

FOCUS ON
GENDER
BOSNIA AND HERZEGOVINA

Issue 01

**Protection from Domestic
Violence and Violence against
Women and the Impact of the
COVID-19 Pandemic**



**COVID-19
RESPONSE**



Sweden
Sverige



UN Women Bosnia and Herzegovina (BiH) issues this alert as a reflection on the response to domestic violence and violence against women with special focus on the impact of the COVID-19 pandemic. This alert, in line with the international standards enshrined in CEDAW¹ and the Istanbul Convention,² provides a snapshot of the availability and accessibility of general and specialised support services for female survivors of violence. Together these services comprise the multisectoral response to cases of domestic violence and violence against women. It concludes with a set of recommendations for national and international stakeholders.

This crisis requires families to stay at home in order to isolate themselves. Yet this can lead to a heightened risk of violence and at the same time restricts women's access to assistance and support services. Such

services are particularly important under the current circumstances. UN Women works with government and civil society to gain a better understanding of the gaps in service provision and to improve multi-sector cooperation on the provision of protection services.

As the most relevant regional treaty on domestic violence and violence against women, the Istanbul Convention refers to general support services (legal, health, social services, financial assistance, housing, education, training and assistance in finding employment) and specialist support services (safe houses, telephone helplines, rape crisis or sexual violence referral centres, and support to child witnesses). In times of crisis, all of these services are considered essential.

UN Women seeks to ensure that the response to the COVID-19 crisis incorporates a gender perspective and that both women and men are equally involved and supported by the crisis response and recovery efforts.

¹ United Nations General Assembly, Convention on the Elimination of All Forms of Discrimination Against Women, United Nations, 1979.

² The Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence, Council of Europe, 2011.



CONTEXT AND EMERGING IMPACT ON GENDER

According to an OSCE survey from 2019, every second woman in Bosnia and Herzegovina has experienced some form of abuse, such as intimate partner violence, stalking or sexual harassment, since the age of 15. Furthermore, 38% of women have experienced psychological, physical and/or sexual violence since the age of 15 at the hands of a partner or non-partner (26% in the Federation of BiH and 39% in Republika Srpska). Moreover, 28% of women have experienced sexual harassment (31% in Republika Srpska and 26% in the Federation of BiH) since the age of 15, and 10% had been sexually harassed in the 12 months prior to the survey (14% in Republika Srpska and 9% in the Federation of BiH). Stalking was reported by 5% of women in both entities.³

ACCESS TO SUPPORT SERVICES

A recent assessment led by USAID⁴ shows that progress in accessing services has been achieved in some parts of the country in terms of the availability and quality of services for survivors of violence against women since 2016. Yet the availability and the quality of these services remain unsatisfactory in BiH (Federation of BiH and Republika Srpska). Access to free legal aid has improved for women survivors of gender based and conflict related sexual violence and legal remedies, the award of restitution and social and healthcare services are improving for survivors of conflict related sexual violence, albeit at a very slow pace.

A study conducted by UN Women into the intersecting barriers to accessing services for protection from domestic violence shows that groups such as Roma women, women with disabilities, rural, elderly and returnee and IDP women either do not trust local institutions that provide services or do not have enough information on how to exercise their rights to such services. At the same time, local service providers claim that they 'treat everyone equally'⁵.

³ OSCE led survey on violence against women in Bosnia and Herzegovina, 2019. <https://bit.ly/2CA8XO3>

⁴ USAID, Gender Analysis for Bosnia and Herzegovina: 2019 Follow-up, August 2019, pp. 2-3. <https://bit.ly/3g0AUNa>

⁵ UN WOMEN, Essential services: Analysis of access to support services (health, police and justice and social services) for women belonging to marginalised groups who have experienced violence, 2019. <https://bit.ly/32Q5G7H>

LEGAL CONTEXT

Despite the absence of unified and endorsed country level policy and legislation against domestic violence, there has been significant progress in terms of legal protection from domestic violence and discrimination since 2016. Yet the situation differs in the two entities where domestic violence is regulated by a host of laws and policies enforced by different ministries, depending on the administrative level of the country.⁶

In Brčko District, the Law on Protection from Domestic Violence was adopted in 2018.⁷ However, some forms of violence against women, such as online violence, have yet to be integrated into the criminal code.

Republika Srpska adopted the most recent amendments in 2019, which came into force in May 2020. These included provisions according to which acts of domestic violence are treated exclusively as criminal acts. Additional revisions included a mandatory safety risk assessment for victims, the signing of protocols for response to domestic violence and the establishment of coordination bodies at the local level. The amendments also foresee the victims' right to include a person of trust in all processes related to legal proceedings.

Legislation on protection from domestic violence is in place in the Federation of BiH. However, it is yet to be fully harmonised with the standards from the Istanbul Convention. This includes the need to adopt the necessary budgets and bylaws to regulate and standardise the work of specialist support services, including safe houses.

SPECIALIST SUPPORT SERVICES IN BiH: SAFE HOUSES⁸

In BiH, shelter in a safe house is provided by eight CSOs with a combined accommodation capacity of 181 beds.⁹

One of the main challenges to ensuring the provision of accommodation in safe houses

lies in compliance with the standards of the Istanbul Convention. The Explanatory Report to the Istanbul Convention recommends safe accommodation in specialised women's shelters, available in every region at a ratio of one family place per every 10,000 of the population.¹⁰ Additionally, the number of shelter places should depend on the actual need.

To date, no crisis centres for rape cases have been established as specialised institutional mechanisms in BiH despite this being one of the criteria from the Istanbul Convention. Given the small number of reported cases of rape and the additional risk of stigmatisation, specialist physicians at healthcare institutions provide services for the victims of rape.

The manual titled 'Clinical Treatment of Cases of Rape'¹¹ was developed for healthcare institutions in both entities. It is a resource for protecting victims of rape and ensures uniform treatment in cases involving violence. Experts have received training, while the CSOs that run the shelters usually provide specialised support for victims of rape.

There are **8 safe houses**
for **women and children**
victims of domestic violence and
other forms of violence in BiH.



Source: UN Women Bosnia and Herzegovina

⁶ Criminal Code of BiH, Law on Gender Equality BiH, Law on Protection of Witnesses under Threat and Vulnerable Witnesses, Criminal Codes of the Federation of BiH and Republika Srpska, Laws on Protection from Domestic Violence in the Federation of BiH and Republika Srpska, Criminal Code of Brčko District and the Law on Protection from Domestic Violence of Brčko District.

⁷ Official Gazette of Brčko District of Bosnia and Herzegovina, No. 7/2018. <https://bit.ly/2ZWYHbu>

⁸ Bosnia and Herzegovina Report on Legislative and Other Measures Giving Effect to the Provisions of the Council of Europe's Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention), pp. 54-57. <https://bit.ly/2Ea1Hso>

⁹ Ibid. According to the Alternative Report of non-Governmental Organisations from Bosnia and Herzegovina to the GREVIO Group (December 2019) there are 171 beds in the safe houses in BiH (p.73).

¹⁰ Council of Europe (2011) Explanatory Report to the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention). <https://bit.ly/3eWtARq>

¹¹ Ministry of Health and UNFPA, Clinical Treatment in Cases of Rape, 2018. <https://bit.ly/39x0uHq>

SAFE HOUSES IN THE FEDERATION OF BIH

In the Federation of BiH, there are five safe houses operated by the following CSOs: the 'Fondacija Lokalne Demokratije' from Sarajevo, the association 'Vive Žene' from Tuzla, the association 'Žene sa Une' from Bihać, the association 'Medica' from Zenica and the association 'Žena BiH' from Mostar. They have a combined capacity of 116 beds.

Based on CSO reports to international monitoring bodies, the assessment of the geographical distribution of the available accommodation capacity in the Federation of BiH notes a gap of 106 beds.¹²

The funding of the safe houses in the Federation of BiH remains one of the biggest challenges to ensuring equal availability and access to such services for the survivors of domestic violence. According to the current Federation of BiH Law on Protection from Domestic Violence, safe houses are funded through cantonal (30%) and entity budgets (70%).

Since the bylaw on the criteria for the establishment and operation of safe houses in the Federation of BiH has been pending adoption since 2013, CSOs providing these services continue to face great uncertainty. This is because their funding is distributed in the form of occasional grants that are insufficient to cover all the expenses related to running a shelter service.

The bylaw developed in 2013 requires CSOs running safe houses to re-register in a way that would preclude them from doing other activities related to the empowerment of women, often funded by international donors.

Based on the provisions of the Law in the entity, the Ministry of Labour and Social Policy of the Federation of BiH allocated funds from the entity budget for financing projects and programmes in 2017 and 2018; part of this funding was intended for the financing of projects related to the accommodation and shelter of victims of torture and violence (safe houses).

There were 264 placements in safe houses in 2017 and 175 in 2018.¹³ Half of those beneficiaries of safe houses were children. Victims mostly spend up to a month at a safe house.

In order to provide uniform protection for victims of domestic violence (children and adults) in the Federation of BiH the preliminary Draft Law on Basic Social Protection included victims of domestic violence as a category of social protection. In 2019, supported by the EU and UN Women, the Safe Network¹⁴ developed a proposal for new draft legislation on protection from domestic violence. The Safe Network will continue to advocate for its adoption in the Federation of BiH in 2020 or 2021.

SAFE HOUSES IN REPUBLIKA SRPSKA

In Republika Srpska there are three safe houses for women and child victims of domestic violence run by the following CSOs: the foundation 'Udružene žene' from Banja Luka, the association 'Budućnost' from Modriča and the foundation 'Lara' from Bijeljina with a combined capacity of 55 available beds.¹⁵

The Ministry of Family, Youth and Sports of Republika Srpska allocates funds four times a year to safe houses for the provision of temporary care, safe accommodation and assistance to victims of domestic violence. The funds are disbursed on the basis of a public call and in compliance with the Law on Protection from Domestic Violence and the 'Rulebook on Safe House Funds Allocation'. The entity budget covers 70% and the municipal budgets cover the remaining 30%.

According to data provided by the Ministry of Family, Youth and Sports of Republika Srpska, 117 survivors of violence were accommodated in safe houses in 2017 and 82 in 2018.

Incidence of all forms of violence against women is likely to increase during crises. Uncertain future, job loss, isolation and reduced social contact and movement increase the risk of domestic violence and other forms of violence against women occurring. A home that is a safe zone for many can become a place of fear for some women.

Some of the data show that in France, for example, cases of domestic violence have increased by 30% since the lockdown began in March, while helplines in Cyprus and Singapore have registered an increase in calls of around 30%.

¹² According to the Alternative Report of non-Governmental Organisations from Bosnia and Herzegovina to the GREVIO Group (December 2019) (p. 78). There are 116 beds in the safe houses in FBiH. <https://bit.ly/2OP55W1>

¹³ Bosnia and Herzegovina Report on Legislative and Other Measures Giving Effect to the Provisions of the Council of Europe's Convention on Preventing and Combatting Violence against Women and Domestic Violence (Istanbul Convention).

¹⁴ Network of CSOs running safe houses in BiH. www.sigurnamreza.ba/.

¹⁵ According to the Alternative Report of non-Governmental Organisations from Bosnia and Herzegovina to the GREVIO Group (December 2019) (p. 73), there are 171 beds in safe houses in BiH. <https://bit.ly/2OP55W1>

SPECIFIC AREAS FOR ATTENTION: DOMESTIC VIOLENCE AND VIOLENCE AGAINST WOMEN DURING CRISES

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SAFE HOUSES IN BiH DURING THE COVID-19 CRISIS

In March 2020, UN Women BiH assessed the impact of the COVID-19 pandemic on the provision of specialised support services (shelters, SOS helplines, psychosocial support and free legal aid) by CSOs running safe houses in BiH. The assessment focused on the major challenges faced by the eight safe houses in BiH during the COVID-19 crisis and the immediate needs in terms of support to be able to keep providing these services. The findings have been instrumental in

redirecting the work of UN Women on ending violence against women and adapting our programming to the current situation.

According to the assessment, all of the safe houses have been open and functional throughout the crisis, most of them with full or almost full occupancy. Some of them did not receive new beneficiaries because of the high risk of infection. Most safe houses lack separate rooms/space for isolation and were forced to refuse new victims, while others reported a rise in cases since the beginning of the crisis.

All of the shelters have discontinued their public activities, such as economic empowerment activities, because of the need to comply with the current social distancing measures. Yet most of the safe houses have continued to provide shelter and food and to cater to the basic needs of survivors and their children as well as provide different forms of treatment for survivors already accommodated in the safe houses. Some organisations provided services for women and even the general public via telephone, email, chat applications such as those aimed at psychosocial support, counselling and legal aid. They also provide support for the population at risk such as, for instance, women who survived war trauma and persons under isolation measures in organisations such as Vive Žene.

There is evident increase in needs for the following support services:



Shelter in
safe houses



Calls to
SOS helplines



Psychosocial support
and counseling



Legal
aid

Some of the needs identified through the assessment included basic protective equipment packages (masks, gloves, hand sanitizer and other disinfection liquids) and some complete packages (suits, boot covers and goggles).

Financial gaps were identified in terms of trained staff and/or volunteers (mostly psychologists to respond to the growing need for psychosocial support and/or to cover staff shortages for reasons such as issued isolation measures, staff belongs to sections of the population at risk, transportation issues, etc.), overheads and other basic needs such as food, clothing and medicine for beneficiaries.

Electronic equipment (tablets and laptops) and TVs were listed as essential for children placed in safe houses to allow them to continue their education.

Other areas of support identified as necessary included tools, guidelines and expertise on how to run a safe house in this type of

crisis, especially from the health/sanitation perspective. Specialised support for the usage of new online tools, such as software for communication and training for staff, was also considered necessary if the safe houses were to continue supporting women who could not leave their home.

The assessment noted that the capacities of service providers were limited since first responders (police, healthcare and the centres for social welfare) were actively engaged in the state of emergency. It was not possible to identify and support children potentially exposed to violence because educational institutions were closed. Moreover, the centres for social welfare were working at limited capacity and only able to process urgent social care cases. Health institutions have drastically reduced public access to general services because of the restrictions on movement, lack of basic personal protective equipment and restricted public transportation. Multi-sector coordination at the local level has been reduced significantly.



In order to help mitigate the consequences of the COVID-19 pandemic, UN Women in BiH has secured comprehensive support for eight safe houses in Bosnia and Herzegovina, with the financial support of Sweden.

RECOMMENDATIONS FOR ACTION

GOVERNMENT

Treat services for women who have experienced violence as essential services. This means that these services should be ranked equal to health, social protection and law enforcement, because they often require lifesaving interventions. This also includes mandatory disinfection measures, priority in COVID-19 testing and the distribution of protective equipment.

Strengthen services, including safe houses, through rapid capacity assessment, safety planning and case management adapted to the context of the current crisis in order to ensure access to support for the survivors of domestic violence and violence against women.

In consultation with CSOs running services for survivors of domestic violence, develop crisis related protocols for the provision of services and especially for indoor facilities.

Expand the capacity of the shelters, including repurposing other spaces such as empty hotels or education institutions in order to comply with the quarantine rules.

Raise awareness among the police and the judiciary about the increase in violence against women and girls during COVID-19 and provide training on how to respond to, protect and refer victims and survivors to appropriate services. No impunity during emergency: The prosecution of perpetrators should not stop during the crisis period.

Support exit strategies for survivors. COVID-19 has had a detrimental effect on the economy and the financial situation of survivors of violence. Many work in the informal economy and are not entitled to government unemployment benefits and other economic measures during the crisis.

Maintain budget lines for specialist services and allocate additional resources to address violence against women and girls within COVID-19 national response plans. When conducting budget revisions (rebalance), ensure that funds earmarked for these purposes are not redirected to cover other priorities. Responding to domestic violence and violence against women is the priority.

INTERNATIONAL DEVELOPMENT PARTNERS

Advocate and push for closer attention by government in order to ensure an adequate response to cases of domestic violence during the crisis. In public speeches, make certain to underline the different experiences of women and men during crises and in particular the need to feel safe at home.

Ensure support for grassroots women's rights organisations, especially those that provide essential services to hard-to-reach, remote and vulnerable sections of the population.

- Ensure women's organisations and women's community organisations participate in the decision-making process so that their specific needs and concerns are identified and included in the response effort. Lead by example.

- Collect data on the needs and the ability of services to respond to the increased demand from women and girls in the context of COVID-19.

- Ensure that data collection efforts do not place women and girls at greater risk of violence and distress.

CIVIL SOCIETY ORGANISATIONS

- Build strong advocacy and awareness about increased violence against women and girls during the COVID-19 pandemic.

- Take advantage of every opportunity for constructive dialogue with government and international actors to point to the gaps and advocate for an improved response as well as to advise on solutions.

- Engage with media outlets and continue to raise the visibility of the issue of increased violence against women and girls, demonstrating how the context of COVID-19 exacerbates the risk factors that drive violence.

- Provide information, including through public service announcements, to survivors of domestic violence on, for example, service referrals or how to use accessible formats for different groups of women to allow them to safely continue their employment.

- Sensitise and engage with the private sector using available global guidance on how to prevent and respond to violence against women and girls during crises.



Photo: World Bank / Hemitsoa Rafalia