



WOMEN AGAINST VIOLENCE EUROPE

WAVE-HANDBOOK

Prevention and Support Standards
for Women Survivors of Violence

A HANDBOOK FOR THE IMPLEMENTATION OF THE ISTANBUL CONVENTION

WAVE-HANDBOOK

The outlined activities and achievements were made possible through generous funding by the:
Rights, Equality and Citizenship Programme of the European Union
Federal Ministry for Health and Women Austria
Federal Ministry for Labour, Social Affairs and Consumers Protection Austria
Municipality of Vienna, the Department for Women's Affairs (MA57), Austria
OAK Foundation
Philip Morris Austria GmbH

With financial support
from the Rights, Equality
and Citizenship Programme
of the European Union



IMPRINT

Publisher: WAVE – Women against Violence Europe, Bacherplatz 10/6, A-1050 Vienna, October 2017

ZVR: 601608559

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This publication has been produced with the financial support of the Rights, Equality and Citizenship Programme of the European Union. The contents of this publication are the sole responsibility of Women against Violence Europe (WAVE) and can in no way be taken to reflect the views of the European Commission.

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INTRODUCTION

This handbook aims to provide an overview of the key legal developments and practical advances, which the ratification of the Istanbul Convention has made possible. It provides a crucial benchmark of success in the struggle to eliminate violence against women and children in Europe and provides a solid legal framework for the protection and support of women and their children who have experienced abuse.

Even though the Istanbul Convention was ratified in 2011, there is still a lack of understanding amongst practitioners working in the violence against women sector, as well as the general public, about its specific remit and the requirements of its implementation.

This handbook provides a solid introduction to the framework of the Istanbul Convention and its human rights as well as non-discriminatory angle in Part One.

Part Two offers a more in-depth overview of its specific requirements, e.g. the need for adequate government funding for specialist VAWG service provision, key elements of making support services for women affected by violence empowering and explores existing challenges in the collaboration between NGOs and their respective European governments.

An extensive list of literary references to enable further reading and research is offered at the end of the handbook.

1. Standards & Definitions

The framework for this Handbook is provided by the definitions and regulations as set out in the Istanbul Convention, the EU Victims' Directive and the WAVE Network.

A key element that sets the Istanbul Convention apart from earlier legal treaties, is its recognition that gender inequality and violence against women are closely linked:

"Violence against women is a "manifestation of historically unequal power relations between women and men, which have led to domination over, and discrimination against women by men and to the prevention of the full advancement of women" (Preamble).

The above sentence recognises the central cause of violence against women as a historical societal problem. To tackle this problem at its roots, it is not enough to define violence against women as separate cases of 'dysfunctional families', or 'personality disorders' of the perpetrator. Whilst such individual components undoubtedly exist, it would be insufficient to restrict measures to the individuals alone and to neglect necessary societal changes. Therefore, the Convention emphasises the need for measures in the area of prevention and an approach addressing all stakeholders involved.

The Convention **defines violence against women** as:

"A violation of human rights and a form of discrimination against women and shall mean all acts of gender-based violence that result in, or are likely to result in, physical, sexual, psychological or economic harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life" (Article 3a).

Domestic violence in the Convention is defined as:

"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 survivor" (Article 3b).

In addition to the Istanbul Convention, the **European Victims' Directive**, adopted in October 2012, is another important instrument for eliminating violence against women. Whilst it focuses on victims in general, the Victims' Directive refers to gender-based violence as a form of violence that requires the provision of specialist support for survivors:

“Persons who are particularly vulnerable or who find themselves in situations that expose them to a particularly high risk of harm, such as persons subjected to repeat violence in close relationships, victims of gender-based violence...,” should be provided with specialist support and legal protection” (EU Victims' Directive 2012).

Another development in recent years is the introduction of the European Protection Order that came into effect in January 2015. It ensures that all victims of domestic violence can have their protection orders recognized in any EU Member State.

It consists of two different mechanisms due to the differences between state protection measures. These are 'the Regulation on mutual recognition of protection measures in civil matters' and 'the Directive on the European Protection Order'. Taken together these two mechanisms provide EU citizens with safety and security in all EU Member States regardless of which EU Member State the order was granted in.

However, despite these new empowering legal tools which in theory enable the more effective tackling of violence against women, their implementation and application in practice often remain unclear to women affected by violence. This handbook aims to provide a source of information and clarification to survivors of violence as well as practitioners supporting them, to enable them to apply these legal instruments (WAVE 2015a).

2. Facts and figures on the prevalence of violence against women and domestic violence

The scale of violence against women

The first European Union-wide survey on violence against women, which is also the largest cross-country representative study on the subject, was carried out by the Fundamental Rights Agency of the European Union (FRA) in 2012. In 2014, the results were published (FRA 2014). The study is based on interviews conducted with 42,000 women (aged 18 to 74 years) from all 28 EU-Member States.

The interviews focused on women's personal experiences of physical, sexual, psychological and economic violence (partner and non-partner violence), stalking, sexual harassment and cyber violence. The survey included questions on both experiences of violence in the 12 months prior to the interview as well as experiences of violence since age 15.

To summarise some key findings of the study on the prevalence of violence against women in the EU (cf. WAVE 2015b):

- › One in three women (33%) has experienced physical and/or sexual violence since she was 15 years old (62 million women throughout the EU).
- › An estimated 13 million women in the EU (7% of women aged 18–74 years) have experienced physical violence in the 12 months prior to the survey interview.
- › 1 in 10 women has experienced some form of sexual violence since the age of 15.
- › 1 in 5 women has experienced some form of stalking since the age of 15.
- › 20% of young women aged between 18 and 29 years have experienced online sexual harassment.

Violence against women by a partner or previous partner

The 2014 FRA survey also uncovered a significant prevalence of intimate partner violence and shows the repeat victimization pattern of this form of violence:

- › 22% of women have experienced physical and/or sexual abuse by a partner since the age of 15.
- › After breaking up with a violent partner, 1 in 6 women (16%) continued to be victimized by the previous partner.
- › 43% of women have experienced some form of psychological violence by a current or former partner, including economic violence.
- › 1 in 10 women have been stalked by a previous partner.

Reporting Gender-Based and Domestic Violence

In the 2014 FRA survey, women were asked if they had reported the violence to the police or another agency. Some findings on reporting rates across the EU include:

- › 66% of women did not report the most serious incident of partner violence to the police or another organisation.
- › Only 1 in 3 survivors of partner violence (33%), and 1 in 4 survivors of non-partner violence (26%), reported their most recent serious incident to the police or other services.
- › 74% of stalking cases were not reported to the police.

These figures point out the significant rate of underreporting of gender-based violence. Women survivors of violence should be encouraged to seek support and have the option to report violence. This requires gaining the trust of survivors, which can be done by low-threshold services such as women's helplines providing free of charge and 24/7 services. A related problem is, as the 2014 FRA survey demonstrates, that there is a general lack of knowledge about their rights and existing legislation, amongst women experiencing domestic and/or sexual violence, since 36% of women are not aware of these specific laws or initiatives.

Specialist women's support services who work in the interest of the survivor are often engaged in awareness-raising activities and can, provided they receive adequate funding, adequately inform survivors about specific policies and laws for their protection (WAVE 2015a).

The FRA study is thus an excellent information framework for policymakers as well as civil society professionals, and therefore a highly-recommended resource for anyone trying to obtain in-depth information on violence against women in European and/or EU country context.

Since its inception, the European Commission and the European Parliament have stressed the importance of EU wide actions for tackling the widespread problem of violence against women (European Parliament 2016). By revealing the worrying prevalence of violence against women across the EU, the 2014 FRA survey provides a solid evidence base for both national and EU wide policies to tackle violence against women in the EU. Detailed standards for such policies and legislative measures, have been set out in the Istanbul Convention, and shall be explored in this handbook.

3. Structure of the Handbook

Part one outlines the general standards and principles of the Istanbul Convention which aim to create an appropriate framework and systems of support for responding to violence against women and domestic violence. Amongst these general standards, special emphasis is placed on the following principles:

- › Human rights, non-discrimination and inclusion as standards for protection and support (Article 4)
- › Due diligence (Article 5)
- › Gender-sensitive policies (Article 6)

Part two elaborates on those aspects of the Istanbul Convention, that clearly highlight the legal obligation of governments to provide the necessary infrastructure and financial resources to enable the creation and running of specialist support services for women survivors of violence:

These are:

- › Financial resources (Article 8)
- › Cooperation with civil society/women's NGOs (Article 9)
- › The role of general services (Article 20)
- › Specialist support services (Articles 22-26)
- › Multi-Agency cooperation and risk assessment (Articles 7 and 51)

The general structure within the chapters includes a reference to the relevant Article of the Istanbul Convention and a discussion of the background. Considerations for implementation, as well as challenges, are elaborated upon. These then provide the framework for more practical examples and recommendations for policymakers.

PART A – ISTANBUL CONVENTION FRAMEWORK

1. General standards and principles in the Istanbul Convention

The Preamble of the Istanbul Convention refers to all major human rights conventions and the growing case law of the European Court of Human Rights (ECHR) around violence against women and domestic violence.

- » Violence against women is understood as a human rights violation and a form of discrimination against women. The Preamble also describes violence against women as a “serious violation of the human rights of women and girls and a major obstacle to the achievement of equality between women and men” (Preamble).
- » The aim of the Convention is to restore and guarantee the human rights of women, above all the fundamental right to live free from violence in both the public and the private sphere (Article 4.1).
- » A human rights-based and survivor-centred approach is applied throughout the Convention. It requires that “measures to protect the rights of victims shall be secured without discrimination on any ground” (Article 4.3). All legislative and other measures to adopt and implement state-wide effective measures to prevent and combat violence against women and domestic violence need to “place the rights of the survivor at the centre” (Article 7).

1.2. Human rights, non-discrimination and inclusion as standards for protection and support

Article 4 of the Istanbul Convention clarifies the values and human rights which underlie the Convention and are required for its implementation.

A core principle of the Convention is the obligation to implement its provisions, especially measures to protect the rights of survivors, without discrimination on any grounds. According to the Convention, the meaning of discrimination is the same as the meaning within Article 14 of the ECHR. The list of non-discrimination grounds draws on this Article as well as on the Protocol No. 12 to the ECHR.

This means that in developing, implementing and evaluating legislation and policies, policymakers and government officials need to systematically review them, to see if any group of people is excluded from protection and support.

Article 4 – Fundamental rights, equality and non-discrimination

1. *Parties shall take the necessary legislative and other measures to promote and protect the right for everyone, particularly women, to live free from violence in both the public and the private sphere.*
2. *Parties condemn all forms of discrimination against women and take, without delay, the necessary legislative and other measures to prevent it, in particular by: – embodying in their national constitutions or other appropriate legislation the principle of equality between women and men and ensuring the practical realisation of this principle; – prohibiting discrimination against women, including through the use of sanctions, where appropriate; – abolishing laws and practices which discriminate against women.*

3. *The implementation of the provisions of this Convention by the Parties, in particular measures to protect the rights of victims, shall be secured without discrimination on any ground such as sex, gender, race, colour, language, religion, political or other opinion, national or social origin, association with a national minority, property, birth, sexual orientation, gender identity, age, state of health, disability, marital status, migrant or refugee status, or other status.*

4. *Special measures that are necessary to prevent and protect women from gender-based violence shall not be considered discrimination under the terms of this Convention.*

The Istanbul Convention thus sets strong requirements and obligations to ensure the practical realisation of equality between women and men (Article 4.2). All forms of discrimination against women must be condemned and necessary measures must be taken to prevent discrimination. These measures include the embodiment of the principle of equality in the constitution, as well as in appropriate legislation, and the obligation to ensure the practical realisation of the principle of equality between women and men. It also requires the abolishment of laws and practices which discriminate against women and prohibits such discrimination.

This principle of non-discrimination is also established in the EU Victims' Directive (Art. 9-10), where discrimination of any kind or based on any ground is prohibited. This includes discrimination on the grounds of the residence status of a survivor of a crime, and, as specified in Paragraph 10 of the Directive:

"(...) Member States should take the necessary measures to ensure that the rights set out in this Directive are not made conditional on the survivor's residence status in their territory or on the survivor's citizenship or nationality."

2. Background and considerations for implementation

Discriminatory practices can be rooted in legislation, regulations and policies, which, for instance, can exclude certain groups of people from protection or services, such as through structural forms of discrimination.

All barriers to access protection and support services should be removed. A key element of implementing the Istanbul Convention therefore is to ensure that specific measures and services for women survivors of violence are not discriminatory and that they support all affected women.

Measures to prevent and eradicate violence against women need to address the specific situation and needs of women and their children, as violence against women is intrinsically connected to the discrimination and disadvantages women face. The Istanbul Convention requires specialist support services for women such as women's shelters, women's helplines and women's centres (Article 22) and explicitly states that special measures "necessary to prevent and protect women from gender-based violence shall not be considered discrimination" (Article 4.4). Thus, governments should not fear being accused of discrimination when establishing women-specific measures; on the contrary, such measures are required.

2.1 Support for male survivors

Male survivors of violence are also entitled to protection and support and have the right not to be subjected to violence. However, generally the causes of violence that men experience are not the same as the root causes of male violence against women.

For example, statistical data on the Austrian emergency barring order issued by the police, show that in approximately 90% of cases where women experience domestic violence, it is caused by a male perpetrator. In cases when men experience of domestic violence, the perpetrators are generally 50% male and 50% female (Wiener Interventionsstelle gegen Gewalt in der Familie 2015). This tendency can also be observed in other European countries e.g. England where police statistics clearly demonstrate that male violence against women make up 85% of reported domestic violence incidents (London Metropolitan police statistics 2012).

The overarching evidence suggests, that gender-based violence is a patterned, repeated behaviour intended to assert power and control over the victim and a problem predominantly experienced by women due to the power disparity between men and women in our society. Thus, measures for male survivors of domestic violence are not required to the same extent as they are for women, and will therefore not be a focus in this handbook.

3. Problems and challenges

There are many forms of discrimination women experience which contribute to inequality. The Istanbul Convention requires all ratifying parties not only to avoid discrimination, but also to actively promote measures for gender equality.

There are a number of groups of women survivors of violence who often face additional discrimination, unequal treatment or exclusion from support. The Istanbul Convention lists “discrimination based on race, colour, language, religion, political or other opinion, national or social origin, association with a national minority, property, birth, sexual orientation, gender identity, age, state of health, disability, marital status, migrant or refugee status, or other status.”

While covering all forms of discrimination and their impacts would exceed the scope of this handbook, some forms will be dealt with, highlighting groups of survivors who are often in additional danger of being denied access to services and are vulnerable to multiple forms of discrimination.

3.1. Examples of women survivors of violence and their children who experience discrimination

Undocumented women and their children

Despite the fact that ‘access for all women’ has been recognised as a professional standard in women’s shelters (WAVE 2004), certain groups of survivors are effectively excluded from accessing shelters.

Undocumented women survivors of violence and their children are particularly hindered from accessing specialist support services (PICUM 2012). The reason for exclusion is often based on governmental policies, which deny people without a residence permit access to public funds and services.

Such regulations ignore that all people have the right to live free from violence. This right is guaranteed in several human rights documents, as well as in the Istanbul Convention (Article 4.1). The right to live free from violence includes the right to protection and support in situations of danger to life, health and freedom.

This means that all women, regardless of their residence status, must be allowed immediate access to shelters. Support and protection must be provided as long as women and their children are in danger and they must also be able to claim their rights as victims in criminal and civil proceedings.

In many countries, women survivors of violence are in danger of becoming undocumented after divorce, as their residence permits depend on their violent husbands. Article 59 of the Istanbul Convention intends to change such practices by establishing the right of women survivors of violence to an independent residence permit.

It is important that, when developing funding principles and programs, governments ensure their funding regulations do not jeopardize the basic rights of any woman to protection and support. Consequently, women’s shelters should receive core funding to cover protection for all women in emergency situations, rather than funding depending on certain entitlements of the survivors, such as the entitlement to public funds.

Non-discriminatory regulations are not only important for undocumented women, but also for asylum-seeking women, women with other European nationalities, and even for nationals from other regions; often, funding regulations exclude women and children who are not residents of the province or town which provides the funding, making it difficult for women to flee from violence.

Women and children with disabilities

Women with disabilities and/or their children are more vulnerable to gender-based or domestic violence than women without disabilities. For example, in 2013 a German representative survey, looking at women with a wide range of physical and mental disabilities, found that women with disabilities are two to three times more likely to suffer from psychological, physical or sexual violence, in large part due to their lack of knowledge about gender-based violence, their rights, and the resources available (Schröttle et al. 2013).

It is paramount that all women are aware of their rights and the resources that are available to them. Women survivors with disabilities are especially in need of specialist support services, but are less likely to access them than women survivors without disabilities. Specialist support services should prioritise these particular groups of women when distributing information materials on their services (WAVE 2017).

In addition, it is crucial that shelters are open to all survivors, regardless of their abilities. Laws and funding policies need to ensure that women and children with disabilities can equally access women's shelters. States are legally bound to ensure that a sufficient number of fully accessible shelter places are available to women and their children in all regions of their country.

Children, and children of a certain age

Children are always affected by violence against their mothers and often are directly victimized, sometimes to the degree that they become victims of homicides (Women's Aid 2016). It is of the utmost importance that children are admitted to shelters together with their mothers and that specific support is provided to them, both in shelters as well as in non-residential support services, such as women's counselling centres, intervention centres, and family justice centres.

According to the principles of human rights and non-discrimination, age-limits for children should not exist in shelters, neither for boys nor for girls. The reality is unfortunately different: many women's shelters have age limits for boys, which according to the WAVE Report 2015 usually affects the age group of 14 to 16 year olds. The reasons for age limits are often a caused by confined living conditions and the absence of privacy due to a lack of space and resources. Adequate funding which allows for self-contained shelter rooms i.e. with bath/toilet facilities for each woman and her children, could avoid this damaging implementation of age limits (WAVE 2004).

Discrimination based on gender identity

In modern European societies, a gender binary dominates, with two distinctly opposite forms of masculine and feminine. People who do not fit into this binary system find different identity categories for themselves along a spectrum of gender. Unfortunately, self-identifying as something other than the norm of male or female often leads to discrimination, which can be especially difficult for survivors of violence. To avoid discrimination, it is important to accept the self-definition of every survivor of domestic/intimate partner-, gender- or gender-identity based violence, and to guarantee them access to the kind of support and protection they need.

Discriminatory attitudes and cultural practises such as victim-blaming

As already mentioned, barriers to accessing services or to justice are common forms of discrimination. However, discrimination can also take the form of discriminatory and harmful attitudes, beliefs and stereotypes.

Victim-blaming is one of the most common forms of discrimination women survivors of violence face. It takes the form of accusing survivors, who are blamed for having 'caused' or 'provoked' the violence through certain behaviour that is deemed 'inappropriate' or 'indecent'.

Victim-blaming discourages women from accessing justice and support. It is a deeply harmful mechanism as those employing it suggest (often implicitly rather than explicitly) that survivors are in some way responsible for the violence they experience(d). Even high level members of the judiciary sometimes employ victim-blaming, perpetuating harmful gender stereotypes. Victim-blaming leads to the dangerous situation where women have little trust in the justice system, which contributes to under-reporting and feelings of shame among victims.

The widespread nature of this harmful attitude has been shown in a recent Eurobarometer Survey on gender-based violence (European Commission 2016). The Special Eurobarometer survey was carried out in all 28 EU Member States in June 2016. Almost 28,000 EU citizens from different social and demographic categories were interviewed face-to-face at home and in their native language. Across the EU, about one in five respondents held victim-blaming views, for example by agreeing to statements that violence against women is often “provoked” by the survivor (17% agreed) or that women “make up” or “exaggerate” claims of violence (22% of respondents agreed).

Other forms of discriminatory and harmful attitudes, prejudices and stereotypical beliefs are, for instance, arguing that violence committed by men is “normal” or “inherently part of a culture”, and should therefore not be regarded as violence. Such attitudes can be especially dangerous when it leads to inaction by authorities (Logar 2011). Additionally, some minority ethnic groups such as Roma have suffered from discrimination and prejudices over hundreds of years in Europe, and as a consequence, Roma women face increased discrimination when it comes to accessing justice and support.

Thus, efforts to eradicate violence against women and domestic violence need to address discriminatory practices and mechanisms which produce inequalities.

4. Recommendations for policy makers on non-discrimination and inclusiveness

Discrimination against survivors can be caused by failures of state actors however, it is also deeply rooted in societal structures and cultures. While it is important to hold individuals accountable, any leadership must regularly evaluate their institutions and organisations to identify structural barriers causing discrimination and must enable members of staff to change the values and attitudes which underlie discriminatory practices.

4.1. Recommendations to avoid discrimination:

- » Carry out sensitivity and awareness training to foster understanding of what constitutes discrimination, how it works and how it can be avoided.
- » Develop guidelines for non-discriminatory practices in all institutions and organisations dealing with violence against women.
- » Address issues of intersectionality and how certain groups of women survivors of violence may face multiple and intersecting forms of discrimination and experience additional violations of their rights.
- » Identify and remove barriers/obstacles to access support and protection when developing, implementing and evaluating legal/other measures to protect and support women survivors of violence. The core questions should be:
 - › Are there groups who are excluded from accessing legal or other services? If so, who are these groups and why are they excluded?
 - › What are the negative consequences of this structural discrimination for the survivor, the society, or the state?
 - › Which measures can be taken, what solutions can be found to remove the barrier?
 - › What are the steps and the timeframe for removing them?

4.2. Measures for the management of organisations and institutions:

Every institution or organisation dealing with violence against women must have an internal policy in the form of clear and transparent guidelines promoting gender equality and avoiding discrimination against women. Such a policy and action plan for gender equality should always:

- » Contain measures to avoid other forms of discrimination, prejudices, and stereotypical beliefs and promote the human rights of all groups.
- » Raise awareness in the institution on the phenomenon of discrimination, what it means, how it works and how it can be avoided; including awareness on prejudices, stereotypes and harmful attitudes and beliefs.
- » Accept and respect self-definition as a human right.

4.3. Tools for implementation

Checklist 1: Applying a non-discriminatory and human rights-based approach when combating violence against women

| Measures/policy/legislation to be reviewed: | | | | |
|--|--|---|---|--|
| Date of review: | | | | |
| Persons involved: | | | | |
| Possible grounds of discrimination/exclusion (Article 4.3 Istanbul Convention) | Are there groups who are excluded from accessing the measure/policy/law/service? | Possible negative consequences: - For the survivor - For society - For the state | Measures taken/solutions found to remove barriers | Steps to remove barriers and timeframe |
| Sex | | | | |
| Gender | | | | |
| Ethnicity | | | | |
| Language | | | | |
| Religion | | | | |
| Political or other opinion | | | | |
| National or social origin | | | | |
| Association with a national minority | | | | |
| Property | | | | |
| Birth | | | | |
| Sexual orientation | | | | |
| Age | | | | |
| Disability | | | | |
| Marital status | | | | |
| Migrant or refugee status | | | | |
| Other status | | | | |

5. The principle of due diligence and the right to live free from violence

Under international human rights law, states are required to refrain from engaging in any act of violence against women, and to exercise due diligence to prevent, investigate, prosecute and punish acts of gender-based violence against women and girls, where the violence is committed by non-state actors. States are required to establish a legal apparatus, which addresses gender-based violence as a form of gender discrimination (Council of Europe 2011b: p. 10).

Article 5 – State obligations and due diligence

Parties shall refrain from engaging in any act of violence against women and ensure that state authorities, officials, agents, institutions and other actors acting on behalf of the state act in conformity with this obligation.

Parties shall take the necessary legislative and other measures to exercise due diligence to prevent, investigate, punish and provide reparation for acts of violence covered by the scope of this Convention that are perpetrated by non-state actors.

5.1. Background and considerations for implementation

Under international human rights law, the state has both negative and positive duties: the obligation to refrain from any acts of violence against women and the obligation to protect women from violence perpetrated by other non-state actors (Council of Europe 2011b).

Failures to protect with due diligence must have consequences in democratic countries governed by the rule of law. For instance, as reviews of femicide cases reveal, authorities were often aware of the danger and risk factors, but the actions taken were insufficient. The life, health and freedom of many women and their children could be saved if the due diligence principle was applied professionally and thoroughly.

5.2. Problems and challenges

Due diligence and accountability

States are responsible to actively protect women and children survivors of violence and to provide immediate access to safe places in women's shelters at all times. It is not sufficient to provide protection and support only to certain groups of women. Children witnessing domestic violence also have the right to protection and support and must be admitted to women's shelters with their mothers. Witnessing violence constitutes psychological violence and jeopardizes the wellbeing of children.

Furthermore, as ECHR case law shows children are also in great danger of becoming direct victims of threats, physical violence and even homicides. For example, in the *Kontrova vs Slovakia* case, the European Court saw a violation of the right to life of two children, who stayed with the violent father after the mother had fled from the violence, and who were both killed by him. The authorities had known about the violent acts of the aggressor and had the obligation to actively protect the children from harm (ECHR *Kontrova v Slovakia*).

Hypothetical Case Study – What if?

Imagine the following: The mayor of a small town in your country has been the survivor of several assaults in the last months; the perpetrator is a citizen who dislikes him. He was reported to the police but remains at large.

One day, the perpetrator threatens to kill the mayor if he reports him to the police again. The mayor goes to the police to report the crime and expresses his fear of the man. The police again file a report, but no further action is taken. The following day the aggressor stabs the mayor in front of the Town Hall.

What would be the consequences, if a mayor of your town was assaulted, threatened with murder, and subsequently murdered? One probable consequence would be that a leading figure from the public prosecution services or police would be held accountable for their failure to protect the mayor.

Specialists working in the field of violence against women unfortunately see cases like these regularly. Women are assaulted and threatened by their former or current partners, whom they report again and again to the police and other relevant authorities (e.g. social services). However, the perpetrator is not effectively stopped by these authorities and thus, is eventually permitted to carry out his threat.

Due diligence must be exercised by states in all cases, to positively change societies and be effective in guaranteeing the right to live free from violence for every person.

This implies that state actors are held accountable if they discriminate against women, deny them support, and/or engage in victim-blaming and other harmful practices, which undermine the right of women to protection and support. Such behaviour is discriminatory and unacceptable; it is also the cause for secondary traumatising, which should be avoided according to standards in the Istanbul Convention and the Victims' Directive.

The state obligation to prevent violence and to protect women and girls from any form of violence includes legal measures of protection and women's shelters as protective measures, where women and children can find safe accommodation and support. Women's shelters have an important role to play in the protection of women in high-risk situations.

As the tragic case study (see box below) shows, police or court barring orders do not provide sufficient protection if the perpetrator is very violent and dangerous and/or has a substance abuse problem. In such cases women survivors of violence and their children must be protected by more efficient means. In cases of threats to kill and previous violence, perpetrators must be arrested and put in pre-trial detention. If the perpetrator has not been apprehended, women and children need to be accommodated in women's shelters with effective safety precautions. Such measures are of crucial importance and states should provide adequate funding for safe and accessible places in women's shelters. However, women's shelters cannot and should not replace legal measures for protection.

Case Study from Austria

In a situation of immediate danger, the police in Austria must issue an emergency barring order to protect victims, removing the aggressor from the home and/or the vicinity of the home for two weeks. This law has proven to be effective in a majority of cases, stopping the violence at least for a certain period of time. However, in cases of repeat and severe violence and situations of high risk, the police barring order is not sufficient and the aggressors should be arrested (see UN CEDAW 2007a and 2007b).

For instance, Sara (name has been changed), a young woman, was choked to death by her husband in front of her child who was not yet two years old. Despite a police barring order, the aggressor had forced entry

into the house via the balcony of a neighbour. Just a day before, the Vienna Intervention Centre attempted to find her a place in a women's shelter because the risk assessment carried out with Sara had shown a situation

of extreme risk and it was feared that the barring order would not provide sufficient protection. Sara had already packed her suitcase, but could not get into the shelter because no place was available that night.

Unfortunately, it was too late for Sara. She was killed while she waited for an available place. Her life could have been saved if a shelter place had been available immediately. Women's shelters can save lives, but a sufficient number of shelter places must be available in every European country, so any woman in Sara's situation will be able to access safe accommodation and will not have to pay with her life for lack of it.

5.3. Recommendations for policymakers

Due diligence entails that states and their governments are responsible to actively protect women and children from violence. All state actors must be familiar with due diligence obligations to protect survivors, especially those actors responsible for protecting people from violence, such as law enforcement and the judiciary.

- » The following are general recommendations for policymakers to ensure due diligence:
- » Ensure that **laws and their implementation are effective** in preventing a perpetrator from re-offending.
- » Provide **sufficient places in women's shelters** which are available at any time and in all geographical regions for immediate access to protection and support, regardless of a woman's status.
- » Require **relevant professional groups to understand the scope and legal grounds** for due diligence in violence prevention, and be familiar with case law from the ECHR (ECHR case law *Opuz v. Turkey* 2009, *Kontrova v. Slovakia* 2007, *Tomasic and others v. Croatia* 2009, and others, see ECHR 2017a. ECHR 2017b).
- » Establish **clear guidelines for police, the judiciary and other relevant institutions** on how to effectively protect and support women survivors of violence and their children
- » Establish **effective cooperation**, especially between survivor support services and police and the judiciary, to ensure all information available on risk and risk factors is taken into account
- » Require **attendance of a professional development course for all police, prosecutors and judges**, for a minimum of five days on the following:
 - › Understanding the problem of gender-based violence against women and their children, including the impact of violence and risk factors.
 - › Treating survivors with respect and in an empowering way.
 - › Refraining from any form of victim-blaming or minimisation of violence avoiding any form of secondary traumatisation of survivors.
 - › Developing methods of investigating violence against women and domestic violence thoroughly.
 - › Understanding due diligence obligations.
 - › Applying effective protective measures and sanctions and reacting swiftly and consistently to any breach of protection orders or new acts of violence.
 - › Learning about international human right cases on violence against women and domestic violence in-depth, especially case law from CEDAW and the ECHR.
 - › Working together with other agencies, especially with women's support services.
 - › Regularly review, assess and analyse case information to ensure that risk factors are identified and effective actions are taken to protect survivors and prevent perpetrators from re-offending.
 - › Ensure that women's shelters establish proper security measures to ensure the safety of women, their children and of staff, and provide heightened attention to cases of repeat violence.
 - › Develop within every state institution clear gender equality policies which counter discrimination against women and promote the advancement of women.

5.3.1. Recommendations regarding accountability

- » Swiftly report, prosecute and sanction state agents exercising violence, particularly police officers.
- » Apply adequate disciplinary sanctions for police officers and other relevant state actors exercising violence against women, irrespective of criminal procedures and possible criminal sanctions.
- » Immediately ban state actors who perpetrate violence against women from any position in which they come into contact with survivors of violence.
- » Remove civil law regulations which shield civil servants who committed violence and impede sanctions.
- » Sanction state actors who engage in victim-blaming, minimising violence and discriminating against women and girls, and ensure that the perpetrators receive intensive training before being allowed to deal with women survivors of violence and their children in their jobs.
- » Establish independent bodies to deal with failures of state actors which need to be thoroughly investigated, and include specialist women's support services and self-help groups as members of such bodies.
- » Ensure that women survivors of violence whose rights were violated receive assistance in individual and collective complaint mechanisms, such as CEDAW or the ECHR, as provided for in Article 21 of the Istanbul Convention.
- » Provide survivors with assistance in presenting such complaints

5.3.2. Recommendations for femicide and child homicide prevention watches

- » Establish a femicide and child homicide prevention watch in every country, together with women's NGOs to develop and implement effective measures to reduce the number of femicides/homicides against women and children.
- » Review femicide cases in a systematic way to identify weak points in the system, to protect and empower survivors and prevent perpetrators from re-offending.
- » Collect data on femicide and attempted femicide and regularly publish the findings.

6. The promotion of gender equality and non-discrimination through gender-sensitive policies

Article 6 of the Istanbul Convention establishes the requirement for gender-sensitive policies and requires all ratifying parties to include a gender perspective in the implementation of its provisions as well as in the evaluation of the impact of the provisions.

The Convention recognises that “the enjoyment of the right to be free from violence is interconnected with the parties' obligation to secure equality between women and men to exercise and enjoy all civil, political, economic, social and cultural rights as set out in the human rights instruments of the Council of Europe, particularly the ECHR and its Protocols and the European Social Charter, and other instruments, such as CEDAW” (Council of Europe 2011b: 54f).

Article 6 – Gender-sensitive policies

Parties shall undertake to include a gender perspective in the implementation and evaluation of the impact of the provisions of this Convention and to promote and effectively implement policies of equality between women and men and the empowerment of women.

6.1. Background and considerations for implementation

Efforts to eliminate violence against women and domestic violence, should always take into account that inequality between men and women is not limited to family and personal relationships, but pervade all levels of social and political life, including institutions such as law enforcement, the judiciary, social sector and health sector (Walby 2009). Gender inequality can lead to unjust and problematic practices, such as minimising violence against women or victim-blaming.

Gender-sensitive measures and policies are needed to avoid reproducing gender inequality through institutional practices. Measures to achieve equality are also needed on the macro level in politics, including fiscal politics and economics, to address the fact that women are still over-represented amongst poor and low income sectors of the population and under-represented in decision-making positions.

Measures to reduce inequality between women and men need to be strategically combined with measures to reduce violence against women and domestic violence. A comprehensive and coordinated policy on violence against women and domestic violence and a comprehensive policy on gender equality are needed to work towards the goal of a just society.

6.2. Problems and challenges

Challenges can arise when policies and laws do not recognize gender inequality, and when laws are not written in a gender-sensitive manner. In most European countries laws to criminalise or prohibit violence against women and domestic violence are formulated in a gender-neutral way, as if men and women were affected by the problem equally, which is not the case.

Instead, laws should be written using gender-sensitive language. It is important that policymakers recognize that men and women experience violence differently and acknowledge that additional measures are needed to support and empower women. Specific women's support services in Europe have developed standards to offer adequate and empowering support to women victims of violence and their children (see WAVE 2004). The support by specific women's services has also become a standard in the Convention (see chapter 6).

Another issue with gender-neutral laws is that they can be used and manipulated by the perpetrator. In some cases, women survivors of gender-based violence have been prosecuted because they were unable to protect their children from violence. Gender-neutral laws also tend to favour family stability over the safety and rights of the primarily female survivors, putting more women's lives at risk. (United Nations Division for the Advancement of Women 2010: p. 15).

It is essential that legislation is written from the perspective that gender-based and domestic violence is predominantly violence committed by men against women. For this reason, gender-neutral language does not protect the rights of women to a life free from violence.

6.3. Good practice examples

Spain, as opposed to most European countries, established a law on gender-based violence in 2004 ("violencia de genero"). The law is specifically addressing violence against women and it recognises that this includes not only physical but also economic and psychological violence. The law is multi-faceted and comprehensive. It includes a range of measures across different policy fields, for instance, criminal law measures, civil law provisions, labour law measures and immigration law (Gender Violence and Justice 2004).

6.4. Recommendations for policymakers and government officials

Measures to promote equality of women and men as a key element of preventing violence against women and domestic violence should encompass, but not be limited to, the following activities:

- › Ensure that policies on gender equality (National Action Plans) are coordinated with policies on violence against women and domestic violence.
- › Include a gender perspective in the implementation of the Istanbul Convention in all areas as well as in the evaluation of all policies.
- › Ensure that all measures focus on the empowerment and economic independence of women survivors of violence (socio-economic rights), including in the areas of: employment, education and training, labour rights, housing, financial aid, child support, childcare, independent residence permits, etc. (Istanbul Convention, Article 18.3).
- › Establish gender-sensitive and non-discriminatory practices in all relevant institutions, specifically in law enforcement and in the judiciary, but also for instance in health and social services, immigration authorities, and probation.
- › Introduce clear and binding policies and staff guidelines in all institutions for the promotion of gender equality, non-violence and against any form of discrimination against women.
- › Provide for (mandatory) training of all staff on gender equality and non-discrimination.
- › Apply gender-budgeting to ensure that financial and human resources allocated to gender equality and the prevention of violence against women are sufficient.
- › Establish the standard that support for survivors of gender-based violence must be based on a gendered-understanding of the problem.

6.5. Tools for implementation

Checklist 2: Promoting gender equality as a key element to eliminate violence against women

Country:

City & Date:

Organisation providing information:

Contact person:

| | | yes | no | n/a | Measures planned to implement the goal: |
|--|---|-----|----|-----|---|
| Gender sensitive policies | | | | | |
| 1. | Policies on violence against women and domestic violence include a gender perspective when implementing the Istanbul Convention in all areas. | | | | |
| 2. | All policies are evaluated from a gender perspective and address the question: What is the impact of these measures on women and girls? | | | | |
| 3. | Policies on gender equality and on violence against women/domestic violence are coordinated. | | | | |
| Gender-sensitive policies in institutions: police | | | | | |
| 4. | Percentage of female police officers in the police force | | | | |
| 5. | Are any strategies/measures in place to increase the number of female police officers? | | | | Which strategies/measures? |
| 6. | Number of female police officers in leading positions | | | | |
| 7. | Are any strategies/measures in place to increase the number of female police officers in leading positions? | | | | Which strategies/measures? |
| 8. | Do police have internal guidelines and policies in place to a) prevent discrimination against women and b) promote gender equality? | | | | |
| 9. | Do police receive internal trainings to a) prevent discrimination against women and b) promote gender equality? | | | | |
| Gender-sensitive policies in institutions: prosecution services | | | | | |
| 10. | Percentage of female staff in prosecution services | | | | |
| 11. | Are any strategies/measures in place to increase the number of female staff in prosecution services? | | | | What strategies/measures? |
| 12. | Percentage of female prosecutors in leading positions | | | | |
| 13. | Are any strategies/measures in place to increase the number of female prosecutors in leading positions? | | | | What strategies/measures? |
| 14. | Do prosecutors have internal guidelines and policies in place to a) prevent discrimination against women and b) promote gender equality? | | | | |

| | | | | | |
|---|--|--|--|--|--|
| 15. | Do prosecutors receive internal trainings to a) prevent discrimination against women and b) promote gender equality? | | | | |
| Gender-sensitive policies in institutions: judges | | | | | |
| 16. | Percentage of female judges | | | | |
| 17. | Are any strategies/measures in place to increase the number of female judges? | | | | |
| 18. | Number of female judges in appeal courts: | | | | |
| 19. | Are any strategies/measures in place to increase the number of female judges in appeal courts? | | | | |
| 20. | Do judges receive internal training to a) prevent discrimination against women and b) promote gender equality? | | | | |
| Gender budgeting | | | | | |
| 21. | Are any gender budgeting measures in place to promote gender equality? | | | | Types of gender-budgeting measures: |
| 22. | Are any gender-budgeting measures in place to tackle violence against women? | | | | Types of gender-budgeting measures: |
| Socio-economic rights of women victims of violence | | | | | |
| 23. | Employment/education/training | | | | Types of measures: |
| 24. | Labour rights | | | | Types of measures: |
| 25. | Housing | | | | Types of measures: |
| 26. | Financial aid | | | | Types of measures: |
| 27. | Child support | | | | Types of measures: |
| 28. | Childcare | | | | Types of measures: |
| 29. | Independent residence permit | | | | Types of measures: |
| 30. | Other areas | | | | Types of existing or planned measures: |

PART B – SPECIFIC REQUIREMENTS FOR IMPLEMENTING THE ISTANBUL CONVENTION

1. Costing and Budgeting: Appropriate financial resources for survivor support

Article 8 of the Istanbul Convention sets out the requirement that parties need to provide appropriate financial and human resources for the implementation of policies, measures and programmes to prevent violence against women and domestic violence:

Article 8 – Financial resources

Parties shall allocate appropriate financial and human resources for the adequate implementation of integrated policies, measures and programmes to prevent and combat all forms of violence covered by the scope of this Convention, including those carried out by non-governmental organisations and civil society.

The explicit reference to NGOs and civil society in this context means that the obligation to finance measures and policies to implement the Convention clearly lies with states and governments.

To address the issue of financing support for survivors we need to deal with two main questions:

- › What are appropriate financial and human resources in each country?
- › What common standards for investment in the prevention of violence against women and domestic violence should be applied?

The following sections try to provide answers to these questions and describe the current situation and problems concerning funding of effective measures to ensure the right for everyone, particularly women, to live free from violence in both the public and the private sphere, as required by the Convention.

1.1. Costs of violence

Without appropriate financial and human resources the goal of eliminating or even reducing violence against women and domestic violence simply cannot be reached. Without additional resources, these widespread human rights violations will prevail and continue to cause harm and suffering, which additionally entail huge economic costs. This not only includes the question of the costs of violence, but above all, the question of financing measures for prevention. What resources are needed in which sector in order to be successful in reducing and preventing violence against women and domestic violence?

A study published by the European Parliament in 2013 estimated the total costs of violence against women and domestic violence in the EU to be about €228 billion in 2011 (1.8% of EU GDP). This amounts to about €450 per European citizen per year.

1.1.1. Appropriate financial and human resources – The 10% of the costs of violence model

Given the high costs of violence against women it can be argued that it would be appropriate to spend at least the equivalent of 10% of the costs of violence against women on measures to prevent violence and to protect and support survivors.

Case Study from Austria

In a country like Austria, with approximately 8.7 million inhabitants, financial investments of €390 million per year would be needed. As the first Austrian NGO shadow report to GREVIO¹ shows, currently the investment in preventing violence against women is much lower.

The relevant ministry (Federal Ministry of Health and Women's Affairs) has a yearly budget of only €10 million at its disposal for all its work on gender equality and combating violence against women. It is evident that this budget is not sufficient for the effective implementation of the provisions of the Istanbul Convention, even if we take into account that other governmental bodies on the national and regional level also provide funds for the prevention of domestic violence.

The coalition responsible for the Austrian shadow report recommends that the budget of the Federal Ministry of Health and Women's Affairs should be increased from €10 million to €210 million annually. This is still much less than 10% of the estimated costs of violence, and amounts to an investment of approximately €24 per citizen in comparison to the actual costs of €450 per citizen.

This simple calculation reveals the necessity to enhance efforts to secure adequate funding for the elimination of violence against women and domestic violence. Alternative methods and models of costing are not currently known or available.

1.2. Problems and challenges

Costing and budgeting the prevention of violence against women and domestic violence

The GREVIO questionnaire requires parties reporting on the implementation of the Istanbul Convention to:

"... provide an account of financial resources allocated to the implementation of the above-mentioned policies, as required by Article 8, with an indication of the sources of financing (amount of financing allocated and its percentage of the total annual state budget; amount of financing allocated and its percentage of regional budget; amounts from other sources)" (Para II.B).

The questionnaire asks for information on the amount of financial resources allocated to the implementation of policies and measures of the Convention. This requires that cost estimations are carried out for all measures. Furthermore, GREVIO requires the amount of costs for all measures in relation to the total annual state budget are included and the percentage calculated.

This may not be an easy task for many governments, given that the relevant policies and national action plans often do not have budgets allocated to their implementation. In the Council of Europe analytical study from 2014, governments were asked if funds for governmental and NGO activities exist in their country (at national, regional and local level) and how much is available per year. Regarding funds for governmental activities, 39 out of 46 countries answered that such resources were available at national level, while 25 countries had resources available at the regional and 34 at the local level.

When asked how much money was provided for such activities per year, only 16 out of 46 countries were able to provide tangible figures. This means that approximately two thirds of the governments did not have any data available on how much money they invest in the violence against women NGO- sector.

Regarding funding of NGOs activities, 37 countries answered that such funds were available at the national level,

¹ GREVIO is the Council of Europe Committee monitoring the implementation of the Istanbul Convention. State parties are asked to provide a report on the implementation of the provisions of the Convention and NGOs working in the area of violence against women and domestic violence are also asked to provide information in the form of a shadow report.

24 countries reported about funds at the regional level, and 33 stated these were available at local level. Only 14 countries were able to provide some factual data on the budget for NGOs which support survivors and prevent violence against women and domestic violence.

The survey reveals the need for governments to improve their data collection on current investments in the prevention of violence against women and domestic violence. 25 governments stated that data on funding is missing due to decentralised budgeting. Therefore, systematic data collection needs to take place at all levels.

Public spending should be transparent and comprehensible, and it needs to be documented. Therefore, instruments such as parliamentary inquiries are one way to initiate a systematic approach to collecting data. Even if systematic data collection systems are often not in place, the implementation and monitoring of the Istanbul Convention requires systematic comparisons of costing policies and identification of budgets allocated to the implementation of relevant measures.

It seems that there is a need for a major shift in how investment in gender-equality is addressed, and how to begin reducing and eliminating violence against women and domestic violence. This can begin with the following questions:

- › What are the costs of violence against women and domestic violence in your country now?
- › How much more investment is needed to reduce and eradicate violence and support its survivors and in what time frame?
- › How can it be ensured that these investments are included in budget policy?

1.3. The provision of funding for specialist services – Private donors cannot replace state obligations

It is the obligation of the state to protect women from violence and to offer them support; however, in some countries, such as Armenia and Belarus, women's support services depend heavily on private donors and international aid because very little or no government funding is made available to them. International documents such as the Beijing Platform for Action and other UN resolutions urge governments to re-think and re-shape their budget and tax policies in order to guarantee basic human rights to all citizens.

Private donors and foundations have an important role when it comes to funding new initiatives and new models of service provision. Innovation is needed and donors/foundations are often more flexible in reacting to changing needs than governments. However, states should not expect private donors to fund ongoing service provision over the course of many years. Private donors are important in phases and places of developing democracies, when states have not fully developed the principles of separation of powers and of partnering with civil society organisations. Building women's support services is an important development, not only to secure women's human rights to live free from violence, but also for deepening democracy.

In some countries and regions, the tendency to deny organisations funding for survivor support activities has created a dependency on private donors. This problem has especially occurred in Eastern Europe and the Balkans. After the collapse of the Soviet Union and during the Balkan wars, international donors and foundations provided funding for women's shelters and helplines. After two decades, donors changed their funding policies and moved on, but the states often did not take up the obligations to fund these services, with the result that many women's shelters were forced to close again.

In several countries, donors pulled out because of the fact that the respective country had become a member of the EU. However, neither the countries themselves nor the EU stepped in to provide funding and women's support services were left facing another crisis. While in the accession phase, measures against violence against women were a requirement in negotiations with the EU as part of its gender equality standards. It seems that these requirements however become irrelevant once a country becomes a member state. Another cause for this situation is that the EU still does not have an integrated and comprehensive policy on violence against women (WAVE 2014).

The precarious situation regarding funding of specialist women's support services has resulted in such services being absent in many regions. Adequate funding means enough funding to secure the existence and sustainability of these services, with sufficient capacity to guarantee every survivor of gender-based and domestic violence professional and empowering support.

2. Women's NGOs filling gaps in state service provision

Over the past four decades in Europe, women's NGOs have developed a broad range of specialist support services for women and children who are survivors of domestic violence. These services apply a human rights based and gender-sensitive approach. To keep this focus and to work in the interest of survivors, women's support services need to be independent from state institutions, parties or religious groups.

Independence means that services need to represent survivors' rights vis-à-vis state institutions, and promote their interests. They need to have an independent voice and engage in awareness raising and attitudinal change towards violence against women and girls. Women's NGOs are civil society organisations and an important part of democratic societies and its principle of separation of powers.

State institutions and statutory agencies (e.g. social services) are powerful entities but cannot guarantee that survivors' rights are always at the centre of their activities. Therefore, many governments in European countries have developed the good practice of working in partnership with women's NGOs running specialist support services and providing full funding for their activities, whilst not running these services themselves.

Women's NGOs, although state-funded for their service provision activities, are still respected as independent experts who can raise their own voice for the rights of women survivors of violence. However, women's NGOs have to be fully accountable to the respective ministry or department regarding the funds they receive, as well as to the survivors. Such models of partnership between state and NGOs are based on democratic principles and contribute to the development of democracy. Corruption can be an obstacle to the development of effective governmental structures and partnerships between state and civil society.

2.1. From postcode lottery to long term funding models

Women's support services, such as women's helplines, women's shelters and various types of non-residential services such as rape crisis centres and intervention centres, often have the problem that their funding is not secure or sustainable and that fundraising takes up a considerable part of the human resources which should be used to support survivors of violence.

Many women's support services are required to reapply for funding annually from insecure funding streams, so continuation of work beyond the one-year period is not guaranteed. This hampers the effective development of organisations and prevents staff professional development. It is evident that this hinders long-term strategic planning, since women's support services have to be able to build their expertise and train staff over a longer period of time.

In many European countries, specialist women's support services are seen as temporary solutions, despite the fact that many of them have existed for decades. The right of every woman and girl to live free from violence, as enshrined in the Istanbul Convention and other human rights instruments, includes the right to adequate and empowering support.

There is a concerning lack of women's support services in Europe. The WAVE Report 2015 shows for example, that only five European countries fulfil the minimum standard recommended by the Council of Europe, to provide one shelter place per 10,000 of population. Over 50,000 women's shelter places are missing in Europe and in many countries and regions, women fleeing violence and their children have nowhere to go (WAVE 2016a).

Women's support services should be part of services normally provided to citizens, just as hospitals and schools. Their funding needs to be guaranteed long-term through laws and sustainable regulations.

2.2. Good practice examples

Scotland – collaborative guidance on commissioning specialist services for survivors of domestic abuse

In light of increased economic strains and a changing landscape in public procurement in Scotland, the specialist support organisation Scottish Women's Aid and the Convention of Scottish Local Authorities (COSLA²) have jointly developed the guidance "Good Practice in Commissioning Specialist Domestic Abuse Services". It aims to support good practice in the commissioning of services for women and children affected by domestic abuse (Scottish Women's Aid and COSLA 2016: p.4).

One of the major challenges mentioned in the guidance is the rising pressure on local governments to make savings, resulting in "a grave concern, with direct cuts severely impacting women and children in general, and specifically those affected by domestic abuse" (ibid.). Even if local authorities have to reduce their funding, the best possible options in commissioning processes should be based on an understanding of the needs and risks of survivors of domestic violence, who "are in need of specialist support and the local authorities that are funding such support" (ibid.).

In the guidance "commissioning" refers to activities and tasks involved in the assessment of need for services, the consideration of options for such services, the planning of future services, and working in partnership to put these in place.

There are different funding options available to commissioners of domestic abuse services in Scotland: grants, service contracts and compensation for non-economic services in the general economic interest (SGEI).

Domestic abuse services are usually not required to go through competitive processes such as tendering in Scotland. Some local authorities, however, are implementing such processes. As the guidance points out, the resource implications in such tendering processes can be significant both for local authorities and service providers and can thus undermine intended cost savings. For service providers, participation in such competitive processes may be hindered by lack of resources; as a consequence, well-established, local services may be ruled out.

To summarise, here are some of the most internationally relevant main points and recommendations from the guidance:

Whatever approach is taken, commissioning processes should aim at supporting services that meet certain quality standards and the needs of women and their children (cf. The Women's Aid National Quality Standards)³

- ▶ *EU and Council of Europe recommendations and obligations (Istanbul Convention, Victims' Directive) need to be complied with, as well as local and national rules.*
- ▶ *EU procurement principles and rules do not require a competitive tendering process or advertising for "Contracts valued at between £50,000 and £589,000 (...). Even where contracts are valued at above £589,000 there are certain exemptions for contracts which do not require an advertised process under the 2015 Regulations. Their application to domestic abuse services is, however, likely to be limited." (Scottish Women's Aid 2011: p.16)*

2 COSLA is the representative voice of Scottish local government and also acts as the employers' association on behalf of all 32 Scottish Councils.

3 Scottish Women's Aid, in partnership with other Women's Aid groups, has developed "The Women's Aid National Service Standards". They are based on the knowledge and understanding gained from over 40 years of work by the Women's Aid network. They are a benchmarking tool and outline the specialist nature of the services provided for women, children and young people affected by domestic violence. The service standards can also be used by local authorities in commissioning and procurement processes. See <http://www.scottishwomensaid.org.uk/sites/www.scottishwomensaid.org.uk/files/NationalServiceStandards-SummaryApril2011.pdf>

Commissioning processes should:

- › *Recognise the knowledge of those affected by violence; ensure their participation in commissioning process*
- › *Recognise the need for greater emphasis on quality rather than cost savings*
- › *Prioritise the protection and safety of children and women*
- › *Be informed by a gendered analysis of domestic violence; recognise gender inequality as a cause and consequence of violence against women*
- › *Ensure the continuity of good quality services*
- › *Recognise and value the knowledge and experiences of existing specialist services and their staff and involve them in the process – collaborative working in a partnership (involving the “routine use of co-production in service design” (Scottish Women’s Aid 2016: p.11)*
- › *Consider the long-term implications of the different commissioning approaches, including the resource implications for existing service providers*

The guidance further details some quality criteria that local authorities should seek in the services that they fund, such as the understanding of a need for women-only spaces, holistic, rights-based and person-centred support (Scottish Women’s Aid 2016: p.12).

3. Recommendations for budgeting and costing the prevention of violence against women and support services for survivors

The following recommendations aim at supporting policymakers and government officials in applying a systematic gender responsive budgeting approach to the area of violence against women and domestic violence. Developing and implementing national policies and action plans to prevent violence against women and domestic violence require an inter-sectoral and multi-level approach. Governmental work is usually structured in different departments and ministries and the challenge for an integrated policy is to coordinate and integrate their work. Therefore, a successful implementation of the Istanbul Convention requires the establishment of one or more co-ordinating bodies responsible for the coordinated implementation of the Convention. The competencies of such a body are crucial for its effectiveness and a purely coordinating role is not sufficient.

3.1. Recommendations:

- » **Analyse and monitor budgets** to determine the following:
 - › Are there sectoral and inter-sectoral allocations to women’s organisations/ institutions that co-ordinate efforts to address violence against women and domestic violence.
 - › What is the allocation and distribution of funds at both the national and local level?
 - › To which extent has gender-responsive budgeting been applied?
 - › Are survivors able to access free legal, health and economic support services?
- » **Continue the efforts to determine the adequate level of funding necessary to deliver all of the services required** to implement the provisions of the Istanbul Convention.
- » Apply a **systematic and gender-responsive approach to costing and budgeting** to prevent violence against women e.g. by requesting that the Ministry of Finance and/or similar agencies address this issue directly in their budgeting process.
- » **Establish a gender-budgeting group** dedicated to tackling violence against women and domestic violence
- » **Collaborate with sector-specific institutions/ministries/departments to include violence against women** and domestic violence in budgeting processes in specific areas (i.e. integration in school-curricula with ministry of education, guidelines and training for the health sector).

- » Allocate **adequate funds to the implementation of national policies** and action plans.
- » Undertake **systematic and transparent data collection and reporting** procedures that provide an accurate overview about spending on measures addressing violence against women and domestic violence.
- » Create **funding security for women's support services and avoid ineffective and labour intensive application procedures. Dedicate specific funding streams to the prevention** of violence against women and survivor support.
- » Ensure **cost effective and at the same time high-quality specialist responses** to women and children survivors of violence.
- » Ensure that the work of a coordinating body is based upon **laws and/or decrees which address violence against women, with a clear commitment from each department/ministry to actively participate** in the national policy framework. Provide the necessary financial and personal resources to develop, implement and evaluate policies in each sector, closely cooperating with others⁴.

4. Recommendations on standards and principles when funding specialist women's support services

As the WAVE Report 2015 shows, many specialist services required by the Istanbul Convention are still not available in a significant number of European countries. Women's NGOs have developed excellence in providing support to women survivors of violence but in many cases had to close due to a lack of resources. It is thus crucial that governments change their funding policies and provide appropriate funding to women NGOs running specialist support services for women affected by violence.

Costing of adequate support for women survivors of violence needs to take quantitative as well as qualitative standards into account. Support needs to be provided to all women survivors of violence and their children. Minimum standards, such as one women's shelter place per 10,000 of population should be implemented in all geographical areas (Council of Europe Task Force Report 2008).

4.1. Non-discriminatory core funding

Funding of services should be based on the principle of non-discrimination, as required by Article 4.2 of the Istanbul Convention. All women survivors of violence and their children are entitled to protection and support, without discrimination on any ground. Thus, funding regulations excluding certain groups of survivors are not in compliance with the Istanbul Convention. Restrictive and inflexible funding regulations can jeopardize the safety of women and children. The leading principle in non-discriminatory funding should therefore always be to ensure that no group is excluded from support. The best model in non-discriminatory funding is core funding, which is not based on individual survivors' entitlement to support.

4.2. Legal basis for the funding of women's support services

A legal funding basis for women's specialist support services must exist in federal systems, and on national, regional and local level. This legal framework is important for budgeting measures and securing sustainable funding for women's support services.

4.3. Core funding

A legal basis is important to ensure that women's support services receive core funding and do not rely on project-based funding. Core funding should be guaranteed for at least three years or be unlimited, and any service receiving public funding is accountable to the funders.

⁴ As Co-ordinating bodies in governments usually do not have budget authority, it is imperative that all departments/ministries provide resources in their own budgets for the implementation of national policies.

4.4. Safety as a principle in funding policies

The safety of survivors must be at the centre of every funding policy. Safety has many facets, including immediate and non-bureaucratic access to shelters. Women and children must have the right and possibility to access a shelter directly and at any time needed (24/7). All women's support services need to have effective security measures in place.

4.5. Funding to guarantee quality services to all survivors

Qualitative standards are crucial in funding policies. Safe accommodation and empowering, professional and gender-sensitive support by trained and experienced staff need to be provided to women and children in functional and comfortable environments. To guarantee a minimum standard of privacy in shelters, every woman and her child(ren) should be offered a self-contained living unit. Immediate access to safe accommodation, 24/7 services and multi-lingual and culturally sensitive support are quality standards that should be included in budgeting service provisions, to ensure equal access to support services for women from all backgrounds.

4.6. Tools for implementation

Draft-Worksheet

| |
|--|
| Aim: Establishing the overall investment needed to prevent and combat violence against women and domestic violence and to support survivors |
| <ul style="list-style-type: none">› What are the annual costs of violence against women and domestic violence in your country now?› How much more investment is needed to reduce and eradicate violence and support survivors and in what time frame?› How can it be ensured that these investments are included in the budget policy of your country? |
| Analysis of the current state of costs and investments: |
| Country: |
| Population: |
| Costs of violence against women and domestic violence: |
| Year: |
| Funds at the federal level: |
| Funds at the regional level: |
| Process of establishing and budgeting investments: |

5. Cooperation with women's NGOs

The Istanbul Convention recognizes and supports the important role of NGOs in eliminating violence against women and domestic violence, particularly those NGOs active in combating violence against women.

Article 9 – Non-governmental organisations and civil society

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

To support and encourage NGOs implies “enabling them to carry out their work in the best possible way.” (Council of Europe 2011b: Para 69).

The Convention calls for:

- » Recognizing, encouraging and supporting the work of NGOs in combating violence against women and domestic violence.
- » Establishing effective co-operation with NGOs.

5.1. Background and considerations for implementation

In many countries in Europe, specialist NGOs have long-standing experience in providing human-rights-based, victim-centred and empowering support. Thus, they have developed a pioneering, extensive knowledge base and standards and have formed networks of excellence (WAVE 2015a).

Many strong partnerships have been established between non-governmental specialist support services (e.g. women's helplines, shelters and centres) and governments. Such partnerships are usually based on a common understanding that support services for survivors of violence need to provide independent, human rights-based and gender-sensitive support to survivors and be funded by the government. These partnerships are based on formal contracts in which tasks, obligations and mechanisms of accountability of women's support services are defined.

5.2. The important role of women's NGOs as actors of change

The prevention and elimination of violence against women cannot be realized by normative measures and laws alone. As the Istanbul Convention points out, a whole variety of measures are necessary to eradicate the widespread human rights violations potentially affecting women and jeopardizing their fundamental human right to live free from violence.

Profound changes in society are needed to promote and establish equality between women and men and to eliminate violence against women. Society as a whole can profit from such changes since violence against women and domestic violence caused by inequalities and discrimination cause enormous material and immaterial costs (Walby 2004; European Parliament 2013).

There is a need to change attitudes and beliefs towards violence against women: a recently published Eurobarometer on violence against women shows that highly problematic attitudes condoning violence against women are still common and perpetuate harmful stereotypes (European Commission 2016). For instance, 27% of the interviewees stated that non-consensual sex could be justifiable in certain situations. Communities need to strengthen their efforts to engage in prevention work to reduce and eradicate violence against women and domestic violence.

Research clearly indicates that countries with many women's NGOs are taking more effective steps to counteract violence against women than countries with no or few women's initiatives (Htun and Weldon 2012). Gender equality can be achieved in society when women and girls are encouraged to participate at all levels and organise themselves to claim their rights, including the right not be subjected to violence. The Istanbul Convention requires parties to "take the necessary measures to promote programmes and activities for the empowerment of women" (Article 12.6). Htun and Laurel Weldon point out that political change can be initiated when women autonomously organise in civil society (Htun and Weldon 2012: p.564).

Key messages

- › *The contribution of civil society is key in changing laws and public opinion and in transforming social practices.*
- › *The role of women's NGOs is crucial after new policies and laws are adopted, to monitor their implementation.*
- › *States and governments aiming at being successful in preventing and eradicating violence against women and girls need to promote women's NGOs and an autonomous women's movement in all areas of society.*

5.3. Problems and challenges

Women's NGOs are a valuable part of civil society, unfortunately, they can face financial difficulties if they take a certain political stance or are critical of government policies concerning women's rights.

Supporting NGOs includes protecting them in carrying out their work as demanded by the United Nations Commission on the Status of Women which states that policymakers must "support and protect those who are committed to eliminating violence against women, including women human rights defenders in this regard, who face particular risks of violence" (United Nations 2013:9). NGOs, specifically women's NGOs working to end violence against women often face intimidation, threats and attacks in carrying out their work.

For example, in Serbia the NGO Women in Black were violently attacked while they held a peaceful commemoration of a wartime massacre. Four activists were injured and the entire group was subjected to threats of sexual violence from the attackers. Prior to this incident, a spokesperson for the police released a statement urging people to attack Women in Black, which was followed by intimidating demonstrations outside of the organization's office, as well as threats of extreme violence. (Kvinna till Kvinna 2016).

In response to events, such as the those in Serbia, governments should ensure that these acts of violence are dealt with as serious threats. Active support and encouragement by governments is of crucial importance to the safety of women's NGOs, and the continuation of their activities.

Furthermore, discrimination against women's NGOs can have the negative consequence that their expertise and potential to work against violence is lost, and so progress towards eliminating violence against women is impeded. Women's support services are often forced to close because of a lack of funding, or they live in constant fear of being shut down because of weak recognition and insufficient financial support.

States need to fulfil their promises to: "recognize the important role of the women's movement and NGOs worldwide in raising awareness and alleviating the problem of violence against women" (UN General Assembly: 1993).

5.4. Recommendations for policymakers

To ensure that women's NGOs are recognized, encouraged and supported in their work, they have to be firmly integrated in the intervention system and government policies to prevent violence against women and domestic violence.

- » Integrate women's NGOs at all possible levels and give them consultative status in policy making e.g. women's NGOs should be formal members of inter-ministerial working groups as part of a decision-making process, not 'guests'.
- » Protect representatives of women's NGOs from sexist, misogynist and violent attacks, from discrimination and from being discredited or hindered in their work.
- » Allocate appropriate financial and human resources for the adequate implementation of policies, measures and programmes carried out by NGOs and civil society.

6. The role of General Support Services compared to Specialist Support Services

The Istanbul Convention states that general support services have an important role "to assist victims and refer them to the appropriate services." Articles 22 to 26 then specify which specialist support services are needed. These specialist support services include shelters, telephone helplines, rape crisis centres, and support for children. All of which will be discussed in further detail in Section 6 of this Handbook.

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.*

According to the Istanbul Convention, it must be ensured that survivors of violence have access to health care and social services. Health care includes all necessary diagnostic and therapeutic treatment of injuries and impacts of violence, even if they do not have or are not entitled to health insurance. This also applies to undocumented women and children survivors of violence. Access to social services and social benefits to secure basic human needs such as food and sanitary goods, housing, and items to attend school for children must also be secured. Health and social services have an important role in providing assistance to survivors of violence and to refer them to the appropriate services. This means that health and social services are the ones addressing the problem, but they are not the appropriate agencies to help and support survivors beyond the first contact.

The GREVIO monitoring questionnaire requires that parties to the Istanbul Convention provide information about measures which ensure the safety of women survivors of violence within their general services. The questionnaire, which is used for monitoring the implementation of the Istanbul Convention, specifically refers to: financial support services, housing services, legal counselling services, psychological support services, education and training services, employment services and any other relevant service. (Council of Europe, GREVIO and Committee of the Parties 2016: 10f).

The specialist services needed are described in the articles on specialist support services for victims (see chapter 6).

6.1. The special role of health services

The health sector has great potential to reach women survivors of violence: according to the 2014 FRA survey, women survivors of violence most often seek help by visiting health services – a doctor, a health centre or a hospital – after the most serious incident of (sexual) violence (FRA 2014a).

General practitioners and hospital units are often the first agencies to encounter the problem. Even if women survivors of violence do not disclose the problem at the beginning, sensitive and considerate treatment of survivors can help them to start talking about the problem. Knowledge about the signs of violence, possible causes of injuries and other symptoms as well as basic skills in asking questions and addressing the problem help health practitioners to build trust and provide first assistance to survivors.

Training of health professionals is important, however training does not have a sustainable impact on the practice of health services, if health management is not involved. As in every agency, management is responsible for setting, implementing and evaluating standards on how health professionals should deal with the problems of violence against women and domestic violence. Clear and written guidelines are necessary to help ensure that the necessary steps to provide first assistance are taken, even in a stressful environment such as an emergency room.

In 2014 WAVE developed a joint manual with UNFPA for sensitizing the health sector to effectively respond to gender-based violence, titled “Strengthening Health System Responses to Gender-Based Violence in Eastern Europe and Central Asia: A Resource Package”. Further projects on the issue of guiding the health sector to strengthen responses to gender-based violence and to establish multi-agency support are three EU-funded projects: IMPLEMENT⁵, RESPONSE⁶, and WHOSEFVA⁷. All three projects strongly advocate for the need of management’s involvement and support in strengthening health professionals’ responses to gender-based violence, including implementing educational modules on gender-based violence in the curriculum for medical students.

6.2. Minimizing Repeat Referrals

The EU Victims’ Directive points out that repeat referrals should be avoided. It is stressful for survivors to talk about the violence they experienced to several people they do not know. This can cause secondary traumatization.

Additionally, repeat referrals can mean the women disengage from service provision prematurely as they feel their needs are not being met. In many such cases women then return to the perpetrator, which increases the risk of harm to her and (if any) children exponentially. Women are at significant risk at the point of separation from an abusive partner. 76% of women killed by their ex-partner or ex-spouse were killed within the first year that followed their separation. (Women’s Aid England 2016). Thus, referrals must be appropriately directed to specialist women’s support services. This standard would not be met if, for instance, women were first referred to general victim’s support services and then to specialist services. Referrals should be made directly to the appropriate specialist service.

6.3. Problems and challenges

One of the biggest problems in many countries is that there are not enough specialist women’s support services to refer survivors of gender-based violence to. Governments need to strengthen their efforts to provide for adequate numbers of such services.

Continuous multi-agency work is necessary to develop and keep high standards for appropriate referrals. Women’s support services also play an important role in this work. Unfortunately, women’s support services often lack the necessary resources to provide coaching and training to all relevant services. Women’s services need to be adequately funded not only to provide support to victims, but also to raise awareness and to carry out training

5 The project website can be seen here: <http://gbv-implement-health.eu/>

6 The project website can be seen here: <http://gbv-response.eu/>

7 The project website can be seen here: <http://whosefva-gbv.eu/>

for different professionals. Awareness-raising and the provision of training to general services, especially for staff in hospitals and other health services, are crucial tasks that specialist survivor support services need to receive resources for.

6.4. Recommendations for policy makers

- » Ensure management support and engagement for implementing a successful referral pathway to specialist women's support organisations, as they ensure motivation as well as resources (financial, spatial and human).
- » Health responses to GBV should be integrated as a mandatory part of the clinical curriculum in education.
- » Create and implement human rights-based and survivor-centred referral systems and ensure their development by health services together with specialist women's support services to ensure women receive adequate and tailored support.
- » Ensure that all survivors of violence, including undocumented or refugee women and their children, have access to healthcare and to specialist women's support services.
- » Incorporate interpreters/translators on site in health services to reduce potential language barriers.
- » Install harmonized data collection on violence against women as part of the standard health record.
- » Provide adequate funding for specialist women's support services to carry out awareness-raising activities and training as well as multi-agency work with general services.
- » States should implement Article 15 and Article 13 of the Istanbul Convention: all professions must be trained in GBV, particularly all medical staff, and each country should implement campaigns and inform victims about their rights and available support.

7. Specialist women's support services and key measures to empower survivors and prevent violence

The Istanbul Convention recognizes the necessity that all women survivors of violence receive specialist support and that general services refer them to appropriate specialist services.

General services play an important role in identifying the problem and in providing first assistance to survivors but they are not specialised in providing intensive and appropriate short-, mid- and long-term support. Just as in health care where specialist services and doctors are needed for specific problems, survivors of violence against women and domestic violence need to be referred to such services applying specific methods and principles, as described in this Handbook.

The Explanatory Report of the Convention defines **specialist support services** as follows:

"(...) dedicated services for victims of the different forms of violence against women made up of "specialised and experienced staff with in-depth knowledge of gender-based violence", including among others counselling centres, shelters, rape crisis centres and sexual violence referral centres" (Council of Europe 2011b: p. 11).

Generally there are three main types of specialist women's support services:

- » Women's helplines providing 24/7 support to survivors on the phone;
- » Women's shelters offering residential support to women victims of violence and their children;
- » Women's centres offering non-residential support in the form of counselling, advocacy, court-accompaniment, outreach, and other services. Women's centres include Women's rape crisis and sexual assault centres, intervention centres and women's counselling centres, family justice centres, outreach and other non-residential support services, but also services for specific groups of women such as migrant and asylum-seeking women and victims of forced marriage.

The crucial role of specialised services is reflected in the Istanbul Convention, where a number of relevant Articles detail the required standards for each party to the Convention. Article 22 deals with all forms of specialist support services, while the subsequent Articles 23 to 26 detail specific services and support for special groups:

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 survivor 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.*

7.1. Background and considerations for implementation

Availability of women's support services

The Explanatory Report of the Convention refers to the recommendations on service provision as set out in the Council of Europe Task Force to Combat Violence against Women, including Domestic Violence 2008 Final Activity Report: (Council of Europe 2008). These include:

- › 1 place in a women's shelter per 10,000 inhabitants.
- › 1 rape crisis centre available per 200,000 women, covering all geographic regions.
- › 1 women's counselling centre available per 50,000 women.
- › For details on helpline recommendations see page 40.

Accessibility of specialist women's support services

The Convention requires services to be easily accessible. This includes services that are effectively accessible by women or children with disabilities, including adapted infrastructure and outreach to victims with specific disabilities, such as hearing and visual impairments. Accessibility also means that all groups of women are admitted to services without discrimination on any grounds (see also chapter 2.1). The principle of accessibility further requires that women in all regions of the country, including rural areas, have access to services.

Coordinated policy on the provision of specialist women's support services

The provision of specialist women's support services needs to be part of every governmental policy on violence against women and domestic violence. This involves calculating and planning how many and what kind of women's support services are needed, which services already exist, which are still missing and how the number of services will be increased. Costing and budgeting for specialist services are further important steps to implement policies.

As considerations differ in part depending on the different forms of support services (i.e. residential vs. non-residential services), the specific backgrounds and standards for each of those forms are discussed separately below.

7.2. Women's shelters

Women's shelters need to provide empowering and professional support to all women and children, based on their human rights and safety. Women's shelters, as other specialist services, "shall be based on a gendered understanding of violence against women and domestic violence" (Article 18 of the Istanbul Convention).

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 survivors, especially women and their children.

The following 15 standards for women's shelters guarantee a human rights-based, gender-sensitive and survivor safety oriented approach and should be the basis for governmental policies and funding of women's shelters (WAVE 2004).

Open and accessible to all women and their children without discrimination

All women survivors of violence and their children should have the right to access shelters, regardless of their background, their residence or any other status. Practice shows that some groups face barriers in accessing shelters. In particular, undocumented women for whom women's shelters are of fundamental importance to their safety, are often afraid to turn to the police or the judiciary. Unfortunately, these women are frequently denied access to women's shelters based on their legal/migratory status (PICUM 2012). This is not only a violation of the right to non-discrimination, but also a violation of the due diligence principle and the right to live free from violence. All such barriers impeding access to shelters should be removed by states.⁸

Accessibility also needs to be guaranteed for women or children with disabilities. This means sufficient funding for women's shelters, so that they can ensure accessible places. Furthermore, any barriers based on geographical/regional location need to be removed (from administrative or funding regulations). Shelters should be able to accommodate survivors from other municipalities to guarantee the safety of all women and children seeking shelter.

Women's shelters are also children's shelters

Violence against women gravely affects children. Witnessing violence against the mother is a traumatic experience for children and constitutes violence against the child. Therefore, it is of great importance that children are always admitted to shelters with their mother and that adequate support and protection is provided to every child. Women's shelters need to admit children without any age restrictions.

Specific shelters for women affected by specific forms of violence

Women's shelters should be open to all women who have become victims of physical, psychological, emotional, sexual and economic violence committed by a partner, former partner or member of the family and to their children. As stated in the Istanbul Convention, domestic violence affects women disproportionately; most survivors of domestic violence are women and most of the perpetrators are men. However, women are in some cases abused by same-sex partners or by an – usually older or higher-ranking – female member of the family (particularly in hierarchically structured societies). It is advisable that women's shelters also accommodate women survivors of other forms of gender-based violence and their children, for instance victims of stalking. However, for women survivors of trafficking or women and girl victims of forced marriage, specific shelters with high safety precautions are needed.

Clear stance against violence and for a survivor-centred approach

Acting against violence means adopting a clear stance and condemning violence against women in all its forms. Women who come to the shelter should not have to offer proof of the violence they have undergone. Survivors need advocates who stand beside them and support them throughout the entire process.

⁸ This does not create a right to a residence permit.

Immediate access 24/7

Women survivors of violence and their children need to be guaranteed immediate access to women's shelters when they need it. Thus, shelters need to be open 24/7. If there is more than one shelter in a town, at least one should be able to accommodate a woman and her children at any time. Deciding on admission should be within the prerogatives of the shelter. Excessive bureaucratic procedures of admission are to be avoided as they can jeopardize the safety of women and their children.

The right to stay as long as necessary

Time limits on the stay in women's shelters are problematic, especially if they are short. If a woman is only allowed to stay a few days or a few weeks, and if she is not offered a good option after this time, she will be experiencing high levels of stress from the beginning and be worried about where to go with her children. Thus, the possibility to stay in a women's shelter as long as needed is essential; only this standard guarantees a human rights based approach, which has the needs and safety of survivors at its centre.

The principle of women helping women with the aim of empowerment

Women survivors of gender-based violence suffer greatly from being dominated and abused by men. It is therefore important for women to receive support and help from a woman advocate specialised in the field. Women's shelters serve as a model for women to experience their own ability to lead an active and self-determined life. This needs to be reflected in an empowering structure of a women's shelter where women not only work at grassroots level but also take leadership roles.

Confidentiality and Anonymity

To protect a woman's human rights and her integrity, it is necessary that she is able to decide which information about her life is shared. No information should be passed on by a shelter without consent. Exceptions can be made if the life and health of a woman or her children are at stake (i.e. suicide attempts, acute danger posed by the violent partner, or women abusing their children); women should be informed upon their arrival at the refuge about these limitations of confidentiality. Women survivors of violence should also have the right to receive counselling and support in women's shelters without having to reveal their identity, if they wish.

Respect for the dignity and right to self-determination of each survivor

A human rights-based and survivor-centred approach means that the will and the decision of each woman is respected; her dignity and right to self-determination are at the core of her stay in the women's shelter. It is a personal decision and a human right for a woman to either stay with the violent partner or to separate from him. Support offered by women's shelters is voluntary and survivors should never be obliged by authorities to go to a shelter or to take any other step. Considering the right for self-determination and that the way out of a violent relationship is an individual process, women's shelters should be able to offer the possibility to survivors to leave and come back if needed.

Safety

Safety and security are paramount in women's shelters. Some perpetrators track women and even if women's shelters try to keep their address secret, it can be discovered. Professional security precautions in and around women's shelters are necessary to guarantee that women and children can live safely in the shelter. It is problematic if government authorities do not invest enough in safety, since in dangerous situations security precautions and systems can save lives. Measures such as safe entrances, guards, technical monitoring systems and alarm systems are necessary to make a shelter a safe place for women and children. These safety precautions include an appropriate layout of the building and a protection scenario for women and their children (including integration of protecting anonymity and the maintenance of a secret address). All employees, volunteers and activities fully follow the protection scenario recommendations and are vigilant regarding the respect of these principles also by the organisations and institutions.

Comprehensive and holistic support for women and children

Women's shelters need to offer comprehensive and holistic support to all women and their children:

Support for women survivors of violence should include the following:

- › Immediate crisis support when coming to the shelter.
- › Individual counselling and support throughout the stay in the shelter and afterwards.
- › Legal counselling and accompaniment to police, courts or other authorities.
- › Health care and wellbeing, self-defence.
- › Support in their role as a mother.
- › Support with securing post-shelter housing, financial matters, employment and training.
- › Adequate support for migrant, refugee/asylum seeking or minority ethnic women as well as for women with disabilities and other women with special needs.
- › Support to personal and civil rights.
- › Support to break isolation and access to culture, sports and leisure.

Support for children should include:

- › Ongoing support from arrival until leaving the shelter and beyond.
- › Individual support as well as group work and alternative methods of support, like art therapy.
- › Recreational and educational activities.

Free of charge services

Women's shelters should be free of charge, at least for women with little or no income. This is to ensure that women and their children in need can access shelters independently of their financial status.

Participation and democratic structures

Democratic structures and the opportunity to be involved in the various aspects of shelter life are very important principles. In women's shelters, there are usually regular meetings which are the basis of participation for women. It is important to be careful that women's shelters are not turned into institutions in which the women's lives are dominated and controlled, but that women are included in the operational processes. The power of the violent (ex-) partner should not be replaced by the power of the institution. Shelter staff are called upon to handle power carefully and to enforce the necessary regulations in such a way that they provide guidance without putting too many limits on women's individual freedom. The organisation of the shelter should also reflect these goals by promoting democratic principles, sharing power and avoiding excessively hierarchical or bureaucratic structures. Participatory structures ensure that all residents of a women's shelters live together in an atmosphere of solidarity and equality.

Quality of service

Professionalism is a prerequisite for the full implementation of principles. Staff in women's shelters must be adequately trained and paid. Provisions must be made for ongoing training and supervision. The number of staff must be appropriate for the number of resident women and children, to provide all the necessary support and required services. Some shelters are dependent on support by volunteers, and therefore volunteers should be well-trained. Resources should be managed economically and efficiently. Quality standards should be checked through regular quality controls.

Independent structure and funding

Women's shelters are human rights based services and should be run by independent non-governmental, non-profit and non-political party women's associations. Women's shelters should work in partnership with the state and receive appropriate funding by the state, to fulfil their necessary functions for society of protecting and supporting women to live a life free from violence.

7.3. Women's helplines

The Istanbul Convention requires parties to set up national 24/7 telephone helplines that are free of charge. The Convention also requires that specialist women's support services are provided to all women survivors of violence and their children. Thus, general helplines would not be enough and many countries in Europe have set up women's helplines to provide adequate support to women survivors of gender-based violence.

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.

Women's helplines offer confidential information and support to survivors of violence to keep themselves and their children safe, as well as empower them to understand their own situation and needs. They inform survivors about women's shelters and local support services. Women's helplines also provide callers with a range of information on protective measures such as emergency barring orders and restraining orders, financial aid, housing or support for children. Women's helpline workers, who have specialist training in all forms of gender-based violence, encourage survivors to exercise their rights and take steps according to what feels right to them at any given point.

Women's helplines provide low-threshold support on the phone, where victims do not have to reveal their identity or visit a service. They can call repeatedly without feeling under pressure to take further steps, and support survivors. Concerned family members, friends or colleagues of victims of domestic violence or other forms of gender-based violence can also contact the women's helpline for information. Some women's helplines also offer additional services, such as face to face counselling, support via e-mail or online help-chats.

Key elements for good quality women's helplines:

- › Operate 24/7.
- › Free of charge (and the helpline number should not show on the bill).
- › Offer confidential support to women survivors of all forms of gender-based violence by trained, specialist female helpline workers.
- › Provide information to people calling on behalf of survivors.
- › Apply a gender sensitive support based on the human rights and the safety needs of the individual survivor.
- › Non-judgemental staff who provide empowering support, engage in active listening and provide information including options for women survivors of violence.
- › Collects data while respecting the rights of survivors to remain anonymous.

7.4. Women's Support/Intervention Centres

Women's centres cover all specialist support services offering non-residential support to women survivors of violence and their children. Such non-residential support can take the form of advocacy, counselling, advice, practical support, pro-active support, court-accompaniment, outreach services and other services. 'Women's centres' describe a range of different types of specialist support services for women which have been established over the past decades in Europe. Some of them are specialists for the support of specific groups of survivors, certain forms of violence or a specific approach. Women's centres include: women's crisis or counselling services, centres for victims of rape and sexual assault, intervention centres and family justice centres, outreach- and other non-residential support services, services for specific groups such as migrant or asylum-seeking women and victims of forced marriage.

Not all women affected by violence are also in need of accommodation, therefore a women's shelter is not necessarily the appropriate service for everyone. Therefore, non-residential support by specialist services needs to be made available to all women survivors of violence and their children. Women's centres serving all women survivors of gender-based violence and their children need to exist in all regions of a country. Women's centre workers need to be trained in supporting survivors of all forms of violence, including survivors of sexual violence and rape, especially if specialist centres for rape and sexual assault are not available.

Specialist women's support services should be able to meet the particular needs of groups such as black and minority ethnic or migrant women, including undocumented migrant women, by making adequate funding available. Where such special centres cannot be established, women's centres should have specially trained staff able to meet the needs of all women survivors of all forms of violence, including women with special vulnerabilities and needs.

Support for women survivors of sexual violence

Because of the specific traumatic impact of sexual violence, specialist support to survivors of such violence is needed and it is particularly important for the survivors' protection and feeling of safety, to receive support in women only places. The provision of support services for victims of sexual violence is established in Article 25 of the Istanbul 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

The traumatic nature of sexual violence, as well as the specific nature of sexual violence crimes (often the survivor is the only witness) requires trained staff and a sensitive approach. Survivors often need medical care and immediate forensic examinations to collect crucial evidence for successful future prosecution. Therefore, sexual referral centres situated in hospitals are important facilities. However, not all survivors of sexual violence will have access to such centres and it is necessary that regional rape crisis centres are able to provide adequate support to victims of sexual violence, to document violence and to collect and store evidence properly.

The Explanatory Report of the Istanbul Convention quotes the Final Activity Report of the Council of Europe Task Force to Combat Violence against Women, recommending that one centre for women victims of sexual violence should be available per every 200,000 inhabitants, covering all geographic regions (Council of Europe 2008: p. 51).

The Istanbul Convention also applies to situations of armed conflict (Article 2). In times of conflict and post conflict, the rates of sexual violence increase, as rape, forced prostitution and sterilization are all used as weapons of war. Measures to prevent sexual violence and to support women survivors need to be set up in/near conflict zones as well as within facilities for refugees. The UN High Commissioner for Refugees has developed a set of guiding principles for service provisions to refugee victims of rape (UNHCR 2003).

Support for children

Children are always affected by violence against their mother, as witnesses but also as direct survivors of gender-based violence. Thus, women's centres should also be able and have resources to adequately support children as witnesses and survivors. Minimum requirements for the protection and support for child witnesses are detailed in Article 26 of the Istanbul Convention.

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.*

7.5. Quality standards and principles of specialist support to women’s survivors of violence and their children

WAVE has established core standards for specialist support services for women survivors of violence and their children. These encompass residential and non-residential support services. These principles and guidelines have been developed so that the needs of survivors of violence and their human rights are guaranteed (see WAVE 2004, 2014, 2015b). The standards reflect needs expressed by survivors in the FRA 2014 survey and are in accordance with the main principles of the Istanbul Convention and the EU Victims Directive. These can be used when establishing or evaluating specialist services for women survivors of gender-based and domestic violence.

8. Risk Assessment and Multi-Agency Work

Article 51 of the Istanbul Convention obliges all relevant authorities to formulate individual plans for all women based on the different safety risks they are exposed to. It is essential that risk assessments appropriately gauge the seriousness of the situation, as serious or deadly violence are often threatened by perpetrators, especially those perpetrators who own or have access to firearms (Council of Europe 2011b: p. 44).

Article 51 – Risk assessment and risk management

- 1. Parties shall take the necessary legislative or other measures to ensure that an assessment of the lethality risk, the seriousness of the situation and the risk of repeated violence is carried out by all relevant authorities in order to manage the risk and if necessary to provide co-ordinated safety and support.*
- 2. Parties shall take the necessary legislative or other measures to ensure that the assessment referred to in paragraph 1 duly takes into account, at all stages of the investigation and application of protective measures, the fact that perpetrators of acts of violence covered by the scope of this Convention possess or have access to firearms.*

In Article 51, the Convention sets out the standard for all relevant authorities to adequately assess the seriousness of the situation of each individual survivor and consider probability of repeated violence or potentially lethal risk. Paragraph 2 places special emphasis on investigations and the application of protective measures in situations when perpetrators possess or have access to firearms.

In terms of multi-agency work, Article 7 - Comprehensive and co-ordinated policies - importantly highlights the need for “state-wide effective, comprehensive and coordinated policies encompassing all relevant measures to prevent and combat all forms of violence covered by the scope of the Convention and offer a holistic response to violence against women.” Parties shall ensure that policies referred to in paragraph 1 of Article 7 are centred on the rights of the survivor and are carried out through cooperative coordination between all relevant actors.

In this respect, a holistic response to violence against women and domestic violence is to be understood as the

ability to meet all of the survivor's fundamental needs, including "social and economic rights, the right to permanent and affordable housing, free health care, education, access to justice, access to the labour market, the right to a residence permit independent of the spouse or partner, as well as political, cultural and other rights" (Logar and Marvanová Vargová 2015: p.15).

8.1. Background and considerations for implementation

From a preventive and protective point of view there are big differences between cases of general and domestic violence. Domestic violence is typically a **repetitive crime** with a specific dynamic and a tendency to escalate over time. In cases of severe domestic violence, we can usually find a history of previous abuse. Many survivors and perpetrators are already known to different institutions and organisations (e.g. police, health care system, social welfare system, specialist centres for victims) due to previous contact. This fact creates a unique opportunity to protect survivors of domestic violence and hold perpetrators accountable. Survivors are often threatened with serious violence, including death. These threats must be taken seriously and the severity of the situation must be assessed adequately. It is essential that any risk assessment and risk management consider the probability of repeated violence, notably fatal violence.

Every part of the chain of prevention and support has responsibility for making decisions about effective protective measures and actions that will hold perpetrators accountable. Moreover, there is an obligation of the state to protect those whose lives are at risk (ECHR 2009, Para.51).

The Explanatory Report to the Istanbul Convention states that Article 51 "establishes the obligation to ensure that all relevant authorities, not limited to the police, effectively assess and devise a plan to manage the safety risks a particular survivor faces on a case-by-case basis, according to standardised procedure and in co-operation and coordination with each other" (Council of Europe 2011b: p.44). This means, in practice, that each agency in contact with the survivor should have trained and skilled personnel to assess risk and follow with a safety plan. However, single-agency interventions are less effective in preventing violence than a more holistic, coordinated multi-agency approach. Therefore, multi-agency risk assessment and safety management is needed. The Explanatory Report to the Convention emphasizes the role of multi-agency networking in providing coordinated safety and support through the management of the identified risk.

What does 'risk' mean?

For effective preventive and protective measures, there needs to be in place a common understanding of risk and risk factors. This premise is especially important in multi-agency settings. Different types of risk can be assessed: risk of repeated violence, risk of serious harm, risk of lethal violence or femicide/homicide, and safety risks for the children including direct violence and kidnapping. For each type of risk assessment, different tools can be used and different types of protective measures can be applied.

Risk is constantly changing

Both practice and research show that risk is a dynamic and constantly changing variable. It is therefore essential that risk assessments are done systematically and repeatedly, in close cooperation with the survivor and with attention to the changing situation of the individual survivor, aggravating factors and, importantly, to the individual needs and concerns of the survivor. Survivor's safety should be at the heart of any intervention in cases of violence against women. Risk assessment is a constant process that has to be followed up by risk management and safety planning, and a review of its effectiveness and re-assessment.

Risk assessment

Risk assessment is a process of identifying risk and protective factors against violence. The risk of violence is multi-faceted and it is important to also consider the possible nature, seriousness, frequency/duration and imminence of any future violence (Hart 2008: p.7-18). The aim of a risk assessment is not to predict risk, but rather to assess it. We cannot eliminate risks, but we can implement protective measures to reduce harm. It is important to mention that the level of risk is related to the perpetrator, as he is responsible for the danger the survivor is facing.

Risk factors

In the last two decades there has been an increasing effort towards a more systematic risk assessment and identification of risk factors. A number of structured, empirically based instruments have been developed to identify risk of re-assault and to assess cases that are more likely to escalate to severe or lethal violence.

There are several studies focusing on identification of risk factors related to domestic violence and violence against women. There are areas of risk factors that are similar or identical across different risk assessment tools. Most risk assessment tools map the history of different forms of domestic violence, recent violent incidents, any criminal history of the perpetrator, substance use by the perpetrator, the use of/or access to weapons, and other factors. Some risk assessment tools also consider other forms of domestic violence and violence against women such as threats, sexual violence, controlling behaviour, jealousy or stalking. Risk factors can be characterised in different ways. In the learning resource Protect II (WAVE 2012), for instance, five categories of risk factors are distinguished:

- › Forms and patterns of violence
- › History of violence
- › Risk factors related to perpetrator's attitudes and behaviour
- › Survivor's perceptions of risk
- › Aggravating factors

A literature review shows that the simplest and most reliable risk-identifier for domestic violence is previous assault or repeated victimisation. Another significant risk-identifier is separation. The risk level of separation is linked to the level of child contact, which can provide the opportunity for violence to continue or escalate. Research from the United Kingdom shows that after separation, more than 75% of women from the sample suffered further abuse and harassment from their ex-partners and that child contact was a moment of particular vulnerability for both women and their children (Humphreys et al. 2005). Thus, it is particularly important to pay attention to the post-separation risk. Moreover, this is a period when many women who have been subjected to violence make contact with different agencies. (Walby et al. 2000).

Survivor's perception of risk

If single agencies or multi-agency teams assess the risk for a particular woman, they need to do it with her, not for her. It is essential to respect her knowledge of the perpetrator and the current situation as well as the history of their violent relationship. Even if she experiences violence in her relationship, she is still the expert of her own situation and life. Thus, in order to have the best outcome - a realistic and realisable safety and risk management plan - the risk needs to be assessed and appropriate safety measures should be planned in close cooperation with the survivor.

Moreover, the survivor's perception of risk is a significant element in the process of risk assessment. As stated by Connor-Smith et al. (2011), "recent studies support the validity of both structured risk assessment tools and survivor perceptions as predictors of risk for repeat intimate partner violence" (Connor-Smith et al. 2011).

To prevent secondary victimization⁹ and to decide which measures will be most beneficial for the survivor, attention needs to be paid not only to her own perception of risk, but also to her needs and rights, as the Explanatory Report to the Istanbul Convention points out.

Even if the survivor's prediction of risk is relatively accurate, particularly in situations of high risk of severe or lethal violence, some victims may underestimate the potential danger of a situation. As research shows, only 47% of femicide victims and 54% of the victims of attempted femicide accurately assessed that their perpetrator was capable of killing them (Roehl et al. 2005). This phenomenon has become a normal response to high risk situations. Thus, professionals supporting victims towards a safer life need to be aware of this fact and sensitive to the possibility that the survivor's own assessment of the risk may underestimate the real danger.

⁹ The victim-blaming attitudes, behaviours, and practices engaged in by community service providers, which results in additional trauma for abuse/sexual assault survivors." The Advocates for Human Rights, http://www.stopvaw.org/secondary_victimization

Risk assessment tools

There is a wide range of different checklists, protocols, projects and other risk assessment tools available. The most commonly used risk assessment tools include the Spousal Assault Risk Assessment (SARA; Kropp, Hart, Webster, & Eaves, 1995), the Domestic Violence Screening Instrument-Revised (DVSI-R; Williams & Grant, 2006), the Ontario Domestic Assault Risk Assessment (ODARA; Hilton et al., 2004), and the related Domestic Violence Risk Appraisal Guide (DVRAG; Hilton, Harris, Rice, Houghton, & Eke, 2008) or the Danger Assessment (DA; Campbell, Webster, & Glass, 2009)

As mentioned before, several studies have found that victims' risk assessment can be as accurate as an assessment done by evidence based risk assessment tools. Connor-Smith et al. pointed to some differences between risk assessment tools and survivor's prediction of risk (Connor-Smith et al. 2011). They found that the most structured, empirically based risk assessment tools tend to focus on static, historical factors (e.g. previous criminal history, breach of restraining orders, etc.) and are likely to be relatively stable over time, while victims of domestic violence focus more on dynamic factors (e.g. perpetrator facing new stressors, such as separation, upcoming court hearing) within an actual context of their relationship. Therefore, victims' perception of risk is more likely to fluctuate following changes in these dynamic factors. As Connor-Smith et al. suggested, combining survivor risk assessment with structured risk assessment tool leads to more accurate predictions than either approach produces alone.

Benefits of risk assessment

If properly applied, risk assessment:

- › Serves as a language for communicating concerns about danger and the recommended steps to be taken for preventing violence (Kropp 2004).
- › Provides more appropriate responses to deteriorating situations and escalating violence.
- › Ensures better matching of safety plans to the level and nature of risk.
- › Allows for coordinated responses to complex cases from a range of agencies.
- › Improves safety planning and increases protection for women and their children.
- › Can help to increase the survivor's awareness of the risks she faces and come to a more realistic appraisal of the danger in her situation (Roehl et al. 2005).

How can risk assessment and safety planning be successful in empowering survivors?

Practitioners should provide an environment that makes women feel comfortable. Survivors should be given all information needed to understand the purpose of the risk assessment and why certain questions are being asked. This is important to gain the trust necessary for them to share information on the abuse and to help address any fears.

In order to empower women survivors of violence and improve their safety, attention needs to be paid not only to the risk factors related to the situation, but also to the individual needs of each survivor. Survivors know best what their needs are, in relation to safety and a better quality of life. It is the responsibility of advocates and those in positions to support survivors, to listen to her and build on her experiences. Practitioners often tend to focus on ending the violent relationship as the primary goal. However, the reasons behind a survivor choosing to remain in a violent relationship are varied and complex. If she decides to stay, it is her right to do so and appropriate protective measures to deal with the situation should be found. Safety planning should support the survivor and improve the quality of her life. It should be a summary of options available to her and actions that will be taken by agencies to support her and prevent the perpetrator from further violent actions.

Empowering support through risk assessment and safety planning implies that victims are:

- › Carefully listened to, respected, understood and believed;
- › Informed about their rights and measures that can be taken to improve safety;
- › Respected in their decisions and validated in their experiences, and
- › Supported actively in identifying and realising their rights and needs.

8.2. Problems and challenges

Risk assessment tools such as various checklists and questionnaires can be helpful instruments in the process of risk management, in order to ensure that survivors receive appropriate and effective protection. However, if these tools are used, potential limits and risks associated with their use should be kept in mind. High quality risk assessments require specific training and supervision: professionals need to be trained in how to use these instruments, how to evaluate risk and which tool is appropriate in which situation. Generally, if an institution uses a risk assessment tool, the institution does not use more than one. This can be potentially risky, because, as mentioned earlier, some tools assess risk of re-assault, others risk of lethal violence or femicide. This may lead to underestimating 'medium' or 'standard' risk situations. Awareness should always be maintained regarding what kind of risk is being looked at by keeping in mind that if, for example, the lethal assault assessment tool does not show high risk, this does not mean that the survivor is not in danger of re-assault and that she may need protection and help. Humphreys et al. pointed out the danger that in poorly performing forces the risk assessment model could be used only sporadically, leaving all but the high-risk cases without adequate service (Humphreys et al. 2003). It is crucial that services and adequate support are never denied to any survivor on the basis of the results of any risk assessment tool.

Training of professionals is also required in the area of interviewing skills. It is not easy for victims to speak about very intimate issues such as sexual violence, death threats or different forms of humiliation. Using risk assessment tools should not become an impersonal "routine procedure". Establishing good rapport and dialogue with the survivor is essential for getting as much important information as we can.

Furthermore, there is ambiguity (both in practice and research) regarding the term risk. There can be different understandings of this term, not only in multi-agency setting, but also within one agency. Therefore, it is necessary to clarify definitions and set up clear risk assessment guidance for all relevant practitioners. In research, it can be difficult to establish how different risk factors interact and which risk factors relate to which outcomes (i.e. which risk factors cause emotional harm, injuries or severe injuries, potentially lethal harm). It is also complicated to weigh or classify different risk factors according to their significance. Some risk factors might be more important than others, but also the respective combination of risk factors is relevant.

8.3. Good practice in assessing and managing risk

The safety and security of survivors must be central to all interventions and cooperation processes. Safety planning should follow any risk assessment and be constantly revised. Safety planning must be done in cooperation with survivors, and never with the survivor being isolated from the process.

Risk assessment and safety planning should be an integral part of service provision. All agencies dealing with domestic violence against women should develop clear (written) policies and procedural guidelines for risk assessment and safety planning/risk management. As a part of quality standards, each agency should have a standardised practice, which should include clear identification of responsibilities and defined effective processes focusing on the needs of survivors, with the safety and prevention of further violence as the focus of attention. The effectiveness of any interventions and cooperative processes should be constantly monitored and evaluated. Safety measures are also important when the survivor attends different agencies. All legal and statutory measures available should be applied to increase the safety of the survivors. These measures are especially important in situations where survivors may encounter the perpetrator on the premises of the agency. The safety of the survivor should always be paramount: appointments with the survivor and the perpetrator should not be made at the same time and the possibility of their meeting when entering or leaving the agency should be avoided. The safety of staff should also be part of every agency's policy and a safety plan for staff should be included in quality standards.

8.4. Recommendations for policy makers

- › Provide specialised training in risk assessment for professionals in all relevant agencies.
- › Ensure that each agency has written policies and guidelines for systematic risk assessment and clear identification of responsibilities and processes on how to manage risk.
- › Establish and promote specialist units within agencies and/ or specialist professionals in different units.
- › Allocate sufficient budgets for training professionals in risk assessment, supervision and multi-agency co-operation.
- › Select risk assessment tools according to a specific purpose (identifying risk of repeated violence, threat of future abuse or lethal violence), and ensure that they are tailored to the context in which they are being used, with validation from survivors and their advocates.

8.5. Tools for implementation – Checklists and exercises

List of risk factors (see WAVE 2011: p.86–92)

The following list of risk factors has been compiled from research and experience by domestic violence practitioners. It provides a framework to gather information on risk factors more systematically and to help identify risk and possible appropriate safety measures. For sources and a comparison of different risk assessment instruments, as well as research and evidence for the respective risk factors, please see the PROTECT Manual (WAVE 2011).

| | Risk factor | Category of risk |
|---|---|---|
| I. History of violence | | |
| 1. | Previous domestic violence against women | Across studies of risk factors for domestic violence against women, prior domestic violence is shown to be the most common risk factor. |
| 2. | Violence towards the children or other family members | Frequent violence within the home will extend to other family members, including children. Initial concerns for the safety of a child can reveal far more extensive patterns of violence within a family. Children may also be used by the perpetrator to emotionally manipulate and control a survivor. (Duluth Model of Domestic Violence). |
| 3. | Generally violent behaviour | Perpetrators of domestic violence often exhibit general anti-social attitudes and behaviours and use violence outside of the domestic sphere. The use of violence outside the family indicates a general tendency to use violence, can increase the risk to the woman survivor and poses a risk to other people including practitioners. |
| 4. | Violation of protective orders | Violations of protective orders (by police, criminal or civil courts) and contact or no-contact orders, are associated with an increased risk of future violence. |
| II. Forms and patterns of violence | | |
| 5. | Severity and frequency of violent acts | Increasing severity and frequency of violent acts is one of the most significant risk factors for severe and potentially lethal assaults. |
| 6. | Use/threats of use of weapons | The actual use of or threats to use weapons are a significant risk factor for serious and lethal violence. In domestic violence cases all weapons, including fire arms, knives and any dangerous object that could be used to hurt the survivor, must be considered in the risk assessment. |
| 7. | Controlling behaviour and isolation | Controlling behaviour is considered a significant risk factor for repeated severe and potentially lethal violence. ^{17, 18, 19} . Isolation is a common strategy for control and can take severe forms like deprivation of liberty (locking women up). |

| | | |
|---|--|---|
| 8. | Stalking | Stalking is related to lethal and serious violence against women, and when coupled with physical assault, it is significantly associated with murder and attempted murder. |
| 9. | Sexual violence | Sexual violence is commonly experienced as part of domestic violence against women. Women who are sexually assaulted are more likely to be subjected to more serious injury and severe domestic abuse. |
| 10. | Threats to kill, threats to harm, coercion | Practical experience has shown that severe violence is often preceded by threats. Coercion can take different severe forms, including forced marriage. |
| 11. | Strangulation and choking | Strangulation and choking are very dangerous forms of violence; approximately half of the victims of homicide have faced a strangulation attempt in the year before their death. |
| III. Risk factors related to perpetrator behaviour | | |
| 12. | Issues related to drug and alcohol abuse | Whilst drug and alcohol abuse is not a cause of or an excuse for domestic violence against women, a perpetrator's alcohol and drug abuse is associated with an increased risk of homicide and more severe violence. |
| 13. | Possessiveness, extreme jealousy and other forms of harmful attitudes | Extreme jealousy and possessiveness are associated with severe violence. ^{29, 30} In addition, perpetrators patriarchal attitudes, such as very rigid concepts of male or family honour and a sense of ownership of women can increase risk. |
| 14. | Issues related to poor mental health, including threats and attempts to commit suicide | Perpetrator mental health problems, including depression, are associated with an increased risk of repeat and severe violence. Threats to commit suicide and a perpetrator's poor mental health are risk factors for homicide-suicide cases. In 32% of femicide/homicide cases, the perpetrator committed suicide afterwards. |
| 15. | Economic Stress | Changes in the perpetrator's financial status and unemployment are strong risk factors in homicide cases related to domestic violence and link to concepts of masculinity and gender roles. |
| IV. Survivor's perception of risk | | |
| 16. | Fear for herself and others | Research shows that there is a strong correlation between the self-assessment of risk by the survivor and the actual use of violence by the perpetrator. However, some survivors of violence may also minimise and underestimate the violence. In a study of femicide by Campbell et al (2003) approximately half of survivors did not perceive that there was any risk that the perpetrator would kill them. |
| V. Aggravating factors | | |
| 17. | Separation | Separation is commonly understood as a significant risk factor for severe harm or homicide. |
| 18. | Child Contact | Conflict in relation to child contact is common following separation and often poses a risk of repeat violence for both women and children. |
| 19. | Step child living in the family | Risks factors of intimate partner violence include any of the perpetrator's stepchildren living in the home. |
| 20. | Violence during pregnancy | About 30% of domestic violence starts in pregnancy. Violence during pregnancy is a risk factor of severe and lethal violence. Pregnant women have a greater risk of both minor and severe violence than non-pregnant women. |

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The WAVE-HANDBOOK was made possible through generous funding by

With financial support
from the Rights, Equality
and Citizenship Programme
of the European Union



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