



**Observatory for
Sociopolitical Developments
in Europe**

Violence against Women

On the implementation of the Istanbul Convention in Denmark, Finland & Austria

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Abstract

The Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention) is a treaty of international law that entered into force on 1 August 2014. The Convention contains binding regulations on the protection of women against all forms of violence. The Istanbul Convention obliges the States Parties to provide a needs-based, comprehensive, well-equipped and financially guaranteed support system. The specialist support services as specified in Article 22 represent a central building block of this help system. In Articles 23 and 25, obligations related to shelters and support for victims of sexual violence are specified.

In this working paper, the Observatory examines the implementation of the Istanbul Convention to protect and support women affected by violence in a comparison between Denmark, Finland and Austria.

The main findings are:

- The findings reveal that in all three states, there is, at fundamental level, a nuanced, specialised and high-quality support system in place for women affected by various forms of violence: In implementing their obligations in line with Articles 22, 23 and 25 of the Istanbul Convention, Denmark, Finland and Austria opt for non-governmental, specialist support services. These are financed and in part also regulated by public administration at national, regional and even municipal level.
- In comparison to the other forms of violence against women, the one that is covered best by the **specialist support services (Article 22)** in all three states is domestic violence. In both Finland and Austria, strongly institutionalised structures of support services for victims of domestic violence are in place throughout the country. By contrast, the services in Denmark are less institutionalised and are mostly provided in cooperation with civil-society organisations.
- The strong focus of anti-violence policies on domestic violence in Denmark, Finland and Austria is at the expense of support services for other forms of violence in terms of their number, scope and regional distribution. Specialist support services for women affected by stalking, violence in the name of so-called “honour”, forced marriage and genital mutilation are not in place across the board and are much fewer in number compared to domestic violence. They are also mostly concentrated in only one or two larger cities in each country; rural areas are underprovided, or not provided at all, with relevant services.
- The discrepancies in number, extent, regional distribution, funding and staffing of the specialist support services can ultimately lead to unequal treatment of victims of different forms of violence. Moreover, these forms of violence frequently affect groups with special needs that are already exposed to a greater risk of discrimination, for example refugee or asylum-seeking women, migrant women or now also women and girls in the second generation of migrants.
- In Finland, the specialist support services are also available to men as victims of violence. In Denmark and Austria this is the case only to a limited extent. However, GREVIO is strongly critical of this gender-neutral stance.

- In all three states, there is a fundamental lack of valid data on the number of women at risk and/or affected by stalking, violence in the name of so-called “honour” and forced marriage as well as genital mutilation. It follows, therefore, that there are no needs analyses that might, as a first step, enable an assessment of the extent to which the number, scope and activities of the specialist support services should be expanded.
- **Shelters (Article 23)** are the central contact points for acute emergency situations, especially for domestic violence in all three states. In Finland, all shelters have been coordinated, financed and monitored by the state since 2015. Previously, responsibility for the provision of services was with local authorities, as is still the case in Denmark and Austria, where shelters are mainly run by civil-society organisations. Most shelters in these three states are networked within umbrella organisations.
- While shelters in Austria, in the form of women’s shelters, are aimed exclusively at women and their children, they are mostly accessible to both women and men in Denmark and Finland. Children of women seeking protection can be housed together with them in virtually all shelters in the three states. There are access restrictions for asylum-seeking women and women with precarious residence status, women with disabilities and sometimes also for women with older sons.
- All shelters in Finland and Austria are open 24/7 to accept persons in need of assistance. Only 65 percent have this capability in Denmark. There are no measures known to shorten the stay in any of the three countries. Most people in need of protection only stay in a shelter for a period lasting from a few days to three months.
- When discussing **support for victims of sexual violence (Article 25)**, the Istanbul Convention distinguishes between sexual violence referral centres in the sense of immediate support and rape crisis centres for the longer term. With nine interlinked sexual violence referral centres, Denmark has the most comprehensive offer of contact points for medical-forensic acute aid. Neither of the other two states provides a nationwide network of sexual violence referral centres: in Finland, there are only two sexual violence referral centres in the very densely populated areas of Helsinki and Turku in southern Finland; various contact points are operating in Austria. However, both countries have announced plans for expanding the sexual violence referral centres.
- In regard to long-term support for victims of sexual violence in rape crisis centres (Article 25), there are gaps in the provision of services, particularly in Denmark and Austria. However, Austria has introduced plans to increase the number of counselling centres set up for this purpose. Finland has three centres that offer longer-term support.
- It is clear that the establishment of networks between various actors and services is crucial; not only in acute support but also in longer-term assistance for victims of sexual violence, and that this has not yet been sufficiently implemented in some areas so far.

1 Introduction

“Violence against women, including domestic violence, is one of the most serious forms of gender-based human rights violations in Europe that is still shrouded in silence.”

(CoE 2011: 1)

The **Council of Europe Convention on Preventing and Combating Violence Against Women and Domestic Violence** (Istanbul Convention, IC) is, at this time, the most far-reaching instrument for preventing and combating violence against women and domestic violence that is legally binding at international level (ibid.). The Convention of the Council of Europe (CoE) was signed in Istanbul in 2011 and entered into force in 2014. The Istanbul Convention introduces a holistic approach that aims to improve the protection of women in Europe against gender-based violence and to create Europe-wide minimum standards. Specifically, the Convention sets out obligations for a coordinated approach to prevent violence, protect victims, prosecute perpetrators, and to collect data. In order to supervise the implementation of the obligations in the States Parties, the Istanbul Convention provides for a comprehensive monitoring procedure¹, which is accompanied by an independent group of 15 experts (Group of Experts on Action against Violence against Women and Domestic Violence, GREVIO).

The Convention defines violence against women as a human rights violation (Article 3a IC). It is a manifestation of historically unequal power relations between men and women (Preamble IC) and should hence be viewed as a consequence of structural discrimination. In this regard, women and girls affected by violence are not perceived as a homogeneous group. The Istanbul Convention takes into account the special protection needs of particular groups exposed to a greater risk of discrimination – such as women with disabilities, older women or women with addiction problems (CoE 2011: 16f). The Convention obliges the States Parties to make efforts to eliminate this form of discrimination against women and in doing so to contribute to the achievement of de jure and de facto gender equality.²

In this working paper, the Observatory examines the implementation of the Istanbul Convention to protect and support women affected by violence in a comparison between Denmark, Finland and Austria. The focus here is on Article 22 (Specialist support services), Article 23 (Shelters) and Article 25 (Support for victims of sexual violence). The working paper applies a uniform structure to describe and then assess the services and arrangements for each of these Articles in the

¹ The initial audit is carried out by means of a *first (baseline) evaluation*. The key steps are: The State Party prepares a country report using a questionnaire drawn up by GREVIO. In addition, civil-society organisations can draft one or more alternative reports, in which they evaluate the status quo from their own perspective, and submit them to GREVIO. GREVIO then prepares the GREVIO baseline report, in which it evaluates the implementation of the obligations resulting from the Convention. The States Parties have the opportunity to respond to the GREVIO report. Afterwards, the Committee of the Parties can issue recommendations on the basis of the GREVIO report.

² In order to clarify the scope of the Istanbul Convention, the Council of Europe explains that men can also be affected by some of the forms of violence covered by the Convention, especially domestic violence. But this is less often the case than for women. It is left to the discretion of the States to apply the regulations of the Istanbul Convention to men (as well as to children and older people (CoE n. y.)). Moreover, the Istanbul Convention states that neither sexual orientation nor gender identity may lead to discrimination when offering protection against violence. For instance, transgender women must therefore receive unrestricted access to the support system (ibid.).

individual States.³ In regard to Article 22, the available specialist support services are categorised according to the forms of violence set out in the Istanbul Convention. This is followed by the Article on shelters (Article 23) and the one addressing rape crisis or sexual violence referral centres for victims of sexual violence (Article 25). The working paper ends with a comparative conclusion summarising the most important insights from the country-based assessments.

Articles of the IC	Sub-chapters for each state	
Specialist support services (Article 22)	Domestic violence Stalking Violence in the name of so-called "honour" Genital mutilation Assessment	<p>The following aspects are covered in the subchapters:</p> <ul style="list-style-type: none"> • Services • Funding and bases • Standards • Distribution • Availability • Access • Duration of stay <small>(only for shelters)</small> • Miscellaneous
Shelters (Article 23)	Overview Assessment	
Support for victims of sexual violence (Article 25)	Sexual violence referral centres Rape crisis centres Assessment	

Figure 1: Structure of the working paper

1.1 Denmark

Denmark signed the Istanbul Convention in 2013 and then ratified it on 23 April 2014. The Convention entered into force on 1 August of the same year with the "first wave" of States Parties. GREVIO conducted its first audit from September 2016 to November 2017.

In Denmark, the national co-ordinating body as defined by the Istanbul Convention⁴ is an **inter-ministerial working group**, which directed government measures in the area of violence against women even before the Istanbul Convention entered into force. It is run by the **Department of Gender Equality (Ligestillingsafdelingen) in the Ministry of Foreign Affairs (Udenrigsministeriet)**.

Denmark had introduced policies to combat violence against women long before the Istanbul Convention was signed. Civil-society organisations such as Danner have been working to provide protection and support structures for women affected by violence since the 1980s. The Danish state supported the creation of networks, but did not introduce its own concerted actions until the 2000s, for instance by establishing an inter-ministerial working group. Denmark has mainly used

³ The information provided here is largely taken from the documents provided during the IC monitoring process (country reports, alternative reports, GREVIO baseline reports). In addition, thorough internet research was carried out for each state in order to obtain detailed information. Some relevant stakeholders were also contacted by email or telephone and asked for clarification concerning specific issues.

⁴ Article 10 IC obliges the contracting parties to nominate or establish one or more official bodies responsible for coordinating, implementing, monitoring and evaluating the political and other measures for preventing and combating all forms of violence covered by the Convention.

action plans to implement strategies and measures in the field of gender equality, as well as to define priorities and spread knowledge, since 2002. The **action plans** published in recent years deal with **sexual violence and rape** (2016), **stalking** (2016), **honour related conflicts** (2017–2020) and **domestic violence** (2014–2017 and 2019–2022) (Ministry of Justice 2017: 2ff). The **national agency “Life Without Violence”** was established in 2017 to consolidate knowledge and practical measures in the area of domestic violence. Furthermore, there is a series of laws that address discrimination against women, for example in the labour market and in the social security systems (GREVIO 2017b: 12). Given these measures, Denmark is considered to possess one of the world’s most advanced systems of gender equality. Indeed, Denmark ranks second in the current Gender Equality Index of the European Institute for Gender Equality (EIGE).⁵

But violence against women remains present, although gender equality is firmly embedded in Danish society, politics and law:

- In Denmark, one in two women aged over 15 is affected by physical, psychological and/or sexual violence (FRA 2012). Estimates suggest that around 3.9 percent of women are subjected to psychological abuse by their partners each year (Department of Gender Equality 2019: 11) Around 1.6 percent of women experience physical violence at the hands of their partners (ibid.: 15).
- Approximately 1,500 women and roughly the same number of children sought temporary refuge in a shelter in 2017, and around eight percent of this group stayed in a shelter on multiple occasions over the course of the year (ibid.).
- 890 rapes were reported to the police in 2017. Estimates concerning the actual numbers of cases of rape or attempted rape of women during 2018 range from 5,100 to 24,000 (AI 2019b: 5).

Excursus: Nordic paradox

Although gender equality is, in principle, well advanced in the countries of Northern Europe, gender-based violence against women remains a persistent problem. Indeed, domestic violence and sexual violence against women are particularly high in Denmark, Finland, and Sweden, compared to Europe as a whole (AI 2019a: 11). In its study on violence against women, the European Union Agency for Fundamental Rights argues that this might be explainable due to the fact that women in more gender-equal societies feel more free to report gender-based violence in the first place (FRA 2012: 25). Other authors argue that rather the opposite might be the case (Wemrell et al. 2019: 16).⁶ This phenomenon, in which high levels of violence against women are observed despite the society’s advanced gender equality, is also known as the “**Nordic paradox**” (Gracia/Merlo 2016).

⁵ Diagram and overview of the Index: <https://eige.europa.eu/gender-equality-index/2019>.

⁶ The data from the FRA survey on violence against women (FRA 2012) does partly not support this thesis: According to the data, for example in Denmark and Finland, only 7 percent of women who were victims of physical or sexual violence contacted the police. The EU average is 14 percent. Data Explorer of the study of FRA on violence against women: <https://fra.europa.eu/en/publications-and-resources/data-and-maps/survey-data-explorer-violence-against-women-survey>.

It is largely unclear why social change in the Nordic states has not led to an elimination of gender-based violence (ibid.). Nevertheless, a comprehensive meta-study of qualitative studies from Sweden managed to identify some possible mechanisms (Wemrell et al. 2019: 1). Included in them is the correlation that achieving what amounts to basic gender equality within society may prompt women to seek individual reasons for domestic violence either in themselves or their partners. Domestic violence as the manifestation of unequal power relations between men and women, which is a structural and not an individual phenomenon, sits uneasily, the study argues, with the principle of gender equality. Domestic and sexual violence, which is still happening, is therefore harder for the individual to frame as gender-based violence, which should in theory be already overcome. In turn, and paradoxically this makes it difficult for women to perceive themselves as victims of gender-based violence and to seek help (ibid.: 16).

1.2 Finland

Finland signed the Istanbul Convention immediately after it was passed in 2011 and ratified it on 17 April 2015. The Istanbul Convention entered into force in Finland on 1 August 2015. There is an **Action Plan for the Istanbul Convention** (NAPE 2017) covering 2018 to 2021, which was preceded by a 2011 action plan for reducing violence against women (STM 2010). GREVIO first evaluated the implementation of the Convention from November 2017 to September 2019.

The Finnish **Ministry of Social Affairs and Health (Sosiaali- ja terveystieteiden ministeriö, STM)** and the independent **National Institute for Health and Welfare (Terveyden ja hyvinvoinnin laitos, THL)** are assigned a key role in designing and implementing gender equality policy.⁷ Both bodies are also strongly involved in implementing the Istanbul Convention measures examined in this working paper. A **Committee for Implementing the Istanbul Convention (NAPE)** has also been set up within the Ministry of Social Affairs and Health as the national co-ordinating body since the beginning of 2017.⁸

Along with its neighbouring Scandinavian states, Finland has often been singled out for its achievements in gender equality and passed the *Act on Equality between Women and Men* (609/1986) as early as 1986⁹. Included in the provisions of the act is the requirement that women must account for at least 40 percent of the people involved in planning and decision-making processes across various social fields. In addition, 47 percent of the successful candidates in the recent parliamentary elections of April 2019 were women, which is the highest ever proportion.¹⁰ In a European comparison, Finland ranks far above the average in the area of equality, taking fourth place in the current EIGE Gender Equality Index.¹¹

⁷ The Ministry of Social Affairs and Health is responsible for submitting legislation on gender equality, coordinating the development of gender-sensitive projects and for general implementation of the government's gender equality policy. The following link provides an overview of the ministry's activities in the area of equality: <https://stm.fi/en/gender-equality>.

⁸ Press release by the Ministry of Social Affairs and Health on the establishment of the NAPE Committee, 17/11/2016: https://valtioneuvosto.fi/en/article/-/asset_publisher/1271139/toimikunta-naisiin-kohdistuvan-vakivallan-ja-perhevakivallan-torjumisek-1.

⁹ Some English translations of law texts are available on the FINLEX website <https://www.finlex.fi/en/laki/kaannokset/>. Use the search function to find the number assigned to the law. These numbers will always be stated in the following sections when discussing Finnish legal texts.

¹⁰ Information from the National Institute for Health and Welfare: <https://thl.fi/en/web/gender-equality/gender-equality-in-finland/decision-making/politics-and-elections>.

¹¹ <https://eige.europa.eu/gender-equality-index/2019>.

Despite their positive standing in the field of equality, Finland and its Scandinavian neighbours (refer to the [Excursus: Nordic paradox](#)) are struggling with a high rate of violence against women and sexual violence in particular (refer to [Chapter 4.2](#)):

- In Finland, every second woman aged 15 and above is affected by physical, psychological and/or sexual violence (FRA 2012).
- 8,300 cases of domestic violence were reported to the police in 2017: The victim was female in 68.1 percent of the cases, and the suspected perpetrator was male in 77.8 percent of the cases. 37.1 percent of the reported cases of domestic violence took place within a partnership.¹²
- 5,063 people sought safety in shelters in 2018, including 2,697 adults and 2,358 children. Of the adults, 2,498 were female and 196 male. (THL 2019: 47)
- 1,338 cases of rape and 1,019 cases of other sexual assaults were reported in 2018.¹³

1.3 Austria

Austria participated actively in the two-year negotiations of the treaty text for the Istanbul Convention and was a cosignatory in 2011. It was also one of the first states to ratify it, namely on 14 November 2013. An **inter-ministerial working group “Protecting women against violence”**¹⁴ was set up in 2013 during the ratification process. The Istanbul Convention entered into force in Austria on 1 August 2014. The first audit took place in Austria from March 2016 to January 2018. It was accompanied at national level by the **National Coordination Office “Violence against Women”** (Article 10 IC), which was established in 2015.¹⁵

In 1997, Austria became the first European country to pass an **Act on Protection Against Violence**. The provisions on evictions, barring orders and restraining orders to protect against violence are exemplary in Europe and bolster Austria’s leading position in protecting women against violence (GREVIO 2017a: 6). In addition, the Act on Protection Against Violence has been continuously amended over the last 20 years in response to loopholes and problems that have emerged in its application. A **Platform Against Violence** has existed in Austria since 1993¹⁶ as an alliance of 45 organisations addressing the topics of violence, anti-violence interventions and prevention of violence. The platform seeks to enable dialogue, create networks and raise awareness within the general public. Austria produced a **National Action Plan for Protecting Women Against Violence** (BMBF 2014) for the period 2014 to 2016. It contained over 60 measures to be taken by the Austrian government and was intended to strengthen interdepartmental collaboration. An implementation report on the action plan was published in 2018 (Federal Chancellery 2018). Austria ranks 13th in the EIGE Gender Equality Rating Index of European states.¹⁷

¹² Information from *Statistics Finland*, 31 May 2018: https://www.stat.fi/til/rpk/2017/15/rpk_2017_15_2018-05-31_tie_001_en.html.

¹³ Information from *Statistics Finland*, 17 May 2019: https://www.stat.fi/til/rpk/2018/04/rpk_2018_04_2019-01-17_tie_001_en.html.

¹⁴ <http://www.coordination-vaw.gv.at/imag/> (in German)

¹⁵ <http://www.coordination-vaw.gv.at/euoparatskonvention/> (in German)

¹⁶ <https://www.gewaltinfo.at/plattform/> (in German)

¹⁷ <https://eige.europa.eu/gender-equality-index/2019>

But violence against women remains a problem, even in Austria, despite this legislative action and the country's commitment to the Istanbul Convention:

- In Austria, one in five women aged 15 and above is affected by physical, psychological and/or sexual violence (FRA 2012).
- Around 15,000 women and girls receive support from the violence protection centres (Domestic Abuse Intervention Centre Vienna 2018: 58) each year, while approximately 1,700 women seek refuge in women's shelters (AÖF 2019).
- Almost a third of women in Austria experience sexual violence at least once in their lives (ÖIF 2011: 105). 936 cases of rape were reported in 2018 (BMI 2019: 26). The number of unreported cases will be many times greater, as estimates suggest that only one rape in 11 is actually reported (ÖIF 2011: 11).

2 Specialist support services (Article 22)

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

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

(Article 22 IC)

Victims of violence need support and protection: Firstly, women affected by violence must be protected against further violent acts. Secondly, women must receive adequate support and assistance “[...] to overcome the multiple consequences of such violence and to rebuild their lives.” (CoE 2011: 21). The Istanbul Convention distinguishes between general and specialist support services for victims of violence: General support services are intended for the general population and provide assistance through public authorities in areas such as social services, health and employment services. Specialist support services are aimed exclusively at victims of certain forms of violence (ibid.: 23f.). The Istanbul Convention specifically lists domestic violence (Article 3b IC), psychological violence (Article 33 IC), stalking (Article 34 IC), physical violence (Article 35 IC), sexual violence, including rape (Article 36 IC), sexual harassment (Article 40 IC)¹⁸, forced marriage (Article 37 IC), female genital mutilation (Article 38 IC), forced abortion and forced sterilisation (Article 39 IC) and violence in the name of culture, religion or tradition, including violence in the name of so-called “honour” (Article 42 IC). Accessible nationwide, the specialist support services must provide support and assistance tailored precisely to meet the needs of victims. This includes the capacity to respond to each form of violence and to offer support to every group of victims, also those who are hard to reach.¹⁹

Excursus: Digital violence

The Istanbul Convention is based on a comprehensive and broad concept of violence that includes any acts that lead or might lead to physical, sexual, psychological or financial harm or suffering for women. It essentially encompasses all forms of violence against women and girls. Violence against women has acquired a new dimension due to the increased use and integration of digital media such as computers, Internet and smartphones in everyday life. Digital violence means the deliberate use of these media to the detriment of other persons. But the Convention does not mention digital violence explicitly. The Explanatory Report to the Istanbul Convention partially

¹⁸ Article 40 IC sets out that the necessary legislative or other measures should be taken in order to ensure that sexual harassment is subject to criminal or other legal sanctions. It does not specifically address a necessary support system for victims. However, Kelly (2018: 15) and others point out the need to provide support in this area as well.

¹⁹ Paragraph 132 Explanatory Report to the IC: The types of assistance that the specialist support services must offer include: “[...] providing shelter and safe accommodation, immediate medical support, the collection of forensic medical evidence in cases of rape and sexual assault, short- and long-term psychological counselling, trauma care, legal counselling, advocacy and outreach services, telephone helplines to direct victims to the right type of service and specific services for children as victims or witnesses. (CoE 2011b: 24).

addresses digital violence as a form of violence in the section on stalking, defining it to include “following the victim in the virtual world” and “spreading untruthful information online” (CoE 2011: 32). A mapping study by the Council of Europe also classified psychological violence and sexual harassment as forms of violence that have digital equivalents (CoE 2018b: 23f). This classification is the basis for GREVIO’s basic assessment that digital violence against women should be perceived as a “continuum of offline violence” (ibid.). In Europe, the Istanbul Convention is regarded as an instrument to prevent and combat violence against women in the digital realm.²⁰

The following provides a state-by-state overview of the necessary specialist support services for each form of violence according to the Istanbul Convention²¹.

Specialist support services (Article 22)			
Form of violence	Denmark	Finland	Austria
Domestic violence	2 legal counselling centres (one specialising in support for foreign women) 4 projects/courses: “Advice for life”, “Tell someone”, “Out of the shadow of violence”, “Follow-up care groups”	23 civil-society organisations from the Federation of Mother and Child Homes and Shelters (see Annex III) 1 civil-society organisation with a focus on migrant women 33 groups belonging to the MARAC Method (multi-agency risk assessment conference)	9 violence protection centres in all federal states, some of them with external and regional offices 11 counselling centres in autonomous women’s shelters 5 specialised counselling centres in the Network of Austrian Counselling Centres for Women and Girls 2 victim-protection organisations: NEUSTART, Weisser Ring
Stalking	Danish Stalking Center	Varjo Center for victims of post-relationship stalking	No stand-alone, specialist support service

²⁰ European Commission: Answer given by Ms Jourová on behalf of the Commission to a question for written answer to the Commission by Viorica Dăncilă (S&D) on 20 February 2018: https://www.europarl.europa.eu/doceo/document/E-8-2017-007255-ASW_EN.html; Germany: Minor inquiry by the MPs Anke Domscheit-Berg, Cornelia Möhring, Dr Petra Sitte and others from the DIE LINKE parliamentary group on 29 November 2018: <https://dipbt.bundestag.de/dip21/btd/19/061/1906174.pdf>.

²¹ It was not possible to research services available to women affected by forced abortion and forced sterilisation in any of the relevant states. Therefore, this form of violence will not be addressed. Psychological violence is not dealt with explicitly at this point, although it is seen as a particular type of violence that precursors or accompanies other forms, frequently domestic or sexual violence.

<p>Violence in the name of so-called honour and forced marriage</p>	<p>Counselling service provided by the Immigration Service</p> <p>RED Center against Honour-Related Conflicts</p> <p>Exitcirklen counselling centre</p>	<p>MONIKA, civil-society organisation</p> <p>SOPU project by Loisto settlement</p>	<p>Counselling centre for migrant women: DIVAN by Caritas Styria, Graz</p> <p>Salzburg violence protection centre</p> <p>Counselling centre specialising in migrant women, operated by the shelter St. Pölten</p> <p>Association Orient Express, Vienna</p>
<p>Genital mutilation</p>	<p>RED Center against Honour-Related Conflicts</p>	<p>KokoNainen project by the Finnish League for Human Rights</p>	<p>African Women's Organization, Vienna</p> <p>FEM Süd women's health centre</p>

Table 1: Overview of specialist support services (Article 22)

2.1 Denmark

The following specialist support services are operating in Denmark:

- One general legal advice service for victims of domestic violence and one specialised in domestic violence against foreign women (refer to [Chapter 2.1.1](#))
- Projects offering advice and support for ongoing/after domestic violence (refer to [Chapter 2.1.1](#))
- A longer-term course for ongoing/after domestic violence (refer to [Chapter 2.1.1](#))
- Follow-up support groups for people after leaving a shelter (refer to [Chapter 2.1.1](#))
- A counselling centre for victims of stalking (refer to [Chapter 2.1.2](#))
- State counselling centre and other counselling centres dealing with violence in the name of so-called “honour” and forced marriage; one centre provides counselling on genital mutilation (refer to [Chapter 2.1.3](#), [2.1.4](#))
- Shelters according to Article 23 (refer to [Chapter 3.1](#)).
- Centres for victims of sexual violence according to Article 25 (refer to [Chapter 4.1](#)).

Information on services available for women affected by violence can be found, firstly, on the website of the agency “**Life Without Violence**” (*Lev Uden Vold*)^{22,23}, which is an alliance of five sponsoring organisations²⁴. Secondly, the National Board of Social Services (*Socialstyrelsen*)²⁵ of the Ministry of Children and Social Affairs (*Børne- og Socialministeriet*) publishes an overview of the specialist support services.

²² Formal note: Unless stated otherwise, the information was obtained from the websites of the relevant organisations.

²³ <https://levudenvold.dk/for-fagfolk/krisecentre-og-andre-raadgivningstilbud/>

²⁴ The consortium includes sponsors from shelters (Mandecentret, Danner, LOKK), Dialogue Against Violence (Dialog mod vold), a project focused on working with perpetrators, and the Mothers' Aid Foundation (Mødrehjælpen). The agency “Life Without Violence” is also responsible for the state-wide telephone hotline that fulfils the requirements set out in Article 24 of the Istanbul Convention.

²⁵ <https://socialstyrelsen.dk/>

The action plan for combating psychological and physical violence in intimate relationships²⁶ for the period 2019 to 2022 names several priorities that are already reflected in the design of the support services (Department of Gender Equality 2019: 15):

- Funding is provided especially for ambulatory services relating to domestic violence. The aim is to ensure early intervention in cases of violence as a means of preventing, for instance, the need to seek refuge in a shelter (see for example “Tell someone”, [Chapter 2.1.1](#))
- There is a particular focus on young people aged between 16 and 25. This age group is disproportionately exposed to the risk of violence, although their needs often fall between the cracks of the services designed for children or adults (see application pool, [Chapter 2.1.1.7](#)).
- A particular emphasis is placed on stalking and digital forms of violence (see Danish Stalking Center, [Chapter 2.1.2](#)).

2.1.1 Domestic violence

Multiple support and counselling services exist in Denmark for victims of domestic violence:²⁷

- Legal advice, provided by the agency “Life Without Violence”²⁸, and the **counselling centre Violence against Foreign Women** (*Vold mod Udenlandske Kvinder*)²⁹
- Follow-up care groups for people after leaving a shelter, provided by the **agency “Life Without Violence”**
- Counselling in the **projects “Advice for Life”** („Råd til livet“)³⁰ and **“Tell Someone”** („Sig det til nogen“)³¹, supported by several civil-society organisations
- **Counselling course “Out of the Shadow of Violence”** („Ud af voldens skygge“)³², provided by the **Mothers’ Aid Foundation** (*Mødrehjælpen*)

2.1.1.1 Services

The **agency “Life Without Violence”** offers legal advice on issues around domestic violence, including matters relating to separation, custody of children and accommodation. The counselling is aimed at adult women and men, their dependants and professionals. One-on-one counselling sessions are offered, as well as the opportunity to join a counselling process. Besides a telephone helpline, there are also opportunities for personal appointments with staff members. The website’s FAQ section provides a wide range of information on legal issues, albeit only in Danish. In addition to legal advice, the agency organises follow-up care groups for women, men and children who have been exposed to domestic violence. Their purpose is to accompany and support victims of violence after a period in a shelter or after accessing ambulatory support services. The follow-up

²⁶ In Denmark, the term “violence in intimate relationships” (“vold i nære relationer”) is used instead of “domestic violence” (Department of Gender Equality 2019).

²⁷ Services that offer general support in the event of violence (Article 20 IC) are not listed. In this regard, visit <https://levudenvold.dk/for-fagfolk/krisecentre-og-andre-raadgivningstilbud/oevrige-tilbud/>. The same applies to services that are mainly focused on perpetrators of violence. In this regard, visit <https://socialstyrelsen.dk/voksne/vold-i-naere-relationer/oversigt-over-tilbud> Special services for children and young people who have been exposed to violence are not listed, either. In this regard, visit <https://socialstyrelsen.dk/voksne/vold-i-naere-relationer/oversigt-over-tilbud>.

²⁸ <https://levudenvold.dk/>

²⁹ <http://www.vold-mod-udenlandske-kvinder.dk/>

³⁰ <https://www.maryfonden.dk/da/r%C3%A5d-til-livet>

³¹ <https://danner.dk/sigdettilnogen>

³² <https://moedrehjaelpen.dk/forside/det-goer-vi/radgivning/ud-af-voldens-skygge/>

support groups are a good opportunity to build relationships with other participants and to create networks. These groups are mediated by a person with a professional background in psychology and are held regularly over a period of five months. Each group has up to six members, with separate groups for men and women.

The **counselling centre Violence against Foreign Women** is a special service for women of non-Danish ethnic backgrounds. It offers counselling by telephone and email, as well as at its offices in Aarhus, Jutland. The centre claims to be the largest of its kind for persons who are subject to the provisions of the Danish immigration law. It mainly provides advice to women who would like to leave a violent partner. One priority is on counselling women who might lose their right to remain in Denmark if they divorce their partner. When needed, the centre contacts the Social Security Administration, government administration and the Immigration Service. The women may be asked to pay processing and advocacy fees if their cases are taken on.

The **project “Advice for Life”** offers social, legal and, in particular, financial counselling. It was initiated by the Mary Foundation (*Mary Fonden*)³³. The Mothers’ Aid Foundation³⁴ and LOKK (*Landesorganisation af Kvindekrisecentre*)³⁵, the umbrella organisation for shelters, provide the services using 140 voluntary counsellors from Nykredit, one of Denmark’s largest banks, and local law firms. The target group for the services are women who have been victims of violence and who need help to organise a financially independent life that is free of violence. The women can receive counselling either in the participating shelters or in one of the four Mothers’ Aid facilities. Around 450 women receive counselling each year. On average, two and a half sessions are held with each woman. Of the organisation’s staff, half are employees of Mothers’ Aid or the shelters participating in the project, and the other half are volunteers (Mary Fonden 2017: 39).

Since October 2018, the **project “Tell Someone”** has provided counselling for women and dependants who are exposed to psychological, physical or other domestic violence, but who do not need or want to move into a shelter. The service is available in three shelters in Copenhagen, Randers and Ringsted. There are five counsellors in total. All of them have training in social professions and have extensive experience in counselling and supporting women who have experienced violence. The website shows personal profiles of some counsellors, including their photos, names and descriptions. Besides one-on-one counselling sessions, there are group courses that the women can attend. Telephone counselling is also possible. After just six months, the project was evaluated by Oxford Research in 2019 and given a positive rating (Danner 2019).

The Mothers’ Aid Foundation offers an interdisciplinary **counselling course “Out of the Shadow of Violence”** for women and children affected by domestic violence. The children are aged between five and 14. Completing the course takes six months to one year. The course is designed for women who have left their violent partner. Unlike in Copenhagen, the course in Aarhus is also open to women who have not yet left their violent partner. During the course, they receive help and support in improving their situation. Their children are not involved in this process. The course includes one-on-one sessions and group discussions with the women and children. The Mothers’ Aid Foundation employs social workers, social education workers, therapists and psychologists to deliver the course (Ministry of Justice 2017: 23). A large number of volunteers also contribute their

³³ <https://www.maryfonden.dk>

³⁴ <https://moedrehjaelpen.dk/>

³⁵ <http://www.lokk.dk/>

services to the foundation. Once the women have completed the course, they receive follow-up visits from counsellors after a certain period. 170 women and children received support in 2018.³⁶ The project has been evaluated several times, also by Ramboll (Ramboll 2010).

There are two additional counselling facilities for victims of domestic violence, one at the Holstebro shelter³⁷, another in Hobæk and Odsherred in Seeland³⁸. They will not be addressed specifically in this working paper.

2.1.1.2 Funding and bases

The provision of ambulatory support services for issues related to domestic violence is not defined by law, as it is for shelters in paragraph 109 of the Danish Social Service Law (*Serviceoven*) (refer to Chapter 3.1.2)

With one exception, the services mentioned here are available to women free of charge. A mix of funding instruments exists. Some services, including the project “**Out of the Shadow of Violence**” and the services of the national agency “**Life Without Violence**”, are exclusively state-funded.³⁹ A few of the services dealing with domestic violence are financed entirely without state support, for example “**Advice for Life**”, which obtains its funds from a foundation and a financial services company. The service “**Tell Someone**” was initially launched using funds provided by a foundation. It has since expanded its portfolio and now receives state funding as well.

State support for the projects described in this paper is assigned in advance for three years using a fund that is readjusted annually. The so-called rate adjustment pool (*Satspuljen*) is subject to approval by the Danish parliament and defines the financial resources available to civil-society organisations, projects and other measures for the benefit of disadvantaged groups in the fields of health, social affairs and the labour market. Some of the funding is used for projects with a fixed term and some for financing of longer-term measures. Several ministries are in charge of administrating the fund priorities, including the Ministry of Children and Social Affairs, the Ministry of Employment (*Beskæftigelsesministeriet*) and the Ministry of Health (*Sundheds- og ældreministerier*).⁴⁰

The **counselling centre Violence against Foreign Women** claims to operate entirely without state funding. Women who take legal action and intend to claim legal support are sometimes required to pay for the casework.

³⁶ <https://moedrehjaelpen.dk/forside/det-goer-vi/resultater/>

³⁷ The crisis centre in Holstebro (<https://holstebrokrisecenter.dk>) provides anonymous advice to women who have been or are exposed to violence. The service is financed via the shelter and therefore by the local authority.

³⁸ “Medusa – A Life Without Violence” (<https://etlivudenvold.dk>/<https://etlivudenvold.dk/medusas-tilbud/>) is a charity operated by volunteers that provides counselling. The charity is funded by donations from individuals and companies.

³⁹ In 2017, the National Board of Social Services and the Department of Gender Equality within the Ministry of Foreign Affairs commissioned a consortium of five organisations to set up a national agency to coordinate services dealing with domestic violence, to run a national hotline and to conduct research into the subject: <http://um.dk/da/ligestilling/vold-i-familien/national-ehed/udbud/>. LOKK, the umbrella organisation of women’s shelters and itself a member of the consortium, has seen its own state funding cut by around 60 percent since establishment of the new agency “Life Without Violence”. EU funds have also fallen by 12 percent (LOGG 2017: 16). LOKK now obtains most of its funding in the form of donations from individuals and foundations.

⁴⁰ <https://socialministeriet.dk/arbejdsomraader/satspuljen/hvad-er-satspuljen/>; <https://www.regeringen.dk/nyheder/satspulje-2018-aftaler/>

2.1.1.3 Standards

The Sector Association for Free Social Advice in Denmark (*Rådgivnings Danmark*)⁴¹ also accredits projects and civil-society organisations in the field of specialist support services addressing violence against women. The civil-society organisation Danner and the Mothers' Aid Foundation are accredited in this way.

2.1.1.4 Distribution

The services are mainly located in and around Copenhagen. Most of them have a few offices in other cities. “**Life without Violence**”, for example, now organises twelve follow-up support groups and is in the process of establishing more. Services are comparatively scarce in the north of the country especially. Often, the organisations specifically mention that those seeking assistance can meet with counsellors anywhere in the country. Existing infrastructure is put to good use in the project “**Advice for Life**”, as several organisations provide the counselling services. Counselling is available at 26 locations.

2.1.1.5 Availability

In regard to availability, most of the services are not intended as emergency support. The telephone hotlines are not staffed at all times and are usually reachable until the afternoons on weekdays. Hence, use of the services will usually require appointments and arrangements.

On its website, the **counselling centre Violence against Foreign Women** states that it can be contacted 24/7.

2.1.1.6 Access

In the past, Denmark has used extensive campaigns and public information in an attempt to raise awareness among ethnic minorities and non-Danish-speaking women about intimate partner violence and to inform them of the services available. The campaign “Break the Silence” (*„Bryd tavsheden“*) is considered a successful example.⁴² Its public information campaigns included the production of video clips in ten languages.

The website of the **counselling centre Violence against Foreign Women** is available in English, French and Arabic. “**Life without Violence**” also provides legal advice in English.

2.1.1.7 Miscellaneous

In keeping with the action plan on domestic violence, a current initiative by the Department of Gender Equality in the Ministry of Foreign Affairs aims to close the gap between services for children and those for adults. An **application pool**⁴³ for ambulatory services among young people in partnerships marred by violence was established with funding from the rate adjustment pool (*Satspuljen*), operating in the area of health, social affairs and the labour market. The pool offers civil-society organisations the opportunity to obtain funding for projects that enable young women

⁴¹ <https://www.raadgivningsdanmark.dk/>

⁴² <https://eige.europa.eu/gender-based-violence/good-practices/denmark/danish-campaign-targets-diversity-domestic-violence>

⁴³ <http://um.dk/da/nyheder-fra-udenrigsministeriet/NewsDisplayPage/?newsID=0DA3C36B-724B-4809-ABDA-09F915571B78>

and men affected by violence to lead a “normal”, young adult’s life involving education, work, hobbies, friends and family and to extricate themselves from violent relationships (Department of Gender Equality 2019: 17).

2.1.2 Stalking

The **Danish Stalking Center** (*Dansk Stalking Center*) has operated as a contact centre for victims of stalking since 2015⁴⁴.

In 2016, the Danish government published an action plan on stalking (Ministry of Justice; Ministry for Children, Education and Gender Equality 2016): It contains seven initiatives, including a comprehensive education programme on stalking, improved support services for victims and measures for the police, who should receive training in consistent risk assessment tools (ibid.: 10). Stalking is also among the priorities of Denmark’s most recent action plan on domestic violence (Department of Gender Equality 2019).

2.1.2.1 Services

The **Danish Stalking Center** (*Dansk Stalking Center*) is a support and counselling centre for victims of stalking as well as for perpetrators, dependants and professionals. The centre works closely with public authorities and the police.

Its services include general telephone counselling. The telephone hotline is staffed by volunteers with a background in psychology, law or social work.

Group and individual therapy is offered as well, along with self-help groups. The therapy sessions are led by psychologists; the self-help groups by volunteers. The services are open to both women and men. Therapy is also provided for perpetrators.

In addition, the Stalking Center has released the “Guardian Angel App” (*Skytsengel App*)⁴⁵. The app is used as a quick and easy way to alert friends or family if people find themselves in a dangerous situation. It can also be used to record and secure evidence of stalking.

The Center itself is unable to provide financial support to people trapped in a fraught financial situation due to stalking. But its website lists other organisations that offer assistance in these cases.

The Stalking Center also acts as a knowledge repository on the subject of stalking. Among other things, it runs seminars for professionals from local authorities, the police and the civil service.⁴⁶

2.1.2.2 Funding and bases

The **Stalking Center** was funded primarily by the Oak Foundation Denmark until 2019. Since then, the Center has also received state support from the health, social affairs and labour market fund (*Satspuljen*). The Center obtains additional resources from the Victims’ Fund (*Offerfonden*).

⁴⁴ <https://en.danskstalkingcenter.dk/>

⁴⁵ www.skytsengel.org

⁴⁶ <https://en.danskstalkingcenter.dk/#>

Three other companies support the Stalking Center with donations. Its services are free of charge to people seeking help.

2.1.2.3 Standards

The **Stalking Center** provides standardised, on-site training to its volunteers, as well two one-week training seminars each year.

2.1.2.4 Distribution

The **Stalking Center's** main office is in Copenhagen, with another facility in Aarhus, central Jutland, although the group and individual therapy and the networking groups are only held in Copenhagen.

2.1.2.5 Availability

The **Stalking Center's** telephone counselling service is only available for a limited, relatively short period of between three and six hours on weekday afternoons. The website is lacking a link to the nationwide hotline "Violence against Women", which is operated by the organisation "Life without Violence". Hence, the website does not provide clear information on the procedure in emergency situations.

2.1.2.6 Access

The website contains information in English.

2.1.2.7 Miscellaneous

The Danish Stalking Center is the **main organiser of the Nordic Network on Stalking**, in which organisations from Sweden, Norway, Finland, Iceland and the Faroe Islands are members.

2.1.3 Violence in the name of so-called honour and forced marriage

Denmark has published an action plan on preventing violence in the name of so-called "honour" and negative social control for the period 2017 to 2020 (Danish government 2016). It prioritises improving the support system for victims of violence in the name of so-called "honour" and the cooperation between state agencies, raising awareness of this form of violence, placing greater emphasis on preventative work, developing strategic partnerships between civil society and local authorities (refer to [Chapter 2.1.3.7](#)), as well as increasing the levels of research into migrant communities and identifying examples of good practice (Ministry of Justice 2017: 3f).

The services in the area of violence in the name of so-called "honour" and forced marriage are as follows:

- Counselling service for young people provided by the **Immigration Service** (*Udlændingestyrelsen*).

- Counselling by the **RED Center** against Honour-Related Conflicts (*RED Center mod æresrelaterede konflikter*)⁴⁷
- Counselling and group meetings provided by **Exitcirklen**⁴⁸

2.1.3.1 Services

The Danish **Immigration Service** offers advice to people aged up to 24 who are under pressure to enter into a forced or arranged marriage against their will.⁴⁹

The **RED Center against Honour-Related Conflicts** is an alliance of the previously independent organisations Ethnic Youth (*Etnisk Ung*), **RED Consulting** (*RED Rådgivning*) and two shelters run by RED Safehouses (refer to [Chapter 3.1.1](#)).

The RED Consulting counselling centre provides advice on honour-related conflicts, negative social control, the topic of virginity, genital mutilation, LGBTQ, religious marriages⁵⁰, forced marriage and “re-education journeys”⁵¹. The services are aimed primarily at younger people up to the age of 30. But telephone counselling is explicitly available to older persons as well. Moreover, the Center disseminates knowledge on the subject of violence in the name of so-called “honour” to the public and professionals. RED Consulting works with the Danish Agency for International Recruitment and Integration (*Styrelsen for International Rekruttering og Integration*, SIRI) to offer courses for professionals in local authorities⁵². Furthermore, the counselling centre provides knowledge on violence in the name of so-called “honour” to the national organisation for knowledge and specialist consultancy within the National Office for Social Affairs (*Videns- og Specialrådgivningsorganisation*, VISO)⁵³, where it is part of the information network.

There is an anonymous telephone counselling service that is staffed 24/7, as well as an anonymous electronic mailbox. The organisation can also arrange longer-term psychological treatment, as well as conflict mediation with families. The latter service is only possible with the consent of the victim and the family.

Exitcirklen offers counselling and weekly group sessions for girls and women, as well as boys and men, who are exposed to psychological violence and negative social control. One-on-one mentoring and support in emergency situations are provided, also. Social control, as a cross-cultural phenomenon present in many cultures, religions and family contexts and not limited, for example, to the Muslim community, is among the conscious priorities of the counselling services. Nonetheless, most participants are young Muslim women. Participants receive an introduction to cognitive tools, acceptance and commitment therapy, mindfulness exercises and assertiveness

⁴⁷ <https://red-center.dk/>

⁴⁸ <http://www.exitcirklen.dk>

⁴⁹ <http://uim.dk/arbejdsomrader/aeresrelaterede-konflikter-og-negativ-social-kontrol/radgivning-til-unge-og-voksne/radgivning-til-unge-og-voksne>

⁵⁰ Religious marriages are not legally valid under Danish law.

⁵¹ The term “re-education trips” refers to a phenomenon whereby migrant families or parents send their daughters to their country of origin with the aim of binding them more strongly to the cultural, traditional and religious values that are upheld there (GREVIO 2017b: 33).

⁵² <http://uim.dk/siri>

⁵³ The national organisation for knowledge and specialist consultancy, VISO, offers advice to citizens as well as local authorities, institutions and schools, etc., when dealing with difficult situations in the social sphere. Honour-related conflicts are among the priorities of the counselling services (<https://socialstyrelsen.dk/viso>).

training. The organisation also provides legal advice, sexological counselling and further education for professionals. The staff are mostly volunteers, but are trained in psychology.

2.1.3.2 Funding and bases

According to Article 12a of the Danish Social Service Law, local authorities are required to offer free advice to adults who are exposed to violence in the name of so-called “honour”. An action plan must be drawn up for the victims if necessary. This needs to contain a risk assessment, along with information about the victim’s current situation, including relevant questions on residency, work, education and family relationships, as well as support options in terms of residency, work and training. The action plan is prepared together with the victim.

The **RED Center** receives state funding from the Ministry of Immigration and Integration (*Udlændinge- og Integrationsministeriet*). This support is managed by the health, social affairs and labour market fund (*Satspuljen*).

The charity **Exitcirklen** also receives funding from the Danish Ministry of Immigration and Integration, as well as from donations, local authorities and foundations. In addition, participation in the discussion groups costs DKK 250 (around 33 euros) per participant and year.⁵⁴

2.1.3.3 Standards

RED Consulting uses the risk assessment tool PATRIARCH, a systematic and evidence-based tool for professionals working with, and offering protection to groups that are at risk of violence in the name of so-called “honour”. It is also used by the police. The tool is advertised as the first of its kind to be specialised for use in relation to violence in the name of so-called “honour”⁵⁵ It enables case description, scenario planning and risk management.

2.1.3.4 Distribution

The headquarters of **RED Consulting** are in Copenhagen, but the organisation claims that it can arrange personal meetings anywhere in Denmark. These meetings always take place in neutral settings, never at home or with third parties.

Exitcirklen also has its headquarters in Copenhagen. There are other offices in Aarhus, central Jutland, Aalborg in north Jutland and Odense in southern Denmark. Demand is high, and there are waiting lists for the discussion groups. There are plans to set up four new groups over the next three years.⁵⁶

2.1.3.5 Availability

The **counselling centre of the Immigration Service** can be contacted by telephone on weekdays until the afternoon. Personal meetings can be arranged on request. But it is not a contact point to provide emergency assistance.

⁵⁴ http://www.exitcirklen.dk/?page_id=186

⁵⁵ <https://protect-international.com/product/assessment-honour-based-violence-patriarch-manual/>

⁵⁶ http://www.exitcirklen.dk/?page_id=186

RED Consulting and **RED Safehouse** operate a joint telephone counselling service that is available 24/7.

In order to participate in the discussion groups at **Exitcirklen**, interested persons can make contact by telephone, which is not staffed round-the-clock, or by email. Only then are they given the addresses of the venues where the discussion groups take place. The addresses are not made public on the website.

2.1.3.6 Access

The **RED Center** website is only available in Danish. Exclusively the main page is in English. It provides instructions for viewing the website so that it does not appear in the browser history.

Exitcirklen's website is only available in Danish. It does not provide details of the languages spoken at the discussion groups.

2.1.3.7 Miscellaneous

The **MÆRK app** has been available since 2012. It was developed as part of the national strategy against honour-related conflicts. The app provides information on rights and support opportunities for victims and professionals.⁵⁷

Young people and parents, who themselves have suffered from negative social control, forced marriage or equivalent honour-related conflicts, visit schools, associations and similar organisations as part of the initiative **Dialogkorpset**, literally “dialogue corps”. They use these visits to share their experiences.⁵⁸ In addition, a **mentoring project** for young women who have experienced honour-related conflicts has also been established under the umbrella of the Red Cross Youth. It advises school teachers on how to identify violence in the name of so-called “honour” and teaches appropriate responses (Danish government 2016: 14).

2.1.4 Genital mutilation

In Denmark, **RED Consulting** also offers counselling on female genital mutilation as part of its advice on violence in the name of so-called “honour” (refer to [Chapter 2.1.3](#)).

Genital mutilation was officially criminalised in 2003. But there is no law on the provision of support to its victims. The National Board for Social Services (GREVIO 2017b: 27) created guidelines for medical professionals in 2013.

It is unclear which clinics are able to offer medical consulting on this issue, and their regional distribution is unknown. RED Consulting does not have access to this information, either. By enquiring, it was possible to find out that the sexual violence referral centres and rape crisis centres (refer to [Chapter 4.1.1](#)) do not offer any specialised treatment.

GREVIO criticises that genital mutilation is not addressed in the first **questionnaires for asylum-seeking women and girls**, although escaping this form of violence might provide grounds for

⁵⁷ <http://uim.dk/arbejdsomrader/aeresrelaterede-konflikter-og-negativ-social-kontrol/radgivning-til-unge-og-voksne/radgivning-til-unge-og-voksne>

⁵⁸ <http://uim.dk/arbejdsomrader/aeresrelaterede-konflikter-og-negativ-social-kontrol/tilbud-og-vaerktojer-til-fagfolk/vaerktojskassen>

asylum being granted (GREVIO 2017b: 58). Female victims may choose to refrain from speaking about their experience because it might violate the social conventions of their home countries.

2.1.5 Assessment

Most specialist support services in Denmark are aimed primarily at victims of domestic violence. The range is comparatively broad, and comprehensive information is available – in line with the priorities defined by the action plan on psychological and physical violence to address early prevention and intervention in domestic violence. Ambulatory follow-up support groups are attempting to improve longer-term support for women, for example after a period in a shelter. One of these counselling services also addresses financial independence among women who want to end, or already have ended, a relationship characterised by violence. But the services are mainly located in and around Copenhagen, which limits their accessibility for victims from other regions. There are fewer services available dealing with other forms of violence, for example stalking or violence in the name of so-called “honour”. In this regard, the Danish Stalking Center deserves a special mention, as it plays a key role on the forefront of tackling stalking and digital violence.

The state emphasises the importance of violence in the name of so-called “honour”, for instance by defining by law that local authorities must, when necessary, prepare an action plan for persons seeking help. As an alliance of multiple stakeholders offering expertise on violence in the name of so-called “honour”, the RED Center is the most important counselling centre and contact point in this field. The RED Center also cooperates with the RED Safehouse to run shelters and emergency flats for people affected by violence in the name of so-called “honour”. The strong networks and rapid coordination prove particularly helpful in emergency situations. The *Exitcirklen* charity consciously provides counselling on social control as a cross-cultural phenomenon that is not limited, for example, to the Muslim community. Like many of the services provided to women affected by violence, *Exitcirklen* also offers counselling to male victims. GREVIO is highly critical of this predominantly gender-neutral approach due to the gender-related nature of the forms of violence set out in the Istanbul Convention (GREVIO 2017b: 13, 15f.) (refer to Chapter 3.1.9). Over recent years, a trend has been observed in Denmark in which violence against women is perceived less in relation to its gender-based aspects and more as an independent phenomenon. For example, intimate partner violence committed against women is classified as domestic violence, which can also affect men.⁵⁹

Barely any information can be obtained on violence in the form of genital mutilation. It is particularly unclear whether and where medical expertise on female genital mutilation is available and accessible.

In essence, the work of the national agency “Life without Violence”, the Danish Stalking Center and the RED Center is the attempt, to the greatest possible extent, to pool expertise on particular forms of violence. Copenhagen is clearly the epicentre in regard to the distribution and nationwide availability of services. Most of the other cities have one or two additional contact points. It is difficult to assess the extent to which counselling is provided reliably at national level by telephone, email and through personal visits from counsellors. Many of the services take place in groups,

⁵⁹ In contrast, support services addressing the LGBTI group are largely inadequate in Denmark – at international level as well – in regard to the issue of domestic violence. Moreover, empirical data is also thin on the ground in this area (cf. Stubberud 2018: 104)

with the aim of establishing networks between the participants. Hence, they are only easily accessible within a particular vicinity.

This research has shown that it is difficult for non-Danish-speaking women to obtain information, for example in English, by means of the usual channels.

The specialist advice and support services, especially concerning domestic violence, are organised in the form of projects and do not exhibit distinctly institutionalised structures. In many cases, they are provided in the form of cooperation between several organisations. Funding is usually obtained from multiple sources as well. Businesses and foundations offer financial support, in addition to state funds. Women can access the services free of charge, apart from a few exceptions. Volunteers play an important role in providing the services.

The state funds for supporting the services are distributed via the health, social affairs and labour market fund (refer to [Chapter 2.1.1.2](#)). GREVIO criticises that this form of state funding is inadequately long term and secure, as the amount available to the fund is decided each year. In GREVIO's opinion, this is not comparable with annual funding from the budget of a ministry in charge of a particular portfolio (GREVIO 2017b: 16). Nonetheless, this arrangement is used to fund even larger organisations, such as the Danish Stalking Center and the national agency "Life without Violence", so it may be less insecure than GREVIO assumes. For example, the 2019 fund already stipulates the amounts that will be paid in support to the Stalking Center even beyond 2022 (Danish government 2018: 2).

2.2 Finland

In Finland, the *Social Welfare Act* (1301/2014) sets out the provisions for social care and defines the forms and structures of social services. Section 11(5) of the Act states that support must be provided, in the form of social services, to victims of domestic violence and other forms of violence and abuse.

The following types of specialist support services are available in Finland:

- Crisis counselling and support provided on the one hand by 23 civil-society organisations and on the other by professionals from public services to victims of domestic violence (33 MARAC groups), intimate partner violence or violence in the social environment (refer to [Chapter 2.2.1](#))
- A counselling centre and multiple support groups for people affected by post-relationship stalking (refer to [Chapter 2.2.2](#))
- Two civil-society organisations with services for victims of violence in the name of so-called "honour" and forced marriage (refer to [Chapter 2.2.3](#))
- A project aimed at preventing female genital mutilation and circumcision (refer to [Chapter 2.2.4](#))
- 28 shelters for victims of domestic violence (refer to [Chapter 3.2](#))
- Two sexual violence referral centres and a support centre for victims of sexual assault (refer to [Chapter 4.2](#)).

2.2.1 Domestic violence

There are several contact points for victims of domestic violence in Finland:

- specialist support services from the network **Federation of Mother and Child Homes and Shelters (Ensi- ja turvakotien liitto, FMS)**⁶⁰,
- the **Multicultural Women's Association Finland (MONIKA)**⁶¹,
- in principle, all public agencies with which victims come into contact: If a dangerous situation is identified, the local **Multi-Agency Risk Assessment Conference (MARAC group)** is notified.

2.2.1.1 Services

The majority of support services for domestic violence are provided by member organisations within the **FMS network**. The FMS is a national association of 30 civil-society organisations. Its aim is to prevent domestic violence and to support children and families.

Not only do the members of the network operate shelters (refer to [Chapter 3.2](#)), they also run crisis centres for victims and perpetrators of domestic violence and offer the following services:⁶²

- Open office hours and crisis support, telephone counselling, *CrisisChat*
- Individual, couple and group discussions, self-help groups
- Individual support for affected children, sometimes adapted to different age groups
- Support for trauma victims
- Practical support in reporting crimes or obtaining injunctions
- Applying for housing, legal aid
- Workshops on dealing with crises and non-violent resolution of problems
- Training for professionals
- Provision of safe housing in the event of acute risk⁶³
- Support during the transition phase after a stay in a shelter (for example planning for the future, reintegration in professional life)

Some organisations point out that domestic violence can also involve sexual violence (refer to [Chapter 4.2](#)).

The degree of specialisation varies among member organisations: The member organisation *Pääkaupungin turvakoti ry*⁶⁴, for example, concentrates exclusively on preventing domestic violence and intimate partner violence, as well as on the support of victims in this area. It runs three shelters (sites: Haaga, Pellas, Toukola), a counselling centre for domestic violence and a housing project with 18 council flats in Helsinki.

In contrast, the member organisation *Tampereen ensi- ja turvakoti ry* runs two shelters in Tampere for victims of domestic violence and offers support to young mothers and older people in the form of counselling, joint activities and an old people's home.⁶⁵

⁶⁰ <https://ensijaturvakotienliitto.fi/en>

⁶¹ <https://monikanaiset.fi/en/>

⁶² An overview of all member organisations within the FMS and selected activities is included in a tabular form in [Annex III](#).

⁶³ Three organisations provide safe houses. Only one of the providers quoted the costs, namely 50 euros per night for adults and 20 euros per night for children (not including babies).

⁶⁴ <http://paakaupunginturvakoti.fi/>

⁶⁵ <https://ensijaturvakotienliitto.fi/tampereenensijaturvakoti>

Seven of the 30 member organisations do not offer any specialist support services as defined by Article 22 of the Istanbul Convention. Three of these seven organisations provide information about violence on their websites, or link to the *Online Shelter* of the FMS (refer to Chapter 3.2.1). Despite being members of the FMS, it was not possible to find any references to violence against women on the websites of the other four organisations.⁶⁶

The organisation **MONIKA** provides services aimed at women from ethnic minorities and at migrant women. In addition to group activities for female victims of violence, it operates a shelter, a telephone counselling service in multiple languages and offers support for integration within Finnish society (WAVE 2018: 28, 31). Its website does not describe the services in any detail, which makes it impossible to list them all. Nonetheless, the organisation is frequently mentioned in reports (as well as in the context of violence in the name of so-called “honour” and forced marriage: refer to Chapter 2.2.3). In its 2017 report on the situation of specialist support services for women in Europe, the network *Women Against Violence Europe* mentioned MONIKA as the only intervention centre in Finland that offers activities for migrant women affected by domestic violence (WAVE 2018: 57).

The **MARAC Method** is a systematic approach to working with victims of domestic violence. The method is designed to identify victims of domestic violence at an early stage in order to break the cycle of recurring abuse. It involves a standardised procedure, divided into three steps: 1. Personal risk exposure is determined using a standardised checklist. Any public body that comes into contact with a relevant person can perform the assessment. The National Institute for Health and Welfare has made the checklist available on its website, along with other documents and forms. 2. Once the checklist has been completed, it is reviewed by a professional. If he or she comes to the conclusion that there is a high risk potential, the case is referred to the MARAC group and discussed at its regular meetings. The groups are made up of members of agencies in the fields of health and social services, the police, shelters and addiction counselling centres, among others. A personal safety plan is drawn up as part of the meeting. 3. The person is informed, and the measures set out in the safety plan are implemented together. The group reappraises the case if certain measures cannot be carried out or if the threat remains.⁶⁷

Research into implementation of the method in Finland yielded an evaluation report by National Institute for Health and Welfare from 2014 (Minna/Lappinen 2014) and the concluding report of a working group on the implementation of the Istanbul Convention from 2016 from the Ministry of Social Affairs and Health (October/Minna 2016). Both of these documents are only available in Finnish. There is also a short journal article from 2016, written by the author of the two texts mentioned above (Minna 2016). The texts state that a pilot project on the MARAC Method started at three locations in Finland in 2010. The pilot project was successful, so it was transformed into a longer-term programme with funding until 2014.

⁶⁶ Authors' own research; refer to the table in Annex III.

⁶⁷ Information on the procedure for the MARAC Method, retrieved from the website of the Finnish National Council for Crime Prevention, a cooperative agency set up by the Finnish Ministry of Justice: <https://rikoksantorjunta.fi/en/marac>; forms (only available in Finnish) on the website of the National Institute for Health and Welfare: https://thl.fi/fi/web/lapset-nuoret-ja-perheet/tyon_tueksi/lomakkeet/lomakkeet_vakivallan_puheeksi_ottamiseen.

A study of all 259 cases managed using the MARAC Method was conducted from 2010 to 2014. This involved reviewing the police files and carrying out case interviews with the persons involved, six months after the MARAC group meeting. The evaluation reveals that the method is effective in reviewing cases of domestic violence and that using the questionnaires is particularly helpful for professionals when assessing the situation. The spiral of re-victimisation was broken in 70 percent of the cases, and no new police reports were filed during this six-month period. Victims also reported positively on the outcomes of the method, although 40 percent stated nonetheless that they were still exposed to various forms of stalking, despite the end to physical violence.

The country report points to another evaluation of the MARAC Method, but its statistics have not been published to date (Government of Finland 2018: 21). The method remains relatively unknown in Finland and is not applied by all stakeholders in the local government districts in which it has already been implemented. The report points out furthermore that additional training is needed for professionals to apply the method (see Minna/Lappinen 2014; October/Minna 2016; Minna 2016).

2.2.1.2 Funding and bases

Most of the support services for domestic violence are state-funded, and additional resources are obtained from donations. State financing is managed by the **Funding Centre for Social Welfare and Health Organisations (STEA)**⁶⁸. The STEA works with the Ministry of Social Affairs and Health and is responsible for the funding and monitoring of projects in the areas of social care and health. Funds are obtained from the proceeds of *Veikkaus*⁶⁹, a kind of state lottery.

The country report for Finland sets out that, at the time of publishing in 2018, STEA disbursed funds totalling five million euros to services related to intimate partner violence, of which the majority was allocated to the FMS (Government of Finland 2018: 17).

In total, **FMS** obtains 70 percent of its funds from STEA (*Veikkaus*). Another 12 percent are provided by the *Lasten Päivän Säätiö (Children's Day Foundation)*⁷⁰. The member organisations also receive financial donations and donations in kind from businesses and individuals. Furthermore, member organisations pay an annual fee of 85 euros. The funding situation of the FMS member organisations cannot be identified precisely. Some of the services state on their websites that they receive additional funds from private foundations, in addition to state funding from STEA, various ministries, local authorities or cities, as well as EU funding. Users can access the majority of services free of charge. One of the member organisations, *Perheidenpaikka ry*⁷¹,

⁶⁸ <https://www.stea.fi/web/en/stea/organisation>

⁶⁹ <https://www.veikkaus.fi/fi/yritys?lang=en>

⁷⁰ <https://www.linnanmaki.fi/fi/lasten-paivan-saatio/>

⁷¹ <https://ensijaturvakotienliitto.fi/perheidenpaikka/> These costs may be refunded by the local authority, but it was not possible to obtain more detailed information in this regard.

offers emergency accommodation in a family home (≠ shelter), for which it charges 50 euros for adults and 20 euros for children per day.

The organisation **MONIKA** states that it is mainly funded by the City of Helsinki, STEA (*Veikkaus*), the Ministry of Social Affairs and Health and the Ministry of Education and Culture, the fund *Stiftelsen Den Sjunde Mars Fonden*, the City of Vantaa and the European Social Fund.

The projects using the **MARAC Method** were carried out by the Ministry of Social Affairs and Health and have been coordinated and evaluated by the National Institute for Health and Welfare since the end of the project period. It was not possible to obtain information on how much funding is used in this regard.

2.2.1.3 Standards

According to the National Institute for Health and Welfare, each local authority is required to prepare an **action programme to prevent domestic violence and to support victims of domestic violence**. Each local authority has an official office that coordinates practical implementation of the measures. Besides providing these services, the local authorities should be aware of, and coordinate with, other local service providers. The local authorities are also responsible for training the social work and health personnel with regard to domestic violence and intimate partner violence.⁷² In 2008, the Ministry of Social Affairs and Health published recommendations for local and regional social services and the health sector to help them identify and prevent intimate partner violence and domestic violence.⁷³ One of the measures set out for implementation in the Istanbul Convention action plan involves, in particular, enhancing the skills of shelter staff in matters relating to intimate partner violence, responding to crises and trauma and supporting older people, people with disabilities and children (NAPE 2017:22). It was not possible to obtain information on specific implementation measures.

Some of the **member organisations of FMS** state that they also advise professionals. However, research did not reveal any systematic procedure in the form of a syllabus or similar. In its *Senja programme (Sensitiveness Model for Professionals of Jurisprudence)*⁷⁴, the *Tukinainen Rape Crisis Centre* offers courses for legal professionals and the police on the subjects of trauma, sexual offences, domestic violence, victims with disabilities and very young victims (refer to [Chapter 4.2.2.1](#)).

The National Institute for Health and Welfare provides training for professionals who want to apply the **MARAC Method**. In addition, the website offers free information about the method, as well as material for further training.⁷⁵

The regional courts in the local government districts have **public legal aid offices** in which persons without the necessary resources can file applications for representation in any legal proceedings.⁷⁶ According to the information on the Finland page of the European e-Justice Portal

⁷² Information from the National Institute for Health and Welfare: https://thl.fi/fi/web/lapset-nuoret-ja-perheet/tyon_tueksi/vakivallan-ehkaisy/lahisuhdevakivalta/kunnilla.

⁷³ <http://urn.fi/URN:NBN:fi-fe201504226067> (only available in Finnish)

⁷⁴ <https://senjanetti.fi/en>

⁷⁵ Information material from the National Institute for Health and Welfare: https://thl.fi/fi/web/lapset-nuoret-ja-perheet/tyon_tueksi/menetelmat/marak

⁷⁶ <https://oikeus.fi/oikeusapu/en/index.html>

of October 2018, all victims of sexual abuse and domestic violence in Finland have access to free legal aid.⁷⁷ The legal aid offices are primarily open to all citizens, so this is not a specialist support service, rather a general support service, according to Article 20 of the Istanbul Convention.

2.2.1.4 Distribution

Twenty-three of the 30 member organisations within FMS offer support services in matters relating to domestic violence as defined by Article 20. They are spread across the country: Two organisations are active in southwestern Finland, two in eastern and northern Finland, six in western and central Finland and nine in southern Finland, including Helsinki.⁷⁸

The organisation **MONIKA** operates in Helsinki.

According to a presentation by the National Institute for Health and Welfare on the **MARAC Method**, there were 33 MARAC groups in Finland in 2017. The presentation visualises their distribution using a map, which shows their even spread across the whole country.⁷⁹

2.2.1.5 Availability

Research identified websites for all **FMS member organisations** that offer specialist support services relating to domestic violence, as well as for the organisation **MONIKA**. The organisations use these websites to describe and explain their services in varying degrees of precision. Telephone numbers for contact persons who can provide additional information on the services were identified in all cases. Some organisations offer their own support helplines as well as an online chat function.

The websites of the **Ministry of Social Affairs and Health** and the **National Institute for Health and Welfare** give extensive information about various forms of violence and provide some links to relevant contact points.⁸⁰

Within the **MARAC Method**, victims are ideally identified by filling in the questionnaire together with one of the public agencies. It was not possible to identify a central contact point or relevant contact persons from local MARAC groups for the event that victims proactively seek to have their cases addressed within a MARAC group⁸¹.

2.2.1.6 Access

The specialist support services offered by the **FMS member organisations** in cases of domestic violence are usually aimed explicitly at women, men and children.

The organisation **MONIKA** only works with women from ethnic minorities and migrant women.

⁷⁷ https://e-justice.europa.eu/content_rights_of_victims_of_crime_in_criminal_proceedings-171-FI-maximizeMS-en.do?clang=en&idSubpage=3&member=1#n08

⁷⁸ Refer to the table in Annex III.

⁷⁹ <https://thl.fi/documents/605877/3375830/Martta+October+MARAK.pdf/ec2b4786-c2c1-4d32-9fa4-0a3175b996c6>, Seite 5.

⁸⁰ Website of the National Institute for Health and Welfare: https://thl.fi/web/lapsset-nuoret-ja-perheet/tyon_tueksi/vakivallan-ehkaisy/lahisuhdevakivalta, website of the Ministry of Social Affairs and Health: <https://stm.fi/en/preventing-violence-and-crime>

⁸¹ This is recommended, for example, among victims of stalking; refer to Chapter 2.2.2.

2.2.1.7 Miscellaneous

It is notable that the websites of the **FMS member organisations**, when discussing their domestic violence support services, frequently address perpetrators explicitly. One organisation, *Lahden ensi- ja turvakoti ry*⁸², offers a comprehensive range of therapies for perpetrators.

2.2.2 Stalking

Finland has a centre for post-relationship stalking called “**Varjo**”⁸³.

Furthermore, two of the **FMS member organisations** state that they can assist with obtaining an injunction as part of their support for persons exposed to domestic violence.⁸⁴ The *Varjo Support Center* website also lists the FMS member organisations as general contacts for victims of post-relationship stalking.

The website of the Finnish police force provides a brochure in ten languages about obtaining an injunction. Stalking is listed as one of the grounds for obtaining the order.⁸⁵ The information is kept very general.⁸⁶

2.2.2.1 Services

The **Varjo Support Center** provides information on various forms of stalking, as well as on first steps that victims may take. In this context, it mentions the MARAC groups and recommends visiting one to prepare a safety plan (refer to [Chapter 2.2.1](#)).

The following services are offered:

- Counselling and support
- One-on-one counselling in Mikkeli and Oulu, as well as online support, for both victims and perpetrators of post-relationship stalking
- Peer-to-peer sharing opportunities in an online forum
- Support groups in Mikkeli, Oulu and online
- Training and counselling for professionals
- Research associations

2.2.2.2 Funding and bases

The **Varjo Support Center** is run by the staff of the two FMS member organisations *Oulun ensi- ja turvakoti ry*⁸⁷ and *VIOLA – Free from Violence (väkivallasta vapaaksi ry)*⁸⁸. No information on their funding was obtainable. It is nonetheless reasonable to assume that funding is obtained from

⁸² <https://ensijaturvakotienliitto.fi/lahdenensijaturvakoti/>

⁸³ <https://varjosta.fi/tukikeskus-varjo/>

⁸⁴ Refer to the table in [Annex III](#).

⁸⁵ In 2013, the Finnish parliament passed amendment 879/2013 to the Finnish Criminal Code. This amendment entered into force in early 2014 and defined stalking as a criminal offence. Paragraph 7a of the Criminal Code now stipulates that a person who repeatedly threatens, watches, contacts or otherwise pursues another person without grounds and thus causes fear or distress is punishable by a fine or a custodial sentence of up to two years.

⁸⁶ https://www.poliisi.fi/crimes/restraining_order, languages: Finnish, Swedish, English, Albanian, Arabic, Kurdish, Persian, Serbo-Croatian, Somali, Sorani

⁸⁷ https://ensijaturvakotienliitto.fi/oulunensijaturvakoti/apua/vakivalta-lahisuhteessa/#eron_jalkeinen_vaino

⁸⁸ <http://www.violary.fi/in-english/>

FMS, and hence indirectly from the state via STEA, as the centre is operated by the two FMS member organisations.

2.2.2.3 Standards

Research did not reveal any standards for specialist support services in cases of stalking. GREVIO's evaluation notes that the quality of support provided to victims is inadequate, which is attributable in particular to a lack of specialist knowledge in this area (GREVIO 2019:30).⁸⁹

2.2.2.4 Distribution

The **Varjo Support Center** states that it operates nationwide, and not only at the locations of the two managing organisations in the regions of Oulu and south Savo. Precise addresses could not be found, presumably to protect victims of stalking.

2.2.2.5 Availability

The two managing organisations behind the **Varjo Support Center** refer to the service on their websites. The *Varjo Support Center* website lists phone numbers and contacts at the offices of the managing organisations in Mikkeli and Oulu.

2.2.2.6 Access

A non-Finnish speaker would have great difficulty finding the **Varjo Support Center** by searching the Internet, as the website is only available in Finnish and does not even include a short presentation of the project in English. Translation software gives the name of the centre, *Varjo*, as "shadow" and adds "eruption" for the Finnish word used by the organisation, which actually means "separation". Hence, the service is not immediately identifiable as a contact point for victims of post-relationship stalking.

2.2.3 Violence in the name of so-called honour and forced marriage

Two civil-society organisations offering services to victims of violence in the name of so-called "honour" and forced marriage were⁹⁰ identified in Finland:

- Organisation **MONIKA**
- **SOPU project**⁹¹ by the organisation *Loisto settlement (Loisto Settlementti ry)*⁹²

⁸⁹ In regard to its source, GREVIO points to a 2016 article in the journal *Qualitative Social Work*. The study investigates the accounts of 15 female victims of stalking in Finland: <https://doi.org/10.1177%2F1473325016644315>.

⁹⁰ Finnish law does not include any statute making forced marriage a criminal offence, as demanded by the Istanbul Convention (Articles 32 & 37 IC). Information provided by the *Finnish League for Human Rights* indicates that the only reason for annulling a marriage under the provisions of the Finnish Marriage Act is if the ceremony was not carried out lawfully (FLHR 2017: 5). An answer given in a questionnaire submitted by Finland in 2018 as part of the evaluation of the implementation of the Council of Europe Convention on Action against Trafficking in Human Beings states that forced marriage is perceived as human trafficking or equivalent (CoE 2018a: 19). Amnesty International is not aware of any convictions in cases of forced marriage under the provisions of the Criminal Code (AI 2017: 15).

⁹¹ <https://soputila.fi/en/>

⁹² <https://loistosetlementti.fi/english/>

2.2.3.1 Services

The website of the organisation **MONIKA**⁹³ does not mention any specialist support services for victims of violence in the name of so-called “honour” or forced marriage. Nonetheless, the organisation appears to be active in this area, and the information and data it provides on the subject of forced marriage are used by the Finnish League for Human Rights in a 2016 study on violence in the name of so-called “honour” (FLHR 2017) and in a 2017 statement by Amnesty International for the UN Committee on the Elimination of Racial Discrimination (AI 2017).

The Amnesty International report states that MONIKA becomes aware of 15 cases of forced marriage or of threat through forced marriage and 40 to 50 cases of violence in the name of so-called “honour” each year (AI 2017: 15). Information contained in the FLHR report indicates that MONIKA has records of 60 cases of forced marriage for the period 2011 to 2014 (FLHR 2017: 5).

The organisation *Loisto settlement* operates various social and youth-work projects that consider gender and cultural aspects. One of the projects, **SOPU**, prioritises the prevention of violence in the name of so-called “honour”. The following services are offered as part of the project:

- Shared group activities and camps, peer support activities for girls and boys, as well as for mothers and fathers
- Confidential support for families or individuals
- Courses and awareness-raising among young people, families and professionals
- Information on the issues of dating and sexuality
- Advice for young people who feel under pressure from their parents to enter into relationships

2.2.3.2 Funding and bases

The organisation behind the **SOPU Project**, *Loisto settlement*, claims to obtain its principal funding from STEA (*Veikkaus*) and the cities of Helsinki and Espoo. It was not possible to obtain a precise breakdown of the funding. According to its website, the SOPU Project was carried out between 2012 and 2017 as a development project by *Loisto settlement* and has received long-term funding from STEA (*Veikkaus*) since the start of 2018.

2.2.3.3 Standards

It was not possible to research standards for the specialist support services relating to violence in the name of so-called “honour” and forced marriage.

⁹³ The organisation Monika has already been discussed in [Chapter 2.2.1](#) on domestic violence. Details of the organisation’s funding and bases, distribution and availability, are only shown there and will not be discussed once more in this section.

2.2.3.4 Distribution

The organisation behind the **SOPU Project**, *Loisto settlement*, states that the projects on violence in the name of so-called “honour” are active in the metropolitan region of Helsinki. It was not possible to obtain more information on the exact location.

2.2.3.5 Availability

The **SOPU Project** website provides email addresses and telephone numbers for the counsellors and the languages offered. The project’s news page also lists times and dates for confidential online chats, as well as the available languages at each time.

2.2.3.6 Access

It was difficult to research information on the services offered by **MONIKA** to victims of forced marriage, and even then the details were incomplete (refer to [Chapter 2.2.1.1](#)). Therefore, it appears that these persons only have limited access to the support service.

2.2.4 Genital mutilation

Information was identified concerning one support project, **KokoNainen**⁹⁴, by the *Finnish League for Human Rights* (FLHR)⁹⁵, which is aimed at preventing female genital mutilation and circumcision.

The current action plan on preventing genital mutilation for the period 2018 to 2020 is based on an assumption that around 10,000 women and girls are affected by genital mutilation and 650 to 3,080 girls are at risk (Koukkula/Klemetti 2019: 9).

2.2.4.1 Services

The FLHR has operated the project **KokoNainen**, which aims to prevent both mutilation and circumcision of female genitals and to publicise the issue, since 2002. The objectives of the project are:

- to enable people from relevant communities to engage in dialogue by means of group-based and individual discussions and
- to offer training on this topic to students and professionals, including the police and social services.

2.2.4.2 Funding and bases

The Ministry of Education and Culture, the Ministry for Foreign Affairs and STEA (*Veikkaus*) fund the **FLHR** activities as the organisation behind the KokoNainen project.

⁹⁴ <https://ihmisoikeusliitto.fi/english/female-genital-mutilation/>

⁹⁵ The FLHR is a civil-society organisation that monitors the human-rights situation in Finland. This organisation mainly carries out studies into human rights in Finland and informs decision-makers and the public about these subjects. The English-language website of the FLHR lists discrimination and racism, female genital mutilation and violence in the name of so-called “honour” (forced marriage is also covered under the latter) as priority areas: <https://ihmisoikeusliitto.fi/english/>

2.2.4.3 Standards

It was not possible to obtain information on any standards for specialist support services in the area of genital mutilation.

The current action plan for preventing genital mutilation aims to include the subject in training curricula and courses for professionals in social services and the health system. The National Institute for Health and Welfare plans to develop an online course on this issue. (Koukkula/Klemetti 2019: 67–68). However, research did not reveal any specific courses on the subject that are currently available.

There was also an action plan in place for the period 2012 to 2016 (STM 2012). The alternative report by the **FLHR** and the *End Female Genital Mutilation European Networks (End FGM EU)* criticises that implementation of the first action plan on genital mutilation was inadequate and that the training it announced was provided exclusively by the FLHR itself (FLHR/End FGM EU, n. y.). An evaluation of the first action plan was carried out by the National Institute for Health and Welfare, but is only available in Finnish (Koukkula et al. 2017).

2.2.4.4 Distribution

FLHR's services are aimed at all victims in Finland. The region in which, for example, training courses are offered is not mentioned.

2.2.4.5 Availability

The **FLHR** has its headquarters in Helsinki. Research did not reveal any activities taking place at this location within the **KokoNainen** project. A general telephone number for the FLHR is provided, along with information on the staff. However, there are no specific details for persons seeking support.

2.2.4.6 Access

The **KokoNainen** project states that it has concentrated so far on persons from the Somalian, Ethiopian, Eritrean and Sudanese communities and that it is currently widening its focus to include other migrant groups.

2.2.5 Assessment

In Finland, specialist support services are provided for all forms of violence examined in this working paper. Support services in the field of domestic violence are relatively extensive, which can be attributed in part to the well-organised cooperation in the national network *Federation of Mother and Child Homes and Shelters*: The network offers easily accessible, specialist support services for victims of domestic violence almost nationwide, namely in five of Finland's six regions⁹⁶. The services are coordinated in terms of content, and detailed information is available online. There are also numerous counselling services (via telephone, chat or in person), which are easily accessible for victims. However, it was not possible to research figures on the specific

⁹⁶ It was not possible to identify any support services in the Lapland region. For the regional distribution of services, refer to Annex III.

utilisation and workload of the services. In its evaluation, GREVIO notes that the support services for domestic violence are making efforts to provide information on this form of violence. However, information on genital mutilation, forced marriage and violence in the name of so-called “honour” in particular is not easily accessible. (GREVIO 2019: 29).

The MARAC Method in particular is used to improve the support and protection system for victims through cooperation and information sharing between different agencies and services. While the method is mainly used for victims of domestic violence, projects dealing with other forms of violence such as stalking are mentioned as well. The MARAC Method has the potential to benefit not only a variety of stakeholders within the support system (civil-society organisations and state agencies), but also the work with various forms of violence. In its evaluation, GREVIO also recommends that this inter-organisational collaboration should be institutionalised and broadened to include specific forms of violence such as forced marriage and violence in the name of so-called “honour” (ibid.: 28).

In contrast to the extended structures in place to tackle domestic violence, specialist services for victims of stalking, genital mutilation, violence in the name of so-called “honour” and forced marriage are quite thin on the ground: The *Varjo Support Center* for post-relationship stalking and the SOPU project, which works with victims of violence in the name of so-called “honour”, offer wide-ranging counselling activities and engage in extensive youth work. The *KokoNainen* project focuses predominantly on public awareness on the topic of genital mutilation. It does not offer any direct support to victims. GREVIO expresses particular criticism of the insufficient training of professionals in the assistance of girls and women affected by this form of violence (ibid.: 31). In a study on violence in the name of so-called “honour” from 2016, the *Finnish League for Human Rights* is critical that the Finnish authorities and professionals are, to a large extent, inadequately informed and lack the requisite skills to offer victim support (FLHR 2017: 6–8). Overall, it is difficult to obtain information about the services for stalking and those provided by the MONIKA organisation by means of Internet research. Following initial research, it is either unclear where exactly the activities or services take place, or they are located exclusively in the metropolitan region of Helsinki.

In addition to the insufficient provision of services for forms of violence other than domestic violence, GREVIO notes that the social services are inadequately equipped to respond to and tackle the specific needs of minorities such as migrant or Sámi women (GREVIO 2019: 30).

Provision of these specialist support services is funded by the state. All projects state that they largely receive their funding from the state lottery *Veikkaus*, which is disbursed by STEA. They obtain additional resources from local authorities or cities, as well as from a number of foundations and individual donors. It remains unclear whether the services have adequate funding, as research did not reveal any appraisals in this regard. Equally, it is not possible to offer an assessment of whether the available funding enables long-term planning.

2.3 Austria

General information is provided on the website of the Division for Women and Equality of the Federal Chancellery.⁹⁷ There is also a brochure that gives a nationwide overview of support

⁹⁷ <https://www.bundeskanzleramt.gv.at/en/agenda/women-and-equality/violence-against-women.html>

facilities for women affected by violence (Federal Chancellery 2020). Another brochure summarises the options for, and rights of, women seeking protection, as well as the basic steps that must be taken; it also offers insight into cooperation between the police, judiciary, and support services (BMGF 2017). An online counselling service for women affected by any form of violence provides anonymous and confidential support, as well as further information.⁹⁸

The following specialist support services exist in Austria:⁹⁹

- 22 counselling centres for domestic violence and violent situations in the family, social milieu or stalking (refer to [Chapter 2.3.1](#))
- four counselling centres for women affected by violence in the name of so-called “honour” or forced marriage (refer to [Chapter 2.3.3](#))
- two counselling centres for women affected by genital mutilation (refer to [Chapter 2.3.4](#))
- 30 women’s shelters (refer to [Chapter 3.3](#))
- five women’s counselling centres specialised in sexual assault, victim-protection groups and clinical-forensic examination centres (refer to [Chapter 4.3](#))

2.3.1 Domestic violence

There are multiple counselling centres for women and girls affected by domestic violence and violent situations in the family, social milieu or stalking in Austria:

- violence protection centres (*Gewaltschutzzentren*)¹⁰⁰ set up after the 1997 Act on Protection Against Violence (*Gewaltschutzgesetz*),
- specialist counselling centres within the Network of of Austrian Counselling Centres for Women and Girls (*Netzwerk österreichische Frauen- und Mädchenberatungsstellen*)¹⁰¹ (GREVIO Shadow Report NGO Coalition 2016: 68),
- general victim protection organisations like NEUSTART¹⁰² or Weisser Ring¹⁰³.
- counselling centres in six women’s shelters organised within the Austrian Autonomous Women’s Shelter Network (*Verein Autonome Österreichische Frauenhäuser, AÖF*)¹⁰⁴ and in five women’s shelters organised in the Union of Austrian Women’s Shelters (*Zusammenschluss Österreichischer Frauenhäuser, ZÖF*)¹⁰⁵

The **violence protection centres**¹⁰⁶ will be examined more closely below:

⁹⁸ <https://www.haltdergewalt.at/en/>; Two female counsellors are available every Monday from 7:00 pm to 10:00 pm to offer professional support and advice, also in English or Turkish. The 2017 annual report contains an evaluation of the helpchat utilisation (AÖF n. y.: 15).

⁹⁹ A graphic atlas of facts shows how the aforementioned institutions for women are distributed across Austria (version: 2017): <http://www.faktenatlas.gv.at/articles/frauenberatung.php> (in German)

¹⁰⁰ <http://www.gewaltschutzzentrum.at/> (in German)

¹⁰¹ <http://www.netzwerk-frauenberatung.at/index.php/h-beratungsstellen>

¹⁰² <https://www.neustart.at/at/en/>

¹⁰³ https://www.weisser-ring.at/?_reload1589955291534#lang-1

¹⁰⁴ <https://www.aof.at/index.php/beratungsstellen> (in German)

¹⁰⁵ In Vienna there is also a counselling centre specialising in cyber violence: https://www.frauenhaeuser-wien.at/cybergewalt_in_beziehungen.htm (in German).

¹⁰⁶ With the exception of Vienna, all intervention centres have now been renamed “violence protection centres”, although the one in Vorarlberg operates as a “violence prevention agency”. They will be referred to in the following as violence protection centres.

2.3.1.1 Services

The violence protection centres offer free and confidential help and support to women and men affected by domestic violence or violent situations in their social milieu.

The range of services includes:

- Information and advice
- Support to increase protection and safety for women and their children
- Psycho-social support (Gewaltschutzzentrum Steiermark 2017: 11)
 - Preparing individual security plans (threat management)
 - Crisis interventions
 - Psycho-social accompaniment
 - Support for affected children
 - Referral to, and coordination with, the authorities, other agencies and professionals
 - Provision of psychotherapeutic professionals and, where necessary, interpreters
- Legal support (ibid.: 12):
 - Legal advice, for example on obtaining an injunction, arrest of the perpetrator
 - Support before and during court proceedings and in dealing with authorities and the police
 - Provision of legal representation when needed

The police notified the violence protection centres in 10,967 cases during 2017 (Domestic Abuse Intervention Centre Vienna 2018: 59). The centres then made contact with the victims immediately. Support to 18,860 people affected by violence was provided in 2017. In total, 83 percent of them were women and their children (ibid.: 58). In 2017 and 2018, all women who contacted a violence protection centre were able to receive counselling and support (Federal Chancellery 2019a: 25).

Some violence protection centres also provide counselling and support in the establishment of victim-protection groups in Austrian hospitals (refer to [Chapter 4.3.1](#)).

In the federal states of Lower Austria, Upper Austria, Salzburg and Vienna, the organisations behind the violence protection centres are non-profit associations, while they are non-profit limited companies in Styria and Vorarlberg. There is no information available on the organisational form of violence protection centres in Burgenland, Carinthia and Tirol.

It was not possible to research information on the composition of staff at violence protection centres in Lower and Upper Austria, Styria and Vienna:¹⁰⁷ The centres have between 12 and 25 workers, mostly women. The teams at all of the centres include lawyers and social workers. Psychologists and sociologists are also employed in Upper Austria.

¹⁰⁷ Neither the website nor the activity report contain any information for Burgenland, Carinthia, Lower Austria, Salzburg, Tirol, and Vorarlberg.

2.3.1.2 Funding and bases

Across Austria, the violence protection centres are legally recognised victim-protection institutions. Following a tender procedure, they have operated since 1 January 2013 on the basis of an open-ended contract with the Division for Women and Equality of the Federal Chancellery (*Frauen- und Gleichstellungssektion im Bundeskanzleramt*) and the Federal Ministry of the Interior (Federal Chancellery 2019b: 58).¹⁰⁸ The funds are adjusted for inflation each year. Flat-rate budget increases are allocated if the contractually agreed case numbers are exceeded (*ibid.*). In total, the ministries each allocated an equal share of the 7.1 million euro budget in 2014 and 7.3 million in 2015 (BMGF 2016:3).

Furthermore, there are single-year contracts with the Federal Ministry of Constitutional Affairs, Reforms, Deregulation and Justice (*Bundesministerium für Verfassung, Reformen, Deregulierung und Justiz*), which funds psychosocial and legal process support for victims of violence in accordance with Paragraph 66 of the Austrian Code of Criminal Procedure (*Strafprozessordnung*). In total, the Austrian Ministry of Justice provided 5.2 million euros in 2014 and 5.7 million in 2015 (*ibid.*).

Some violence protection centres also receive regional funding from their home states.¹⁰⁹

2.3.1.3 Standards

The violence protection centres operate on the basis of quality guidelines to which they have all agreed.¹¹⁰ In addition, in 2016 the Federal Association of Victim-Centred Work with Perpetrators (*Bundesarbeitsgemeinschaft opferorientierte Täterarbeit*) prepared and agreed standards for cooperation between victim-protection organisations, including violence protection centres, and organisations that work with perpetrators.¹¹¹

2.3.1.4 Distribution

There is one violence protection centre in each Austrian federal state. There are also field offices and regional branches in some states.

2.3.1.5 Availability

The violence protection centres are not open round-the-clock. In general, they can be reached on every working day. The Domestic Abuse Intervention Centre Vienna (*Wiener Interventionsstelle*) is open on Saturdays as well. In addition to availability during normal office hours, almost all violence protection centres are open until 8:00 pm on one or two days. Regional branch offices of the violence protection centres sometimes operate only on one or two days per week during normal office hours and/or by arrangement. The Burgenland violence protection centre also offers regular counselling days in all districts of the state.

¹⁰⁸ Before then, the violence protection centres had been funded based on one-year assistance agreements. Temporary contracts lasting a few years were agreed in each case between 2001 and 2006 (Federal Chancellery 2019b: 58).

¹⁰⁹ For instance Upper Austria, Salzburg, and Styria.

¹¹⁰ They are not publicly accessible.

¹¹¹ <https://gewaltschutzzentrum-noe.at/wp-content/uploads/2016/11/BAG-OTA-Standards.pdf> (in German)

2.3.1.6 Access

The individual violence protection centres provide varying accessibility options:

- Carinthia violence protection centre: Website offers information in German and Slovenia
- Lower Austria, Salzburg and Tirol violence protection centres: Website offers information in German, English, Serbian and Turkish
- Upper Austria violence protection centre: Website offers information on the Act on Protection Against Violence in German, English, Serbian and Turkish
- Lower Austria violence protection centre: Psychosocial support and legal advice in English, French and Serbian
- Domestic Abuse Intervention Centre Vienna and Association of Austrian Autonomous Women's Shelter Network (AOEF): Brochure on protection against violence in 20 languages, also available in Braille; can be ordered as print version
- Domestic Abuse Intervention Centre Vienna: Counselling by native speakers of Armenian, Bosnian/Croatian/Serbian, Georgian, Farsi/Persian, Russian and Turkish; also counselling in English, French, Italian, Slovenian and Spanish

Interpreters can be called into violence protection centres when needed. The Lower Austria and Salzburg violence protection centres also work with sign language interpreters.

A video informs deaf and hearing-impaired women¹¹² of the types of specialist support services available in cases of violence and how they are accessed; the women can then receive counselling¹¹³ from the women's helpline against violence using a relay system.¹¹⁴ In addition, the WITAF¹¹⁵ website "Scream against violence" ("*Schrei gegen Gewalt*") provides comprehensive information on the issue of protection against violence¹¹⁶.

2.3.1.7 Miscellaneous

The services provided by the violence protection centres are documented in annual reports with up-to-date statistics.¹¹⁷

Since 2006, the violence protection centres have been contractually required by the competent ministries to indicate any problems with the various victim-protection laws and to submit proposals to the national government for new legislation to improve the situation of victims. The reform proposals are drafted and conceptualised in the Legal Expert Forum (*Juristisches Fachforum*), an alliance of female lawyers from the Austrian violence protection centres and intervention centres. Relevant legal materials are analysed each year for potential problems in terms of their relevance to victim protection. Weaknesses are identified and evidenced using empirical figures and practical examples. International documents, such as the Istanbul Convention and exemplary provisions in foreign legislation, are helpful material to present the arguments. Another step involves regularly

¹¹² <http://www.oegsbarrierefrei.at/bmbf/hilfseinrichtungen/> (in German)

¹¹³ A relay service translates sign language, recorded for example by webcam, or text messages into speech and vice versa, enabling communication between hearing and non-hearing interlocutors.

¹¹⁴ www.oegsbarrierefrei.at/frauenhelpline (in German)

¹¹⁵ Knowledge – Information – Tradition – Latest news – Demands by deaf people for deaf people (*Wissen – Information – Tradition – Aktuelles – Forderungen von Gehörlosen für Gehörlose*): <https://www.witaf.at/> (in German)

¹¹⁶ <https://www.schreiegegengewalt.at/> (in German)

¹¹⁷ See for example for Carinthia – report and statistics for 2019: https://9e5094c0-bb9b-4bb0-8fb4-608510593482.filesusr.com/ugd/b16c59_2331bee6dd454208a0613489b5fa75d8.pdf (in German)

presenting to the ministries reform proposals in the form of detailed draft legislation (Styria violence protection centre 2017: 38). The most recent reform proposals were published in May 2018 (cf. Austrian violence protection centres 2018).

The Tirol violence protection centre commissioned an evaluation in 2018. Several other violence protection centres took part as well.¹¹⁸ The programme of Chancellor Sebastian Kurz's federal government (18 December 2017 to 28 May 2019) also included an evaluation and, if necessary, continued development of the violence protection centres (NVP/FPÖ 2017: 107). It was not possible to obtain information on how this has been implemented.

2.3.2 Stalking

In places, the violence protection centres provide counselling and support to stalking victims (see Chapter 2.3.1), but there is no independent, specialist support service.

2.3.3 Violence in the name of so-called honour and forced marriage

There are four counselling centres for girls and women affected by violence in the name of so-called "honour" or forced marriage: The Women-Only Counselling Centre for Migrant Women – DIVAN (*Frauenspezifische Beratungsstelle für Migrantinnen*), operated by Caritas Styria in Graz, the Salzburg violence protection centre¹¹⁹ (refer to Chapter 2.3.1), a counselling centre specialising in migrant women, operated by the shelter St. Pölten, and the association Orient Express in Vienna, which was founded in 1988¹²⁰.

DIVAN and Orient Express will be examined more closely below:

2.3.3.1 Services

The services offered by **DIVAN** are aimed at migrant women and at girls and young women at risk of forced marriage or women who want to escape a forced marriage. They include:

- Psychosocial and legal support (including by telephone or email)
- Longer-term support and assistance
- Emergency accommodation when possible
- Where needed, referral to specialist agencies and authorities

150 women from 37 countries received counselling in 2014. The majority were third-country nationals of Turkish extraction (Federal Chancellery 2018: 28).

The services offered by **Orient Express** are intended for girls and young women aged 16 to 24. They include:

- Anonymous and free counselling, assistance and support (also by telephone and online) for women affected by forced marriage or abduction

¹¹⁸ <https://campus.aau.at/cris/project/0f4de0c76123327e01612851efa509dc> (in German)

¹¹⁹ <http://www.gewaltschutzzentrum.eu/index.php?lang=e&status=7>

¹²⁰ <https://www.orientexpress-wien.com/?lang=en>

- Counselling services for problems relating to families or partnerships, violence or abuse and inter-generational conflicts
- Awareness-raising and educational work addressing genital mutilation

123 women and girls received counselling and support on the subject of forced marriage in 2018.

In addition, a **Nationwide Coordination Centre Against Abduction and Forced Marriage** (*Bundesweite Koordinationsstelle gegen Verschleppung und Zwangsheirat*) was established within Orient Express in 2017. It coordinates efforts in cases of abduction (for purposes of forced marriage or as “punishment”) and repatriation of the women to Austria at national level. Orient Express has operated an emergency flat since 2013 and a transitional flat since 2019. They are available to girls and young women aged 16 to 24 from all over Austria who are at risk of, or affected by, forced marriage (refer to [Chapter 3.3](#)). The organisation has a team of around 35 multilingual female counsellors, support workers, course leaders, coordinators and organisers. The number of counsellors changes frequently, depending on the momentary budget situation. At present there are four advisers, although their hours amount to a full-time equivalent of 2.13 positions.

2.3.3.2 Funding and bases

DIVAN was founded in 2011 and is financed using funds allocated by the Division for Women and Equality of the Federal Chancellery, the Federal Ministry of Europe, Integration and Foreign Affairs (*Bundesministerium für Europa, Integration und Äußeres*), the federal state of Styria, and the departments for Women and Equality (*Referat Frauen und Gleichstellung*) and for Education and Integration (*Abteilung für Bildung und Integration*) of the City of Graz.

Counselling by **Orient Express** is financed using funds allocated by the Division for Women and Equality of the Federal Chancellery, the Federal Ministry of Europe, Integration and Foreign Affairs and the Municipal Department Women’s Affairs of the City of Vienna. With the exception of the three-year framework assistance agreement with the City of Vienna, funding is based on one-year project assistance. The Nationwide Coordination Centre Against Abduction and Forced Marriage within **Orient Express** has been funded since 2017 by the Federal Ministry of Europe, Integration and Foreign Affairs, with some additional co-funding from the Municipal Department Women’s Affairs of the City of Vienna.

2.3.3.3 Standards

It was not possible to identify specific standards for the counselling agency **DIVAN**.

Orient Express states that its counsellors receive intense training for several months and attend ongoing basic and further training.

2.3.3.4 Distribution

The counselling centre **DIVAN** is based in Graz and has a branch office in Kapfenberg. DIVAN also offers ambulatory counselling in Upper Styria, which is arranged in advance by telephone. Counselling at DIVAN is usually offered in the organisation's main office, sometimes in the form of scheduled visits and sometimes in the form of "surgeries" at the premises of other counselling agencies.

Orient Express is based in Vienna.

2.3.3.5 Availability

The counselling agency **DIVAN** can be reached every weekday morning until at least 12:00 pm and on two additional weekday afternoons. **Orient Express** can be reached on three workdays until 5:00 pm and on one workday until 1:00 pm.

2.3.3.6 Access

The counselling centre **DIVAN** offers its services in German, Turkish, Arabic, Bosnian, Croatian, Serbian, English, Dari, and Farsi. **Orient Express** provides counselling in German, Turkish, Arabic, and English.

2.3.3.7 Miscellaneous

Orient Express runs the **working group "abduction and forced marriage"** (*Arbeitskreis „Verschleppung und Zwangsheirat"*), which was founded in 2016 and which handles specific when necessary. It is also tasked with developing general improvements to develop case-independent improvements for more effective work in this area and to carry out prevention work (Federal Chancellery 2018: 6). The working group also creates networks between the Austrian executive and judiciary on the one hand and, on the other, between relevant organisations and the Division for Women and Equality of the Federal Chancellery, the Federal Ministry of the Interior, and the Federal Ministry of Constitutional Affairs, Reforms, Deregulation and Justice (ibid.: 24).

2.3.4 Genital mutilation

There are two counselling centres for women affected by genital mutilation in Austria, namely the counselling centre Bright Future, founded in 2005 by the African Women's Organization¹²¹, and the FEM Süd Women's Health Centre (*Frauengesundheitszentrum FEM Süd*)¹²², which has provided counselling on the issue of genital mutilation since 2007. Secondly, several Vienna hospitals have special outpatient clinics for girls and women affected by genital mutilation.¹²³

Estimates from 2006 suggest that up to 8,000 women in Austria, above all from Somalia, are affected by genital mutilation, over a quarter of them in Vienna (City of Vienna 2006:

¹²¹ <http://www.african-women.org/index.php>

¹²² http://www.fem.at/FEM_Sued/femsued.htm

¹²³ They include the Wiener Rudolfstiftung, the University Women's Clinic at the AKH and the Wilhelminenspital.

392). However, experts now believe that the total number of girls and women affected is significantly higher.¹²⁴

2.3.4.1 Services

The services provided by the **African Women's Organization** are aimed at African women who are at risk of, or affected by, genital mutilation and other harmful traditions inflicted on women and children. They include:

- counselling and care
- gynaecological examinations

Since 1998, the African Women's Organization has prioritised a campaign against female genital mutilation in Austria, which aims to reduce the risk of genital mutilation for migrant women. In addition, the organisation conducted a survey on genital mutilation in Austria in 2000 (African Women's Organization in Vienna 2000).

Around 360 women receive counselling and support each year (City of Vienna 2006: 394).

The **FEM Süd** services are aimed at women and girls from African countries and Arabic-speaking regions who are at risk of, or affected by, genital mutilation. They include:

- Information and counselling by telephone
- Counselling on health and social matters
- Crisis interventions

Over 800 women received counselling and support in 2017. This involved almost 4,400 sessions (Institute for Women's and Men's Health 2017: 69).

FEM Süd employs one counsellor with a professional background in medicine and another part-time staff member who conducts preliminary meetings and support sessions. In addition, six peer counsellors are currently working on a one-year project on a part-time basis under a freelance contract.

2.3.4.2 Funding and bases

The counselling centre of the **African Women's Organization** was founded in 2005 with funding from the City of Vienna, the then Ministry of Women's Affairs, and a health fund (*Fond Gesundes Österreich*) (National Action Committee 2008). Between 2015 and 2018, the African Women's Organization received project funds of 11,250 euros per year from the Division for Women and Equality of the Federal Chancellery to enable measures associated with awareness raising,

¹²⁴ <https://www.medinlive.at/gesundheitspolitik/fgm-stellt-oesterreichs-gesundheitssystem-vor-herausforderungen>

prevention and elimination of genital mutilation and the provision of support to victims of genital mutilation.¹²⁵

FEM Süd is funded by the Division for Women and Equality of the Federal Chancellery, the Federal Ministry of Europe, Integration and Foreign Affairs, the Municipal Department Integration and Diversity and the Municipal Department Women's Affairs of the City of Vienna, and the Vienna Hospital Association (*Wiener Krankenanstaltenverbund*). Within the project "intact – education, awareness-raising and support around female genital mutilation" (*Projekts „intact – Aufklärung, Bewusstseinsbildung und Unterstützung bei weiblicher Genitalverstümmelung“*), funds from the Federal Ministry of Europe, Integration and Foreign Affairs will be provided for activities during the period 1 July 2018 to 31 December 2019, also for counselling of affected women.¹²⁶

2.3.4.3 Standards

It was not possible to find specific standards for **DIVAN**.

FEM Süd bases its work on the World Health Organisation's policy guidelines on genital mutilation in particular.¹²⁷

2.3.4.4 Distribution

Both organisations are located in Vienna. The intact project involves training women as multipliers in cooperation with the local women's health organisations. The courses take place in Vienna, Linz, and Salzburg. Among others things, they will counsel women and girls affected by genital mutilation.

2.3.4.5 Availability

The **African Women's Organization** can be reached Monday to Friday from 9:00 am to 5:00 pm. **FEM Süd** can be reached until 4:00 pm on three workdays and until 12:00 pm on the other two.

2.3.4.6 Access

The **African Women's Organization** offers advice in Arabic, German, English, and French and can arrange interpreting services for a range of African languages when necessary.

The employees of **FEM Süd** offer advice in German, English, Arabic, and Somali. They work with interpreters to provide other languages (Institute for Women's and Men's Health 2017: 69).

2.3.4.7 Miscellaneous

Orient Express (refer to [Chapter 2.3.3](#)) provides education and awareness raising for matters relating to genital mutilation. The **Austrian Platform against Genital Mutilation** (*Österreichische*

¹²⁵ https://www.parlament.gv.at/PAKT/VHG/XXVI/AB/AB_02108/imfname_728485.pdf (in German)

¹²⁶ <https://www.bmeia.gv.at/integration/datenbank-integrationsprojekte/detail/project/intact-aufklaerung-bewusstseinsbildung-und-unterstuetzung-bei-weiblicher-genitalverstuemmelung-pha/> (in German)

¹²⁷ WHO guidelines on the management of health complications from female genital mutilation: https://apps.who.int/iris/bitstream/handle/10665/206437/9789241549646_eng.pdf;jsessionid=8A403A794F04248478AC7CC9B290CDEA?sequence=1

Plattform gegen Genitalverstümmelung) was founded in 2003. It takes action to combat female genital mutilation in Austria and abroad.¹²⁸

2.3.5 Assessment

Austria relies on non-governmental support services to implement Article 22. There are specialist support services for all the forms of violence included in this working paper. They are offered by non-governmental, mainly charitable organisations, which predominantly receive public grants for this purpose.

Specialist support services for victims of domestic violence operate Austria-wide: The first legal basis for rapid and efficient protection for victims of domestic violence was established in 1997 with the Act on Protection Against Violence¹²⁹. Violence protection centres were set up in each federal state at the same time to offer comprehensive protection to affected women, men, and children. Throughout Austria, the violence protection centres are legally recognised as victim-protection agencies that act as interfaces between all institutions involved, including security authorities, courts, and women's shelters. They have signed open-ended contracts with the state, so their funding can be considered secure. The violence protection centres operate on the basis of uniform quality standards, which are documented in published annual reports. Some violence protection centres have already undergone external evaluation.¹³⁰

Nonetheless, the strong focus on domestic violence within the Austrian anti-violence policy is at the expense of efforts to prevent other forms of violence that receive less political attention, funding and support:¹³¹ For instance, Austria only has a handful of specialist support services for victims of violence in the name of so-called "honour", forced marriage or genital mutilation (for sexual violence see [Chapter 4.3](#)). The majority of these institutions are located in Vienna. The violence protection centres address the issue of stalking in part, but there is no independent, specialist support service for this area in Austria.

Although domestic and/or sexual violence are the most common forms of violence in Austria, violence in the name of so-called "honour", forced marriage and genital mutilation are assumed to be on the increase as well (GREVIO 2017a: 31; Criminal Law Task Force 2019: 25). Female refugees, asylum seekers and migrants are disproportionately affected by these forms of violence, which now also extend to girls and women of the second immigrant generation (GREVIO 2017a: 31).¹³² Given the lack of valid data on the prevalence of less common forms of violence against women in Austria, it remains difficult to estimate the extent to which the number, scope, and range of specialist support services need to be enlarged. In this context, the Committee for Victim

¹²⁸ <http://www.stopfgm.net/> (in German)

¹²⁹ Article 25, long-term support, Paragraph 140 of the Act on Protection Against Violence

¹³⁰ <https://campus.aau.at/cris/project/Of4de0c76123327e01612851efa509dc> (in German)

¹³¹ This can lead to unequal treatment of victims of different forms of violence: By law, the law enforcement authorities are obliged to ensure that victims of domestic violence receive support from a violence protection centre. However, no equivalent obligation applies to victims of other forms of violence (GREVIO 2017a: 31). The NGO coalition for the GREVIO Shadow Report therefore calls for the police to inform the violence protection centres whenever there is an incident involving violence against women or domestic violence, so that victims can be reached earlier and violence prevented more effectively (Austrian GREVIO Shadow Report NGO Coalition 2016: 71).

¹³² For more information on the need for improvements in the special case of migrant women facing violence, refer also to the list of demands issued by the working group "migrant women and violence" (2014): http://www.a oef.at/images/06_infoshop/6-2_infomaterial_zum_downloaden/Infoblaetter_zu_gewalt/Forderungskatalog_Migration_Feb-2014.pdf (in German)

Protection and Work with Perpetrators within the Criminal Law Task Force¹³³ calls for the establishment of counselling centres for genital mutilation in every federal state (Criminal Law Task Force 2019: 39).

The amount of funds allocated to finance the current support services differs in each federal state and competent city district. The terms under which assistance is provided vary as well: Unlike the funding of the violence protection centres, the other specialist support services are frequently awarded only annual or biannual contracts. In addition, the allocated funds usually cover no more than the basic costs (GREVIO 2017a: 16). In turn, other organisations must place applications for financial assistance at all three levels of government (national, regional, and local), as well as at European level, and frequently receive only short-term funding (ibid.). This occasionally precarious financial situation directly impacts how specific support services are offered: In particular, it is impossible to accommodate the longer-term counselling needs of victims, as the number of counselling sessions available to each victim must be restricted due to the limited resources (ibid.: 33; GREVIO Shadow Report NGO Coalition 2016: 71). Trauma treatment is affected by this predicament especially (GREVIO 2017a: 33; this assessment refers also to the services provided under Article 25, see [Chapter 4.3](#)). It seems moreover that the services lack specialisation in regard to the special needs of female victims of violence suffering from concomitant addiction problems, psychological problems, learning difficulties or physical disabilities¹³⁴ (ibid.; Schachner et al. 2014).

The demand formulated in the GREVIO report for fit-for-purpose, comprehensive and long-term financial support for the civil-society organisations that provide important help and support services to victims of violence (GREVIO 2017a: 16) was also adopted in the policies of the Social Democratic parliamentary group in late 2018¹³⁵. The report insisted on the need for a comprehensive and coordinated approach to preventing and combating violence in the name of so-called “honour”, forced marriage and genital mutilation, with the involvement not only of various stakeholders, organisations and agencies, but also and above all, the migrant communities in Austria that continue to inflict these forms of violence as culturally inherited practices (ibid.: 32).¹³⁶ These forms of violence appear to have captured more political attention in recent times: Since 2018, counselling services for women with a migrant background have also been instructed to “prioritise education, awareness-raising and support when responding to female genital mutilation and violence against women” (Federal Chancellery 2019b: 100). Moreover, additional funding for the submission of project proposals for “measures against female genital mutilation and violence

¹³³ A Criminal Law Task Force was established in 2018 under the Sebastian Kurz administration in Austria to promote the government’s aim of “tougher sentences for sexual and violent offenders”. It consisted of a criminal law committee and a committee for victim protection and work with perpetrators. Legislative amendments had been presented for 57 measures by May 2019: https://www.bundeskanzleramt.gv.at/bundeskanzleramt/nachrichten-der-bundesregierung/2019/task_force_strafrecht_stroengere_strafen_bei_sexuellem_missbrauch_sowie_gewalt_gegen_frauen_und_kinder.html (in German)

¹³⁴ A study on violence and sexual abuse inflicted on persons with disabilities was commissioned by the Federal Ministry of Labour, Social Affairs, Health, and Consumer Protection in 2016. The contract was awarded to a consortium led by the Institute for the Sociology of Law and Criminology (IRKS). The findings have been published in 2019: <https://www.irks.at/publikationen/studien/2017/gewalt-an-menschen-mit-behinderungen.html> (in German)

¹³⁵ However, the Gender Equality Committee is yet to start deliberations: https://www.parlament.gv.at/PAKT/VHG/XXVI/A/A_00540/index.shtml (in German)

¹³⁶ A National Action Plan for Prevention and Elimination of FGM in Austria existed from 2009 to 2011 (National Action Committee 2008). Implementation of the plan was to be evaluated after this period as a basis for defining future policies. It was not possible to locate any information in this regard.

against women in the context of integration” was made available following a special appeal by the Austrian Integration Fund (*Österreichischer Integrationsfonds*).¹³⁷

¹³⁷ https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=20&ved=2ahUKEwia57We84vjAhXl-6QKHedbDlw4ChAWMAI6BAgCEAI&url=https%3A%2F%2Fwww.integrationsfonds.at%2Ffileadmin%2Fcontent%2FDo wnloads%2FStipendienFoerderungen%2FAufruf_zur_Einreichung_FGM_sowie_Gewalt_an_Frauen.pdf&usg=AOvVaw3UAahO LZ5EuTNwU8GzPZ_O

3 Shelters (Article 23)

“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 proactively to victims, especially women and their children.”

(Article 23 IC)

Specialised shelters for people affected by violence have the primary task of providing rapid and low-threshold protection around the clock if possible. In addition, legal and psychosocial counselling and effective cooperation with all authorities and institutions involved are needed to support victims.

The following table will provide an overview of shelters required by the Istanbul Convention, broken down for each country.

Shelters (Article 23)			
Aspects	Denmark	Finland	Austria
Number	48; of which 42 are only for women (as of 2018)	28; of which 1 is only for women (as of 2019)	30 (as of 2019)
Places	643; of which 451 are only for women and children	202; of which 14 are only for women and children	766 for women and children
Recommendation in the Istanbul Convention: one family place per 10,000 inhabitants¹³⁸	Fulfilled in regard to aggregate places for women and men Not fulfilled in regard to places only for women: shortfall of 121 places	Not fulfilled: shortfall of 352 places (women and men)	Not fulfilled: shortfall of 100 places (women only)
Operated by	Civil-society organisations, 10 regional or local-authority bodies, one umbrella organisation (only for women’s shelters)	7 local-authority bodies, 17 civil-society organisations, pooled via the National Office for Welfare and Health	Civil-society organisations, 2 umbrella organisations and 4 independent women’s shelters

¹³⁸ Paragraph 135 Explanatory Report to the IC: The system of shelters should be able to accept one family per 10,000 head of population (CoE 2011: 25). It is not clear whether the standard from the Istanbul Convention includes only places exclusively for women (and their children) or also refers to those that are available to men. The recommendations in the Istanbul Convention refer to the recommendations included in the concluding report of the Council of Europe Task Force to Combat Violence against Women, including Domestic Violence (EG-TFV 2008: 51).

Funding and bases	50 percent of funding comes from the government and contributions by residents; the local authority pays the rest	State-funded via the National Institute for Health and Welfare	Federal states mostly responsible for funding; different conditions for each state
Distribution	Predominantly in Copenhagen, which is also the location with the greatest utilisation	Distributed across all regions; utilisation rate very high in southern Finland	Mostly in cities; gaps in availability, especially in rural areas.
Availability	65 percent 24/7 ready for new intake	24/7 ready for new intake	24/7 ready for new intake
Access	<p>Women and their children, men in some cases</p> <p>No access for women without valid residency status</p> <p>Limited access for women with mobility restrictions and disabilities</p> <p>Very limited access for women with mental illnesses and addiction problems</p>	<p>Women, men and their children (1 shelter only for women)</p> <p>Barrier-free access guaranteed according to official information</p>	<p>Women and their children</p> <p>Limited access for asylum-seeking women and women without valid residency status, women with older sons, women with addiction problems, mental illnesses, learning difficulties or physical disabilities</p>
Duration of stay	<p>Unlimited</p> <p>Average duration of stay 2017: 2.5 to 4 months (varies according to type of violence experienced)</p>	<p>Unclear</p> <p>Average duration of stay 2018: 16 days</p>	<p>Unlimited</p> <p>Average duration of stay not known</p>

Table 2: Overview of shelters (Article 23)

3.1 Denmark

There are 48 shelters for women affected by violence and their children in Denmark. Some shelters can also be used by men affected by violence. The **National Organisation of Women's Shelters in Denmark LOKK** is an alliance of 41 shelters that exclusively accept women and their children. Two shelters specialise in victims of violence in the name of so-called "honour". The shelters are operated by civil-society organisations and, in part, by local authorities, which are also legally responsible for providing the shelters.

3.1.1 Services

There were 48 shelters in late 2018 according to information from the national agency “Life without Violence”:^{139,140} Six of them are open to men as well as women. This makes 42 shelters for women only. Seven additional shelters prioritise abused men (Lev Uden Vold 2019: 3). Two shelters have a secret address. Two shelters specialise in victims of violence in the name of so-called “honour” and also have secret addresses in Zealand and southern Denmark (RED Safehouses)^{141,142}.

Women can make contact by telephone to locate their nearest shelter or use the online overview provided by LOKK or “Life without Violence”.

For as long as the residents remain at the sites, the shelters offer:¹⁴³

- Safety from perpetrators for women and children
- Counselling and support for crisis management
- Activities for women and children
- Assistance with contacting authorities
- Sharing of experience with people in the same situation

The shelters can also arrange for women to receive socio-psychiatric, psychological or special therapeutic treatment if necessary (Guideline 9096 for Adult Housing (*Vejledning om botilbud m.v. til voksne*), paragraph 140)¹⁴⁴. Children and young people are always offered a psychological treatment lasting between four and ten hours. This also extends to the period after their stay at the shelter (Guideline 9096, paragraph 142). The women can remain anonymous in the shelter.¹⁴⁵

On average, the individual shelters had 13 staff members, each of them working 23 hours per week in 2017. Each shelter also employed an average of 29 volunteers (Ministry of Justice 2017: 25).

3.1.2 Funding and bases

Responsibility for the provision of shelters is assigned to local authorities under paragraph 109 of the Danish Social Service Law. They are entitled to introduce their own services and to use places offered by other providers, including private companies, civil-society or religious organisations (paragraph 4, subparagraph 2 Danish Social Service Law). The Ministry of Children and Social Affairs is responsible for legislation in this area.

The National Organisation of Women’s Shelters in Denmark LOKK is an alliance of 41 women’s shelters. In the evaluation of shelters by Ramboll in 2015, 31 shelters were described as independent organisations; some of them operated based on an agreement with the local

¹³⁹ For a full list see: <https://levudenvold.dk/hjaelp-og-radgivning/krisecentre-og-raadgivning/>

¹⁴⁰ List from the National Organisation of Women’s Shelters in Denmark LOKK: <https://www.lokk.dk/kvindekrisecentre/liste-over-krisecentre/>. It also lists accommodation projects that accept homeless people and contains 58 shelters.

¹⁴¹ <https://red-center.dk/safehouse/hvad-tilbyder-vi/>

¹⁴² GREVIO criticises that shelters for people affected by “honour”-based violence are not exclusively for women. Allowing access to boys and men fails to acknowledge the gender-based aspect inherent to this form of violence (GREVIO 2017b: 34).

¹⁴³ <https://www.lokk.dk/kvindekrisecentre/hvad-tilbyder-et-krisecenter/>

¹⁴⁴ <https://www.retsinformation.dk/forms/R0710.aspx?id=198678>

¹⁴⁵ <https://www.lokk.dk/kvindekrisecentre/hvad-tilbyder-et-krisecenter/>

authority, while others did not. Ten shelters were organised by the local authority or the region. One shelter had a different organisational form (Ramboll 2015: 14).

According to paragraph 109, subparagraph 7 of the Danish Social Service Law, local authorities are also responsible for providing coordination counselling after a stay in a shelter.

The shelters are financed by the local authorities, which receive 50 percent of the funding from the government (paragraph 177, subparagraph 5 Danish Social Service Law). Responsibility for payment rests with the local authority in which the woman is an official resident (Guideline 9096, paragraph 129).¹⁴⁶ Women must contribute to the costs of their stay: The amount of this co-payment contribution is determined by the Ministry of Children and Social Affairs. The rates are adjusted annually. The rate was 84 DKK (around 12 euros) per day in 2018. The local authority covers this amount if the woman has no income. Women are also entitled to apply for a reduction in their personal contribution. In addition, the local authority sets a small allowance for personal needs and disburses this amount (Guideline 9096, paragraph 139).

Shelters are required, within no longer than three days, to submit information to the competent local authority concerning admissions and discharges of women (Guideline 9096, paragraph 132). The only information submitted is that a female resident of the local authority is present at the women's shelter if the woman would like to remain anonymous. When a woman leaves the shelter, the responsible local authority is required to initiate a coordination counselling process addressing the areas of housing, finances, employment, school, childcare and health (Guideline 9096, paragraph 143). In complex cases, the local authority can seek assistance from the national knowledge and special counselling organisation for social affairs, VISO⁵³. There are guidelines for adults, children and persons with disabilities, which are intended to help local authority caseworkers respond to victims of domestic violence. The local authority may also fulfil its obligation to offer counselling by cooperating with voluntary organisations or private sector providers. An initial counselling session must take place as soon as possible after admission of a woman to the shelter and no later than when her departure from the shelter is planned. Contact with a caseworker should be arranged as quickly as possible. Only one contact person should be appointed if possible. The meetings can take place in the women's shelter. Counselling is more extensive in the early stages, but takes less time as it progresses. A typical counselling session may last between one-and-a-half and two hours per week over six months, with the option of extending to twelve months for women with special needs (Guideline 9096, paragraph 143–148).

3.1.3 Standards

The Decree on a Quality Standard for Shelters for Women is set out in paragraph 139 of the Danish Social Service Law and is defined in more detail by Guideline 9096, paragraphs 149–167: The local authority is responsible for ensuring that quality standards for shelters exist and are publicly accessible. Specifically, the quality standards must provide information on the following:

- Number of places and space circumstances
- Overall objective of the women's shelter
- Description of the services, especially with regard to children and special target groups

¹⁴⁶ If the shelter is far from the woman's previous hometown, the local authorities can agree that the legal responsibilities are transferred to the place of residence in which the shelter is located (Guideline 9096, paragraph 129).

- Acceptance of accommodation and costs for women and children
- Procedure for how women approach a women's shelter and details of who is allowed to stay there
- Common areas and shared facilities
- Staff competency, qualifications and further training

The residents should be allowed to participate in developing and revising the quality standards. The standard must be made available on the internet, either on the website of the local authority or of the shelter. It must be audited every two years and revised if necessary. The local authority must ensure that the shelters comply with the standards. They must conduct a review every two years, in particular by meeting with the residents.¹⁴⁷

According to paragraph 102 of the Social Services Supervision Act (*Socialtilsynslovens*), five **social supervisory authorities** (*Kommunalbestyrelsen*) are responsible for accreditation and supervision of women's shelters in Denmark. They inspect the shelters every year in eight areas with relevance to quality standards (paragraph 6, Social Services Supervision Act): 1. Education and employment, 2. Independence and cooperation, 3. Target groups, methods and outcomes, 4. Health and wellbeing, 5. Organisation and administration, 6. Competencies, 7. Finances and 8. Premises.

In accordance with the quality assurance model of the supervisory authority responsible for social affairs (National Board of Social Services 2013), social services such as shelters are required to document their outcomes systematically (Ramboll 2015: 15). The documentation should be used to support dialogue with the woman about her personal progress as well as for organisational development. Ramboll states that around half of the shelters maintain a continuous evaluation and/or documentation system to record women's development. A small proportion use standardised screening or assessment tools such as the Change Compass (Municipality of Copenhagen, n. y.). It follows, therefore, that the systems used for documentation differ considerably (ibid.: 16).

The umbrella organisation **LOKK** has its own minimum standards for the 41 shelters incorporated within its organisation. These standards are also available in English (LOKK 2012). They include, for example, the requirement that all shelters must be available at any time to accept women seeking help.

3.1.4 Distribution

Denmark's five regions have different population densities, with the north of the country being the most sparsely populated and a large number of people living in the region around Copenhagen. The **number** of shelters varies accordingly, with the utilisation rate of shelters being lower in the less populated regions (with the exception of Zealand).

The utilisation rate of shelters in 2018 was as follows (Lev Uden Vold 2019: 3):

¹⁴⁷ Examples for local authority quality standards are available on the websites of the Ringsted (Municipality of Ringsted 2019) and Bornholm (Municipality of Bornholm 2014) local authorities.

- Denmark overall (48 shelters), approx. 5.8 million inhabitants, not including Greenland and the Faroe Islands: 93.2 percent utilisation rate
- North Jutland (5 shelters), approx. 590,000 inhabitants: 82.4 percent utilisation rate
- South Denmark (9 shelters), approx. 1.2 million inhabitants: 85.2 percent utilisation rate
- Central Jutland (8 shelters), approx. 1.3 million inhabitants: 88.9 percent utilisation rate
- Zealand (10 shelters), approx. 830,000 inhabitants: 91 percent utilisation rate
- Capital region (16 shelters), approx. 1.8 million inhabitants: 97.2 percent utilisation rate

Places in shelters are therefore particularly scarce in the Copenhagen region (Danner, n. y.). The number of places in the shelters increased by 19.3 percent in 2018, from 378 to 451. This was achieved partly by establishing new shelters (54 new places) and partly by expanding the capacities of the existing facilities (24 new places) (Lev Uden Vold 2019: 3).¹⁴⁸ The shelters have an average of ten places. The spectrum ranges from four to 54 places (Ramboll 2015: 14). The figure for shelters that are accredited for men as well as women was 192 places at the end of 2018. The number fell when a shelter with 21 places was closed (ibid.: 6).

There were therefore 643 places¹⁴⁹ in shelters in 2018, 451 of which were only for women.

The **occupancy rate** varies over the course of each year, describing a wave-like pattern with troughs at the start of the year and in August: It is lowest in January and February (88.1 and 88.8 percent, respectively) and highest in November with 96.7 percent (ibid.: 4).

3.1.5 Availability

30 of 46 shelters (65 percent) were accessible 24/7 in 2017. This means that staff were available to admit women at any time (Ministry of Justice 2017). LOKK states that 41 of 58 shelters are accessible 24/7 in 2019.¹⁴⁰

Women can contact the shelter directly or be referred by counsellors from public agencies such as the national agency “Life without Violence” or the national organisation of women’s shelters, LOKK (Guideline 9096, paragraph 130). The national advice hotline run by “Life without Violence” is also operational 24/7 to inform callers of their nearest women’s shelter.

3.1.6 Access

The following may be considered special needs’ groups in the context of accommodation in a shelter:

- Women who have been exposed to violence in the name of so-called “honour”,
- Women without residency permits/female refugees,
- Women with disabilities (physical and/or mental), and

¹⁴⁸ The number of places in men’s shelters rose from 46 to 54 in 2018 (17.3 percentage points).

¹⁴⁹ This is the number of places available to women, i.e. men, according to the agency “Life without Violence”. Numbers to accommodate children need to be deducted from this amount if persons with children come to the shelters.

- Women with addiction problems and/or mental illnesses.

There are two shelters and around 20 transitional flats for the period after leaving a shelter for women who have endured **violence in the name of so-called “honour”**.¹⁵⁰ This accommodation is also open to men. Staff from the RED Safehouses, which specialise in responding to violence in the name of so-called “honour”, sometimes share their expertise as counsellors in other shelters (Danish Government 2016: 14).

A survey by Ramboll in 2015 indicates that the **proportion of non-Danish** women in shelters was 47 percent (Ramboll 2015: 7). Non-Danish women who have been victims of violence and do not have a valid residency permit in Denmark are not entitled to services under the Danish Social Service Law, which includes specialist support services such as shelters (GREVIO 2017b: 14). Asylum-seeking women whose applications have not yet been decided or have already received a positive decision can be admitted to shelters.

In Guideline 9096, paragraph 152 states that shelters should be adapted to the needs of disabled people. They must on all accounts provide details on **accessibility for people with limited mobility**. According to LOKK, 15 of the 48 shelters are suitable for disabled people and therefore accessible for people with mobility restrictions. These facilities are marked specifically in the list of shelters on the LOKK website.¹⁴⁰ LOKK states that the shelters provide interpreting for deaf women.

In 2009, LOKK published a brochure on **women and children with disabilities** in shelters (National Board of Social Services/LOKK 2009). It is aimed primarily at staff in shelters and other professionals. It is only available in Danish. The brochure is based on an evaluation of seven shelters carried out by the National Board of Social Services. The most common disability was restricted mobility; 15 percent were affected by impaired hearing. One quarter of the women had more than one disability (Knigge/Kibsgaard 2009: 3).

According to LOKK, there are two shelters that house **women with addiction problems and/or mental illnesses**. These shelters do not accept children.¹⁵¹

When someone is not accepted, they may file a complaint to the National Social Appeals Board (*Ankestyrelsen*) at any time up to four weeks after their rejection (Guideline 9096, paragraph 131).

3.1.7 Duration of stay

The standards of the umbrella organisation **LOKK** state that the duration of a stay in a women’s shelter should be based on a professional assessment by the institution’s management. The woman needs to overcome her current crisis, and all relevant legal and practical problems must be resolved. A minimum duration of three months is recommended (LOKK 2012: 4); measures to shorten the duration are not known.

Information provided by LOKK indicates that the **average duration of stay** for women in the shelters differs depending on the type of violence experienced. Women who had suffered physical violence remained in the shelter for 89 days on average. Women who had suffered psychological

¹⁵⁰ <https://red-center.dk/om-red-center/om-red-safehouse/>

¹⁵¹ This information was only available on request and does not appear to be included in any of the publicly available overviews.

violence stayed for 76 days. For women who had experienced sexual violence, the stay was lengthened by an average of 24 days (National Board of Social Services 2017: 24).

During the **transition from the women's shelter** into independence, the women shall be accompanied by a well-structured and close support – especially as part of the legally required coordination counselling programme (refer to [Chapter 3.1.2](#)).¹⁵² Besides the coordination counselling, “Life without Violence” offers follow-up support groups after a stay in a women's shelter or ambulatory services (refer to [Chapter 2.1.1.1](#)).

RED Safehouse has 21 transitional flats that are available for use after a stay in a women's shelter. The women have greater independence than in the shelters. These apartments are used as transitional homes after a period in a shelter. Residents can stay for one year at most.¹⁵³

3.1.8 Miscellaneous

Denmark is making efforts to ensure the consistent **collection and storage of data** for women in shelters. The data includes information on injuries, previous contact with institutions, age, socioeconomic status, origin, housing circumstances, children and details about the perpetrator. Around 30 percent of women consent to the storage of their data in connection with their passport number. This association with the passport number enables the organisation a follow-up after a stay. Among other things, data can be connected from the national crime statistics, the national register of patients or housing data, thus permitting conclusions on the effectiveness of the woman's stay in the shelter. Statistics Denmark manages the dataset which can be accessed by scholars and other relevant stakeholders.^{154, 155}

The National Board of Social Services performed an evaluation of the **CTI Method** (Critical-time Intervention-Method) between 2015 and 2018 in order to improve the counselling services provided to women leaving a shelter (coordination counselling) (refer to [Chapter 3.1.2](#)). The aim was to reduce the proportion of women returning to a shelter to seek refuge. Conducted by Deloitte, the evaluation revealed positive outcomes (Deloitte 2019).¹⁵⁶ The CTI Method consists of three phases, each of which lasts three months, during which responsibility and initiative is gradually transferred from the caseworker to the person undergoing a critical transition. The first step is to prepare a plan that contains the relevant support persons and services, who should then provide a network that the person can turn to (outside of the shelter). The woman is able to maintain the network by herself after nine months, without needing support from the caseworker. A manual for applying the CTI Method (National Board of Social Services 2018) and other materials for documenting and implementing the method were placed online.¹⁵⁷ The National

¹⁵² <https://vidensportal.dk/voksne/vold-i-naere-relationer/indsatser-1/cti>

¹⁵³ <https://red-center.dk/safehouse/hvad-tilbyder-vi/sikre-opholdssteder/>

¹⁵⁴ <https://eige.europa.eu/gender-based-violence/good-practices/denmark/nationwide-registration-women-shelters>

¹⁵⁵ Nevertheless, both GREVIO and EIGE strongly criticise Denmark for having neglected to disaggregate data in official police statistics based on gender. Moreover, the data does not include ages, types of violence and relationships with the perpetrator (GREVIO 2017a: 8). An alternative report by the European Institute for Gender Equality states the opposite: <https://eige.europa.eu/gender-based-violence/good-practices/denmark/police-report-cases>.

¹⁵⁶ The Deloitte evaluation is only available in Danish. The competent staff at the National Board of Social Services can also provide information on the findings in person, either in English or German: <https://socialstyrelsen.dk/tvaergaende-omrader/dokumenterede-metoder-voksne-og-handicap/om/cti>.

¹⁵⁷ <https://socialstyrelsen.dk/tvaergaende-omrader/dokumenterede-metoder-voksne-og-handicap/om/cti>

Board of Social Services offers training for professionals who want to use the CTI Method in their district or institution (including for other critical transitions, such as out of homelessness).¹⁵⁸

Together with LOKK and the Ole Kirk Foundation, the Mary Foundation hands out **rucksacks** with practical utensils and toys for children who enter a shelter with their mother. 80 percent of shelters use the rucksack as an educational teaching aid, for example to engage with the children in conversation. An evaluation by the National Danish Centre for Social Research confirmed that the measure has a positive effect.¹⁵⁹

3.1.9 Assessment

There appears to be a substantial number of places:

Based on the recommendations of the Istanbul Convention (1 family place per 10,000 head of population) (CoE 2011: 25), Denmark would need 580 places.¹³⁸ In 2018, 643 places were available for women and men, of which 451 were for women only. This means the number of places in Denmark (with women's and men's places taken together) is in line with the recommendations of the Istanbul Convention. However, if only the places available to women are counted, Denmark falls short of the Istanbul Convention recommendation.¹⁶⁰

There are some accessibility problems regarding the available shelters.

First, demand is greatest in the metropolitan region of Copenhagen, so shelters there frequently reach their occupancy limits. According to GREVIO, there are often bottlenecks and instances of emergency housing that do not meet the defined standards for shelters accommodating women who have experienced violence (GREVIO 2017b: 34). Especially women with several children may experience difficulties gaining access to the relatively small shelters (ibid.).

Women are also required to pay a contribution to their stay at the refuge. This amount may be covered by the local authority if the women are lacking the necessary financial resources.

Women without valid residency status are particularly affected by the accessibility problems, as they are not admitted into the shelters. Women with addiction problems and/or mental illness are only accepted in two shelters. Around a third of the shelters can accommodate women with restricted mobility.

Denmark's sometimes gender-neutral approach (refer to [Chapter 2.1.5](#)) is only reflected to a certain extent in the shelters. Of the 48 shelters, 42 are exclusively open to women and their children.

The fact that some quality assurance measures have been defined for the shelters should be noted positively, for instance the requirement that circumstances and services at the shelter must

¹⁵⁸ <https://socialstyrelsen.dk/tvaergaende-omrader/dokumenterede-metoder-voksne-og-handicap/udviklings-og-investeringsprogrammet/fa-implementeringsstotte/stotte-til-cti>

¹⁵⁹ <https://www.maryfonden.dk/en/comfortpacks>

¹⁶⁰ Based on a total Danish population of 5.8 million in 2019.

be shown clearly. Moreover, all shelters are officially accredited and monitored by the supervisory authorities for social affairs.

It is not standard practice for the shelters to offer psychological support to the women following an acute emergency situation. However, it is mandatory for children. Ambulatory services (refer to [Chapter 2.1](#)) have been established as the principal means of providing psychological support after a stay at a shelter. It cannot be stated with any certainty whether this is adequate or whether specialist psychological counselling and therapy should already take place at the shelter.

There is a legal requirement to provide women with coordination counselling once they have left a shelter. Significant efforts have been made to prevent them returning to the violent situation, for example the piloting of new approaches such as the CTI Method.

3.2 Finland

The Finnish shelters for victims of actual or threatened domestic violence have been state-supervised and funded via the **National Institute for Health and Welfare** since 2015. There are no shelters outside this system. This arrangement dates back to the so-called *Shelter Act* (short for *Act on Compensation Payable to Shelter-Service Provision from State Funds* (1354/2014)), which entered into force on 1 January 2015 and transferred responsibility for the shelters from the local authorities to the state. Prior to this, there had been no legal obligation in Finland to provide shelters. The act is therefore seen as a milestone in the emergence of the country's system to protect against violence. The *Shelter Act* defines the terms "shelter"¹⁶¹ and "domestic violence"¹⁶², specifies the duties of the National Institute for Health and Welfare and describes the conditions for the provision of services, state subsidies and for the evaluation.

At the time of writing (2019), there were 28 shelters with 202 places in Finland.¹⁶³

The shelters are operated by:

1. **Federation of Mother and Child Homes and Shelters (Ensi- ja turvakotien liitto, FMS)**¹⁶⁴. 18 of the shelters are made available by 14 civil-society organisations from the FMS network.
2. **Local authorities** or associations of local authorities¹⁶⁵: Seven of the researched shelters are operated by local authorities.
3. Other civil-society organisations: There are three shelters run by organisations that are not part of FMS: the shelters **Sophie Mannerheimin** and **Mona**, as well as the **Villa Familia**.

¹⁶¹ Shelters are defined as free crisis centres that are open 24/7 to individuals or families that have experienced or are at risk of domestic violence.

¹⁶² The definition of domestic violence includes physical, sexual, psychological or economic violence against a former partner, spouse, child, parent or other close relative. This meets the requirements set out in Article 23 of the Istanbul Convention.

¹⁶³ An overview of all shelters, available family places and management organisations for 2017, 2018 and 2019 is included in the table in [Annex IV](#).

¹⁶⁴ <https://ensijaturvakotienliitto.fi/en/>

¹⁶⁵ The local authorities provide a broad portfolio of social and health services, so they do not fulfil the criteria for specialist support services. Instead, they should be perceived as a hybrid form of specialist support services within general support services.

3.2.1 Services

According to the **National Institute for Health and Welfare**, the shelters it supervises provide:

- Free and secure accommodation 24/7
- Psycho-social support
- Counselling and guidance in crisis situations

The **FMS** also operates an “Online Shelter” (*nettiturvakoti*)¹⁶⁶, a website for all victims of domestic violence and intimate partner violence that is intended to facilitate access to help for all victims. The service mainly provides information on the subject of violence and includes a chat function. In particular, the website includes a summarised list of all services available at the FMS contact points and shelters. The vast majority of FMS member organisations have added a link to the Online Shelter on their websites.¹⁶⁷

3.2.2 Funding and bases

All shelters are uniformly funded and regulated by the state. The **National Institute for Health and Welfare** coordinates the shelters nationwide. State support is awarded annually by the National Institute for Health and Welfare, taking into account the allocated amount in the government budget. This means that the institutions have financial planning security for one year. The funding for shelters was 11.55 million euros in 2015 and 2016 and increased to 13.55 million in 2017 and to 17.55 million in 2018. (Government of Finland 2018: 56) According to the action plan for the Istanbul Convention 2018–2021, the funding is set to rise to 19 million euros in 2019, principally to improve nationwide access to shelters (NAPE 2017: 22). According to the GREVIO report, the funds for 2019 amount to 19.55 million euros (GREVIO 2019:33).

3.2.3 Standards

While the general supervision and monitoring of the shelters is the responsibility of the **National Institute for Health and Welfare**, the Shelter Act ensures that the measures taken by the shelters are overseen by the relevant public administration authorities in the regions and the Supervisory Authority for Welfare and Health (Valvira)¹⁶⁸, which is the Ministry of Social Affairs and Health’s national regulator for service providers in the health and social sectors.

The state funding via the National Institute for Health and Welfare requires the organisations operating the shelters to adhere to existing minimum standards and regulations.

The Finnish Ministry of Social Affairs and Health and the National Institute for Health and Welfare together developed the first set of non-binding quality recommendations for shelters in 2013. The document they have drawn up is extensive and, running to 50 pages, provides the basic principles of work in this field, ranging from a definition of domestic violence, the need for shelters and violence prevention to the working procedures in shelters and cooperation between different social services. (THL 2013) Once the *Shelter Act* had entered into force, thus allocating responsibility for shelters to the state, a decree (598/2015) on the qualifications and training required by staff in the

¹⁶⁶ <https://nettiturvakoti.fi/>

¹⁶⁷ Refer to the table in Annex IV.

¹⁶⁸ <https://www.valvira.fi/web/en>

shelters was passed, along with an amendment (381/2018). The decree regulates the qualifications and training for shelter staff: Employees of the institutions must have a degree in social work or healthcare and must have professional experience with domestic violence. A master's degree is required for managerial roles. Among other things, the amendment that entered into force on 1 January 2019 specifies in particular the selection of service providers and the details of funding payments.¹⁶⁹

3.2.4 Distribution

The statistical report of the **National Institute for Health and Welfare** for 2018 states that there were 27 shelters nationwide with 179 available places that year. These figures will rise to 28 shelters and 202 places in 2019.

Furthermore, the statistical report for 2018 includes figures for utilisation rates and accepted and rejected applicants at each shelter. For 2018, the rejection rate¹⁷⁰ is 27.3 percent nationwide and the average utilisation rate of shelters is 61.9 percent.

There are 12 shelters in southern Finland, two in the south-west, three in the east, seven in western and central Finland, three in northern Finland and one in Lapland.¹⁷¹

3.2.5 Availability

Shelters must be open 24/7 to meet the requirements of the *Shelter Act*. Telephone numbers for counselling and information on the subject of domestic violence could be researched on the websites of most shelters.

Data obtained from the statistical reports (THL 2018; THL 2019)¹⁷² of the **National Institute for Health and Welfare** shows that southern Finland has, for several years, experienced the strongest demand at national level with the highest average utilisation and rejection rates for shelters. 50.7 percent of all people seeking protection – whether accepted or rejected – came from the region of southern Finland in 2017, with the proportion rising to 52.6 percent in 2018.

Region	Ø Utilisation rate		People seeking protection		Rejection rate	
	2017	2018	2017	2018	2017	2018
Southern Finland	70.3%	71.2%	1,859	2,257	39.3%	38.4%
Western/central Finland	67.0%	60.2%	815	1,200	35.0%	20.3%
Eastern Finland	55.0%	52.7%	573	473	1.4%	13.2%
South/west Finland	53.0%	50.0%	446	517	6.9%	3.5%
Northern Finland	43.0%	54.7%	455	496	7.9%	17.1%
Lapland	35.0%	33.0%	173	120	0.0%	0.0%
Total	61.1%	61.9%	4,321	5,063	28.5%	27.3%

¹⁶⁹ The amendment is very recent, so it was not possible to locate a translation of the text. It was hence not possible to research any further details.

¹⁷⁰ Calculation method: Number of rejections / number of rejected and accepted people in shelters

¹⁷¹ Refer to the table in [Annex IV](#).

¹⁷² All details are shown in the table in [Annex IV](#).

Table 3: Shelters in Finland broken down by region: utilisation rate, people seeking protection, rejection rate

The region of southern Finland has shelters in the cities of Espoo, Hämeenlinna, Helsinki (four), Imatra, Kotka, Lahti, Porvoo, Raasepori, and Vantaa. Local authorities operate three shelters in southern Finland. None of them are in Helsinki. The figures show that the shelters run by **member organisations of the FMS** continuously exhibit extremely high utilisation rates, despite the increase in available places from 52 (2017) to 66 (2018) and the associated reduction in the rejection rate.

	Ø Utilisation rate		People seeking protection		Rejection rate	
	2017	2018	2017	2018	2017	2018
Operated by						
FMS	82.5%	82.0%	952	1,304	49.2%	43.6%
Civil-society organisations	77.0%	78.7%	524	570	33.1%	40.5%
Local authorities	47.3%	42.0%	383	383	6.1%	2.5%
Total	61.1%	61.9%	4,321	5,063	28.5%	27.3%

Table 4: Shelters in southern Finland: utilisation rate, people seeking protection, rejection rate

3.2.6 Access

The shelters are primarily aimed at victims of domestic violence. The services provided by the shelters are generally available to both men and women, as well as children. The system is also accessible for people with unclear migration status (GREVIO 2019: 43). One exception is the **shelter MONA** in Helsinki, which is run by the organisation MONIKA (refer to [Chapters 2.1.1](#) and [2.2.3](#)) and is open to migrant women only. Based on the data from the statistical report of the National Institute for Health and Welfare, 93 percent of adults who were supported in a shelter in 2018 were women (THL 2019).

According to the country report, the majority of shelters are designed to be barrier-free for people with restricted mobility. Transport services to other institutions can be organised (Government of Finland 2018: 56). This information was only found explicitly on the website of one **member organisation of FMS**, *Raahen ensi- ja turvakoti ry*¹⁷³.

3.2.7 Duration of stay

The country report explains that the shelters are intended for short-term stays (Government of Finland 2018). It was not possible to research what this means in practice, and whether there is a limit to the duration of stay in the shelters. The **average duration of stay** in 2018 was 16 days. Only 2.7 percent of the people who lived in a shelter in 2018 stayed for longer than 60 days. The largest proportion of victims (2018: 27.4 percent) remained for between one and three days.

The FMS member organisation VIOLA – *Free from Violence* was responsible for the **ARKI Project**¹⁷⁴, which was initiated by the Ministry of Justice, from August 2017 to the end of 2018. It was intended to develop a post-shelter model for social and health services in the south Savo

¹⁷³ <https://ensijaturvakotienliitto.fi/raahenensijaturvakoti/>

¹⁷⁴ <http://www.violary.fi/arki-hanke/>

(*essote*)¹⁷⁵ region. The project aims to develop a support system that combines official and non-governmental services for victims of violence and persecution after their stay in a shelter. The active phase of the project started in 2018, which involves piloting and evaluation of group activities in cooperation with the developers and other civil-society organisations. It was not possible to research any additional information.

Moreover, two other **FMS member organisations**¹⁷⁶ mention that their services for victims of domestic violence include support in looking for a new home or general practical assistance after a stay in a shelter (refer to Chapter 2.2.1).

3.2.8 Miscellaneous

In November 2018, the **National Institute for Health and Welfare** carried out an **information campaign** on shelters. This included a radio campaign and involved marketing the services via social media and search engine optimisation. Furthermore, the shelters themselves have improved their public information services, which, according to the National Institute for Health and Welfare, has led to an increased number of events and reports in local newspapers, on the radio and in social media since the end of 2018. This campaign was launched after a 2018 survey of victims of domestic violence indicated that while they were very satisfied with the shelters (4.7 out of 5 points); they nevertheless believed there would be considerable room for improvement in terms of information and awareness raising.¹⁷⁷

3.2.9 Assessment

The uniform public coordination and monitoring of shelters means that the system is highly professional in regard to comprehensive, consistent quality standards for services – in contrast to the other specialist support services. As with the specialist support services for domestic violence, the FMS association, which runs 18 shelters, contributes to good networking of services, while also presenting its work very clearly and accessibly within the framework of the *Online Shelter*. Some FMS member organisations that offer other specialist support services relating to domestic violence also support women after they leave a shelter. However, the follow-up care is not regulated by the state in a consistent manner and is, like the other domestic violence services, a service provided by the FMS association. **GREVIO voices strong criticism that the number of services provided in this area is insufficient, which means that women have serious difficulties finding housing after leaving a shelter (GREVIO 2019: 31).**

It is noticeable that centralised control means the shelters provide identical services and describe them in these terms. The exclusive priority is domestic violence. Only one shelter has a specialised focus on migrant women. Apart from this one, all shelters are available to men and women, although 94 percent of people seeking protection are women. **In its evaluation, GREVIO notes**

¹⁷⁵ <https://www.essote.fi/>

¹⁷⁶ <http://www.paakaupunginturvakoti.fi/> und <http://www.tetuko.fi/>

¹⁷⁷ Information from the National Institute for Health and Welfare dated February 2019: https://thl.fi/en/web/thlfi-en/-/clients-feel-safe-in-shelters-for-victims-of-domestic-violence?redirect=https%20Prozent3A%20Prozent2F%20Prozent2Fthl.fi%20Prozent2Fen%20Prozent2Fweb%20Prozent2Fthlfi-en%20Prozent2Fmain-page%20Prozent3Fp_p_id%20Prozent3D101_INSTANCE_Hqr7tiX0hzzV%20Prozent26p_p_lifecycle%20Prozent3D0%20Prozent26p_p_state%20Prozent3Dnormal

that the gender-based nature of these forms of violence must be recognised and that Finland should hence provide protected spaces for women only (GREVIO 2019: 34).

The essentially well-developed and organised nationwide shelter system could be used to address other forms of specialised violence, for example stalking, violence in the name of so-called “honour” or forced marriage. This might close the current gaps in the support system in these areas, or supplement the narrow range on offer to make this form of assistance more widely available. According to the country report, some civil-society organisations also complain that they are inadequately able to contribute their expertise and specialist experience due to cooperation with the state (Government of Finland 2018: 20). The pooling of expertise on forms of violence that go beyond domestic violence must therefore be promoted more effectively.

Although the system seems to function very well, it does not fulfil the recommendations of the Istanbul Convention, as the required number of places in shelters has not been reached:

Finland would have to increase its allocation of 202 places by another 352 in order to meet the Istanbul Convention’s recommendation for one family place per 10,000 head of population.¹⁷⁸

Evaluation of the data from the statistical reports by the National Institute for Health and Welfare shows that over half of all people seeking protection¹⁷⁹ in Finland come from the region of southern Finland. While the number of places in this region has been increased steadily, the trend towards higher utilisation rates and the high rejection rate indicates that demand is actually far higher. Ranging between 88 and 92 percent, the civil-society organisations in Helsinki in particular show the highest utilisation rates in Finland. It is noticeable that the three shelters run by the local authorities in south Finland are utilised significantly less (2018: 42 percent) and, in consequence exhibit a very low rejection rate (2018: 2.5 percent). The data plainly shows that the number of available places must be increased in order to meet the demand from victims, especially in the region of southern Finland. The FMS calls for an increase to 500 places.¹⁸⁰

3.3 Austria

In total, Austria has 30 shelters for women affected by violence and their children:¹⁸¹ 15 women’s shelters are grouped within the association Austrian Autonomous Women’s Shelter Network (*Verein Autonome Österreichische Frauenhäuser, AÖF*)¹⁸², which was founded in 1988. A second network was established in 2013, the Union of Austrian Shelters for Women (*Zusammenschluss Österreichischer Frauenhäuser, ZÖF*).¹⁸³ It creates a network of 11 women’s shelters. In addition, emergency accommodation has been provided since 2013 via the association Orient Express, as well as transitional accommodation since 2019. The housing is available to girls and young women

¹⁷⁸ This is based on the Finnish population of 5.54 million in 2019.

¹⁷⁹ Rejected and accepted

¹⁸⁰ https://yle.fi/uutiset/osasto/news/increase_in_womens_shelters_insufficient_says_organisation/10668434

¹⁸¹ In addition, there are two safe houses and one halfway house for female victims of human trafficking (IBF n. y.).

¹⁸² <https://www.aeof.at/index.php> (in German)

¹⁸³ https://www.frauenhaeuser-zoef.at/en_uber.htm

aged 16 to 24 from all over Austria who are at risk of or affected by forced marriage (refer to Chapter 2.3.3).

3.3.1 Services

The **women's shelters** offer immediate, unbureaucratic aid to women who have been abused or affected by violence, along with their children. The services provided by the women's shelter include:

- Immediate aid
- Protection and accommodation/protected housing
- Preparation of a safety plan
- Accompaniment in crisis situation
- Support in processing the violent experience
- Specialised and qualified support in psychosocial and legal areas
- Accompaniment to court, the police, government agencies
- Legal and psychological support during criminal court proceedings
- Support in making applications, dealing with official paperwork, issues of maintenance and custody, separation and looking for employment or housing
- Help with making a living/help in kind
- Future planning
- Follow-up support after moving out when needed
- Referral other useful support institutions
- Support and counselling for children and young people
- Counselling in a native language or support via an interpreter when needed
- Transitional flats for the period after leaving a shelter¹⁸⁴

All women's shelters are run by independent organisations. Some are closely connected to political, governmental, or religious organisations (ibid.).

3,284 people received support in 26 women's shelters in 2018, of whom 1,664 were women and 1,620 were children (AÖF 2019).

The first and only emergency emergency flat established in Austria has been open since 2013 and is and available to girls or young women who are threatened or affected by forced marriage.¹⁸⁵ Admission to the emergency flat is organised by **Orient Express**. The service is aimed at girls and young women aged 16 to 24 from anywhere in Austria who are at risk or already victims of forced marriage and need to be housed anonymously in order to be protected from this and other forms of violence:

- Accommodation for eight young women and girls, as well as two emergency beds
- Protection by means of a secret address and necessary security measures
- Round-the-clock support at the accommodation

¹⁸⁴ Provision of transitional flats by AÖF and ZÖF were not included in the research.

¹⁸⁵ <https://www.orientexpress-wien.com/schutzeinrichtungen>

- Integrated support in German, Turkish, Bosnian/Croatian/Serbian, Arabic, Farsi, English and French
- Accompaniment to appointments, for instance with government authorities or doctors
- Support with future planning

In 2018, 36 girls and young women who were threatened with or already affected by forced marriage were given accommodation at the emergency flat.

A transitional flat has also been in operation at Orient Express since January 2019. It functions as a follow-on service with spaces for 15 women and girls aged 16 to 24. Besides the emergency flat, the range of services includes:

- Weekly group discussions
- Educational leisure activities (for example sports, crafts, workshops, celebrations)
- Psychological and therapeutic services provided in-house by the staff or, where necessary, by external agencies
- Accompaniment and support on the way to independence.

3.3.2 Funding and bases

The **women's shelters** in Austria mainly receive public funding, which means principally from the governments of the federal states. Each federal state has its own legal provisions in regard to this funding: Upper Austria and Burgenland have enshrined the funding of women's shelters in law. The four women's shelters in Vienna have an open-ended contract with the City of Vienna (GREVIO Shadow Report NGO-Coalition 2016: 54). The financial situation of the women's shelters is more precarious in the other federal states, not least due to the absence of a legal basis and because of single-year contracts (ibid.: 54; AÖF 2017a). The women's shelters provide their services largely free of charge to women who do not have their own income; women with an income often have to pay a financial contribution, depending on their means (GREVIO Shadow Report NGO Coalition 2016: 54).

The **Orient Express** emergency flat is funded by the Division for Women and Equality of the Federal Chancellery and the Federal Ministry of the Interior. The transitional flat is financed by the Vienna Social Fund. Accommodation for minors in both facilities is funded by the children and youth welfare service.

3.3.3 Standards

The **women's shelters in the AÖF** operate in line with international and feminist basic principles (AÖF n. y.: 7). A new quality brochure was published in spring 2017 entitled "yesterday for today for tomorrow" („gestern für heute für morgen“), which was prepared in cooperation with the staff of the individual women's shelters (ibid.: 17).

The **Dynamic Risk Analysis System** was implemented in the women's shelters (and in the violence protection centre) of the federal state of Salzburg in order to assess risk levels and serious hazards among affected persons (Federal Chancellery 2019a: 27).

3.3.4 Distribution

Most of the 30 **women's shelters** are located in urban areas.¹⁸⁶

3.3.5 Availability

All **women's shelters** are accessible 24/7. Women can be admitted at any time of day or night.

3.3.6 Access

In principle, all shelters are open to all women who are threatened by and/or at risk of familial violence – regardless of nationality, income, or religion.

However, like with funding, each federal state has its own legal provisions governing access to women's shelters. These provisions can – firstly – make it harder or even impossible for women affected by violence to access shelters in another federal state, especially due to the difficult reimbursement arrangements between the individual states. This becomes particularly problematic when there are too few places in a federal state and women and children are therefore unable to claim protection (AÖF, n. y.: 5). Secondly, these provisions can make it difficult for asylum-seeking women and women with precarious residence status to access women's shelters, or even exclude them completely (GREVIO 2017a: 33),¹⁸⁷ not least due to the fact that basic welfare provisions for asylum-seeking women falls under the responsibility of the national government, while management of the women's shelters is the responsibility of the federal states.

The women have the right to bring their child or children with them. In practice, however, only a few women's shelters offer places to male adolescents aged over 14 (ibid.: 32). In addition, financial constraints mean that not all women's shelters have enough staff to care for and support the children (AÖF 2017b).¹⁸⁸

Due to the lack of barrier-free rooms, women with restricted mobility or particular care needs that require personal assistance can rarely be accepted into a shelter.¹⁸⁹

3.3.7 Duration of stay

The **women's shelters** offer temporary accommodation for as long as a woman's individual situation requires the special protection they offer.¹⁹⁰ There are no known measures for shortening the duration of stay.

¹⁸⁶ AÖF: Amstetten, Burgenland, Hallein, Innviertel, Linz, Mistelbach, Neunkirchen, Pinzgau, Salzburg, Steyr, Tirol, Vöcklabruck, ifs FrauennotWohnung (Dornbirn women's shelter), Wels, Wiener Neustadt; ZÖF: Four women's shelters in Vienna, Kapfenberg, Graz, St. Pölten, Klagenfurt, Lavanttal, Spittal/Drau, Villach

¹⁸⁷ In some cases, a stay in a women's shelter is only funded if a woman is entitled to Austrian social security benefits.

¹⁸⁸ Between 2015 and 2018, 12 women's shelters received project funds of 6,000 euros per year from the Federal Chancellery – Section III (Women's Affairs and Equality) to pay for the psychological care of children:

https://www.parlament.gv.at/PAKT/VHG/XXVI/AB/AB_02108/imfname_728485.pdf (in German). The association AÖF calls for at least three workers per women's shelter to provide counselling and support to children (AÖF 2017b).

¹⁸⁹ Victims can obtain information about barrier-free women's shelters from the Frauenhelpline: <http://www.frauenhelpline.at/> (in German)

¹⁹⁰ http://www.frauenhaeuser-zoef.at/betroffene_frauen.htm (in German)

In 2018, around 26 percent of the 623 women, who sought protection in the AÖF's women's shelters, stayed for between 4 days and 1 month. A further 26 percent stayed between 1 and 6 months, and 12 percent stayed longer than 6 months. One percent stayed for longer than a year (AÖF 2018: 16).

In 2018, there were 2,277 follow-up care contacts in total, provided in the form of ambulatory counselling sessions, house visits or telephone calls with women after their stay in a women's shelter (ibid.: 3).

The duration of stay in the **Orient Express** emergency flat depends on the individual situation and the level of victim risk; it can range from a few days to several months. The duration of stay in the transitional flat is limited to no more than one year.

3.3.8 Miscellaneous

The ZÖF association offers – in cooperation with counselling centres for men – **professionally mediated clarifying discussions** for women from the shelters; these discussions focus on victim protection.¹⁹¹ The women are thus given the opportunity to talk with their (ex-) partners in a protected setting.

The European network against violence against women **WAVE** (Women Against Violence Europe) was part of the AÖF association for over 20 years till 2014.

3.3.9 Assessment

Austria's uses non-state support services to implement Article 23. The shelters are provided by non-profit associations that receive public funds for the purpose – predominantly from the regional state governments. Each federal state has its own legal provisions with regard to financing. Hence, the financial resources and planning certainty for women's shelters across Austria varies. The occasionally precarious funding situation impacts directly on the services the shelters can offer. Often they can only cater to short-term crisis intervention rather than long-term support (GREVIO 2017a: 16).

In addition, the legal requirements that the federal states attach to the financing lead to differing circumstances in the women's shelters: An especially problematic factor is the complicated or refused access to women's shelters in regard to the admission of affected women from different federal states,¹⁹² of asylum-seeking women, women with precarious residence status and women with older sons (ibid.: 32, 33). In addition, the women's shelters do not accommodate the special needs of female victims of violence with addiction problems, psychological problems, learning difficulties or physical disabilities (ibid.: 33; Schachner et al. 2014). Many women's shelters are not barrier-free.

¹⁹¹ https://www.frauenhaeuser-zoef.at/opferschutzorientierte_klaerungsgespraechе.htm (in German)

¹⁹² The committee for "Victim Protection and Work with Perpetrators" of the Criminal Law Task Force proposes that an exchange quota for women's shelters should be enshrined in law (Criminal Law Task Force 2019: 16): Each federal state would hence be required, without bureaucratic complications or reimbursement of costs, to accept a set number of admissions for high-risk women or families, adjusted according to each state's population. Among the main purposes of this measure would be to ease the strain on the highly frequented women's shelters in Vienna.

A positive factor is that women can be admitted to all shelters at any time of the day or night. They can also stay as long as their individual situation requires the special protection afforded by a women's shelter. There are no known measures for shortening the duration of the stay.

However, shelters do not exist everywhere in Austria: The number of support places is particularly deficient in rural areas¹⁹³, as well as in some federal states such as Styria (GREVIO Shadow Report NGO Coalition 2016: 77). As such, Austria does not meet the requirements of the Istanbul Convention to create one family place per 10,000 head of population,

In total, the 30 women's shelters offer 766 places for women and children. To fulfil the recommendation of the Istanbul Convention, there would have to be 866 family places, so Austria is 100 places short.¹⁹⁴

In 2018, 181 women were unable to find accommodation in the independent women's shelter responsible for them due to a shortage of spaces (AÖF 2018: 4). This indicates that there should be twice as many places.

The programme of the former Kurz administration included a plan for the Austria-wide expansion of acute interventions dealing with violence against women and children, as well as a further expansion of emergency shelters for women and children (NVP/FPÖ 2017: 107). The Austrian parliament passed a law in May 2018 requiring the provision of 100 new support places (emergency shelters and women's shelters) for female victims of violence by 2022¹⁹⁵, while at the same time ensuring existing support services by guaranteeing the current budget.¹⁹⁶ This decision was preceded by an Austria-wide evaluation¹⁹⁷ that investigated the demand for counselling and support places.

¹⁹³ For instance in the regions of Waldviertel in Lower Austria, Mühlviertel in Upper Austria or Oberland in the Tirol.

¹⁹⁴ The population of Austria was 8.86 million in 2019.

¹⁹⁵ A fifth women's shelter is being constructed in Vienna to provide 50 of these places:
<https://www.derstandard.at/story/2000091939837/wien-baut-fuenftes-frauenhaus>

¹⁹⁶ https://www.parlament.gv.at/PAKT/VHG/XXVI/E/E_00020/index.shtml

¹⁹⁷ The information was obtained the website of the Federal Chancellery:
<https://www.bundeskanzleramt.gv.at/bundeskanzleramt/nachrichten-der-bundesregierung/2019/frauenministerin-bogner-strauneue-frauen-notrufnummer-fur-schnelle-hilfe.html> (in German). According to the website, the evaluation showed that the shortage does not refer to the number of places in women's shelters, but to the availability of inter-state women's shelter places and transitional flats.

4 Support for victims of sexual violence (Article 25)

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

(Article 25 IC)

The following table provides an overview of the crisis centres that the Istanbul Convention has deemed necessary for victims of sexual assault, broken down for each state. In this regard, the Istanbul Convention distinguishes between sexual violence referral centres that offer immediate support, especially by providing medical treatment for victims and the gathering of forensic evidence, and rape crisis centres that offer support in the longer term, especially in the form of psychological counselling and legal assistance. However, the States Parties are not instructed to establish both forms of crisis centres (CoE 2011: 26).

Support for victims of sexual violence (Article 25)			
	Denmark	Finland	Austria
Recommendation in the Istanbul Convention: One centre per 200,000 population¹⁹⁸	Not fulfilled: Short by 20 centres	Not fulfilled: Short by 24 centres	Not fulfilled: Short by 29 centres
Sexual violence referral centres	9 centres	2 state-run contact points	24-hour women’s emergency line provided by the City of Vienna Austria-wide victim-protection groups in hospitals (number not recorded) ¹⁹⁹ 4 clinical-forensic examination centres 5 counselling centres

¹⁹⁸ Paragraph 142 Explanatory Report to the IC: “one such centre should be available per every 200,000 inhabitants” (CoE 2011: 26). As with the recommendations for the number of shelters, the Istanbul Convention’s recommendations are based on the recommendation of the Council of Europe Task Force to Combat Violence against Women, including Domestic Violence (EG-TFV 2008: 51). Since this is an aggregate figure for sexual violence referral centres and rape crisis centres, it is not possible to draw any nuanced conclusion on the comprehensive provision of the support system. For example, a large number of rape crisis centres might be available, but only a few forensic investigation facilities (for more information, refer to [Chapter 5](#)).

¹⁹⁹ Hence not included in the comparison with the IC requirements.

Rape crisis centres	See sexual violence referral centres	1 centre	5 counselling centres 4 violence protection centres 1 counselling centre for women with disabilities
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Table 5: Overview of support for victims of sexual violence (Article 25)

4.1 Denmark

Multiple studies in recent years have shown sexual violence and rape as a major and often underestimated problem in Denmark and other Nordic states (AI 2019a) (refer to the [Excursus: Nordic paradox](#)). Activists are calling for the state to take action, starting with the amendment of the legal definition of rape itself.²⁰⁰ Furthermore, they also insist that victims of sexual violence must not face barriers and victim-blaming when they turn to state authorities. There are many personal accounts of these incidents in Denmark and in other Nordic countries (ibid.).

4.1.1 Sexual violence referral centres for victims of sexual violence

In Denmark, specialised **centres for rape victims** (*Centre for Voldtægtsofre*) in hospitals offer acute assistance and care after a rape.

4.1.1.1 Services

There are nine **Centres for Rape Victims** (*Centre for Voldtægtsofre*) nationwide²⁰¹. They are located in hospitals, mostly in university clinics, and are sometimes attached to the gynaecological department.

They offer the following services free of charge (GREVIO 2017b: 35):

- Out- and inpatient treatment for people aged 15 and over²⁰²
- Forensic examination, DNA evidence, evidence gathering and documentation of injuries; report on other details provided by the victim by medical personnel
- Medical investigation, treatment and care: tests for pregnancy, infections and sexually transmitted diseases, amongst others
- Psychological care (maximum of five sessions, in some cases more)
- If necessary, contacting of the police
- Counselling of dependent persons

The clinics do not have a time limit within which victims must visit the clinic in cases of violence.

²⁰⁰ The definition of sexual violence and rape in Denmark means that the mere absence of consent on the part of the victim is not sufficient to constitute a criminal offence, unless the perpetrator has threatened or actually inflicted violence (Paragraph 216 Criminal Code).

²⁰¹ <http://erduivivl.dk/>

²⁰² The Rigshospitalet in Copenhagen treats children under the age of 15 in the event of sexual abuse <https://www.rigshospitalet.dk/afdelinger-og-klinikker/julianemarie/center-for-seksuelle-overgreb/boern/Sider/default.aspx>.

The Centre for Rape Victims in Aarhus²⁰³ has a video on its website in which a member of staff explains and shows what people seeking help can expect. The websites of the individual sexual violence referral centres provide information on the procedure of treatment in varying degrees of detail.

In cases of sexual abuse in the family, the website links to the Centre for Victims of Sexual Abuse East (*Center for Seksuelt Misbrugte Øst*)²⁰⁴. This is not a sexual violence referral centre (see Chapter 4.1.1.7).

The centres for rape victims in Aarhus and Copenhagen are involved in research into sexual violence. The centre in Aarhus runs regular training courses for professionals from the other sexual violence referral centres. The crisis centre in the *Rigshospitalet* in Copenhagen also offers training for medical and non-medical professionals, which is intended to teach a more sensitive approach to victims of rape.²⁰⁵

4.1.1.2 Funding and bases

The centres are mostly funded via the regions (Ministry of Justice 2017: 26). The university clinic in Aarhus receives additional funding from the Ministry of Health and from companies, private donors and foundations such as *A.P. Møllerske* (Aarhus Universitetshospital 2018: 6).

4.1.1.3 Standards

A forensic investigation is carried out on victims of rape, even when there is no immediate intention to report a crime.²⁰⁶ The DNA evidence is stored for up to six months.²⁰⁷

4.1.1.4 Distribution

There are nine centres for rape victims nationwide. One centre in north Jutland and two in each of the other four regions.

4.1.1.5 Availability

Most centres are open and accessible 24/7.

4.1.1.6 Access

The National Board of Social Services has published treatment guidelines aimed at psychological professionals treating people with impairments and disabilities who have been sexually abused.²⁰⁸ The guidelines were developed in partnership with the Centre for Rape Victims at the university clinic in Aarhus and the Centre for Victims of Sexual Abuse at the *Rigshospitalet* in Copenhagen.

²⁰³ <https://www.voldtaegt.dk/>

²⁰⁴ <https://csm-danmark.dk/ost/om-csm-ost/>

²⁰⁵ <https://www.rigshospitalet.dk/english/departments/juliane-marie-centre/centre-for-victims-of-sexual-assault/Pages/default.aspx>

²⁰⁶ The Council of Europe also recommends this practice (CoE 2011: 26).

²⁰⁷ <https://www.voldtaegt.dk/fa-hjalp/nar-du-kommer-til-centret/>

²⁰⁸ <https://socialstyrelsen.dk/handicap/udviklingshaemning/temaer/seksualitet/behandling>

There is no detailed information available on the centres for non-Danish-speaking women.

4.1.1.7 Miscellaneous

There are three regional centres (*Center for Seksuelt Misbrugte*, CSM Center)²⁰⁹ in which persons suffering from the **long-term effects of childhood sexual abuse** can receive free counselling and treatment. Both individual and group therapy are provided. The centres are run by four independent institutions. All three centres are part of the countrywide network of the national knowledge and special counselling organisation for the sector, VISO⁵³. The CSM centres are financed by the health, social affairs and labour market fund (*Satspuljen*). The Centre for Victims of Sexual Abuse East (*Center for Seksuelt Misbrugte Øst*) is accredited by the Danish Sector Association for Free Social Advice. The three CSM centres are in Copenhagen, Odense in southern Denmark and Aarhus in central Jutland

4.1.2 Rape crisis centres for victims of sexual violence

Denmark does not have dedicated contact points with a particular focus on working with people affected by sexual violence or rape, apart from the **centres for rape victims** (refer to [Chapter 4.1.1](#)).

The centres for rape victims can be contacted even years after the incident. [In addition to acute aid, the centres also offer a small amount of psychological counselling and treatment, counselling by social workers and sexological counselling.](#) However, GREVIO and others have stressed that this is not provided systematically or to an adequate sufficient extent (GREVIO 2017b: 35).

4.1.3 Assessment

The sexual violence referral centres are well resourced for the provision of acute aid: They can be reached 24/7 and offer all necessary forensic and medical services.

According to the recommendations of the Istanbul Convention, Denmark should have 29 crisis centres (one centre for every 200,000 inhabitants).¹⁹⁸ This is equivalent to a shortfall of 20 centres. However, Denmark is a small country in terms of territorial size, so that the centres might still be reachable when necessary.

Available research confirms the impression conveyed in the alternative report that the general population is not adequately aware of the information about sexual violence referral centres (Danish National Observatory on Violence against Women 2017: 22). This weakens their position as low-threshold support services. The sexual violence referral centres are included in the list of specialised services drawn up by the national agency “Life without Violence”.

While sexual violence referral centres are, in comparative terms, available comprehensively, there are no specialised rape crisis centres or services for long-term support after sexual violence. In general, the sexual violence referral centres offer only five psychology sessions at maximum.

²⁰⁹ <https://csm-danmark.dk/>

There is therefore no assurance of long-term psychological care. It is not possible to obtain any information on group therapies or self-help groups that are offered or facilitated by the centres. With their focus on domestic violence, the ambulatory services listed under the specialist support services, such as “Tell Someone” (see [Chapter 2.1.1](#)), are not dedicated to meeting the needs of women affected by forms of sexual violence and rape.

4.2 Finland

As mentioned in the beginning (refer to the [Excursus: Nordic paradox](#)), sexual violence is a major problem in Finland and its Scandinavian neighbouring countries.

According to figures from *Statistics Finland*, a total of 1,338 rapes were reported in 2018, 7.5 percent more than in 2017. Moreover, 529 cases of sexual harassment were reported in total during 2018, which represents an increase of 27.8 percent compared to the previous year.²¹⁰

Strong criticism has been levelled at the criminal statutes on rape for many years.²¹¹ Amnesty International comments highly critical on the provisions of national criminal law (AI 2019a: 17 ff), the whole legal process (ibid.: 47ff) and the poor accessibility of support in the form of crisis centres (ibid.: 55). Contrary to the promises of politicians, Amnesty International has noted that change has still to take place (cf. AI 2019a).

4.2.1 Sexual violence referral centres for victims of sexual violence

At the time of research for this working paper, there was one **Sexual Assault Support Center (Seri Support Center)** in Helsinki²¹² as contact point for victims of sexual violence in Finland that can be classified as a sexual violence referral centre within the meaning of the Istanbul Convention. In February 2020, another Seri Support Center in Turku²¹³ opened. Therefore, the number of sexual referral centres was updated to two for the overview. However, the following description focuses only on the Seri Support Center in Helsinki.

4.2.1.1 Services

The **Seri Support Centers** are state-run contact points for victims of sexual violence and are run by the National Institute for Health and Welfare in cooperation with university clinics. The Seri Support Center in Helsinki officially opened in 2017.²¹⁴ The centre offers the following services:

- Medical care and gathering of forensic evidence

²¹⁰ Information from *Statistics Finland*, January 2019: https://www.stat.fi/til/rpk/2018/04/rpk_2018_04_2019-01-17_tie_001_en.html.

²¹¹ In recent years, Finland has amended some provisions of its criminal law and expanded what constitutes rape. Nonetheless, Finnish law still inherently links rape to either the application or the threat of violence or the state of helplessness. Amnesty International criticises this and calls for the legal definition of rape to be aligned with the internationally approved practice of placing the person's consent at the heart of the definition. (AI 2019b)

²¹² <https://www.hus.fi/en/medical-care/hospitals/womens-hospital/ambulatory-clinics/Pages/Seri-Support-Center.aspx>

²¹³ <http://www.vsshp.fi/en/toimipaikat/tyks/to7/Seri-keskus/Pages/default.aspx>

²¹⁴ https://yle.fi/uutiset/osasto/news/finland_last_among_nordics_to_set_up_centre_for_victims_of_sexual_violence/9637730

- Psychological support
- Development of a future treatment plan
- 24/7 telephone counselling
- Support in reporting the crime to the police (not compulsory – only on the wishes of the victim)
- Referral to external agencies for further support

4.2.1.2 Funding and bases

The **Seri Support Centers** are funded from the budget of the Ministry for Health and Social Affairs.

4.2.1.3 Standards

It was not possible to identify specific standards for the **Seri Support Center** Helsinki. Multiple civil-society organisations have developed general standards for legal and educational professionals (refer to [Chapter 4.2.2.3](#)).

4.2.1.4 Distribution

The **Seri Support Center** Helsinki caters to the regions of Helsinki, Espoo and Vantaa. According to the 2018–2021 Istanbul Convention Action Plan, the network of Seri Support Centers for victims of sex offences is to be expanded to include all university clinics, initially in Turku and Tampere, followed by Kuopio and Oulu (NAPE 2017: 23). Press reports indicate that the centres in Kuopio, Tampere and Turku should be open since the end of 2019, another centre in Oulu in February 2020.²¹⁵ It was not possible to obtain information confirming these dates.

4.2.1.5 Availability

The **Seri Support Center** Helsinki employs one full-time midwife and one psychologist, as well as a part-time social worker and doctor. It is open on weekdays between 8:00 am and 6:00 pm. Telephone counselling is also offered free of charge 24/7.

4.2.1.6 Access

The **Seri Support Center** Helsinki accepts people of any gender above the age of 16. According to a statistical report by the National Institute for Health and Welfare on the subject of domestic violence, 97 percent of people who approached the Seri Support Center in 2017 were female (THL 2018).

In a report from 2019, Amnesty International adds that victims are only accepted if less than one month has elapsed since their sexual assault, and is critical of the high utilisation, which makes it very difficult in general to obtain support (AI 2019a: 48). The Seri Support Center tracks the health status of the people it treats for up to six months after their visit (AI 2019a: 39).

²¹⁵ <https://www.helsinkitimes.fi/finland/finland-news/domestic/17245-over-1-000-have-sought-help-from-centre-for-sexual-assault-victims-in-helsinki.html>

4.2.2 Rape crisis centres for victims of sexual violence

In addition to the state support services provided by the sexual violence referral centre, there is a major civil-society organisation, the **Rape Crisis Centre Tukunainen (Raiskauskriisikeskus Tukunainen)**²¹⁶ that offers specialist support services to victims of sexual violence. All of these services fall under the category of rape crisis centres as defined in the Istanbul Convention.

Many of the **FMS member organisations** point out that domestic violence can also mean sexual violence. As part of its support for victims of domestic violence, the Jakobstad shelter²¹⁷, for example, also offers support groups and individual assistance relating to rape or sexual harassment. The membership organisation VIOLA – *Free from Violence* has developed, in partnership with the municipality of Mikkeli, a prevention programme (**My Space, Not Yours!**)²¹⁸ for sexual violence (refer to [Chapter 4.2.2.3](#)). As a rule, individual measures taken by the FMS member organisations that are linked to sexual violence are mentioned within the range of services for victims of domestic violence. Domestic violence is prioritised in this regard, which is why the services are described in more detail under this point (refer to [Chapter 2.2.1](#)).

4.2.2.1 Services

The **Rape Crisis Centre Tukunainen** in Helsinki is a national, non-governmental support centre for victims of sexual violence and their families. It offers the following services:

- On-site counselling
- Telephone counselling for persons affected by sexual violence and information on personal and group appointments
- Appointments with lawyers on-site²¹⁹
- Legal counselling by telephone
- Appointment with a sex therapist (up to five sessions are possible)
- Organisation of self-help groups
- Online service *Nettitukunainen*, anonymous, online assistance for victims of sexual violence²²⁰
- Training for professionals and government agencies: Senja programme

4.2.2.2 Funding and bases

The **Tukunainen Rape Crisis Center** obtains its funding from the STEA budget (*Veikkaus*), as well as from donations. The Senja programme for training professionals and government agencies is developed by the Tukunainen Center and funded by STEA (*Veikkaus*) and the Ministry of Justice.

The project “**My Space, Not Yours!**” was also financed by STEA (*Veikkaus*).

²¹⁶ <https://tukunainen.fi/>

²¹⁷ <https://www.kvinnojouren.fi/>

²¹⁸ <http://www.violary.fi/myspace/>

²¹⁹ Victims of sexual violence are entitled to free legal representation. The *Tukunainen Rape Crisis Centre* also states that victims have the right to support throughout the entire legal process. This applies even if the person is only being examined as a witness: <https://tukunainen.fi/oikeus-oikeudenkayntiavustajaan-ja-tukihenkiloon/>

²²⁰ <https://www.nettitukunainen.fi/>

4.2.2.3 Standards

As part of its **Senja programme (Sensitiveness Model for Professionals of Jurisprudence)**²²¹, the Tukinainen Rape Crisis Centre offers information for legal professionals and the police on the subjects of trauma, sexual offences, domestic violence, victims with disabilities or migratory backgrounds and very young victims. All of these skills are taught in a course programme for professionals.

The project **My Space, Not Yours!** is run in partnership between the FMS member organisation *VIOLA – Free from Violence* and the municipality of Mikkeli. The project aims primarily to prevent sexual violence. Teaching methods for secondary schools were developed together with the youth services, trained professionals, schoolchildren and students. A pilot project was organised to include the teaching unit in the curriculum of every level 2 secondary school in Mikkeli, and suitable training was provided to the educational staff. The project ran from 2015 to May 2019. The materials developed are freely available to experts.

4.2.2.4 Distribution

The main office of the **Rape Crisis Centre Tukinainen** is located in Helsinki. There are two regional sites in Jyväskylä (region of western and central Finland) and Rovaniemi (region of north Finland). However, the self-help groups can be organised anywhere in Finland. The Statistical Report for 2017 shows that the telephone service for legal counselling is used by people all over Finland. Accounting for 48 percent, the lion's share of calls did come from the southern Finnish region of Uusima, in which the capital Helsinki is also located (Tukinainen, n. y.: 4).

4.2.2.5 Availability

The website of the **Rape Crisis Centre Tukinainen** informs visitors of the telephone service for legal and general counselling. In 2017, the telephone service for legal counselling offered by the Rape Crisis Centre Tukinainen was contacted by the victim in 68 percent of cases, by a government agency in 12 percent of cases and by parents or people from the social milieu in 11 percent of cases (Tukinainen, n. y.: 5).

4.2.2.6 Access

Victims of sexual violence can obtain rapid assistance by contacting the online service *Nettitukinainen*.

4.2.3 Assessment

The range of specialist support services for victims of sexual violence is significantly narrower than in the areas of shelters and domestic violence. Hence, Finland does not fulfil the recommendations of the Istanbul Convention to create one centre per 200,000 head of population:

²²¹ <https://senjanetti.fi/en>

In total, there are five rape crisis and sexual violence referral centres²²² for women affected by sexual violence per 200,000 head of population. In order to fulfil the recommendation of the Istanbul Convention, there would have to be 28 – i.e., Finland is 23 places short.

Of the existing services, the civil-society organisation *Tukinainen* is particularly active and offers a broad, accessible range of services at multiple locations in Finland.

The announcement that more *Seri Support Centres* will be opened to supplement the existing centres at Helsinki and Turku university clinics demonstrates the political will to expand the services. Nonetheless, the number of centres is insufficient. There is indeed an urgent need for action in this area, especially in view of the high figures for sexual violence and harassment in Finland, as mentioned earlier. The information provided by the *Seri Support Center Helsinki* does not adequately describe the conditions for access. According to Amnesty International, the centre is only responsible for victims aged over 16 for a period of one month following the incident (AI 2019a: 48). This would mean an enormous restriction on access to help. The GREVIO evaluation also criticises this access barrier. According to data available to GREVIO, the great majority of victims are referred to the centre within three days. This means that access is not assured for victims who need help after a longer period. (GREVIO 2019: 35)

Both crisis centres offer psychological help. However, the *Seri Support Center Helsinki* only employs one psychologist, and it was not possible to determine this person's specialist field. The *Tukinainen Rape Crisis Centre* offers victims up to five sessions with trained sex therapists.

The opening of additional crisis centres is necessary as a matter of urgency in light of the low admission capacity of the two crisis centres and the inadequate care for victims of sexual violence in all parts of the country. It is reasonable to assume that many victims turn to other support services due to the low availability of specialist support services dealing with sexual violence. Some member organisations of the *Federation of Mother and Child Homes and Shelters* (FMS) do provide information to the effect that domestic violence can also include sexual violence. Hence, an expansion of specialised care for victims of sexual violence could ease the pressure on these services.

4.3 Austria

Almost a third of women in Austria experience sexual violence (ÖIF 2011: 105).²²³

4.3.1 Sexual violence referral centres for victims of sexual violence

Acute crisis support for women and girls affected by sexual violence is offered by the 24-hour women's emergency line (*24-Stunden Frauennotruf*) run by the City of Vienna²²⁴ and five

²²² Besides the four centres, there are some individual services that address sexual violence within the context of domestic violence. Although they were presented in this chapter, they have not been evaluated as dedicated centres within the meaning of the Istanbul Convention.

²²³ Survey of 1,292 women aged 16 to 60.

²²⁴ <https://www.wien.gv.at/menschen/frauen/beratung/frauennotruf/index.html> (in German)

autonomous counselling centres across Austria that specialise in sexual violence²²⁵. In addition, victims of sexual violence in Austria can turn to victim-protection groups (*Opferschutzgruppen*) in hospitals. A variety of contact points is available in Austria to document injuries sustained and to preserve evidence. Their services were surveyed in 2015 by the then Federal Ministry of Education and Women's Affairs (BMBF 2015). The clinical-forensic examination centre of the Medical University of Graz²²⁶ was presented in this study as an example of good practice.

4.3.1.1 Services

The **24-hour women's emergency line** is an agency that specialises in sexual, physical, and psychological violence against women and girls. Its services prioritise medium-term support for victims of violence, as well as acute and crisis support for women and girls aged 14 and over. They include:

- Immediate support and crisis intervention
- Accompaniment to the police, to court or hospital

The counselling team consists of clinical and health psychologists, qualified social workers and lawyers.

Victim protection groups offer specialist assistance and situational support to adult²²⁷ victims of physical and/or sexual violence. The range of services includes:

- Special medical, nursing, and therapeutic treatment and care in hospitals for victims of violence.
- Discussion sessions
- Information about counselling services and refuge options, as well as support in contacting the relevant facilities
- Coordination and cooperation with counselling and support agencies outside the hospital

The victim protection groups are also tasked with raising awareness of the subject of violence against women and children and of contributing to the early identification of female patients affected by violence. Hence, victim protection work also involves the organisation of training, operating procedures and public relations at each hospital.

The composition of victim protection groups is defined by law: They consist of two specialist casualty and gynaecology/obstetric physicians, a nurse and a psychologist or psychotherapist.

In 2017, a total of 799 victim protection cases in Vienna were documented by ten victim protection groups (City of Vienna 2018: 30).²²⁸

²²⁵ The women's advice agencies dealing with sexual violence mainly prioritise medium- to long-term support for female victims of sexual violence, so they are presented in Chapter 4.3.2 .

²²⁶ [https://www.medunigraz.at/klinisch-forensische-ambulanz/allgemeines/?sword_list\[\]=gerichtsmmedizin&sword_list\[\]=ambulanz&no_cache=1](https://www.medunigraz.at/klinisch-forensische-ambulanz/allgemeines/?sword_list[]=gerichtsmmedizin&sword_list[]=ambulanz&no_cache=1) (in German)

²²⁷ There are child protection groups for children and young people.

²²⁸ This number does not include all potentially relevant departments, as some did not document any victim protection cases due to time constraints (ibid.).

The **clinical-forensic examination centre** is for people of all ages who have been affected by physical and sexual violence, child abuse or mistreatment. The range of services includes:

- Forensic medical examination with extensive documentation of injuries and, where needed, preservation of evidence and preparation of an expert opinion.
- Information about further support options
- Referral to other services, for example further medical investigation and treatment, specialist support services and/or psychological or legal counselling

The services of the clinical-forensic examination centre are free of charge to victims. There are four specially trained doctors.

4.3.1.2 Funding and bases

The **24-hour women's emergency line** is a service of the women's department of the City of Vienna, which also funds it.

The establishment of **victim protection groups** has been a legal requirement²²⁹ for all hospitals with gynaecological and casualty departments since 2011. There are no legal provisions about how the work of the victim protection groups should be funded. It was not possible to obtain information on whether and to what extent the hospitals provide financial resources for this purpose.

4.3.1.3 Standards

The federal requirement to set up **victim protection groups** in hospitals was initially enshrined in the regional state laws. There is no Austria-wide, standardised concept for the establishment of victim protection groups and their work.²³⁰ The Vienna Hospital Association, the 24-hour women's emergency line, the police and the forensic medicine department developed an **evidence preservation set** in 2004. It guarantees consistent evidence preservation and has become established in the hospitals of the City of Vienna as the treatment standard for examining victims of sexual violence (MA 57 et al. 2005). 31). A forum for networking the victim protection groups in Vienna was founded in 2013 on the initiative of the Viennese Programme for Women's Health and the 24-hour women's emergency line of the City of Vienna. It includes the victim protection groups at ten hospitals in Vienna. The aim is to promote standardised procedures when dealing with female patients affected by violence and to network with the police, the Department for Youth and Family of the City of Vienna and violence prevention institutions. A **checklist for cases of violence against women**²³¹ was developed in this context. It is designed to help medical staff to identify violent assaults and to respond to them correctly in everyday clinical work.²³² The **MedPol questionnaire**²³³ is used Austria-wide as a consistent documentation questionnaire for violent offences or where there is reason to suspect third-party responsibility. It is designed to meet the requirements of the court. This was developed in partnership between the Austrian Medical

²²⁹ Article 8e Hospitals and Sanatoria Act (*Krankenanstalten- und Kuranstaltengesetz*)

²³⁰ Publication of the evaluation report (refer to FN 235) will also include a toolbox for newly founded victim protection groups.

²³¹ <https://www.wien.gv.at/menschen/frauen/beratung/frauennotruf/checkliste-gewalt.html> (in German)

²³² <https://www.wien.gv.at/gesundheit/beratung-vorsorge/frauen/frauengesundheit/schwerpunkte/gewalt/vernetzung-opferschutzgruppen.html> (in German)

²³³ https://bundeskriminalamt.at/202/Gewalt_widersetzen/files/Dokumentationsbogen.pdf (in German)

Chamber (*Österreichische Ärztekammer*), the Austrian Society for Forensic Medicine (*Österreichische Gesellschaft für Gerichtsmedizin*), and the Federal Ministry of the Interior.²³⁴

The **clinical-forensic examination centre** states that it uses internationally recognised high standards in its examinations. In addition, the centre voluntarily uses the latest imaging procedures (CT, MRI) for research purposes, as doing so enables an objective and precise assessment, especially of the kind of injuries that are not externally visible and have hence been largely impossible to assess so far.

4.3.1.4 Distribution

The **24-hour women's emergency line** is a service of the City of Vienna. Research was not carried out to determine whether and how female victims outside Vienna contact this support service and therefore receive counselling.

An Austria-wide overview of established **victim protection groups** does not exist at present.²³⁵

The **clinical-forensic examination centre** only operates in Graz.²³⁶

4.3.1.5 Access

The **24-hour women's emergency line** is staffed by multilingual counsellors and interpreters.

The examinations at the **clinical-forensic examination centre** are carried out regardless of whether the violent act has been or will be reported to the authorities.²³⁷ As a rule, the referral is made by a doctor, victim protection institution, police or public prosecutor. The examination centre is available to all children, adolescents, and adults affected by violence. No information on access restrictions was identified.

4.3.1.6 Availability

Women and girls affected by violence can contact the **24-hour women's emergency line** round-the-clock. No information was identified concerning availability of the **victim protection groups**. The clinical-forensic examination centre is open on weekdays from 8:00 am to 4:00 pm. Appointments must be arranged in advance by telephone.

4.3.1.7 Miscellaneous

In their 2018 reform proposals, the nationwide violence protection centres recommend that the legal provisions should include the requirements for participation of one their representatives (refer

²³⁴ Apparently there are other documentation questionnaires circulating in Austria aside from the MedPol questionnaire, but they are seemingly inadequate in places (BMBF 2015: 6). There is no conclusive overview of the documentation questionnaires that are currently in use.

²³⁵ In 2018, the Austrian Federal Ministry of Labour, Social Affairs, Health and Consumer Protection commissioned Gesundheit Österreich GmbH with preparing an evaluation. An online-toolbox is earmarked for publication in summer 2020. The evaluation will not be published: https://goeg.at/Versorgung_Gewaltopfer (in German)

²³⁶ Comparable institutions exist also in Vienna (outpatient crisis clinic at the hospital AKH Wien: <https://frauenheilkunde.meduniwien.ac.at/gyn/patientinneninformationen/ambulanz/krisenambulanz/> (in German)) as well as in Innsbruck (outpatient clinic for victims of violence) and Salzburg (BMBF 2015).

²³⁷ The preserved evidence is kept for six months if the victim does not want to file a police report (at present).

to [Chapter 2.3.1](#)) in the victim protection groups (refer to [Chapter 2.3.1.7](#)) (Austrian violence protection centres 2018: 11).

4.3.2 Rape crisis centres for victims of sexual violence

There are five autonomous counselling centres dealing with sexual violence. They came together in 2010 to form the Alliance of Autonomous Counselling Centres for Women Affected by Sexual Violence Austria (*Bund autonome Frauenberatungsstellen bei sexueller Gewalt Österreich*)²³⁸. In addition, the violence protection centres in Burgenland, Lower Austria, Styria, and Vienna (refer to [Chapter 2.3.1](#)) also offer counselling and support to victims of sexual violence and harassment. Furthermore, there is a counselling centre for women with learning difficulties and multiple disabilities who have suffered sexual violence.²³⁹

4.3.2.1 Services

The services of the **Counselling Centres for Women Affected by Sexual Violence** cater to women and girls aged 14 and over who have experienced or defended themselves against sexual violence. They include:

- Free information and counselling
- Crisis support/intervention as the first step towards regaining internal and external security and psychological stability with the help of a clinical psychologist
- Psychological and psychosocial counselling
- Counselling for carers, so for significant persons such as relatives and partners, as well as teachers and social counsellors
- Psychosocial and legal process assistance:
 - Information on court procedures
 - Preparation for cross-examination and protective accompaniment when reporting crimes and attending trial
- Preventative work:
 - Primary prevention does not address specific persons, rather society as a whole. It aims to identify and eradicate societal causes of violence.
 - Secondary prevention: Violent situations should be identified at an early stage and appropriate intervention measures taken.
 - Tertiary prevention: Therapy and crisis intervention for both victims and perpetrators are prioritised here.

The various institutions offer additional services as well: The women's counselling centre in Graz provides trauma therapy, which is charged to clients according to their income. The women's counselling centre in Linz offers online counselling. The women's counselling centre in Salzburg can provide free legal representation in criminal proceedings. The lawyer ensures that all rights and claims are protected during the trial. In addition, the counselling centre offers advice on personal compensation claims based on the Austrian Victims of Crime Act, especially with regard to the options of receiving psychotherapeutic support.

²³⁸ <http://www.sexuellegewalt.at/> (in German)

²³⁹ <http://www.ninlil.at/kraftwerk/ninlil.html> (in German)

There is one women's counselling centre in each of the cities Graz, Innsbruck, Linz, Salzburg and Vienna that operate as state-certified victim protection institutions. Non-profit associations are behind the women's counselling centres. It was not possible to obtain information on staffing at any of the five women's counselling centres: Four part-time counsellors work at the centre in Graz. Four female lawyers are available to represent clients as part of the support service for court cases. The team at the women's counselling centre in Innsbruck consists of four part-time staff members and three volunteer counsellors. There are four lawyers in Linz to provide counselling and trial support, one of whom works within a marginal employment arrangement, as well as three psychosocial counsellors. The women's counselling centre in Salzburg consists of a psychologist, a lawyer, several social workers and a life and social coach. The women's counselling centre in Vienna consists of four social workers, one of whom is also a lawyer and another who is a trainee psychotherapist.

The **counselling centre “Kraftwerk against Sexual Violence against Women with Learning Difficulties”** (*Beratungsstelle „Kraftwerk gegen sexuelle Gewalt an Frauen mit Lernschwierigkeiten“*), which is operated by the association NINLIL (*Verein „NINLIL – Empowerment und Beratung für Frauen mit Behinderung“*), is a women's service centre that is accredited by the Division for Women and Equality of the Federal Chancellery (Federal Chancellery 2018: 28). The counselling centre's services are aimed at women with learning difficulties and multiple disabilities who are or have been affected by sexual violence. They include:

- Advice for victims and for the families or carers of women with learning difficulties affected by violence
- Referrals to other counselling centres that offer relevant services
- Regular moderated group meetings for eight women with learning difficulties who have experienced violence

In regard to the specific life circumstances of women with learning disabilities, counselling is also provided to teams at institutions for people with disabilities who deal with actual or suspected sexual violence and to female experts for protection against violence. The counselling centre consists of one manager and one counsellor, supported by an assistant on a marginal employment contract (Kraftwerk 2017: 6).

4.3.2.2 Funding and bases

All **women's counselling centres for sexual violence** are funded by Division for Women and Equality of the Federal Chancellery. Unlike in the rules for violence protection centres, this funding is not adjusted for inflation on an annual basis. The women's counselling centres have a framework agreement that includes personnel and material costs and has a term of three years. However, the funds are requested separately every year. Furthermore, there are single-year contracts with the Federal Ministry of Constitutional Affairs, Reforms, Deregulation and Justice for one-time funding of psychosocial and legal process support for victims of violence (refer also to [Chapter 2.3.1.2](#)). All women's counselling centres also receive funds from the federal states and the responsible municipal authorities based on various assistance conditions. The women's counselling centres in Graz and Innsbruck have received additional funds from a campaign (*“Licht ins Dunkel”*) by the Austrian public service broadcaster ORF.

Kraftwerk is funded by the Municipal Department Women's Affairs of the City of Vienna and the Federal Ministry of Health and Women's Affairs. A third of the counselling work has been co-financed from the budget of the Vienna Social Fund (*Fonds Soziales Wien*) since 2011.

4.3.2.3 Standards

The women's counselling centres in Innsbruck²⁴⁰ and Vienna²⁴¹ work according to principles they have developed themselves.

4.3.2.4 Distribution

There is one **women's counselling centre for sexual violence** in each of the cities of Graz²⁴², Innsbruck²⁴³, Linz²⁴⁴, Salzburg²⁴⁵, and Vienna²⁴⁶. The women's counselling centre in Innsbruck also provides counselling sessions in Landeck.

Kraftwerk is based in Vienna but provides counselling nationwide, including to other women's counselling centres that advise (or want to advise) women with learning difficulties.

4.3.2.5 Availability

None of the **women's counselling centres for sexual violence** are open 24/7. The 24-hour women's emergency line provided by the City of Vienna is also aimed at victims of sexual violence (refer to [Chapter 4.3.1](#)).

Kraftwerk is staffed on weekdays from 10:00 am to 5:00 pm, but for organisational reasons can only be reached by telephone during the core hours of Monday and Wednesday from 10:00 am to 1:00 pm and Tuesday and Thursday from 1:00 to 4:00 pm.

4.3.2.6 Access

The **Alliance of Autonomous Counselling Centres for Women Affected by Sexual Violence Austria** operates a shared website, but it only contains information in German. On its website, the women's counselling centre in Graz offers a barrier-free information brochure in German, Arabic, English, Farsi, Romanian, Serbian, and Turkish. The website of the women's counselling centre in Salzburg has information in German, English, Serbian, and Turkish.

Kraftwerk has developed guidelines²⁴⁷ for counselling women with learning difficulties who are affected by violence in order to continue improving access to existing counselling services for these women.

²⁴⁰ <https://www.frauen-gegen-vergewaltigung.at/ueber-uns/> (in German)

²⁴¹ <http://www.frauenberatung.at/index.php/beratungsstelle/arbeitsprinzipien> (in German)

²⁴² Counselling centre TARA: <http://www.taraweb.at/> (in German)

²⁴³ Verein Frauen gegen VerGEWALTigung: <http://www.frauen-gegen-vergewaltigung.at/> (in German)

²⁴⁴ Autonomes Frauenzentrum afz: <http://www.frauenzentrum.at/> (in German)

²⁴⁵ Frauennotruf Salzburg: <http://www.frauennotruf-salzburg.at/> (in German)

²⁴⁶ Verein Notruf für vergewaltigte Frauen und Mädchen: <http://www.frauenberatung.at/> (in German)

²⁴⁷ <http://www.ninlil.at/kraftwerk/dokumente/leitfaden-beratung.pdf> (in German)

4.3.2.7 Miscellaneous

The women's counselling centre in Graz is a member of the **Styrian Network against Sexualised Violence** (*Steirisches Netzwerk gegen sexualisierte Gewalt*).²⁴⁸ This consists of violence prevention and victim protection institutions, support agencies for disabled persons, health, and youth work institutions, housing institutions, therapists, child protection service, police, prosecutors and other experts who work in the area of sexual violence.

The committee for "Victim Protection and Work with Perpetrators" of the Criminal Law Task Force calls for a simplification of access to services for victims of sexual violence: It proposes the dismantling of bureaucratic obstacles for people affected by sexual violence when accessing psychotherapy, a lump-sum compensation via the Austrian Victims of Crime Act and funding for support when reporting a crime (Criminal Law Task Force 2019: 17).

4.3.3 Assessment

Austria prefers non-governmental support services when implementing Article 25. Rape crisis centres for victims of sexual violence are not available nationwide. They are lacking in rural areas especially. Hence, Austria fails to meet the recommendations of the Istanbul Convention to establish one place per 200,000 head of population.

There is a total of 15 crisis centres for victims of sexual violence (not including victim protection groups). In order to fulfil the recommendation of the Istanbul Convention there would have to be 44 – i.e., Austria falls short by 29 facilities.

Crisis centres for women and girls who are affected by sexual violence are provided by the **24-hour women's emergency line of the City of Vienna** and **five autonomous counselling centres** across Austria that specialise in sexual violence. In addition, victims of sexual violence in Austria can approach the **victim protection groups** that are required by law to be established at all hospitals. Their work is currently being evaluated across Austria. The work of the victim protection groups in Vienna was described in 2018 and recommendations were formulated for ensuring good victim protection (City of Vienna 2018): The report indicates the need for more resources in terms of time, staffing, and premises in order to deal with the core tasks – early identification of victims and raising awareness among workers. Since there is no standardised Austria-wide concept for establishing victim protection groups and their work, it is reasonable to assume that good victim protection work rests, to a large extent, on the personal commitment of the people involved in the victim protection groups and on support from management at each hospital. Absent an evaluation, it is virtually impossible to assess whether the work of the victim protection groups meets the provisions of the Istanbul Convention as crisis centres for victims of sexual violence.

In Austria, there is no comprehensive availability of dedicated centres for forensic examinations and evidence preservation for victims of sexual violence.²⁴⁹ It is helpful that the services offered

²⁴⁸ <http://www.netzwerk-gegen-sexualisierte-gewalt.at/> (in German)

²⁴⁹ By law, victim protection groups cannot accept this task (BMBF 2015: 8).

by the various contact points were surveyed and evaluated in 2015 already (BMBF 2015): The report states that rapid evidence preservation is not possible in all cases. In addition, there is no consistent standard for documenting injuries. There is an institution that performs this work in each of the cities of Graz, Innsbruck, Salzburg, and Vienna, but they use varying procedures and conditions. However, in order to meet the requirements of the Istanbul Convention, the report recommends creating additional forensic examination facilities and improving the training for health and care staff (ibid.: 10). A matching **concept for an Austria-wide development of clinical-forensic networks** was presented in 2015 during a meeting of the working group “Protecting Women against Violence” (ibid.: 6f.).²⁵⁰ It provides for the establishment of Austria-wide headquarters (including an Austria-wide telephone counselling service), an internet forum and four regional agencies with clinical-forensic examination centres (ibid.: 7). Moreover, it suggests cooperation with twelve partner hospitals (three for each regional agency) (ibid.). The concept has not yet been implemented.²⁵¹

Moreover, there is no comprehensive availability of rape crisis centres for victims of sexual violence in Austria. There is currently one **women’s counselling centre for sexual violence** in each of the cities of Graz, Innsbruck, Linz, Salzburg, and Vienna. The absence of women’s counselling centres in the other federal states is partly compensated by the violence protection centres in Burgenland and Lower Austria or is supplemented in the case of the violence protection centres in Styria and Vienna. Various organisations and bodies called for more counselling centres.²⁵² The project “Concept for the Comprehensive Care of Victims of Sexual Violence” outlines ways in which “an Austria-wide provision of specialist counselling centres can be achieved, with due consideration of the current infrastructure and, if needs be, ambulatory services” (Federal Chancellery 2019b: 57). The project was carried out by the Vienna women’s counselling centre from November 2017 to May 2019 with funding from the Federal Chancellery. The follow-on project was launched in June 2019. It was intended to implement the concept, meaning the establishment of women’s counselling centres for sexual violence in the four federal states of Lower Austria, Burgenland, Vorarlberg and Carinthia by 30 November 2020. Moreover, in May 2019, the governing parties of the former Kurz administration, ÖVP and FPÖ, introduced a motion for a resolution for the Austria-wide expansion of counselling centres for sexual violence, which was to be deliberated by the equality committee.²⁵³

While there is political debate on expanding the counselling centres for sexual violence, there is none that addresses the issue of funding for the current institutions. All counselling centres for women affected by sexual violence receive national government funding. However, the money is not adjusted annually for inflation – unlike in the rules for the violence protection centres – which, with due consideration of rising costs, automatically leads to budget constraints. Moreover, the amount of funds in each federal state and responsible municipal authority differs due to the varying

²⁵⁰ The concept is based on the experiences acquired during a 2013/14 pilot project in Styria (ibid.: 3).

²⁵¹ The political party NEOS – The New Austria and Liberal Forum (*NEOS – Das Neue Österreich und Liberales Forum*) recently called for the introduction of ambulatory violence clinics in all federal states: https://www.parlament.gv.at/PAKT/VHG/XXVI/A/A_00685/fname_742734.pdf (in German)

²⁵² The alternative report called for the establishment and funding of a further women’s counselling centre (GREVIO Shadow Report NGO-Coalition 2016: 81). In contrast, the establishment of counselling centres for sexual harassment was rejected (ibid.: 75). The GREVIO evaluation report called for the establishment of four women’s counselling centres (GREVIO 2017a: 33). The committee for “Victim Protection and Work with Perpetrators” of the Criminal Law Task Force recently called for “the adequate assurance of services in all federal states” (Criminal Law Task Force 2019: 21).

²⁵³ https://www.parlament.gv.at/PAKT/VHG/XXVI/A/A_00823/index.shtml#tab-Uebersicht (in German)

assistance conditions. According to the Austrian NGO Coalition for the GREVIO Shadow Report, sustainable long-term funding for the women's counselling services addressing sexual violence is not secure (2016: 81).²⁵⁴

5 Conclusion

This working paper provides a comparative analysis of the implementation of the Istanbul Convention for the protection and support of women affected by violence in Denmark, Finland and Austria. The findings reveal that in all three states, there is, at fundamental level, a nuanced, specialised and high-quality support system in place for women affected by various forms of violence: In implementing their obligations in line with Articles 22, 23 and 25 of the Istanbul Convention, Denmark, Finland and Austria opt for non-governmental, specialist support services. These are financed and in part also regulated by public administration at national, regional and municipal level.

The following provides a summarised description and comparison of some central characteristics of the support mechanisms set out in Articles 22, 23 and 25, as they exist for women affected by violence in Denmark, Finland and Austria:

5.1 Specialist support services (Article 22)

Of the various types of violence, **domestic violence** is covered best in the support system of all three states. Each country has a wide range of contact points to which women (and sometimes also men) can turn if they are affected by violence. This seems natural because the most common source of violence against women is their immediate social environment, and in particular their partner. Well-resourced violence protection centres have been established almost throughout Austria. These are legally recognised victim protection facilities that are managed by civil-society organisations and function as an interface between all actors involved. Finland also has a highly institutionalised and virtually nationwide structure of support services dealing with domestic violence in the *Federation of Mother and Child Homes and Shelters* network. By comparison, Denmark has gaps in service delivery outside of the region around the capital. The structure in Denmark differs as well: The services are mainly provided in the form of projects by means of cooperation between civil-society organisations. Private companies are also involved in this work in some cases.

In all countries, the services for victims of domestic violence are financed predominantly by the state at national level. In Denmark, this primarily takes place using a fund for disadvantaged groups that is regulated by parliament and that provides assistance in the fields of social services, health and the labour market for a period of three years. Financing in Finland is coordinated by the Funding Centre for Social Welfare and Health Organisations, which uses profits from *Veikkaus*, a kind of state lottery, to support projects in the fields of social services and health. The violence protection centres in Austria are funded by the Federal Chancellery and the Federal

²⁵⁴ It hence called for appropriate funding of the Alliance of Autonomous Counselling Centres for Women Affected by Sexual Violence Austria and of the five existing women's counselling centres that are organised under its umbrella (and of at least one further women's counselling centre) (GREVIO Shadow Report NGO-Coalition 2016: 81) The committee for "Victim Protection and Work with Perpetrators" of the Criminal Law Task Force also backs this demand (Criminal Law Task Force 2019: 21).

Ministry of the Interior on the basis of a rolling contract. These funds are adjusted for inflation each year. Support can therefore be considered secure.

The Austrian violence protection centres work according to common standards to which all nine of them are committed. There is no comparable obligation in Denmark and Finland. In Denmark, however, civil-society organisations and cooperation projects can voluntarily apply for accreditation from the Sector Association for Free Social Advice. For Finland, research did not reveal any common standards that apply to support services for victims of domestic violence that are networked within the umbrella organisation *Federation of Mother and Child Homes and Shelters*. However, the shared web presence and the coordination of services indicate that at least preliminary agreements in this regard exist at the level of the umbrella organisation.

The strong focus of anti-violence policies on domestic violence in Denmark, Finland and Austria comes at the expense of support services for other forms of violence against women in terms of their number, scope and regional distribution. Only a small number of specialist support services are aimed at other forms of violence and those are mostly only available in urban areas. In addition, the funding of services relating to stalking, violence in the name of so-called “honour” and genital mutilation are managed by the same state agency as those that deal with domestic violence. Therefore, the specialist support services may end up competing for funding in regard to different forms of violence.

In Denmark, support for victims of **stalking** is mainly provided by the Danish Stalking Center. There is also one contact point in Finland, although it deals exclusively with post-relationship stalking. The two contact points in Denmark and Finland are connected within the Nordic Network on Stalking. By contrast, Austria does not have a specialist support service for victims of stalking. Counselling and support for victims of stalking is only partially covered by the violence protection centres.

In recent years, **violence in the name of so-called “honour” and forced marriage** have received more attention, especially in Denmark and Austria. For example, a separate action plan for these issues was approved in Denmark. Besides two counselling centres for female victims, Austria also has a coordination agency that organises a nationwide response to cases of abduction based on forced marriage, including repatriation of the woman involved. The Austrian government has also provided additional funding for project-related measures. Finland has two counselling centres in Helsinki. It was difficult to research information on the services offered, and even then the details were incomplete. In this regard, the civil-society organisations are particularly critical of the inadequate degree to which staff in Finnish authorities and many professionals are informed and trained in the issue of violence in the name of so-called “honour”.

There are only a few counselling services for victims of **genital mutilation**: Although Austria has two counselling centres for women affected by genital mutilation, they are both in Vienna. However, a project that is scheduled to run until the end of 2019 has included training for counsellors who will then provide assistance to women affected by genital mutilation in Linz and Salzburg at least. Denmark also has a counselling centre dealing with this form of violence, in addition to its focus on violence in the name of so-called “honour”. So far, the focus in Finland has mainly been on public awareness and prevention; it was not possible to determine whether counselling for affected women is offered as well. The current Finnish action plan for the period

2018 to 2020 also prioritises the prevention of genital mutilation, with the aim of introducing the topic into educational curricula for professionals in the social and health services. While Austria has several specialised ambulatory clinics for women affected by genital mutilation, it was not possible to locate any equivalent institutions in Denmark or Finland.

Correspondingly, in none of the countries did the research reveal any cases and support services related to **forced abortion or forced sterilisation**.

Specialist support services for women affected by stalking, violence in the name of so-called “honour”, forced marriage and genital mutilation are not universally available and are much fewer in number than those for domestic violence. Although local authorities in Denmark are required by law to provide individual counselling to women affected by violence in the name of so-called “honour”, it was not possible to find any additional details on how this provision is put into practice. The available support services are mostly grouped in just one or two larger cities in each country; rural areas do not have enough or any relevant services. It is not clear to what extent the provision of, for example, outreach counselling might mitigate the effects of inadequate service delivery. In Austria, there are concrete demands with regard to the forms of violence genital mutilation and sexual violence to set up a specialised counselling centre in each province. Online chats to share experience and obtain counselling are available in Finland as part of the projects on stalking and violence in the name of so-called “honour”. It follows, therefore, that opportunities to receive advice are available to a limited extent, even outside the major urban areas. The growing number of follow-up support groups for women leaving women’s shelters in Denmark is a good example of how new locations can be established quite quickly and easily nationwide, even though the responsibility lies in Copenhagen with the “Life without Violence” agency.

Compared to the counselling centres for domestic violence, Austria’s specialist support services for women affected by stalking, violence in the name of so-called “honour”, forced marriage or genital mutilation are poorly funded and staffed. In many cases, funding for their work is not secured beyond the current financial year. Hence, a lot of counselling centres only have minimal human resources at their disposal. In addition, the number of counsellors fluctuates frequently based on the momentary budget situation. Volunteers therefore play an important role in service delivery alongside the professionals.

Ultimately, victims of the different forms of violence may receive unequal treatment due the discrepancies between specialist support services in terms of their number, scope, regional distribution as well as financial and human resources. In frequent cases, these forms of violence affect groups with special needs that are already exposed to a greater risk of discrimination, for example refugee or asylum-seeking women, migrant women or now also women and girls in the second migrant generation. Compounding these deficits is the fact that these groups are already facing language and other barriers when accessing relevant services: For example, although all three countries have specialist counselling centres for migrant women affected by violence that offer their services in multiple languages, even with interpreters where needed, most of the websites that have an English-language version in Finland and Austria are difficult to access and contain less detailed information. In Denmark, it is generally difficult to find information in English.

Some specialist support services are also available to men as victims of violence: the services for victims of domestic violence, stalking and sexual violence in Finland are generally available to

men and women. In Austria, the violence protection centres target men affected by domestic violence as well.²⁵⁵ In contrast, only a few support services for domestic violence in Denmark are aimed at men as victims of violence; some have separate group sessions for women and men. Male victims of stalking and violence in the name of so-called “honour” receive support in Denmark as fixed components of the services. Broadly speaking, it has become evident in recent years, in Scandinavian states especially, that violence against women is viewed more as a separate phenomenon and less in regard to its gender-related characteristics. **This gender-neutral approach** continues to a certain extent in the shelters as well. GREVIO is highly critical of this approach due to the pronounced gender-related nature of the forms of violence covered in the Istanbul Convention.

Despite the call to expand the specialist support services, all three states exhibit a paucity of **valid data** on the number of women at risk and/or affected by stalking, violence in the name of so-called “honour”, forced marriage and genital mutilation. It follows, therefore, that there are no needs analyses that might, as a first step, enable an assessment of the extent to which the number, scope and activities of the specialist support services should be expanded.

5.2 Shelters (Article 23)

Shelters are the central contact points in acute emergency situations in all three states, especially in cases of domestic violence. There are umbrella organisations networking most shelters in Denmark, Austria and Finland. Women can approach the shelters directly or are referred to them by counselling centres or public agencies. They can also call the national telephone hotline to find their nearest shelter.

Denmark has the highest ratio of places to inhabitants with its population of 5.8 million and 48 shelters with 643 places. Finland has 28 shelters with 202 places and a population of 5.5 million; Austria has a population of 8.9 million and provides 30 shelters with 766 places.

Finland falls short of the recommendation defined by the Istanbul Convention for one family place per 10,000 head of population and lacks 352 places to meet the requirement for 2019. In 2018, 27.3 percent of persons seeking protection nationwide had to be referred to alternative accommodation. A more precise analysis of the number of persons seeking protection and rejection rates for Finnish shelters shows, however, that the greatest need for action is in the region of south Finland, which includes Helsinki, while utilisation and rejection rates are low in other parts of the country. Likewise in Denmark, utilisation of shelters is significantly higher in Copenhagen than in the rest of the country. Nevertheless, the country as a whole exceeds the Istanbul Convention recommendation by 71 places. Austria is 100 places short, especially in rural areas. In 2018, 181 women were turned away due to a lack of available places. This indicates that there should be twice as many places. The Austrian government has already decided to create

²⁵⁵ All other specialist support services are aimed exclusively at women (and their children). Specialist support services aimed at men were not included in the research.

100 more places for women affected by violence by 2022. This decision followed an evaluation of the demand for counselling and support.

All shelters in Finland and Austria are open 24/7 to accept persons in need of assistance. Only 65 percent have this capability in Denmark. Averaging between seven and ten places, the shelters in Finland and Denmark are comparatively small.

Denmark and Austria have two shelters that specialise in victims of violence in the name of so-called “honour” and/or forced marriage. There is one shelter in Finland that caters specifically to migrant women. The organisation operating this shelter is also active in the area of violence in the name of so-called “honour”, forced marriage and genital mutilation.

All shelters in Finland have been coordinated and supervised by the state since 2015. Before then, responsibility for service delivery was with the local authorities, although there was no legal obligation to do so. They are currently operated by civil-society organisations and, to a lesser extent, by local authorities. The local authorities in Denmark are legally required to provide shelters. Here as well, they are mainly run by civil-society organisations with a smaller number operated by the local authority. The federal states are responsible for providing shelters in Austria. The women’s shelters are run exclusively by civil-society organisations.

The government is responsible for funding shelters in Finland, in addition to coordination and supervision. In Denmark, roughly half of the budget for shelters comes from the state, while the local authorities pay the rest. The women also pay a small contribution, depending on their means. In Austria, the federal states are mainly responsible for funding, although they each have differing arrangements. Funding is precarious in some states as it is based on temporary contracts and is not enshrined in law. Women are sometimes required to make a contribution to costs here as well.

The shelters in Finland are supervised not only by the National Institute for Health and Welfare, but also by a regulatory and administrative agency at national level and another one at regional level. State funding is only provided if the organisations and local authorities that maintain the shelters adhere to the minimum standards and regulations. Shelters in Denmark are accredited and supervised by one of the five regulatory bodies for social affairs. The individual shelters are required by the local authorities to make the details of their services and circumstances available to the public. Research did not reveal any equivalent supervisory authority for women’s shelters in Austria.

In Denmark, six of the 48 shelters can be accessed by both men and women. They include the two shelters that specialise in violence in the name of so-called “honour”. In Finland, all shelters are accessible for both men and women, apart from one. However, women accounted for 93 percent of adults seeking protection in Finland in 2018. GREVIO’s strong criticism of this gender-neutral approach was already mentioned in the conclusion on the specialist support services (refer to [Chapter 5.1](#)), as it prevents adequate consideration of the gender-based aspects of violence against women as an independent phenomenon. In contrast, none of the women’s shelters in Austria are open to men. Special shelters for men were not researched.

The children of women seeking protection can be accommodated with their mothers in almost all shelters. This is in line with the provisions of the Istanbul Convention. A problematic aspect in this context is that shelters in Denmark are small on average and therefore have difficulties admitting the children. Two shelters in Denmark do not accept children. These projects prioritise housing for

women with addiction problems and mental illnesses. There are access barriers for women with older sons in Austria, where only a few women's shelters offer places to male adolescents over the age of 14. Moreover, not all of the women's shelters have adequate staff resources to care for and support the children due to financial constraints.

Around a third of the shelters in Denmark are accessible for persons with restricted mobility. All shelters in Finland are officially barrier-free. There is a lack of barrier-free rooms in Austria, so persons with restricted mobility can rarely be admitted to a shelter. It was not possible to obtain information on the precise number.

The system of shelters in Finland is open to all women, including migrant women with irregular residence statuses. In contrast, women without a residence permit are not admitted to shelters in Denmark. Asylum-seeking women do, however, have access. In Austria, access for asylum-seeking women and women with precarious residence status is made difficult or even refused entirely. This is caused not least by the responsibility of the national government for basic welfare provisions for asylum-seeking women, while management of the women's shelters falls within the remit of the federal states.

There are no known measures to shorten the stay in any of the three countries. However, most people in need of protection only stay in a shelter for a period lasting from a few days to three months.

In 2018, 18 percent of women stayed no longer than three days in Austria, while the corresponding figure in Finland was 27 percent. In Denmark, victims of physical violence stayed in shelters for three months on average. Women who had exclusively experienced psychological violence remained in the shelter for almost two weeks less; their average stay was 24 days longer in the case of sexual violence. The average length of stay in Finland was 16 days in 2018. In Finland, only 2.7 percent of people stayed longer than two months; in contrast, 24 percent stayed longer than three months in Austria.

All countries make efforts to provide support to women when they leave a shelter: Wide-ranging counselling services are legally required in Denmark and are provided by the local authorities. Some local authorities are already piloting new methods for supporting "critical transitions" with positive outcomes. Furthermore, there are follow-up support groups that facilitate the sharing of experiences and receipt of support at 12 locations. Some services dealing with domestic violence in Finland continue to support women, even after they have left the shelter. However, the follow-up care is not state-regulated in a uniform manner. In Austria, the women's shelters provide some follow-up support for the women in the form of ambulatory counselling services, home visits or telephone calls. Temporary homes are also provided, although it was not possible to determine their number or utilisation.

5.3 Support for victims of sexual violence (Article 25)

In regard to support for victims of sexual violence, Article 25 of the Istanbul Convention distinguishes between sexual violence referral centres that offer immediate support after an

assault and rape crisis centres: The former primarily offer medical treatment and specialised forensic examinations to preserve evidence. Rape crisis centres operate in the area of long-term support, especially in the form of psychological care and legal assistance. However, the Istanbul Convention emphasises that the two types of centre do not need to be provided separately; the services can also be offered within a single centre or spread across various contact points. It is also worth noting that in addition to the specialist services researched in this paper, there are other general medical contact points such as regular hospitals that can offer acute care after sexual violence (even if they are less specialised). However, it is important to have a specialised and experienced team to support traumatised persons in their vulnerable state.

The official recommendations of the Istanbul Convention specify one centre per 200,000 head of population, which includes both rape crisis and sexual violence referral centres.²⁵⁶ This means that Denmark is lacking 20 crisis centres, while Finland lacks 24 – although the specialist support services for domestic violence that can also offer advice concerning sexual violence were not included in this figure. Austria is lacking 29 centres. The victim protection groups were not included here, as they have not yet been classified as specialist crisis centres for victims of sexual violence.

Providing nine connected **sexual violence referral centres**, Denmark has the most comprehensive range of contact points for acute medical-forensic assistance. The centres are located in hospitals, mostly in gynaecological departments. However, the Danish sexual violence referral centres seem less well known to the public, compared to other services that deal with violence against women. This is also connected to Denmark's focus on domestic violence, which pays insufficient attention to sexual violence as an element within domestic violence. Neither Finland nor Austria provide nationwide access to sexual violence referral centres: There are only two sexual violence referral centres in Finland, which opened in Helsinki in 2017 and Turku in 2020. Finland therefore brings up the rear, compared to the other Nordic states. The current action plan states that the centres will be expanded to include other university clinics across the country. However, the momentary implementation level is unclear. There are various contact points for emergency care following a sexual assault in Austria: The 24-hour women's emergency line of the City of Vienna and five autonomous counselling centres across Austria provide acute support to women affected by sexual violence. Furthermore, there are victim protection groups in hospitals across the country: They offer specialised care and support to victims of violence, but do not concentrate solely on sexual violence. Moreover, they are unable to perform forensic examinations, which limits the acute assistance on offer. Viewed numerically, the range of clinical-forensic contact points currently available in Austria seems insufficient. Facilities dealing with this work operate in four cities, although they have different procedures and circumstances. A concept for the nationwide expansion of clinical-forensic networks in Austria has been developed, but not yet implemented. There is a need to provide additional training to health and social care professionals in all three countries as well.

In Denmark, the regions are mainly responsible for funding the sexual violence referral centres. The state-run sexual violence referral centre in Helsinki, Finland, is also funded by the state. It is

²⁵⁶ The validity of this information must be called into question, as the Istanbul Convention lacks clarity in relation to acute or longer-term support. For instance, the comprehensive provision of forensic examination facilities seems indispensable, but apparently cannot be assessed by means of this indicator.

not clear how victim protection groups and clinical-forensic examination centres are funded in Austria. The 24-hour women's emergency line (*Frauennotruf*) is funded by the City of Vienna.

As one of their core tasks, the sexual violence referral centres in Denmark and Finland and the clinical-forensic examination centres in Austria provide medical treatment for victims of sexual violence. In Austria, the victim protection groups cooperate with the hospitals to offer additional on-site medical and nursing care. The requirements for staff qualifications are enshrined in law. The sexual violence referral centres are located in hospitals in all three states, including at a number of university clinics. One of the potential benefits is that it enables rapid referrals to other departments within the hospital, which can mean less stress for the victims.

In addition to the medical treatment, emergency assistance also includes a forensic examination of the victims, including the preservation of DNA evidence if possible. As recommended by the Istanbul Convention, DNA evidence is secured and preserved in all three states, even if the victim does not initially wish to report the crime. The evidence is kept for up to six months in Denmark and Austria. The clinical-medical examination centre in Graz is viewed as an example of good practice for state-of-the-art imaging procedures in the preservation of evidence.

Psychological counselling is another aspect of the care provided to victims of sexual violence: It is only offered to a limited extent in the sexual violence referral centres in Denmark, where only five sessions are available in most cases. This must be considered inadequate in regard to potential trauma and the lack of follow-up care, which is a particular problem in Denmark. Some medium-term services in Austria offer a more extensive form of psychological support. The sexual violence referral centres in Finland appear to have very few expert professionals with a background in psychology, meaning that they are not able to offer longer-term psychological counselling, either.

Most services have limited opening hours. In Finland, even the sexual violence referral centre only offers its full range of services during the day. However, its location within the clinic enables the preservation of DNA evidence in the adjacent gynaecology department. The sexual violence referral centre in Denmark and the 24-hour women's emergency line in Vienna can be reached round-the-clock and offer crisis support after an assault. The centres in Denmark and Finland are designed for people aged 15, 16 or older. The women's emergency line of the City of Vienna is available for women and girls aged 14 and above. One of the centres in Denmark specialises in emergency support for children. In Austria, children can use the clinical-forensic examination centres, and there are victim protection groups for adults, as well as separate ones for children. The sexual violence referral centres are open to persons of all genders in all three states. In 2017, 97 percent of the people seeking assistance in the Helsinki sexual violence referral centre were female. Other medium-term services, such as the ones in Austria, are only available to girls and women. There are no time restrictions on how long after a violent incident a person may approach one of the contact points in Denmark and Austria. According to Amnesty International, persons in Finland can only be admitted to a sexual violence referral centre within one month of the assault. However, the centre in Finland tracks the health of patients for up to six months after their stay. It is not possible at this point to assess how women who do not speak the national language access the information and services. The women's emergency line run by the City of Vienna was the only service for which evidence of interpreting services was located.

In addition to the sexual violence referral centres, **rape crisis centres for supporting victims of sexual violence** may be provided. Longer-term support should consist in particular of psychological counselling, which might also include trauma therapy, as well as legal advice, support and representation by a lawyer if necessary. There are gaps in service delivery for the long-term support of victims of violence, especially in Denmark and Austria. Finland has three centres that offer longer-term support. The civil-society organisations that are active in the area of domestic violence point out that their focus also includes sexual violence and that they can offer advice in this area. In the case of Austria, the offers of acute emergency aid and longer-term assistance for women affected by sexual violence overlap at the women's counselling centres. The violence protection centres for domestic violence offer some support in regions in which there are no women's counselling centres for sexual violence. Austria also has a counselling centre for women with disabilities who have experienced sexual violence.

The rape crisis centres in Finland are funded by state assistance. The women's counselling centres in Austria receive funding from all levels of government. Nevertheless, their funding situation is viewed as precarious and insecure in the long term. Moreover, the conditions of assistance differ due to the federalist structure of the country. The counselling centre for women with disabilities is funded by the City of Vienna and the Federal Ministry for Health and Women.

Both Finland and Austria exhibit clear regional gaps in the distribution of services. Especially the access to services in rural regions is a problem. A concept has already been drafted in Austria to establish more counselling centres for women affected by sexual violence. Its implementation in the federal states that had previously lacked these services will be audited over the period leading up to late November 2020. Most of the longer-term support services are not available 24/7 in all three states. Access is also more difficult for women who do not speak the national language. Austria has a separate counselling centre for women with disabilities who have experienced sexual violence. There are no records of any such service in Finland or Denmark.

The importance of establishing networks between different actors and services that cater to similar needs is clear, not only in acute support, but also and especially in longer-term services for victims of sexual violence: Firstly, this enables the optimisation of procedures for dealing with victims of sexual violence. Secondly, it allows for the pooling and hence the more efficient use of scarce resources. In Austria, for example, the Styrian Network against Sexual Violence brings together government authorities, professionals, institutions and other relevant stakeholders. Moreover, there are plans for a representative of a violence protection centre to be involved in the work of the victim protection groups as well. The comprehensive availability of contact points in all three countries lags behind the requirements. The organisations within the state-coordinated network FMS create an institutional structure in Finland, as they also provide counselling on sexual violence. Stronger cooperation with the three rape crisis centres and the sexual violence referral centre could improve service delivery here. The funding of some services has proved problematic in Austria. At present, planning at political level is focussed on the necessary task of expanding counselling centres for women affected by sexual violence. Nonetheless, it is also indispensable to stabilise the funding of existing services if a sustainable support structure is to be assured. Denmark excels with its institutionalised structure for acute support, but has major gaps in the provision of psychological support to victims over the longer term.

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²⁵⁷ All internet sources are currently available [16/06/2020].

Annex

I. Link list

a. General

- EIGE – European Institute for Gender Equality, Gender Equality Index: <https://eige.europa.eu/gender-equality-index/2015>
- End FGM European Network: <https://www.endfgm.eu/>
- FRA – EU Agency for Fundamental Rights (2012): Survey on gender-specific violence against women: <https://fra.europa.eu/de/publications-and-resources/data-and-maps/gewalt-gegen-frauen-eine-eu-weite-erhebung>
- UN Women – Global Database on Violence against Women: <http://evaw-global-database.unwomen.org/>
- WAVE – Women Against Violence Europe: <https://www.wave-network.org/>

b. Denmark

- “Advice for Life” (“Råd Til Livet”): <https://www.maryfonden.dk/da/r%C3%A5d-til-livet>
- Centre for After-Effects of Sexual Abuse (Center for Seksuelt Misbrugte, CSM Center): <https://csm-danmark.dk/>
- Centre for Rape Victims (Centre for Voldtægtsofre) - <https://www.voldtaegt.dk/>
- Counselling Centre in Cases of Violence against Foreign Women (Vold Mod Udenlandske Kvinder): <https://www.vold-mod-udenlandske-kvinder.dk/>
- Danish Stalking Center (Dansk Stalking Center): <https://www.danskstalkingcenter.dk/>
- Department of Gender Equality (Ligestillingsafdelingen): <http://um.dk/da/ligestilling/>
- Ethnic Youth (Etnisk Ung) (since merged with RED Center): <https://www.etniskung.dk/>
- Life without Violence (Lev Uden Vold): <https://levudenvold.dk/>
- Mary Foundation (Mary Fonden): <https://www.maryfonden.dk/>
- Ministry of Children and Social Affairs (Børne- og Socialministeriet) – violence and crisis: <https://socialministeriet.dk/arbejdsomraader/udsatte-voksne/vold-og-krise/>
- Ministry of Immigration and Integration (Udlændinge- og Integrationsministeriet) – Honour-Based Conflicts and Negative Social Control: <http://uim.dk/arbejdsomrader/aeresrelaterede-konflikter-og-negativ-social-kontrol>
- Mothers’ Aid Foundation (Moedrehjaelpen): <https://moedrehjaelpen.dk/>
- National Board of Social Services (Socialstyrelsen) – intimate relationship violence: <https://socialstyrelsen.dk/voksne/vold-i-naere-relationer>

- National Organisation for Knowledge and Special Advice, VISO (Nationale videns- og specialrådgivningsorganisation) – advice around honour-based conflicts:
<https://socialstyrelsen.dk/viso/udvalgte%20indsatsomraader/aeresrelaterede-konflikter>
- National Organisation of Women’s Shelters, LOKK (Landesorganisation af Kvindekrisecentre): <http://www.lokk.dk/>
- “Out of the Shadow of Violence” (“Ud af voldens skygge”):
<https://moedrehjaelpen.dk/forside/det-goer-vi/radgivning/ud-af-voldens-skygge/>
- RED Center against Honour-Related Conflicts (RED Center mod æresrelaterede konflikter):
<https://red-center.dk/>
- Sector Association for Free Social Advice Denmark (Rådgivnings Danmark):
<https://www.raadgivningsdanmark.dk/>
- “Tell Someone” (“Sig det til nogen”): <https://danner.dk/sigdettilnogen>

c. Finland

- Federation of Mother and Child Homes and Shelters (FMS, Ensi- ja turvakotien liitto):
<https://ensijaturvakotienliitto.fi/en>
- FLHR – Finnish League for Human Rights: <https://ihmisoikeusliitto.fi/english/>
- KoKoNainen Project for Prevention of Female Genital Mutilation:
<https://ihmisoikeusliitto.fi/english/female-genital-mutilation/>
- Ministry of Social Affairs and Health (Sosiaali- ja terveystieteiden ministeriö):
<https://stm.fi/en/combating-domestic-violence>
- Multicultural Women’s Association Finland (MONIKA), also operates the shelter MONA:
<https://monikanaiset.fi/en/>
- National Council for Crime Prevention, for information on the MARAC Method:
<https://rikoksantorjunta.fi/en/marac>
- National Institute for Health and Welfare (Terveystieteiden ja hyvinvoinnin laitos):
<https://thl.fi/en/web/gender-equality/gender-equality-in-finland/wellbeing/gender-based-violence>
- Online Shelter der Federation of Mother and Child Homes and Shelters (FMS):
<https://nettiturvakoti.fi/en>
- Rape Crisis Centre Tukinainen (Raiskauskriisikeskus Tukinainen): <https://tukinainen.fi/>
- Senja – Sensitiveness Model for Professionals of Jurisprudence: <https://senjanetti.fi/en>
- Sexual Assault Support Center (Seri Support Center): <https://www.hus.fi/en/medical-care/hospitals/womens-hospital/outpatient-clinics/Pages/Seri-Support-Center.aspx>
- SÖPU Project against Violence in the Name of So-Called “Honour”: <https://soputila.fi/en>
- Varjo Support Center – Centre for Post-Relationship Stalking: <https://varjosta.fi/tukikeskus-varjo/>

- VIOLA – Free from Violence (member of FMS): <http://www.violary.fi/in-english/>, delivers “My Space, Not Yours!” programme on sexual violence: <http://www.violary.fi/myspace/>

d. Austria

- Advice services for women affected by sexual violence: <http://www.sexuellegewalt.at/>
- Austrian Autonomous Women’s Shelter Network (AÖF): <https://www.aof.at/>
- Faktenatlas Frauenberatungs- und Gewaltschutzeinrichtungen: <http://www.faktenatlas.gv.at/articles/frauenberatung.php>
- Federal Ministry for Women, Families and Youth – violence against women: <https://www.frauen-familien-jugend.bka.gv.at/frauen/gewalt-gegen-frauen.html>
- FRAUEN-HELPLINE Gegen Gewalt: <http://www.frauenhelpline.at/>
- HelpChat – online advice for women and girls affected by sexual violence: <http://www.haltdergewalt.at>
- Network of Austrian Counselling Centres for Women and Girls: <http://www.netzwerk-frauenberatung.at/>
- Plattform gegen Gewalt: <https://www.gewaltinfo.at/plattform/>
- Schrei gegen Gewalt! Information for deaf women about protection against violence: <https://www.schreigengewalt.at/>
- Steirisches Netzwerk GEGEN SEXUALISIERTE GEWALT: <http://www.netzwerk-gegen-sexualisierte-gewalt.at/>
- stopFGM – Austrian platform against female genital mutilation: <http://www.stopfgm.net/>
- Union of Austrian Shelters for Women (ZÖF): <http://www.frauenhaeuser-zoef.at/>
- Violence protection centres and intervention centres in Austria: <http://www.gewaltschutzzentrum.at/>

II. Lists of Translations

a. Denmark (English – Danish)

English	Danish
“Advice for Life”	“Råd til livet”
“Guardian Angel App”	Skytsengel App
“Out of the Shadow of Violence”	“Ud af voldens skygge”
“Tell Someone”	“Sig det til nogen”
Centre for Rape Victims	Centre for Voldtægts ofre
Centre for Victims of Sexual Abuse	Center for Seksuelt Misbrugte, CSM Center
Counselling Centre for Violence against Foreign Women	Vold Mod Udenlandske Kvinder
Danish Social Service Law	Serviceovens
Danish Stalking Center	Dansk Stalking Center
Department of Gender Equality	Ligestillingsafdelingen
Ethnic Youth (since merged with RED Center)	Etnisk Ung
Guideline No. 9096 on Housing for Adults	Vejledning om botilbud m.v. til voksne
Health Act	Sundhedsloven
Health, Social Affairs and Labour Market Fund	Satspuljen
Immigration Service	Udlændingestyrelsen
Integration minister (2001 to 2011)	Integrationsministe
Life without Violence	Lev Uden Vold
Mary Foundation	Mary Fonden
Ministry of Children and Social Affairs	Børne- og Socialministeriet
Ministry of Employment	Beskæftigelsesministeriet
Ministry of Finance	Finansministeriet
Ministry of Foreign Affairs	Udenrigsministeriet
Ministry of Health	Sundheds- og ældreministerier
Ministry of Immigration and Integration	Udlændinge- og Integrationsministeriet
Mothers’ Aid Foundation	Moedrehjælpen
National Board of Social Services	Socialstyrelsen
National Office for Services	Servicestyrelsen
National Organisation for Knowledge and Special Advice, VISO	Nationale videns- og specialrådgivningsorganisation, VISO
National Organisation of Women’s Shelters, LOKK	Landesorganisation af Kvindekrisecentre
National Social Appeals Board	Ankestyrelsen
RED Center against Honour-Related Conflicts	RED Center mod æresrelaterede konflikter
RED Consulting	RED Rådgivning

Sector Association for Free Social Advice Denmark	Rådgivnings Danmark
Social Regulation Act	Socialtilsynslovens
Social Regulatory Bodies	Kommunalbestyrelsen
Victims' Fund	Offerfonden

b. Austria (English – German)

English	German
24-hour women's emergency line	24-Stunden Frauennotruf
Act on Protection Against Violence	Gewaltschutzgesetz
African Women's Organization in Vienna	Afrikanische Frauenorganisation in Wien
Alliance of Autonomous Counselling Centres for Women Affected by Sexual Violence Austria	Bund autonome Frauenberatungsstellen bei sexueller Gewalt Österreich
Association "NINLIL – Empowerment and Advice for Women with Disabilities"	Verein „NINLIL – Empowerment und Beratung für Frauen mit Behinderung“
Austrian violence protection centres	Gewaltschutzzentren Österreichs
Austrian Autonomous Women's Shelter Network	Verein Autonome Österreichische Frauenhäuser (AÖF)
Austrian Institute for Family Research at the University of Vienna	Österreichisches Institut für Familienforschung an der Universität Wien (ÖIF)
Austrian Integration Fund	Österreichischer Integrationsfonds
Austrian Medical Chamber	Österreichische Ärztekammer
Austrian Platform against Genital Mutilation	Österreichische Plattform gegen Genitalverstümmelung
Austrian Society for Forensic Medicine	Österreichische Gesellschaft für Gerichtsmedizin
Austrian Victims of Crime Act	Verbrechensopfergesetz
Code of Criminal Procedure	Strafprozessordnung
Counselling centre "Kraftwerk against Sexual Violence against Women with Learning Difficulties"	Beratungsstelle „Kraftwerk gegen sexuelle Gewalt an Frauen mit Lernschwierigkeiten“
Criminal Law Task Force – Commission on Protection of Victims and Work with Perpetrators	Task Force Strafrecht – Kommission Opferschutz und Täterarbeit
Department for Women and Equality of the City of Graz	Referat Frauen und Gleichstellung der Stadt Graz
Division for Women and Equality of the Federal Chancellery	Frauen- und Gleichstellungssektion im Bundeskanzleramt
Domestic Abuse Intervention Centre Vienna	Wiener Interventionsstelle
Education and Integration of the City of Graz	Abteilung für Bildung und Integration der Stadt Graz
Federal Association of Victim-Centred Work with Perpetrators	Bundesarbeitsgemeinschaft opferorientierte Täterarbeit
Federal Chancellery	Bundeskanzleramt

Federal Ministry of Constitutional Affairs, Reforms, Deregulation and Justice Ministry of Justice	Bundesministerium für Verfassung, Reformen, Deregulierung und Justiz Justizministerium
Federal Ministry of Education and Women's Affairs	Bundesministerium für Bildung und Frauen (BMBF)
Federal Ministry of Europe, Integration and Foreign Affairs	Bundesministerium für Europa, Integration und Äußeres (BMEIA)
Federal Ministry of Health and Women's Affairs	Bundesministerium für Gesundheit und Frauen (BMGF)
Federal Ministry of Labour, Social Affairs, Health, and Consumer Protection	Bundesministerium für Arbeit, Soziales, Gesundheit und Konsumentenschutz
Federal Ministry of the Interior	Bundesministerium für Inneres
FEM Süd Women's Health Centre	Frauengesundheitszentrum FEM Süd
Freedom Party of Austria	Freiheitliche Partei Österreichs (FPÖ)
GREVIO Shadow Report NGO-Coalition	NGO-Koalition GREVIO Schattenbericht
Hospitals and Sanatoria Act	Krankenanalten- und Kuranstaltengesetz
Institute for the Sociology of Law and Criminology	Instituts für Rechts- und Kriminalsoziologie (IRKS)
Institute for Women's and Men's Health	Institut für Frauen- und Männergesundheit
Municipal Department Health and Social Planing of the City of Vienna	Magistratsabteilung Gesundheits- und Sozialplanung der Stadt Wien
Municipal Department Integration and Diversity of the City of Vienna	Magistratsabteilung Integration und Diversität der Stadt Wien
Municipal Department Women's Affairs of the City of Vienna	Magistratsabteilung Frauenservice der Stadt Wien
National Action Committee – National Action Committee to Draw up a National Action Plan under the Direction of the Austrian National Council President Mag. Barbara Prammer, Vice President Dr. Christa Pözlbauer and the EU FGM Coordinator for Austria Etenesh Hadis	Nationales Aktionskomitee – Nationales Aktionskomitee zur Erstellung eines Nationalen Aktionsplans unter der Leitung der österreichischen Nationalratspräsidentin Mag. Barbara Prammer, Vice President Dr. Christa Pözlbauer and the EU FGM Coordinator for Austria Etenesh Hadis
National People's Party	Nationale Volkspartei (NVP)
Nationwide Coordination Centre Against Abduction and Forced Marriage	Bundesweite Koordinationsstelle gegen Verschleppung und Zwangsheirat
NEOS – The New Austria and Liberal Forum	NEOS – Das Neue Österreich und Liberales Forum
Network of of Austrian Counselling Centres for Women and Girls	Netzwerk österreichische Frauen- und Mädchenberatungsstellen
Project “intact – education, awareness-raising and support around female genital mutilation”	Projekts „intact – Aufklärung, Bewusstseinsbildung und Unterstützung bei weiblicher Genitalverstümmelung“
Styrian Network against Sexualised Violence	Steirisches Netzwerk gegen sexualisierte Gewalt
Union of Austrian Shelters for Women	Zusammenschluss Österreichischer Frauenhäuser (ZÖF)
Victim protection groups	Opferschutzgruppen

Vienna Hospital Association	Wiener Krankenanstaltenverbund
Vienna Social Fund	Fonds Soziales Wien
Women-Only Counselling Centre for Migrant Women	Frauenspezifische Beratungsstelle für Migrantinnen (DIVAN)
Working group "abduction and forced marriage"	Arbeitskreis „Verschleppung und Zwangsheirat“

III. Finland: List of FMS member organisations and their areas of activity²⁵⁸

Name und Region	Shelter (Art. 23)	Specialist support services (Art. 22)
Äidit irti synnyttymasennuksesta ÄIMÄ ry Southern Finland	none	no services or information
Etelä-Karjalan perhetyön kehittämisyhdistys ry Southern Finland	none	Crisis support for victims and perpetrators in cases of domestic violence
Etelä-Pohjanmaan Ensi- ja turvakotiyhdistys ry West/central Finland	1	Crisis counselling in cases of domestic violence and custody, emergency flat available for cases of acute crisis
Helsingin ensikoti ry Southern Finland	none	no services or information
Kaapatut Lapset ry Southern Finland	none	no services or information
Kanta-Hämeen perhetyö ry Southern Finland	1	“Violence working group” for instances of actual or threatened violence
Keski-Suomen ensi- ja turvakoti ry West/central Finland	2	“Violence counselling centre”, practical support with injunctions or reporting crimes
Kokkolan ensi- ja turvakoti ry West/central Finland	1	“Department for crises and violence”, workshops and individual-, group- or couples-based work
Kuopion Ensikotiyhdistys ry Eastern Finland	none	Crisis counselling for cases of family-based violence
Kvinnohusföreningen i Jakobstadsnejden rf West/central Finland	none	Accommodation and ambulatory support, crisis meetings for children, support in the event of rape or sexual harassment
Kymenlaakson Ensi- ja turvakotiyhdistys ry Southern Finland	none	Two counselling centres, support in cases of violence in the family or partnership
Lahden ensi- ja turvakoti ry Southern Finland	1	Crisis work in conversation and 24-hour crisis telephone line, therapy service for violent men
Lapin ensi- ja turvakoti ry Northern Finland	1	Crisis centre for people with traumatic experiences, CrisisChat and telephone counselling

²⁵⁸ The list of member organisations of the Federation of Mother and Child Homes and Shelters (Ensi- ja turvakotien liitto, FMS) was taken from the FMS website: <https://ensijaturvakotienliitto.fi/tietoa-liitosta/jasenyhdistykset/>. All other information was taken from the individual websites of the member organisations: The organisation names are hyperlinks to the relevant websites. The allocation to regions was based on the categorisation by the National Institute for Health and Welfare: <https://thl.fi/fi/palvelut-jasoiointi/valtion-sosiaali-ja-terveydenhuollon-erityispalvelut/turvakotipalvelut/turvakodit/turvakotien-yhteystiedot>. For more information on the shelters operated by the member organisations, see table in Annex IV.

Name und Region	Shelter (Art. 23)	Specialist support services (Art. 22)
Lapsen Kengissä ry Eastern Finland	none	Open services provided according to the website. No contact details or services identifiable
Lyömätön Linja Espoossa ry Southern Finland	none	Contact person available on the subject of domestic violence, no specific services
Oulun ensi- ja turvakoti ry Northern Finland	1	“Department for domestic violence and intimate partner violence”, counselling, peer support groups
Pääkaupungin turvakoti ry Southern Finland	3	“Department for domestic violence” for women affected by violence (or perpetrators), support for children aged 4–18, housing unit in Helsinki and 18 transitional flats
Paasikiven Nuorisokylän Säätiö Southern Finland	none	Counselling in cases of domestic violence and intimate partner violence, interpreters available on request
Perheidenpaikka ry Eastern Finland	none	Family flat for violence-related emergencies, €50 per day for adults, €20 per day for children, free for babies
Pienperheyhdistys ry Southern Finland	none	No service offered, but link to <i>Online Shelter</i>
Porin ensi- ja turvakotiyhdistys ry South/west Finland	1	Contact person for people affected by violence, no specific service offered
Raahen ensi- ja turvakoti ry Northern Finland	1	Counselling centre, support in applying for a flat or injunction
Tampereen ensi- ja turvakoti ry West/central Finland	2	Support during transition from shelter into everyday life, open service for work dealing with violence, support for children in the age groups 0–3 and 3–17 who have experienced violence along with their parent
Turun ensi- ja turvakoti ry South/west Finland	1	Support centre for people affected by partner violence and domestic violence, support for children who been exposed to violence
Turvallisen vanhuuden puolesta – Suvanto ry Southern Finland	none	Violence against older people, support helpline and legal representation
Vaasan ensi- ja turvakoti West/central Finland	1	Counselling for people affected by domestic violence and specifically intimate partner violence; for victims and perpetrators
Vantaan Turvakoti ry Southern Finland	1	Department for violence with five contact persons; all parties to domestic violence and

Name und Region	Shelter (Art. 23)	Specialist support services (Art. 22)
		intimate partner violence; special counselling for children
VIOLA – väkivallasta vapaaksi ry Eastern Finland	none	Counselling centre dealing with domestic violence for victims and perpetrators; peer support groups
Vuoksenlaakson vammais- ja perhetyö ry Southern Finland	none	No service offered, but link to <i>Online Shelter</i>
Ylä-Savon Ensi- ja turvakotiyhdistys ry Eastern Finland	none	No services or information

IV. Finland: Overview table of shelters²⁵⁹

Name	Operated by	City	Number of places			Utilisation		Refusal		People seeking protection		Rejection rate	
			2017	2018	2019	2017	2018	2017	2018	2017	2018	2017	2018
Etelä-Pohjanmaan turvakoti	FMS	Seinäjoki		7	7		38.0%		0		130		0%
Hämeenlinnan turvakoti (Kanta-Hämeen)	FMS	Hämeenlinna		7	7		75.0%		22		106		17%
Keski-Suomen ensi- ja turvakotiry	FMS	Äänekoski			7								
Keski-Suomen ensi- ja turvakotiry	FMS	Jyväskylä	5	5	7	92.0%	87.0%	193	140	195	187	50%	43%
Kokkolan ensi- ja turvakotiry	FMS	Kokkola	5	5	5	31.0%	55.0%	0	10	135	161	0%	6%

²⁵⁹ The list of shelters, number of places, people seeking protection, rejection rate and utilisation were taken from the statistical reports of 2017 and 2018 by the National Institute for Health and Welfare (THL 2018; THL 2019). The rejection rate was calculated as follows: Number of rejections / total number of people seeking protection (accepted and rejected). There is only a list of all shelters and their available places for 2019. This is based on forecasts from the statistical report from 2018. Where shelters did not open until 2018 or 2019, the fields for previous years are left empty. The organisations operating the shelters were categorised as 1. Civil-society organisations that are members of the Federation of Mother and Child Homes and Shelters (FMS), 2. Other civil-society organisations (NGOs) and 3. Local authorities.

Name	Operated by	City	Number of places			Utilisation		Refusal		People seeking protection		Rejection rate	
			2017	2018	2019	2017	2018	2017	2018	2017	2018	2017	2018
Lahden ensi- ja turvakoti ry	FMS	Lahti	5	5	5	70.0%	57.0%	124	98	228	238	35%	29%
Lapin ensi- ja turvakoti ry	FMS	Rovaniemi	7	7	7	35.0%	33.0%	0	0	173	120	0%	0%
Oulun ensi- ja turvakoti ry	FMS	Oulu	8	8	8	65.0%	79.0%	29	74	365	388	7%	16%
Pääkaupungin turvakoti ry	FMS	Helsinki	11	11	11	88.0%	90.0%	326	285	374	376	47%	43%
Pääkaupungin turvakoti ry	FMS	Espoo		7	7		88.0%		149		153		49%
Pääkaupungin turvakoti ry	FMS	Helsinki	7	7	7	87.0%	93.0%	116	198	86	184	57%	52%
Porin ensi- ja turvakoti ry	FMS	Pori	7	7	7	41.0%	51.0%	0	0	183	199	0%	0%
Raahen ensi- ja turvakoti ry	FMS	Raahe	5	5	5	25.0%	17.0%	1	0	72	82	1%	0%
Tampereen ensi- ja turvakoti ry	FMS	Tampere		9	9		73.0%		30		277		10%
Tampereen ensi- ja turvakoti ry	FMS	Tampere	8	8	8	89.0%	82.0%	245	125	288	297	46%	30%

Name	Operated by	City	Number of places			Utilisation		Refusal		People seeking protection		Rejection rate	
			2017	2018	2019	2017	2018	2017	2018	2017	2018	2017	2018
Turun ensi- ja turvakoti ry	FMS	Turku	7	10	10	65.0%	49.0%	33	19	263	318	11%	6%
Vaasan ensi- ja turvakoti ry	FMS	Vaasa	5	6	6	56.0%	26.0%	0	0	197	148	0%	0%
Vantaan turvakoti ry	FMS	Vantaa	8	8	14	85.0%	89.0%	355	257	264	247	57%	51%
Sophie Mannerheimin turvakoti	NGO	Helsinki	7	7	7	86.0%	92.0%	72	180	161	235	31%	43%
Turvakoti Mona	NGO	Helsinki	10	10	14	85.0%	88.0%	134	157	264	235	34%	40%
Villa Familia	NGO	Raasepori	4	4	4	60.0%	56.0%	53	51	99	100	35%	34%
Etelä-Karjalan sosiaali- ja terveystoiminta (Eksoten)	Local authority	Imatra	4	4	4	29.0%	32.0%	0	2	61	78	0%	3%
Kainuun turvakoti (Oulu)	Local authority	Salmijärvi	1	1	1	39.0%	68.0%	9	28	18	26	33%	52%
Kotkan turvakoti/Villa Jensen	Local authority	Kotka	3	3	7	46.0%	44.0%	0	0	120	87	0%	0%

Name	Operated by	City	Number of places			Utilisation		Refusal		People seeking protection		Rejection rate	
			2017	2018	2019	2017	2018	2017	2018	2017	2018	2017	2018
Kuopion turvakoti	Local authority	Kuopio	5	5	5	79.0%	77.0%	8	64	214	169	4%	27%
Mikkelin turvakoti (Essoten)	Local authority	Mikkeli	7	7	7	32.0%	32.0%	0	0	197	130	0%	0%
Porvoon kaupungin turvakoti	Local authority	Porvoo	7	9	9	67.0%	50.0%	25	8	202	218	11%	4%
Siun Soten turvakoti	Local authority	Joensuu	7	7	7	54.0%	49.0%	0	8	162	174	0%	4%



Current Publications

- Wittenius, Marie (2020): [Perspectives on the new LGBTI strategy announced by the European Commission](#), Newsletter No. 1/2020.
- Schliffka, Christina (2020): [Demographic change in border regions – Cross-border cooperation to safeguard services of general interest](#), Working Paper No. 20.
- Molter, Sarah / Schliffka, Christina (2020): [Tackling Child Poverty and Social Exclusion – Approaches and Experiences of State Support for Children in Europe](#), Documentation of the European Expert Meeting on 27 May 2019 in Berlin.
- Lange, Katrin / Molter, Sarah (2019): [Digital violence against women: new forms of violence and approaches to fight them in Europe](#), Newsletter No. 2/2019.
- Molter, Sarah / Schliffka, Christina (2019): [Growing up with good opportunities – How can state support reach all children and families?](#) Newsletter No. 1/2019.
- Gärtner, Debora / Reinschmidt, Lena (2019): [Farewell to the supplementary-earner model – but where to now? Aims and requirements of reconciliation policy from a gender equality perspective](#). Documentation of the European Expert Meeting on 1 and 2 October 2018 in Berlin.
- Merkle, Maike (2018): [Volunteering in hospice and palliative care in France and in Poland](#). Working Paper No. 19.



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