of support that should be available under the terms of the Istanbul Convention.

The definitions are those used by the Council of Europe and should be the ones you use in reporting to GREVIO.

Istanbul Convention requirements

The Council of Europe Convention on preventing and combating violence against women and domestic violence, also known as the Istanbul Convention, was adopted by the Council of Europe Committee of Ministers on 7 April 2011. It entered into force on 1 August 2014.

It draws on the international recognition that violence against women is a form of gender-based violence that is committed against women because they are women (state parties may also apply the protective framework it creates to men, children and the elderly who are exposed to violence within the family or domestic unit). States are obliged to fully address all forms of violence against women, take measures to prevent it, protect its victims and prosecute the perpetrators.

While the ultimate aim of the Istanbul Convention is the prevention of violence, there are specific requirements to protect victims from further violence and offer support and assistance to overcome the impacts and rebuild their lives (See Appendix for relevant articles of the Istanbul Convention).

There is widespread recognition the best support services are delivered by specialist NGOs, often led and run by women, which are established to address the specific needs of victim-survivors.

That said, there can be specific violence against women provision within general services offered by public authorities such as social services, health services, legal aid and victim support. There is also a responsibility on public authorities to identify victim-survivors and refer them into support.

There are three questionnaires which enable you identify and report on these different layers of provision in your country in line with the provisions of the convention. These guidelines set out the definitions of the terms used in the questionnaires.

What is support?

The reference for what is support and support services is Article 18 of the Istanbul Convention and its explanatory report (paragraphs 111 to 123). These documents explicitly state that support for victims of violence against women (VAW) should be rooted in a 'gendered understanding' and focused on 'the human rights and safety of the victim'. Victims' human rights include dignity, privacy and bodily integrity. There are a number of further aims/principles for support, such as avoiding 'secondary victimisation' – this should include not blaming victims or making them feel responsible for what has happened to them. It should also be rooted in a 'culture of belief'.

Support should also aim at 'empowerment'. Violence takes away control over one's body and life, so support should give control back and enable victims to make their own decisions (what is sometimes called 'self-determination'). This can be decisions about, for example, whether to make a formal report or whether they want to see a female professional. It should also enable the achievement of 'economic independence'. The Istanbul Convention also notes that 'the specific needs of vulnerable persons, including child victims' must be addressed. The Convention is explicit about 'child witnesses' of all forms of violence against their mothers and the need to take into account their rights. There also needs to be recognition that girls as also victimised directly, inside and outside the household.

The overall aim of support is to 'facilitate recovery' – this recognises the harms of violence and the range of psychological and material impacts it may have. Counselling and advice needs to include, therefore, financial assistance, health care, housing, legal rights, and employment and training and other forms of social welfare provision. Staff need to be 'sensitive and knowledgeable' – unlikely without training and supervision.

Specialist agencies are expected to be widely available geographically and able to cover short-, medium- and long-term needs across all forms of violence (see below) and for all victims. These are challenging requirements, since the most developed services are for domestic violence, with support around other forms underdeveloped. 'All victims' requires thinking about the barriers to accessing support for some women – those with disabilities, from minority groups, older women, recent migrants, for example. Specialisation, therefore, can be about the forms of violence and/or the target groups which are currently underserved.

Specialist and general support services

The Istanbul Convention explicitly recognises the difference between 'general and specialist services' in Article 18. The explanatory report at paragraphs 119 and 125 provide clarification about this distinction.

General support services are universal services 'offered by public authorities such as social services, health services, employment services, which provide long-term help and are not exclusively designed for the benefit of victims only'.

Specialist support services are designed and provided to meet the needs of victims of specific forms of violence against women and are not open to the general public. While these may be services run or funded by government authorities, the large majority of specialist services are provided by NGOs. States are also expected to develop 'effective cooperation' both between state agencies and with the NGO specialist sector, recognising their unique contribution through funding and invitations to be part of assessing, adapting and extending existing support. The specialist sector is more likely to be 'holistic' in one of two ways – by covering all or a range of forms of violence against women and/or providing a range of support. General services are more likely to focus on one area of support – for example, health or employment.

Forms of violence against women

Many services claim to cover all forms of violence against women, but in reality they are primarily experts on domestic violence. It is important, here, to ensure that there is actual expertise to address each form of violence against women, as whilst they are connected they also have different dynamics and can result in diverse consequences. Few European countries have extensive provision on sexual violence, despite the European Union Fundamental Rights Agency Violence against Women study³ showing that sexual harassment is the most common form of violence against women. There may be few, if any specialist agencies focusing on FGM, forced marriage or honour-based violence. We need to identify the gaps accurately if the letter and spirit of the Istanbul Convention is to be met.

Below we offer the definitions of the forms of violence covered by the Istanbul Convention. These may not be how defined in national law and policy, but they are the definitions used by the Council of Europe. Although drafted in gender neutral language (with the exception of FGM, forced abortion and forced sterilisation) they are gendered in the understanding in that women and girls are disproportionately victims and men and boys are disproportionately the perpetrators.

Domestic violence means all acts of physical, sexual, psychological or economic violence that occur within the family or domestic unit or between former or current spouses or partners, whether or not the perpetrator shares or has shared the same residence with the victim (Article 3.b).

3. http://fra.europa.eu/en/publication/2014/violence-against-women-eu-wide-survey-main-results-report

Rape/sexual assault includes non-consensual vaginal, anal or oral penetration of a sexual nature of the body of another person with any bodily part or object; other non-consensual sexual acts or causing another person to engage in non-consensual acts of a sexual nature with a third person (Article 36).

Stalking is the intentional conduct of repeatedly engaging in threatening conduct directed at another person, causing them to fear their safety, such as repeatedly following another person, engaging in unwanted communication or letting another person know that they are being observed (Article 34).

Crimes in the name of 'honour' are any acts of violence or threat, including those covered by the Convention, where culture, custom, religion, tradition or so-called "honour" are used as a justification for such acts. This covers, in particular, claims that the victim has transgressed cultural, religious, social or traditional norms or customs of appropriate behaviour (Article 42).

Female Genital Mutilation (FGM) is defined as excising, infibulating or performing any other mutilation to the whole or any part of a woman's labia majora, labia minora or clitoris (Article 38).

Forced marriage is the intentional conduct of forcing an adult or a child to enter into a marriage. The term "forcing" refers to physical and psychological force where coercion or duress is employed (Article 37).

Sexual harassment means any unwanted verbal, non-verbal or physical conduct of a sexual nature with the purpose or effect of violating the dignity of a person, in particular when creating an intimidating, hostile, degrading, humiliating or offensive environment (Article 40).

Forced abortion is performing an abortion on a woman without her prior and informed consent; **Forced sterilisation** is performing surgery which has the purpose or effect of terminating a woman's capacity to naturally reproduce without her prior and informed consent or understanding of the procedure (Article 39).

Other Council of Europe instruments such as the Council of Europe Convention on Protection of Children against Sexual Exploitation and Sexual Abuse, known as Lanzarote Convention, or the Council of Europe Convention on Action against Trafficking on Human Beings introduce relevant gender-based definitions of additional forms of violence. Whilst these are not covered explicitly by the Istanbul Convention, state parties are encouraged to address these gender dimensions when reporting to their respective monitoring bodies. The following definitions are of relevance in this regard:

Trafficking of human beings is the recruitment, transportation, transfer, harbouring or receipt of persons by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability, or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labour or services, slavery or practices similar to slavery, servitude or the removal of organs (see Council of Europe Convention on Action against Trafficking in Human Beings, Article 4.a)

Childhood sexual abuse means engaging in sexual activities with a child below the legal age of consent, the use of coercion, force or threats, abuse of a recognised position of trust, authority or influence over the child, or abuse of a particularly vulnerable situation of the child (notably a disability or a situation of dependence) (see Lanzarote Convention, Article 18, para 1).

Forms of provision

The templates cover three types of provision: the forms of specialist services which are defined below, specialist services within general services, and general services. Specialist services within general services refer to workers/teams which provide support ONLY to victims of violence against women/domestic violence. Such specialist support may be developed by, for example, housing providers or within health settings, with staff employed or located there whose role is to provide support to victims of violence against women. Included here would be specialist shelters provided by larger housing providers, rather than NGOs, which are ONLY for victims of domestic violence.

The Istanbul Convention lists a set of specific forms of support which should be available, but there may be variations or other services which are not listed in the templates. The methodology tools offer the possibility of including other forms of support within several sections and towards the end. The forms of specialist support explicitly cited in the Istanbul Convention are: shelters; telephone helplines; sexual violence services; legal support; counselling centres; and support for child witnesses⁴.

Shelters should provide immediate, preferably around-the-clock, safe accommodation for victims, especially women and children, when they are no longer safe at home. Temporary housing alone or general shelters such as those for the homeless, are not sufficient. Specialised women's shelters are best equipped to address the multiple interlocking problems victims face, as they provide women and their children with support, enable them to cope with their traumatic experiences, leave violent relationships, regain their self-esteem and lay the foundations for an independent life of their own choosing. They also play a central role in networking, multi-agency co-operation and awareness-raising in their respective communities (Explanatory report accompanying the Istanbul Convention, para 133).

Paragraph 135 commends that there be shelters in every region, with one family place per 10 000 head of population, and that shelters are accessible to women with disabilities and migrant women.

Telephone helplines should have a widely advertised public number and provide support, crisis counselling and referral to face-to-face services, such as shelters, counselling centres or the police. Helplines should be state-wide, available around the clock, in relevant languages and free of charge (Explanatory report accompanying the Istanbul Convention, para 136).

Support for victims of sexual violence may take the form of a rape crisis centre or a sexual violence referral centre. Rape crisis centres typically offer long-term help such as face-to-face counselling, support groups and contact with other services. They also support victims during court proceedings by providing woman-to-woman advocacy and other practical help. Sexual violence referral centres may specialise in immediate medical care, high quality forensic practice and crisis intervention. They are sometimes established in a hospital setting to respond to recent sexual assault by carrying out medical checks and referring the victim to specialised community-based organisations for further services (Explanatory report accompanying the Istanbul Convention, paras 140–141).

The explanatory report also notes that one such centre should be available per every 200.000 inhabitants and that their geographic spread should make them accessible to victims in rural areas as much as in cities.

Support through the legal process involves victim organisations, specifically trained domestic violence counsellors or other types of support/advocacy services who may assist and support victims during investigations and judicial proceedings. This type of service is not of a legal, but a practical/psychological nature. It includes psychologically/ emotionally preparing victims to endure testifying in front of the accused, accompanying victims to court and/or assisting them in any other practical and emotional way (Explanatory report accompanying the Istanbul Convention, para 282).

Counselling centres are non-residential services that provide day support, including advice, counselling and practical support, to women victims of violence and their children. These include intervention centres providing practical and emotional help to women in the community.

Protection and support for child witnesses includes "age-appropriate psychosocial counselling for child witnesses of all forms of violence covered by the scope of this Convention and shall give due regard to the best interests of the child (Istanbul Convention, Article 26)."

Types of support

Within the various forms of support services different 'types' of support may be available – helplines, shelters, rape crisis centres often offer, for example, legal and psychological counselling and practical support. Service providers often provide a combination of types of support. Below are the most common types of support but the list is non-exhaustive.

Crisis support is short term, and centres on providing non-judgemental assistance, advice and resources in the immediate aftermath of VAW or at a time of current crisis. The aim is to help reduce stress and improve the person's ability to cope with their current situation, as well as with future crises. It may be face to face or via the telephone.

Legal advice/counselling/advocacy refers to having access to information about legal rights and to the process of accompanying and supporting a victim through a legal process. This might involve advocating for someone with other agencies in order that they receive their legal entitlements.

4. These services appear in the section on specialist services, meaning they refer to services which are focused on violence against women. They do not, therefore, cover for example, general helplines or homeless shelters.

Psychological counselling is linked more to being able to talk about violence and its meanings for the person, to address the ways in which it has undermined a sense of self and connections with others. The goal is to enable the child or adult to place responsibility for the abuse with the perpetrator and to have a sense of a positive future in which they are more comfortable in their body and with their sense of self. It tends to be more long term.

Outreach involves working with the wider community beyond the immediate physical confines of the service/centre, in order to reach people who need assistance but may not be able/confident to contact the service themselves or may not be aware of it.

Case advocacy involves ensuring individual victims know about and can obtain rights within a range of institutional contexts. This may involve assisting them to obtain help from institutions providing housing, financial assistance, legal protection, employment, social care, social and health protection, and can include accompanying them.

Legal advice involves providing information and advice about the legal process, rights and options, and may include legal representation.

Economic empowerment involves instilling in victims a sense of control of their lives, which in many cases includes working towards financial security, in particular economic independence from the perpetrator (Explanatory report, para 118). This may be through offering opportunities for training, access to education or personal development courses, linked to the reference to assistance in finding employment (Article 20.1). This also covers entitlements to social security, child support and other forms of financial support provided by governments.

Some service providers may offer the next two forms of support, but these are often considered inappropriate where there are imbalances of power within a couple (as in domestic violence) or within a family (as in family violence or familial child sexual abuse). Where they are part of responses to violence against women, they must be used with care and caution, with regard to the ethical implications and human rights for victims.

Mediation is a way of resolving disputes between parties with a third party acting as mediator to help them reach an agreement.

Couple counselling refers to counselling the parties of a relationship in order to recognise, manage or reconcile differences and repeating patterns of distress.

PROPOSED METHODOLOGY

A government official should be designated as responsible for collating and compiling the information for GRE-VIO reporting using the data templates provided. Whilst cooperation between states and NGOs is an expectation, NGOs also have the right to report separately to GREVIO.

The following methodology is suggested for undertaking this work.

Creating two roundtables of stakeholders who are trained in the guidelines and data which needs to compiled – everyone should be clear about and agree to work within the definitions provided by the Istanbul Convention to ensure that country level data is comparable. If there are forms of support which are not currently or sufficiently addressed this can be added as an addendum, and these notes can be feed into future revisions of the tools.

The Istanbul Convention (see Appendix) makes clear that specialist NGOs are key partners in this work, alongside ensuring that state agencies fulfil their obligations to protect women and their children and provide appropriate support. The two roundtable formats reflect these obligations.

The process of compiling data is likely to take at least six months, with a year a preferred timeline.

Roundtable 1: Specialist services

Membership

- All umbrella organisations which support/co-ordinate VAW support services i.e. shelter organisations, networks of rape crisis centres, networks of intervention centres.
- **•** Groups which work on underdeveloped areas of support e.g. FGM, forced marriage.
- Groups which work with underserved groups e.g. women with disabilities, minority women's organisations, migrant women.

Process

Hold a training event on the data requirements, including identifying if there are significant forms of support not covered by the tools.

- Ensuring that there will be no 'double counting' of organisations where they may be a member of several networks.
- Agreeing a time line for the delivery of data on current provision to the government official responsible.
- A draft of the state report section on support services to GREVIO sent to all members for comment in order to check data quality and interpretation.
- ▶ A final version produced in light of the comments.

When GREVIO produces its country report with recommendations and the Committee of the Parties to the Istanbul Convention its recommendations this group should reconvene to consider them.

Roundtable 2: General services

Here rather more initial work will need to done to identify those in the health, social work, legal, employment and other sectors have a remit on violence against women. This may be at national or regional levels. These people should be invited to the roundtable, with a slightly amended process. There are two templates to be completed through this group – the specialisation within general services and the general services one.

Process

Hold a training event on the data that needs to be compiled including identifying if there are significant forms of support not covered by the tools.

- Reaching agreement about where there is specialism within general services.
- Insuring that there will be no 'double counting' of organisations where they may be included across multiple sectors.
- > Agreeing a time line for the delivery of data on current provision to the government official responsible.
- A draft of the submission to GREVIO sent to all members for comment in order to check data quality and interpretation.
- > A final version produced in light of the comments.

Where GREVIO publishes its country report with recommendations and the Committee of the Parties to the Istanbul Convention its recommendations this group should reconvene to consider them.

Additional questions to be explored and included in the country report to GREVIO

There are some questions which ought to be reflected on by the official responsible for collating the information at the end of the process.

- Which forms of violence is there limited support currently? (domestic violence, rape/sexual assault, childhood sexual abuse, stalking, honour based violence, forced marriage, FGM/C, sexual harassment, trafficking and sexual exploitation).
- ▶ How does the government promote a gendered approach rooted in human rights in support services?
- > Does the government recognise the right of victims seeking support to confidentiality?
- Has the government supported or recognised common standards for support services, and if so for which forms and types of support services?
- Is there sufficient capacity in specialist support services (including those within general services) for example, can women find a shelter place in an emergency, are their waiting lists for psychological counselling?
- ▶ How is inter-agency communication and co-ordination undertaken5 at national, regional and local levels, and does it cover all forms of violence against women?
- Has the government supported/funded/required training on VAW for professionals, and if so in which sectors, the length of training and what proportion of the workforce has been trained?
- How does the government intend to implement the standards for support services in the Istanbul Convention going forward – i.e. ensuring wide geographic coverage and addressing gaps in current provision?
- Does the government provide adequate and timely information on support services available in relevant languages?

⁵ There are many ways in which this can be organised – formal committees, regular roundtables, a designated person – but the purpose is to establish common principles (for example, gendered understanding, human rights)for interventions with victims and perpetrators, clarification of roles and a collective commitment to improving responses.

1. Data template for specialised violence against women services

This template is for support services which are developed to cater to the needs of victims of violence, they specialise in this as their core work. There are sections on 'integrated violence against women (VAW) services' – that is they work across a range of forms of violence. There is a section on shelters, which tend to focus on domestic violence, one on national helplines and one on sexual violence services. Before completing the template read through it, and discuss in the roundtables (see proposed methodology) which section support services in your country belong in.

Integrated services on violence against women

How many integrated VAW services are there – that is, services which deal with multiple forms of violence against women. Number ______

Forms of violence	Number of services addressing it
Domestic violence	
Rape/sexual assault	
Stalking	
Crimes in the name of 'honour'	
Female Genital Mutilation (FGM)	
Forced marriage	
Sexual harassment	

Within this number how many deal with each of the following forms of violence?

Within this number how many provide the following forms of support?

Forms of support	Number of services addressing it
Crisis support	
Helpline	
Short term counselling	
Long term counselling	
Safe accommodation	
Case advocacy	
Legal advice/support/advocacy	
Economic empowerment	
Housing advice	

How do these services work from a gendered understanding of violence against women?____

Shelters

How many shelters are there: Number _____

How many bed spaces are there _____

How many of the shelters accommodate victims of these forms of violence?

Forms of violence	Number of shelters addressing it
Domestic violence	
Rape/sexual assault	
Stalking	
Crimes in the name of 'honour'	
Female Genital Mutilation (FGM)	
Forced marriage	
Sexual harassment	

What is the geographic spread, including by region? _____

How do shelters work from a gendered understanding of violence against women?

How many are:

Women only ______ Men only ______ Mixed sex ______

How many shelters are specifically for women from minority communities?

How many shelters are accessible for women with disabilities?

Are there restrictions in relation to boy children?

 \Box Yes in all \Box Yes in some \Box No

If Yes what are the restrictions and how many shelters apply these?

How many shelters have the following restrictions for access?

Current Protection order

Victim status granted through formal procedures _____

Geographic location _____

Citizenship _____

Substance misuse _____

Mental health issues _____

How many have limits on length of stay?

Up to 1 month _____

Up to 3 months _____

3–6 months _____

7–12 months _____

No limit _____

Can asylum seekers/those who have no recourse to public funds access shelters? _____

If they can, how are they supported financially whilst there?

How many shelters provide these forms of support?

Forms of support	Number of shelters providing it
Crisis support	
Helpline	
Short term counselling for adults	
Long term counselling for adults	
Short term counselling for children	
Long term counselling for children	
Safe accommodation	
Safety planning	
Case advocacy	
Legal advice/support/advocacy	
Economic empowerment	
Housing advice	

How many shelters have specific staff to work with children?

Number _____

How many shelters rely heavily on volunteers rather than paid staff?

Number_____

Are shelters able to maintain confidentiality for those staying there?

If No who are they required to share data with? _____

How many of the shelters are run by:

Specialist women's VAW/domestic violence organisations _____

Religious organisations _____

Other NGOs _____

How many shelters are funded through:

National funding stream _____

Local government funding _____

Charity/donor funding _____

Mixed funding stream _____

How may shelters have:

Grant funding _____

Funding is through competitive tendering _____

Are there national quality standards for shelters?

If there are who has developed them?

Is there regular monitoring on whether the standards are being met? ______

Non-residential domestic violence support services

There are forms of support on domestic violence which are not shelters, that is, they do not provide safe accommodation. Rather they offer advice, counselling, advocacy. This section covers these forms of support services.

How many non-residential domestic violence support services are there?

How many provide these forms of support?

Forms of support	Number of services providing it
Crisis support	
Helpline	
Short term counselling for adults	
Long term counselling for adults	
Short term counselling for children	
Long term counselling for children	
Safe accommodation	
Case advocacy	
Legal advice/support/advocacy	
Economic empowerment	
Housing advice	

How many have specific staff to work with children?

How do these services work from a gendered understanding of violence against women?_____

Are these services able to maintain confidentiality?

If No who are they required to share data with? _____

How many of these services are run by:

Specialist women's VAW/domestic violence organisations _____

Religious organisations _____

Other NGOs _____

How many are funded through:

National funding stream _____

Local government funding _____

Charity/donor funding _____

Mixed funding streams _____

How many of these services have:

Grant funding _____

Funding is through competitive tendering _____

Are there national quality standards for these services? _____

If there are who has developed them?_____

Is there regular monitoring on whether the standards are being met? ______

Sexual violence support services⁶

How many rape crisis centres are there? _____

What is the geographic spread, including by region? _____

How many are:

Women only ______ Men only _____ Mixed _____

How many work with:

Adults only _____

Young people (12–18) _____

Children (0–11)

How many work with:

Recent assaults only _____

Recent and historic abuse _____

How many rape crisis centres work with these forms of violence?

Forms of violence	Number of rape crisis centres addressing it
Domestic violence	
Rape/sexual assault	
Stalking	
Crimes in the name of 'honour'	
Female Genital Mutilation (FGM)	
Forced marriage	
Sexual harassment	

How do rape crisis centres work from a gendered understanding of violence against women?_____

Forms of support	Number of rape crisis centres providing it
Crisis support	
Helpline	
Short term counselling for adults	
Long term counselling for adults	
Short term counselling for children	
Long term counselling for children	
Case advocacy	
Legal advice/support/advocacy	
Economic empowerment	
Housing advice	

How many rape crisis centres offer the following forms of support?

^{6.} Please note that sexual assault referral centres (based in hospitals) are in the specialist within general services template.

Are rape crisis centres able to maintain confidentiality?
If No who are they required to share data with?
How many of the rape crisis centres are run by:
Specialist women's VAW/domestic violence organisations
Other NGOs
How many rape crisis centres are funded through:
National funding stream
Local government funding
Charity/donor funding
Mixed funding streams
How may rape crisis centres have
Grant funding
Funding is through competitive tendering
Are there national standards for rape crisis centres?
If there are who has developed them?
Is there regular monitoring on whether the standards are being met?
Do you have any other specialist forms of support for sexual violence?
If you have, please describe their geographic coverage and the forms of support they provide:

Helplines

How many national helplines for victims of violence against women and domestic violence are there?

How many are:

Women only _____

Men only _____

Mixed _____

How many work with:

Adults only _____

Young people _____

Children _____

Which of the forms of violence can helplines deal with?

Forms of violence	Number of helplines that can deal with
Domestic violence	
Rape/sexual assault	
Stalking	
Crimes in the name of 'honour'	
Female Genital Mutilation (FGM)	
Forced marriage	
Sexual harassment	

How do these helplines work from a gendered understanding of violence against women?_____

	ence against women and domestic violenc	e those working on helplines
How many are open 24/7?		
If not 24/7 how many hours a day are		
	s cannot be traced (i.e. so they do not appear	in the caller's phone records)?
Are calls free of charge?		
Is support available in different langu	ages?	
If Yes which additional languages	?	
Are national helplines able to mainta	in confidentiality for callers?	
If No who are they required to sh	are data with?	
How many national helplines are fund	ded through:	
National funding stream		
Charity/donor funding		
Mixed funding streams		
Are there national quality standards f	or national helplines?	
If there are who has developed th	nem?	
Is there regular monitoring on wh	nether the standards are being met?	
How many local/regional helplines ar	e there?	
What is the geographic spread, includ	ling by region?	
How many are:		
Women only Men o	nly Mixed	
How many work with:		
Adults only		
Young people		
Children		
How many local helplines deal with the	nese forms of violence?	_
Forms of violence	Number of helplines that can deal with	
Domestic violence		
Rape/sexual assault		
Stalking		
Crimes in the name of 'honour'		
Female Genital Mutilation (FGM)		
Forced marriage		1
Sexual harassment		1

What is the length of training on violence against women and domestic violence those working on helplines have to undertake?_____

How many local helplines are funded through:

National funding stream _____

Local government funding _____

Charity/donor funding _____

Mixed funding streams _____

Other forms of violence against women

How many specialist violence against women support services are there which ONLY work on these forms of violence?

Stalking
FGM
Forced marriage
Crimes in the name of honour
Sexual harassment
How many specialist violence against women support services ONLY work with:
Minority women
Disabled women
Migrant women
Lesbians

How do these services work from a gendered understanding of violence against women?

Other forms of service provision

You may have forms of provision which are not listed here or in the Convention – counselling centres/intervention centres, 'one stop shops' for example.

Agree in your roundtable what these forms of provision are and if they do not fit into any of the sections above collect the same types of information as is asked for in earlier sections.

2. Data template for specialist provisions within general services

This data template is for specialist violence against women provision within general services. It must ONLY be used where there are specialist workers/teams which provide support only to victims of violence against women/domestic violence. This means that specialist support has been developed by, for example, housing providers or within health settings. That there are staff employed or located there whose role is to provide support to victims of violence against women. Included here would be specialist shelters provided by larger housing providers, rather than NGOs, but they are ONLY for victims of domestic violence and sexual assault referral centres located in hospitals.

Shelters within general housing services

Are there shelters within general housing services (not general homeless provision) which specialise in violence against women?

If Yes answer the next section

How many such shelters are there: _____

How many bed spaces are there overall?

How many of the shelters accommodate victims of these forms of violence?

Forms of violence	Number of shelters addressing it
Domestic violence	
Rape/sexual assault	
Stalking	
Crimes in the name of 'honour'	
Female Genital Mutilation (FGM)	
Forced marriage	
Sexual harassment	

What is the geographic spread, including by region? _____

How do they work from a gendered understanding of violence?

How r	many are:		
W	omen only	Men only	Mixed sex
How r	many are specifically for	women from minority	communities?
How r	many are accessible for v	women with disabilitie	s?
Are th	ere restrictions in relation	on to boy children?	
	Yes in all		
	Yes in some		
	No		
lf	Yes what are the restrict	tions and how many sh	elters apply these?
_			

How many have the following restrictions for access?

Current Protection order _____

Victim status granted through formal procedures ______

Geographic location _____

Citizenship _____

Substance misuse _____

Mental health issues _____

How many have limits on length of stay?

Up to 1 month _____

Up to 3 months _____

3–6 months _____

7–12 months _____

No limit _____

Can asylum seekers/those who have no recourse to public funds access shelters?

If Yes how are they supported financially whilst there?_____

How many shelters provide these forms of support

Forms of support	Number of shelters providing it
Crisis support	
Helpline	
Short term counselling for adults	
Long term counselling for adults	
Short term counselling for children	
Long term counselling for children	
Safe accommodation	
Safety planning	
Case advocacy	
Legal advice/support/advocacy	
Economic empowerment	
Housing advice	

How many have specific staff to work with children? _____

Are shelters able to maintain confidentiality for those staying there?

If No who are they required to share data with? _____

Who are the shelters run by?_____

How are they funded?

 \Box National/federal government

□ Regional government

□ Local/city government

□ Foreign donor(s) including UN organisations

□ National or International charitable foundation(s)

□ Private company(ies)

🗆 Don't know

Are there national quality standards for these shelters? _____

If there are who has developed them?_____

Is there regular monitoring on whether the standards are being met? _____

Support for victims of sexual violence within social/health services

How many sexual assault referral centres (based in hospitals) are there ______

What is the geographic spread, including by region? _____

How many are:

Women only _____

Men only _____

Mixed ____

How many work with:

Adults only _____

Young people _____

Children _____

Can victims access a sexual assault referral centre without making a formal report to the police?_____

How many sexual assault referral centres work with these forms of violence?

Forms of violence	Number of sexual assault referral centres addressing it
Domestic violence	
Rape/sexual assault	
Stalking	
Crimes in the name of 'honour'	
Female Genital Mutilation (FGM)	
Forced marriage	
Sexual harassment	

How do sexual assault centres work from a gendered understanding of violence against women?

How many sexual assault offer the following forms of support?

Forms of support	Number of sexual assault referral centres providing it
Forensic examination	
Crisis support	
Medical treatment	
Helpline	
Short term counselling for adults	
Long term counselling for adults	
Short term counselling for children	
Long term counselling for children	
Case advocacy	
Legal advice/support/advocacy	

Are female staff always available:

□ For forensic examinations

□ For counselling

□ Answering helpline calls

□ As advocates

Are sexual assault referral centres able to maintain confidentiality?

If No who are they required to share data with? _____

How many sexual assault referral centres are funded through:

National funding stream _____

Local government funding _____

Charity/donor funding _____

Mixed funding streams _____

Are there national quality standards for sexual assault referral centres?______

If there are who has developed them?

Is there regular monitoring on whether the standards are being met? _____

Is there specialist provision for sexual violence within wider general services, for example, in mental health provision are there trauma services specific to sexual violence?

If Yes, please answer the next set of questions:

What is the type of provision? _____

How do they work from a gendered understanding of violence against women?______

What is the geographic spread, including by region? _____

How many are:

Women only _____ Men only _____ Mixed _____

How many work with:

Adults only _____

Young people _____

Children _____

Can victims access their services without making a formal report to the police?_____

How many work with these forms of violence?

Forms of violence	Number of agencies addressing it
Domestic violence	
Rape/sexual assault	
Stalking	
Crimes in the name of 'honour'	
Female Genital Mutilation (FGM)	
Forced marriage	
Sexual harassment	

How many offer the following forms of support?

Forms of support	Number of services/institutions providing it
Crisis support	
Helpline	
Short term counselling for adults	
Long term counselling for adults	
Short term counselling for children	
Long term counselling for children	
Case advocacy	
Legal advice/support/advocacy	
Economic empowerment	

Are female staff always available:

 \Box For forensic examinations

 \Box For counselling

□ Answering helpline calls

 \Box As advocates

Are these agencies able to maintain confidentiality?

If No who are they required to share data with?

How are they funded?

□ Within overall general service budgets

 \Box From other sources

Are there national quality standards for these agencies?

If there are who has developed them?_____

Is there regular monitoring on whether the standards are being met?

Other forms of provision

Do you have other support services which have some specialism in violence against women – for example, social work centres, family centres, employment/unemployment centres, public education or training services, public psychological and legal aid/legal counselling services?

If Yes please create a set of the following questions for each of these services:

What forms of violence they work with?

Forms of violence	Number of agencies addressing it
Domestic violence	
Rape/sexual assault	
Stalking	
Crimes in the name of 'honour'	
Female Genital Mutilation (FGM)	
Forced marriage	
Sexual harassment	

How is there a specialism about violence within it?_____

How do they work from a gendered understanding of violence against women?_____

What is the geographic spread, including by region? _____

What forms of support do they offer?

Forms of support	Number of services/institutions providing it
Crisis support	
Helpline	
Short term counselling for adults	
Long term counselling for adults	
Short term counselling for children	
Long term counselling for children	
Safe accommodation	
Safety planning	
Case advocacy	
Legal advice/support/advocacy	
Economic empowerment	
Housing advice	

3. Data template for general services

This template is to record the extent to which identification and referral to specialist support for victims of violence against women and domestic violence are part of general service provision.

General services refer to help offered by public authorities such as social services, health services, employment services, etc. which provide long-term help and are not exclusively designed for the benefit of victims of violence against women but serve the public at large.

Health services

Are there <u>national</u> protocols for routine enquiry (asking all patients/all where there might be issues or concerns) about the following experiences of violence in the named health sectors?

Forms of violence	Protocol in accident and emergency	Protocol in maternity	Protocol in mental health	Protocol for family doctors	Other sector (Please specify)	Other sector (please specify)
Domestic violence (whether physical, sexual, psychological or economic violence)						
Rape/sexual assault						
Stalking						
Crimes in the name of 'honour'						
Female Genital Mutilation (FGM)						
Forced marriage						
Sexual harassment						

Is there regular monitoring on whether the protocols are being met?

What information about support services is provided to victims? Does this give details of the services offered, opening hours, etc.?_____

Are there formal referral pathways into specialist support services?_____

Are there <u>national</u> training programmes within health services on any of the following forms of violence – only answer YES if there are such programmes?

Forms of violence	Training programmes
Domestic violence (includes physical, sexual, psychological and economic violence)	
Rape/sexual assault	
Stalking	
Crimes in the name of 'honour'	
Female Genital Mutilation (FGM)	
Forced marriage	
Sexual harassment	

What proportion of health service staff have been specially trained to understand violence against women?____

How many hours of training do they receive? _	
Who normally provides the training?	

How do the training programmes present a 'gendered understanding' of violence against women?

Social services

Are there <u>national</u> protocols for routine enquiry (asking all users where there might be issues or concerns) about the following experiences of violence within social services?

Forms of violence	Child protection	Mental health	Family support	Disability	Other sector (please specify)	Other sector (please specify)
Domestic violence (includes physical, sexual, psychological and economic violence)						
Rape/sexual assault						
Stalking						
Crimes in the name of 'honour'						
Female Genital Mutilation (FGM)						
Forced marriage						
Sexual harassment						

Is there regular monitoring on whether the protocols are being met?_____

Are there formal referral pathways into specialist support?_____

What information about support services is provided to victims? Does it give information about details of the services offered, opening hours, etc.?

Are there <u>national</u> training programmes within social work on any of the following forms of violence – only answer YES if there are such programmes?

Forms of violence	Training programmes
Domestic violence (includes physical, sexual, psychological and economic violence)	
Rape/sexual assault	
Stalking	
Crimes in the name of 'honour'	
Female Genital Mutilation (FGM)	
Forced marriage	
Sexual harassment	

What proportion of staff have been specially trained to understand violence against women?_____

How do the training programmes present a 'gendered understanding' of violence against women?

Police

Are there <u>national</u> protocols for routine enquiry (asking victims where there might be issues or concerns) about the following experiences of violence in the named police sectors?

Forms of violence	Child protection	Violent crime	Family support	Front office	Other sector (please specify)	Other sector (please specify)
Domestic violence (includes physical, sexual, psychological and economic violence)						
Rape/sexual assault						
Stalking						
Crimes in the name of 'honour'						
Female Genital Mutilation (FGM)						
Forced marriage						
Sexual harassment						

Is there regular monitoring on whether the protocols are being met?_____

Are there formal referral pathways into specialist support services?______

What information about support services is provided to victims? Does the information include details of the services offered, opening hours, etc.?

Are there <u>national</u> training programmes within the police on any of the following forms of violence?

Forms of violence	Training programmes
Domestic violence (includes physical, sexual, psychological and economic violence)	
Rape/sexual assault	
Stalking	
Crimes in the name of 'honour'	
Female Genital Mutilation (FGM)	
Forced marriage	
Sexual harassment	

What proportion of the workforce have been specially trained on understanding violence against women?____

How many hours of training do they receive? _____

Who normally provides the training? ____

How do the training programmes present a 'gendered understanding' of violence against women?

Other general services

You may have other general services (legal assistance and legal aid, employment services) which are not listed here or in the Istanbul Convention that routinely enquire about violence against women and domestic violence.

Agree in your roundtable what these other general services are and if they do not fit into any of the sections above collect the same types of information as is asked for in earlier sections.

APPENDIX: RELEVANT ARTICLES FROM THE ISTANBUL CONVENTION

Article 9 – Non-governmental organisations and civil society

Parties shall recognise, encourage and support, at all levels, the work of relevant nongovernmental organisations and of civil society active in combating violence against women and establish effective co-operation with these organisations.

Article 18 – General obligations

1. Parties shall take the necessary legislative or other measures to protect all victims from any further acts of violence.

2. Parties shall take the necessary legislative or other measures, in accordance with internal law, to ensure that there are appropriate mechanisms to provide for effective co-operation between all relevant state agencies, including the judiciary, public prosecutors, law enforcement agencies, local and regional authorities as well as non-governmental organisations and other relevant organisations and entities, in protecting and supporting victims and witnesses of all forms of violence covered by the scope of this Convention, including by referring to general and specialist support services as detailed in Articles 20 and 22 of this Convention.

3. Parties shall ensure that measures taken pursuant to this chapter shall:

- be based on a gendered understanding of violence against women and domestic violence and shall focus on the human rights and safety of the victim;
- be based on an integrated approach which takes into account the relationship between victims, perpetrators, children and their wider social environment;
- aim at avoiding secondary victimisation;
- aim at the empowerment and economic independence of women victims of violence;
- allow, where appropriate, for a range of protection and support services to be located on the same premises;
- address the specific needs of vulnerable persons, including child victims, and be made available to them.

4. The provision of services shall not depend on the victim's willingness to press charges or testify against any perpetrator.

5. Parties shall take the appropriate measures to provide consular and other protection and support to their nationals and other victims entitled to such protection in accordance with their obligations under international law.

Article 19 – Information

Parties shall take the necessary legislative or other measures to ensure that victims receive adequate and timely information on available support services and legal measures in a language they understand.

Article 20 – General support services

1. Parties shall take the necessary legislative or other measures to ensure that victims have access to services facilitating their recovery from violence. These measures should include, when necessary, services such as legal and psychological counselling, financial assistance, housing, education, training and assistance in finding employment.

2. Parties shall take the necessary legislative or other measures to ensure that victims have access to health care and social services and that services are adequately resourced and professionals are trained to assist victims and refer them to the appropriate services. Article 21 – Assistance in individual/collective complaints Parties shall ensure that victims have information on and access to applicable regional and international individual/collective complaints rectains. Parties shall promote the provision of sensitive and knowledgeable assistance to victims in presenting any such complaints.

Article 22 – Specialist support services

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

2. Parties shall provide or arrange for specialist women's support services to all women victims of violence and their children.

Article 23 – Shelters

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

Article 24 – Telephone helplines

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

Article 25 – Support for victims of sexual violence

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

Article 26 – Protection and support for child witnesses

1. Parties shall take the necessary legislative or other measures to ensure that in the provision of protection and support services to victims, due account is taken of the rights and needs of child witnesses of all forms of violence covered by the scope of this Convention.

2. Measures taken pursuant to this article shall include age-appropriate psychosocial counselling for child witnesses of all forms of violence covered by the scope of this Convention and shall give due regard to the best interests of the child.

Article 27 – Reporting

Parties shall take the necessary measures to encourage any person witness to the commission of acts of violence covered by the scope of this Convention or who has reasonable grounds to believe that such an act may be committed, or that further acts of violence are to be expected, to report this to the competent organisations or authorities.

Article 28 – Reporting by professionals

Parties shall take the necessary measures to ensure that the confidentiality rules imposed by internal law on certain professionals do not constitute an obstacle to the possibility, under appropriate conditions, of their reporting to the competent organisations or authorities if they have reasonable grounds to believe that a serious act of violence covered by the scope of this Convention, has been committed and further serious acts of violence are to be expected.

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The Council of Europe is the continent's leading human rights organisation. It comprises 47 member states, 28 of which are members of the European Union. All Council of Europe member states have signed up to the European Convention on Human Rights, a treaty designed to protect human rights, democracy and the rule of law. The European Court of Human Rights oversees the implementation of the Convention in the member states.

