



Monthly data collection on the current migration situation in the EU

June 2016 monthly report

1–31 May 2016

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Note the full monthly June 2016 report is available on the FRA website at:

<http://fra.europa.eu/en/theme/asylum-migration-borders/overviews/june-2016>

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Highlights: 1–31 May 2016

New arrivals

Some 100 Syrian and Iraqi refugees, including 44 children, arrive in Italy through a church-financed humanitarian corridor.

Arrivals in Italy double and include hundreds of children and many pregnant women. Several shipwrecks occurred and many dead were recovered. Arrivals to Greece remain stable, although the constant flow congests the hotspots on the Greek islands.

On average, 200 people are stopped daily from entering Hungary from Serbia. Push-back incidents and excessive use of force are reported.

No new arrivals take place in Croatia, few are reported from Slovenia. Arrivals to Germany continue to decrease.

A boat carrying asylum seekers trying to reach Sweden from Denmark capsized.

Many migrants are returned on a daily basis from France to Italy. Some reports claim that Austria sent several asylum seekers to Italy although they neither registered there nor travelled through the country.

Fewer than 600 persons have been relocated from Italy and some 1,140 from Greece to other Member States during the past eight months.

Criminal proceedings

In Bulgaria, migrants are punished for irregular border crossings. Seventeen Iraqi and Syrian nationals, who were apprehended when crossing the border, receive a suspended prison sentence ranging from five to six months as well as a fine.

In Italy, a person objecting to boarding a return flight protests against unfair treatment and is charged with obstructing return and damaging property.

Initial registration and processing

Some 8,500 people who arrived on the Greek islands since 20 March remain there without prospects for a solution.

Excessive use of force during registration and identification is increasingly reported from hotspots in Italy.

Applicants for international protection in Milan, Italy, are pre-screened for eligibility by a self-administered form which, depending on the answers provided, may lead to immediate expulsion.

Judges in Italy express concern about the increasing backlog of appeals against negative asylum decisions.

Asylum seekers entering Hungary through Serbia are almost automatically rejected unless they require urgent medical treatment.

In Germany, Syrians are increasingly granted subsidiary protection rather than refugee status. In March, only some 500 Syrians received subsidiary protection, a number which then increased to over 13,000 in April. Following recent legislative changes, subsidiary protection status holders are barred from bringing their family members to Germany for two years.

Germany also faces a significant shortage of interpreters for the asylum procedure, with video interpretation rarely being used. Interpreters are not required to have any special qualifications other than fluency in the language they work in.

In Sweden, people withdrawing their asylum application and leaving the country outnumber those applying for asylum.

Swedish police hires more staff to carry out immigration controls inside the country.

Reception conditions

Due to decreasing arrivals, (initial) reception centres remain sparsely occupied in Bulgaria, Croatia and Slovenia.

The informal site in Idomeni, Greece, was peacefully evacuated on 24 May. Some of the facilities in northern Greece to which people were brought are in very poor condition.

In Italy, hotspot facilities in Pozzallo and Lampedusa are critically overcrowded, with poor health conditions in Pozzallo, including many cases of scabies, a contagious skin infection. A tuberculosis case is reported at a reception centre in Imperia. A judicial inquiry is launched against the contractor of a facility in Bari for illegal profit making. A reception centre in Ventimiglia has been closed to prevent crossings to France.

Italy adopts a 'Good Reception Charter' outlining basic principles such as small-size facilities, cooperation between municipalities and prefectures, and promoting sustainable integration.

Data indicate that upon arrival, migrants are generally in good health, which then significantly deteriorates due to their living conditions and poor access to healthcare.

Italy will provide new arrivals in Lampedusa and Trapani with a health card valid across the EU, which will facilitate the monitoring of migrants' health conditions. The German Medical Assembly favours a country-wide use of the electronic health card, which so far only some federal states provide to every migrant, irrespective of their legal status.

Transit zones in Hungary along the Serbian border are inadequate. Access is restricted to 20-30 persons, while more than 100 people wait at the fences. Before entering the transit zone, people may have been forced to wait for up to one month without shelter or any facilities in the open air.

Accommodation centres in Sweden report an increase in incidents of violence and assaults.

Reception centres in Bulgaria report a shortage of medical supplies. As in Italy, the infectious skin disease scabies remains a major health problem.

Child protection

Fewer children disappear from transit facilities in Greece, while children disappearing remains common in Sweden and Slovenia. Some children are reported to be exploited in prostitution in Sweden.

In Italy and Greece, many unaccompanied children continue to be accommodated in inadequate hotspot facilities for weeks pending their transfer to other facilities.

Identification of children and families takes a long time in transit zones in Hungary. Some unaccompanied children are left waiting outside the transit zones for days without any care or facilities.

United Nations International Children's Emergency Fund (UNICEF) and civil society criticised facilities for unaccompanied children in Slovenia and considered them unsuitable.

The German government and federal states' governments, as well as welfare organisations, discuss a reduction of child welfare services for unaccompanied children. Child welfare organisations, nevertheless, insist on uniform quality standards of childcare.

Legal, social and policy responses

Italy proposes identification at sea on board of vessels as 'floating hotspots', but civil society criticised the proposal for a lack of adequate procedural safeguards and for healthcare reasons.

Three out of four enterprises in Germany are involved in refugee aid since most businesses consider immigration as an opportunity for the German labour market, according to a recent Bertelsmann Foundation study.

In Germany, the draft Integration Act proposes deeming asylum requests inadmissible if a third country agrees to take back the person concerned, subsequently circumventing standards for considering a third country as safe.

Public and political debates in Germany increasingly discuss violence against Christians at reception centres despite a lack of reliable data and of similar attention to violence against Muslim refugees.

Germany and Sweden further extend the duration of border controls within the Schengen area, which also continue in Austria.

Sweden launches an 'effective return process' initiative aimed at accelerating asylum decisions and returns, increasing detention capacity and deploying increasing numbers of liaison officers to countries of return.

Hate speech

Attacks on reception centres in Germany increased fivefold in 2015 compared with 2014, according to police statistics. Violence against refugees further increased in the first quarter of 2016, despite the significant decrease in new arrivals.

Repeated incidents of hate speech against Muslim asylum seekers and homosexual asylum seekers occur in Umeå, Sweden.

Thematic focus: Gender-based violence

There is increasing evidence that gender-based violence is a major issue for migrant women and girls. A recent field assessment of risks for refugee and migrant women and girls identified instances of sexual and gender-based violence, including early and forced marriage, transactional sex, domestic violence, rape, sexual harassment and physical assault in the country of origin and during the journey to Europe. The United Nations Refugee Agency (UNHCR), United Nations Population Fund (UNFPA) and the Women's Refugee Commission (WRC) in Greece and the former Yugoslav Republic of Macedonia carried out this field assessment and published their initial report on [Protection risks for women and girls in the European refugee and migrant crisis Greece and the former Yugoslav Republic of Macedonia](#).

Sexual and gender-based violence is identified as both a reason why refugees and migrants are leaving countries of origin and first asylum, and a reality for women and girls along the refugee and migration route. The report concludes that *'as the response to the European refugee and migrant crisis is currently not able to prevent or respond to survivors of sexual and gender-based violence in any meaningful way'*.

The European Women's Lobby (EWL) also published a report indicating that *'women and girls fleeing conflicts and travelling to or settling in Europe are at higher risk of suffering from male violence'*. The report calls for gender-sensitive asylum policies and procedures to help women and girls to escape or denounce male violence and access to their full human rights.¹

Despite this evidence, there is an alarming lack of data at the national level on the extent of violence against women and girls who newly arrived or are in need of international protection. This lack of data may fuel the perception that violence against women is not a major feature of this crisis.

The findings of this thematic focus suggest that a number of factors contribute to women not being in a position to report abuse, including:

- a lack of information on how to report such incidents;
- a lack of effective procedures to identify cases;
- insufficient training of staff in charge of recognising gender-based violence.

These shortcomings result not only in an underestimation of this phenomenon but also prevent a coordinated and comprehensive response addressing victims' needs. In addition, as the UNHCR, UNFPA and WRC report underlines, women and girls are also vulnerable to gender-based violence at reception centres and other facilities once they arrive in the EU. While governments, humanitarian actors, EU institutions and agencies as well as civil society organisations make efforts to address these issues, FRA's findings indicate that far more could be done to prevent and address continuing abuses against women and girls.

¹ European Women's Lobby (EWL) (2016), [From conflict to peace? Women's voices - Recommendations on preventing and combating violence against refugee women and girls on the move](#), Brussels, EWL.

Occurrence of gender-based violence

Gender-based violence can occur in the context of conflict, during the migration journey, and in host EU Member States (for example, in reception and/or detention facilities).

In the current report, gender-based violence – focusing on women and girls' experiences of violence – is understood as encompassing physical, sexual and psychological violence, including threats of such acts, coercion or arbitrary deprivation of liberty. The violence relates to incidents that occur in either public or private places. It can therefore encompass violence by family members (intimate partner violence and domestic violence by different family members), and also forms of sexual harassment, alongside other forms of sexual violence, by different perpetrators.

This thematic focus examines gender-based violence in four areas:

- 1. Reporting and data collection**
- 2. Identification, referral of cases of gender-based violence and training**
- 3. Protection and prevention of gender-based violence**
- 4. Medical and legal support services**

Article 21 (1) of the Charter of Fundamental Rights of the European Union prohibits any discrimination based on, among others, sex and sexual orientation, and Article 23 provides for equality between men and women in all areas. Article 3 of the Charter sets out everyone's right 'to respect for his or her physical and mental integrity.'

The Reception Directive² establishes as a general principle that Member States should take into account the specific situation of victims of rape or other forms of psychological, physical or sexual violence when implementing all aspects covered by the directive. In Article 18(4), the directive also requires Member States to take measures '*to prevent assault and gender-based violence, including sexual assault and harassment, within the premises and accommodation centres*'.

Directive 2013/32/EU on granting and withdrawing international protection³ provides for the possibility of a separate examination of the asylum claim for victims of gender-based persecution, even if submitted on common grounds together with other members of their family. Furthermore, Article 15 establishes the requirement for interviewers to take into account personal and general circumstances, such as gender, during the personal interview.

² Directive 2013/33/EU of the European Parliament and of the Council of 26 June 2013 laying down standards for the reception of applicants for international protection (recast), OJ 2013 L 180, Art. 21.

³ Directive 2013/32/EU of the European Parliament and of the Council of 26 June 2013 on common procedures for granting and withdrawing international protection (recast), OJ 2013 L 180, Art. 11 (3).

In a recent resolution,⁴ the European Parliament calls for new gender guidelines based on the situation of female refugees and asylum seekers in the EU. The European Commission has proposed⁵ that the EU ratifies the Istanbul Convention on preventing and combatting violence against women and domestic violence, which also covers violence in connection with migration and asylum (Chapter VII).⁶

Specifically, Articles 60 and 61 of the Istanbul Convention address the protection of refugee women against violence, as well as the application of the principle of non-*refoulement* to victims of gender-based violence. Given that all EU Member States have signed the convention, and some have now ratified it (as of June 2016), the convention provides a solid legal basis for addressing violence against women in its wide-ranging forms, including violence against women who may find themselves in particular situations of vulnerability.

Main findings

- Guidelines or procedures for **identifying** and dealing with victims of gender-based violence are in place or are being developed in almost half of the EU Member States reviewed. They are, however, not always considered effective. Cases of violence are often identified during health checks.
- In most Member States, **training** on identifying and dealing with victims of gender-based violence is either not provided or provided in a non-systematic way.
- **Protection** of newly arrived migrant women who may be vulnerable to and/or are victims of gender-based violence is addressed through a number of measures, including: separate accommodation at reception centres; access to special women's shelters for victims of gender-based violence; medical and psychosocial follow-ups and mechanisms for reporting cases of gender-based violence. Even though all nine Member States covered in this report seem to have one or more measures in place, only a few have procedures that address the response to gender-based violence in a comprehensive and coordinated manner.
- **Measures to prevent gender-based violence** include: awareness raising on gender-based violence at reception centres; infrastructure and housing measures (i.e. separate accommodation and separate sanitary facilities for men and women); inter-agency coordination on the issue; training of staff employed at reception centres; and availability of security measures (for example, security staff and cameras).
- None of the Member States were able to provide **data on reported incidents** of gender-based violence against women and girls who are newly arrived or in need of international protection.

⁴ European Parliament Resolution on the situation of women refugees and asylum seekers in the European Union (2015/2325(INI)), para 13.

⁵ See: http://europa.eu/rapid/press-release_IP-16-549_en.htm.

⁶ Council of Europe, Convention on preventing and combating violence against women and domestic violence (Istanbul Convention), 2011.

- **Provision of information** on what gender-based violence is, how to report it and where to seek help is considered a major weakness in all Member States.
- **Victims themselves are reluctant to report to reception centre authorities or to the police.** In most Member States, authorities and other actors working at reception centres are taking various steps to facilitate and encourage reporting of violence – such as carrying out asylum interviews with women in private rooms with trained staff and interpreters of the same gender, and separated from the husband; information sessions (group or individual); provision of ‘women-only’ spaces, or provision of written information through leaflets or posters.
- Some countries report a lack of access to **legal support services** or adequate interpretation for victims of gender-based violence at reception centres.

Reporting and data collection

None of the Member States were able to provide any statistics on violence against women and girls who are newly arrived or in need of international protection. Anecdotal evidence shared by authorities and civil society refer to cases where women and girls were victims of sexual abuse or physical violence, by family members or strangers, in their home country, during the journey to Europe or in the reception facilities in the host country. Cases of trafficking in women, forced prostitution and forced marriages (also concerning girls) were reported as well. There are also anecdotal reports of violence by personnel at reception facilities⁷ or other related actors.⁸

In some Member States, media or non-governmental organisations (NGOs) have been reporting about violence against women at the reception centres. For example, in Sweden, a television programme has sparked a public discussion concerning a number of reports on gender-based violence in reception facilities, primarily focusing on sexual harassment and threats, but including incidents of sexual abuse where the alleged victim was 10 years old.⁹ Reports claim that the authorities of the Swedish Migration Agency failed to ensure the protection of girls and women due to a lack of intervention and some controversial public declarations, which questioned the reports about violence and the credibility of the

⁷ Germany, Welfare organisation, department of refugees and migration.

⁸ Italy, Information provided by the cooperative ‘Be Free’, interview given on 30 May 2016. See also: www.meltingpot.org/Milano-Violenza-nel-Cie-di-Via-Corelli-assolto-l-ispettore.html#.V06fpFfj7rY.

⁹ The Swedish Television Programme Cold Facts (*Kalla Fakta*), broadcast, 31 May 2016, available at: www.tv4play.se/program/kalla-fakta?video_id=3389752; the Swedish news programme Current Events (*Aktuellt*), broadcast, 30 May 2016, available at: www.svt.se/nyheter/inrikes/migrationsverkets-generaldirektor-vi-slapar-efter.

victims. As a result, the Swedish Migration Agency is reviewing the implementation of its policy and guidelines.¹⁰

An Amnesty International article reports that women staying in refugee camps in Greece are under a lot of pressure and continue to raise their fear of not feeling safe due to the mixed populations in the camps and the mixing, in some cases, of men and women in tents and lack of proper lighting at night.¹¹

The lack of statistics is due to a lack of systematic recording, a lack of centralised data collection systems and possible reluctance by public authorities to share information. Some reception centres collect information on incidents in their own database or registry. For example, in Croatia, the social workers in charge at the reception centres record incidents of violence in the databases of the reception centres and in the asylum department. In Austria, doctors working at the reception facilities have their own database where they also collect data on gender-based violence.¹²

In all Member States, in cases where incidents are reported to the police, the usual case recording would take place according to national standard procedures for gender-based violence cases. However, no disaggregation of data would be possible with regard to incidents occurring at the reception centres.

In Germany, some federal states like Berlin started to document the residence status of offenders in their statistics. Also, in order to assess the caseload of crimes against refugees, the factor 'against accommodation facilities' was included in the federal statistics.¹³

In addition, **a major challenge observed in all Member States is the apparent reluctance of victims themselves to report to reception centre authorities or the police.** The main causes of the low reporting rates are considered to be: the fear of what impact this could have on the asylum claim of the victim and on the perpetrator (especially in cases of domestic violence), the lack of information for the victim on her rights or where to report and seek help, fear of the perpetrator, stigma and cultural norms.

¹⁰ Sweden, Swedish Migration Agency. Mainly refers to: Sweden, 'Handbook: Migration cases' (*Handbok: Migrationsärenden*), available at: www.migrationsverket.se/download/18_5e83388f141c129ba63109a5/1445867195906/handbok_migration_sarenden.pdf.

¹¹ Greece, Amnesty International, 'Nowhere safe: Refugee women on the Greek islands live in constant fear', 7 June 2016.

¹² Austria, Frontline health care staff working at EAST Traiskirchen.

¹³ Germany, Response of the Berlin Senate to a minor interpellation (2016): <https://kleineanfragen.de/berlin/17/18257-kriminalitaet-gegen-und-von-fluechtlinge-n.txt>.

FRA survey on violence against women: under-reporting

The [EU-wide survey on violence against women](#) looks at experiences of physical, sexual and psychological violence among women in all 28 EU Member States. It is based on a random sample of women in the general population. The survey results help to contextualise this thematic focus' findings with respect to refugee women's and girls' experiences of violence.

FRA's survey, based on interviews with 42,000 women, shows that one in three women (33 %) has experienced physical and/or sexual violence since the age of 15.

The survey also shows that violence is systematically under-reported to the authorities. One-third of victims of partner violence (33 %) and one-quarter of victims of non-partner violence (26 %) contacted either the police or some other organisation, such as a victim support organisation, following the most serious incident of violence.

For about one-quarter of victims, feeling ashamed or embarrassed about what happened was the reason for not reporting the most serious incident of sexual violence by a partner or a non-partner to the police or any other organisation.

To facilitate the reporting of gender-based violence, in most Member States, authorities and other actors working at the reception centres are, to varying degrees, taking some form of action, such as carrying out asylum interviews with women in private rooms by trained staff and interpreters of the same gender and separated from the husband (where relevant); information sessions (group or individual); provision of 'women-only' spaces; or provision of written information through leaflets or posters.

For example, in Germany, the Guidelines of the Federal Agency for Migration and Refugees stipulate that in cases where it becomes evident that a female asylum seeker was exposed to violence, a specially trained female interviewer as well as a female interpreter should take over.¹⁴ The female asylum seeker can ask the interviewer to ensure that the husband does not gain knowledge about the content of the interview.¹⁵

The Office of Immigration and Nationality in Hungary provides an official of the same gender to conduct the whole asylum procedure in cases where there is a strong suspicion that the claimant is a victim of gender-based violence or sexual harassment (for example, there are signs of physical abuse or some signalling by the person concerned).

The use of unskilled interpreters, known to the victim or from the same country or cultural background, is also seen in several Members States as an obstacle to women reporting violence. A report in Bulgaria notes that the

¹⁴ Germany, Federal Agency for Refugees and Migration (2010), Instructions for exercising the asylum procedure (*Dienstanweisung Asylverfahren*), p. 192.

¹⁵ Germany, asylum lawyer interviewed in Berlin.

discussion of topics such as discrimination, violence, and sexual health are connected to the experiences and cultural background of the interpreter and they are often not accurately translated. Thus, the translated messages are not always correctly understood by the authorities or other actors.¹⁶

Authorities in Member States would generally consider the request of a woman to change the assigned interpreter; however, due to the large number of proceedings and the lack of trained or female interpreters, this may lead to significant time delays.

Other ways of facilitating complaints include the setting up of independent complaint mechanisms (set up independently of the authorities running the facilities) or complaint boxes at reception or detention centres.

For example, in the German state of North-Rhine-Westphalia, an independent complaint mechanism at reception centres is now considered mandatory.¹⁷ An evaluation of the first three months phase does not show any complaints about violence.¹⁸

In Hungary, the police established complaint boxes at all detention centres in 2011, where victims may anonymously report violence and harassment. The claims placed in the complaint boxes are only opened by the head of the detention centre or a designated staff member. The authorities rarely find complaints placed in these boxes and none have been registered in 2016.¹⁹ In Slovenia, according to the Rules on residing in the Centre for Foreigners, any person accommodated at the centre has the right to file a complaint for violation of rights with the head of the centre.²⁰

Provision of information on what gender-based violence is, how to report violence and where to seek help is considered a major weakness in all Member States. There are, however, a number of initiatives trying to address this. In Greece, for example, information on how to report, make a complaint and seek a possible remedy is made available through leaflets during the registration procedure – not for gender-based violence in particular, but for all vulnerable groups.²¹ In Hungary, as no leaflets are available, information is provided orally by social workers in the refugee camps to all new arrivals, and include available

¹⁶ Bulgaria, Tisheva, G. and Nikolova, A. (2015), Monitoring Report on Sexual and Gender-based Violence in the Context of International Protection in the Republic of Bulgaria in 2014, (*Мониторингов доклад за 2014 г. за сексуално и основано на пола насилие в контекста на международната закрила в Република България*), UNHCR, p. 19, available at: www.unhcr-centraleurope.org/assets/files/report-sgbv-final-final.pdf. For an executive summary in English, see: www.unhcr-centraleurope.org/assets/files/content/where_we_work/pdf_en/bulgaria/sgbv_executive_summary_2015.pdf.

¹⁷ Germany, see: www.landtag.nrw.de/portal/WWW/dokumentenarchiv/Dokument/MMV16-2644.pdf.

¹⁸ Germany, Refugee Council North-Rhine-Westphalia.

¹⁹ Hungary, National Police Headquarters.

²⁰ Slovenia, Article 39, Rules on residing in the Aliens Centre, depositing own financial resources and on the form and content of the card stating permission to remain in the Republic of Slovenia.

²¹ Greece, Reception and Identification Service.

counselling and protective measures for victims of gender-based violence and assurance of the confidentiality of any reports.²²

In Austria, the reception centre in Traiskirchen provides specific consultation hours regarding violence twice a week.²³ Some facilities in Germany provide spaces for women, where only women meet and are given general information about how things work in Germany, like health services and job training, but also information about women's rights and violence. Interpreters and child care are sometimes provided, so all women can take part.²⁴

Identification, referral of cases of gender-based violence and training

Identification and referral of victims of gender-based violence is the cornerstone for an effective response to this phenomenon. Identification is challenging because most women do not report violence due to fear, stigma and impunity for perpetrators. Once victims are identified, a clear referral system should be in place with legal, medical and psychosocial organisations, police, and other support services, working together to provide protection and support to victims.

In nearly half of the Member States reviewed, **guidelines or procedures for identifying and dealing with victims** of gender-based violence are in place or are being developed. For instance, in **Bulgaria**, standard operating procedures (SOPs) for identification and referral of cases of sexual and gender-based violence have been in place since 2007 and are currently being updated.²⁵ Any first signs of possible gender-based violence are already sought at the stage of registration of asylum seekers. However, such incidents rarely emerge at this stage. Therefore, social workers are present at the medical examination, which foreigners undergo immediately after registration, where there is more possibility for such traumas to be declared. Similarly, in **Slovenia**, at the Asylum Home (where asylum seekers are accommodated), an expert group for sexual violence and gender-based violence operates in accordance with the Agreement on standard operative procedures for preventing and addressing cases of sexual violence and gender-based violence.²⁶ In **Sweden**, according to the Migration Agency's management, staff at reception centres have the obligation to identify possible victims of gender-

²² Hungary, Office of Migration and Nationality.

²³ Austria, Frontline health care staff working at EAST Traiskirchen.

²⁴ Germany, for example facilities in Friedland: <http://caritasfriedland.de/frauenzentrum/>.

²⁵ Bulgaria, UNHCR (2007), Standard Operating Procedures for Prevention and Reaction in Cases of Sexual and Gender-Based Violence in the Republic of Bulgaria (*Стандартни оперативни процедури за предотвратяване и ответни действия при сексуално и свързано с пола насилие*), 22 November 2007, available at: www.airm-bg.org/SGBV.pdf.

²⁶ Slovenia, Agreement on standard operative procedures for preventing and reacting in cases of sexual violence and gender-based violence (*Sporazum o standardnih operativnih postopkih za preprečevanje in ukrepanje v primerih spolnega nasilja in nasilja po spolu*).

based violence in all phases of the process of applying for asylum,²⁷ following the indications provided in the Swedish Migration Agency's handbook on migration.²⁸ However, such procedures are not always considered effective. According to NGOs in Bulgaria, for example, people belonging to vulnerable groups are mainly identified by NGOs and volunteers working at the reception centres, particularly the social workers and social mediators of the Bulgarian Red Cross.²⁹

In **Germany**, some Federal States recently started to develop interview guides to identify vulnerable persons, including victims of gender-based violence at reception. In December 2015, the Federal Ministry for Family Affairs, Senior Citizens, Women and Youth in cooperation with UNICEF International and the development bank KfW launched the 'Initiative to protect **children and women** in refugee accommodation centers'³⁰. It aims to improve protection from assault and gender-based violence where migrant children, young people and women are residing through the provision of increased human resources as well as raising awareness and providing training for staff already working there.

In a few Member States, including Croatia, Italy and Hungary, **no specific procedures to identify** victims of gender-based violence were reported, and such cases get addressed only when the person reports directly to the authorities. In some of these Member States, despite the lack of standard procedures to identify cases of gender-based violence, it was reported that identification of such cases may occur at the time of the medical check.

Only a few Member States (Bulgaria and Slovenia) have in place clear **standard operating procedures** which include **referral mechanisms for cases of victims of gender-based violence**. For example, in Bulgaria,³¹ according to the standard operating procedures, victims of gender-based violence can notify any person who they consider may be of help – for example, the police, NGOs, and community leaders – and these persons must refer the victim to authorities that can offer help. The referral system should be presented in the languages of the foreigners' communities and/or in a visual manner, and these presentations should be disseminated among the communities concerned. The standard operating procedures also prescribe means for coordination of the stakeholders involved.

²⁷ Sweden, Migration Agency; Sweden, Police.

²⁸ Sweden, Migration Agency, Handbook: Migration cases (*Handbok: Migrationsärenden*) available at: www.migrationsverket.se/download/18_5e83388f141c129ba63109a5/1445867195906/handbok_migration_sarenden.pdf.

²⁹ Bulgaria, Bulgarian Helsinki Committee (*Български хелзинкски комитет*) (2016), Annual monitoring report of the provision of international protection in Bulgaria (*Годишен доклад за наблюдение на производството за предоставяне на международна закрила в България*), Sofia, Bulgarian Helsinki Committee, p. 9.

³⁰ Germany, Federal Ministry for Family Affairs, Senior Citizens, Women and Youth, Press release, 14 December 2016, available at: www.bmfsfj.de/BMFSFJ/kinder-und-jugend.did=222264.html.

³¹ Bulgaria, UNHCR (2007), Standard Operating Procedures for Prevention and Reaction in Cases of Sexual and Gender-Based Violence in the Republic of Bulgaria (*Стандартни оперативни процедури за предотвратяване и ответни действия при сексуално и свързано с пола насилие*), p. 6, available at: www.airm-bg.org/SGBV.pdf.

Pilot project in Berlin to identify victims of gender-based violence at the registration phase

In Berlin, a pilot project is currently under preparation. The concept is that asylum seekers are interviewed by trained social workers at the registration office in order to identify vulnerability. The questions are based on the EASO tool and other existing guidelines. If women show signs of violence, they are supposed to be offered a facility only for women, access to specialised counselling and information about the possibility of being interviewed by a specialised interviewer in the asylum procedure. If the concept is accepted after the pilot phase, it will be implemented in reception facilities.³²

The Reception Directive³³ requires Member States to provide appropriate **training** to staff working with victims of rape or other serious acts of violence. In most Member States, training on identifying and dealing with victims of gender-based violence is either not provided or provided in a non-systematic way through ad hoc trainings and seminars.

In Italy, Croatia, Hungary, Slovenia and Sweden it was reported that staff is not trained to recognise and deal with gender-based violence. For example, in **Hungary**, the alien police receives regular intercultural trainings,³⁴ but no special training on how to identify and treat people who have suffered trauma,³⁵ including victims of gender-based violence. In **Sweden**, there are no requirements for special training on gender-based violence for staff working at the asylum accommodation centres.³⁶ NGOs occasionally organise this kind of training in some centres on their own initiative.³⁷ In Bulgaria³⁸ and Greece,³⁹ it was reported that staff at reception centres is trained to recognise and deal with victims of gender-based violence. In Austria and Germany, such trainings take place only at some centres. For example, in Austria, training for social workers on gender-based violence is carried out at federal reception centres, but not necessarily at provincial accommodation centres.

³² Germany, Berlin Senate Administration for Work, Integration and Women; Department of Policies of Women and Equality.

³³ Directive 2013/33/EU of the European Parliament and of the Council of 26 June 2013 laying down standards for the reception of applicants for international protection (recast), OJ L 180, Article 25.2.

³⁴ Hungary, National Police Headquarters.

³⁵ Hungary, Office of Migration and Nationality.

³⁶ Sweden, Migration Agency.

³⁷ Sweden, Save the Children; Sweden, Amnesty International; Sweden, the National Organisation for Women's Shelters and Young Women's Shelters in Sweden (ROKS)

³⁸ Bulgaria, State Agency for Refugees.

³⁹ Greece, Reception and Identification Service.

Pilot project using EASO tool

During autumn 2016, the Swedish Migration Agency is planning to carry out a pilot programme based on the EASO tool for identifying persons with special needs,⁴⁰ including persons who have been subjected to rape and other serious forms of psychological, physical or sexual violence. The pilot programme will be carried out in two parts, including one test unit and one reference unit for each part of the tool. The purpose of the test unit is to use the EASO tools, while the reference unit will use existing tools and guidance. The pilot programme will be evaluated through a questionnaire and workshops.⁴¹

Protection and prevention of gender-based violence

Article 18(4) of the Reception Directive⁴² obliges Member States to take measures for the prevention of assault and gender-based violence at reception and accommodation centres. In most Member States, protection of newly arrived migrant women who are vulnerable to violence and who are victims of gender-based violence is addressed through a number of measures, including: separate accommodation at reception centres; access to special women's shelters for victims of gender-based violence; appropriate medical and psychosocial follow-up, and mechanisms for reporting cases of gender-based violence. All Member States seem to have one or another measure in place, but only a few have comprehensive procedures addressing the response to gender-based violence in a more comprehensive and coordinated manner.

Separate accommodation in reception and accommodation facilities for women who are vulnerable to gender-based violence was mentioned in several Member States. At federal centres in Austria, during the reception interview with social workers, women are offered the possibility to have separate accommodation, irrespective of whether they are travelling alone, in company or with family, and irrespective of any suspicion of someone potentially being a victim of gender-based violence. Change of accommodation for women who indicate vulnerabilities is possible at any time.⁴³ At the reception center in Traiskirchen, newly arrived migrant women who mention problems with violence – including domestic violence - are accommodated in separate living quarters for women, where all social workers as well as security staff are women.⁴⁴ In **Greece**, where it was reported that different standards are in place, victims of, and persons

⁴⁰ EASO, *Tool for identification of persons with special needs*, available at: <https://ipsn.easo.europa.eu/>.

⁴¹ Sweden, Migration Agency.

⁴² Directive 2013/33/EU of the European Parliament and of the Council of 26 June 2013 laying down standards for the reception of applicants for international protection (recast), OJ L 180.

⁴³ Austria, Federal Ministry of the Interior, Department III/9 (*Bundesministerium für Inneres, Abteilung III/9 Grundversorgung und Bundesbetreuung*).

⁴⁴ Austria, interview with frontline health care staff working at EAST Traiskirchen.

particularly vulnerable to, gender-based violence are placed in separated areas within the reception facilities and are monitored by the Reception and Identification Service's staff. In **Hungary**, a victim of gender-based violence may be separately accommodated from the others, if she so requests, or her individual circumstances (e.g. mental and physical condition) justify the separation.⁴⁵

Several Member States reported the possibility of referring victims of gender-based violence to specialised women's shelters, providing immediate and safe accommodation to female victims of violence and their children, such as Austria, Greece, Germany, Italy, Hungary and Sweden. In Greece, in case of need, persons who are particularly vulnerable to gender-based violence are transferred to special facilities. There are 21 available shelters for victims of sexual and gender-based violence in Greece.⁴⁶ Information on these mechanisms is available at registration and reception facilities. In Hungary, there is one special accommodation available for victims of sexual violence, torture or rape at the protected shelter in Kiskunhalas. In Sweden, the Swedish Migration Agency must offer safe housing for all persons who are victims of violence or threats of violence.

In some Member States, migrant victims of gender-based violence may have difficulty accessing women's shelters due to legal and administrative barriers. In Sweden, some women's shelters only accept victims referred by the social services. However, adult asylum applicants who are victims of gender-based violence are assisted by the Swedish Migration Agency, not by the social services.⁴⁷ For example, in the city of Gothenburg, there are only two crisis centres that accept female victims of gender-based violence without a referral from the social services.⁴⁸

Legal barriers were mentioned in Germany. According to German immigration law,⁴⁹ asylum seekers are required to live in a first reception facility for a period of up to six months and are subject to legal restrictions on their freedom of movement, i.e. they are not allowed to leave a certain territory – for example, a city – without permission from the competent authority. As a consequence, a woman who flees to a women's shelter without first obtaining permission from the authority may be found to commit an administrative offence. Women who ask the immigration authority to reassign them to a safe shelter may have to face a long waiting time. There is no standardised procedure in place for the authorities to follow in cases involving violence. The competent authorities are not set up to respond to the need to provide protection for women at short notice in such cases.

In a few Member States, a more comprehensive and coordinated set of measures to respond to gender-based violence is in place. In Bulgaria and Slovenia,

⁴⁵ Hungary, National Police Headquarters.

⁴⁶ Greece, interview with UNHCR.

⁴⁷ Sweden, Fridh law firm.

⁴⁸ *Ibid.*

⁴⁹ Germany, Section 47 (1) of the Asylum Procedure Act (*Asylgesetz*).

standard operating procedures specify a number of actions to be taken following identification of cases of gender-based violence. For example, in Slovenia,⁵⁰ at the Asylum Home (the centre where asylum seekers are accommodated), an expert group on sexual violence and gender-based violence operates in accordance with the Agreement on standard operative procedures for preventing and addressing cases of sexual violence and gender-based violence. When the expert group is notified of a case, the group prepares an expert plan to help the victim in each individual case. The expert plan includes an assessment of endangerment, a safety plan, the search for safe accommodation, legal assistance, psychotherapy, expert-psychosocial counselling, workshops for personal growth, leisure/pastime activities and individual help.

The **lack of adequate information** on measures addressing gender-based violence in reception and accommodation facilities was mentioned in several Member States. For example, in Austria, no specific information material on gender-based violence is available at the Traiskirchen reception centre, only the general information sheets about rights and duties of asylum seekers.⁵¹ In Sweden, where no authority has the specific responsibility of ensuring that such information is available, there is very limited information on protective mechanisms at the reception facilities, which is mainly provided by NGOs carrying out preventive work in relation to gender-based violence.

In a number of Member States, including Germany, Hungary, Slovenia and Greece, it was reported that gender-based violence has to be taken into account as a **possible obstacle to return a person**. For example, in **Germany**, according to law⁵², a foreigner may not be deported to a state in which his or her life or liberty is under threat on account of his or her race, religion, nationality, membership of a certain social group or political convictions. Women who suffered from gender-based violence may fall within the criterion 'social group'. In **Greece**⁵³ and **Slovenia**⁵⁴, the fact that a person has identified her/himself as being a victim of gender-based violence is taken into account as a possible obstacle to return the person concerned and her vulnerability to gender-based violence is also taken into account in such decisions. In **Hungary**, the police shares the information about potential victims of gender-based violence with the Office of Immigration and Nationality. The Office states that they always have an obligation to examine the inadmissibility of an asylum claim; however, it specifically takes violence into consideration when applying the safe third-country rule.⁵⁵

Measures to **prevent** gender-based violence include infrastructure and housing measures (i.e. separate accommodation for single women and other women

⁵⁰ Slovenia, Agreement on standard operative procedures for preventing and reacting in cases of sexual violence and gender-based violence (*Sporazum o standardnih operativnih postopkih za preprečevanje in ukrepanje v primerih spolnega nasilja in nasilja po spolu*).

⁵¹ Austria, Diakonie Austria (*Diakonie Österreich*).

⁵² Germany, Section 60 (1) of the Act on the Residence, Economic Activity and Integration of Foreigners in the Federal Territory the Prohibition of deportation (*Aufenthaltsgesetz*).

⁵³ Greece, Reception and Identification Service.

⁵⁴ Slovenia, Centre for Foreigners in Postojna (*Center za tujce Postojna*), Senior Police Inspector.

⁵⁵ Hungary, Office of Immigration and Nationality.

vulnerable to gender-based violence; separate sanitary facilities for men and women - toilets and bathroom facilities); awareness raising (i.e. community meetings on gender-based violence); inter-agency coordination (i.e. regular meetings attended by all relevant agencies and NGOs); training of staff employed at reception centres (see above); availability of security measures (e.g. security staff and cameras).

In most Member States, the principal mechanism for preventing gender-based violence is separate accommodation (as reported in Austria, Croatia, Germany, Hungary and Slovenia). For example, in Hungary, at the open reception centres, single women are accommodated in a separated accommodation space and families are separated from single men. The special accommodation has sanitary facilities, private spaces that are separated from those available for single men. In **Germany**, there are first reception facilities for vulnerable groups or only for women.⁵⁶ The main problem is the lack of binding and uniform standards. Federal state laws on reception conditions stipulate obligations on construction conditions – for example, how many square metres have to be provided per person. But they do not address the safety of women. This has been criticised without success on several occasions. Reports by women’s organisations revealed several problems, like sanitary facilities reachable only through unlit corridors, not separated for men and women and not lockable.⁵⁷

Information and awareness-raising sessions on gender-based violence are organised in a few Member States. As an illustration, in Austria, workshops on violence prevention and talks about experiences of violence are held twice a week at federal reception centres.⁵⁸ **Security measures** are also used; for example, in Hungary, the entrance and the corridor leading to sanitary facilities are equipped with cameras in all refugee camps. In Austria, there is always security and support staff present at federal reception centres.

Specific gaps in relation to prevention of gender-based violence were mentioned in Italy, Sweden and Slovenia. In **Italy**, preventive measures are often not in place. As for hotspots, the number of people reaching the Italian coast on a daily basis is so high (and constantly on the rise) that it is very difficult to sort them into women (and children) and men, and to guarantee suitable means of transport to transfer them from hotspots to reception centres; the practicalities of doing this with respect to families (containing both men and women) should also be noted.⁵⁹ In Sweden, detention facilities have separate female units, but there is no requirement for asylum accommodation centres to have private spaces or separate areas for women.⁶⁰ Save the Children and Amnesty International received reports

⁵⁶ More information available at: www.abendblatt.de/hamburg/article205992603/Hamburg-plant-spezielle-Unterkuenfte-nur-fuer-Frauen.html.

⁵⁷ Germany, see, for example, Women in Exile and Friends: www.women-in-exile.net/?p=3017.

⁵⁸ Austria, Federal Ministry of the Interior, Department III/9 (*Bundesministerium für Inneres, Abteilung III/9 Grundversorgung und Bundesbetreuung*).

⁵⁹ Italy, information provided by the IOM Mission in Rome (interview held on 25 May 2016).

⁶⁰ Sweden, Migration Agency.

from women staying at asylum accommodation centres indicating that they need separate toilets and shower facilities because they do not feel safe using these facilities alone, especially during evenings or night-time.⁶¹ The Swedish Health and Social Care Inspectorate observed that gender-based violence perspectives require more focus on the future.⁶²

Concerns were raised in some Member States regarding the security of unaccompanied girls. The Swedish Health and Social Care Inspectorate observed that no specific measures are in place to target unaccompanied girls at centres for unaccompanied children.⁶³ In **Slovenia**, the Legal Information Centre of NGOs pointed out that unaccompanied girls are not accommodated separately in the Asylum Home, but rather in the separate part for all unaccompanied youth.⁶⁴ The Slovenian Philanthropy also noted that it is very easy to go from one ward to another at the Asylum Home, increasing the risk of gender-based violence.⁶⁵

Only two Member States (Bulgaria and Sweden) have **specific procedures to identify and respond to children as victims of gender-based violence**. In Sweden, children who are victims of gender-based violence or perpetrators of such crimes must be referred to social services in the municipality that has the obligation to support and help the children.⁶⁶ However, as noted by Save the Children, there are challenges in addressing this problem because these issues are often considered difficult to talk about and are surrounded by fear and prejudice.⁶⁷ Bulgaria has standard operating procedures in place both for children as victims and perpetrators of gender-based violence.

Standard operating procedures addressing children as victims and perpetrators of gender-based violence in Bulgaria⁶⁸

In Bulgaria, the standard operational procedures have a special chapter on children as victims and perpetrators of gender-based violence. In every case involving a child victim, officers with knowledge about the psychosocial needs of children should be included. When a child victim is interviewed, members of the family should not be present because the violence may be committed by some of them. Parents/guardians, however, should be notified about the interview. Child victims should be informed about the options for receiving health, psychological and legal

⁶¹ Sweden, Save the Children; Sweden, Amnesty International.

⁶² Sweden, Health and Social Care Inspectorate.

⁶³ Sweden, Save the Children; Sweden, Amnesty International.

⁶⁴ Slovenia, Legal Information Centre of NGOs (*Pravnoinformacijski center nevladnih organizacij, PIC*).

⁶⁵ *Ibid.*

⁶⁶ Sweden, Act concerning Social Services (*Socialtjänstlagen*) (2001:453), chapter 5, paragraph 1-3, available at www.riksdagen.se/sv/dokument-lagar/dokument/svensk-forfattningssamling/socialtjanstlag-2001453_sfs-2001-453.

⁶⁷ Sweden, Save the Children.

⁶⁸ Bulgaria, UNHCR (2007), Standard Operating Procedures for Prevention and Reaction in Cases of Sexual and Gender-Based Violence in the Republic of Bulgaria (*Стандартни оперативни процедури за предотвратяване и ответни действия при сексуално и свързано с пола насилие*), p. 7, available at: www.airm-bg.org/SGBV.pdf.

help and protection, based on their right to take part in decisions affecting them. Child-friendly techniques should be used to encourage the children to share their views. In cases of child perpetrators of violence, the procedures also address children as perpetrators. They deem the use of custody as a measure of last resort and require providing special legal aid and protection against abuse for child perpetrators in custody. Hearings should be speedy, help for psychosocial rehabilitation should be provided and child perpetrators should be informed about procedural specifics and be aided in giving evidence.

In all other Member States (Austria⁶⁹, Germany, Greece⁷⁰, Croatia, Hungary, Italy and Slovenia⁷¹), no special procedures for child victims are foreseen. In Germany, the recently proposed initiative on prevention and protection against violence drafted by UNCEF and the Federal Ministry for Family Affairs, Senior Citizens, Women and Youth includes recommendations that respond to the specific needs of children as victims of gender-based violence. However, the initiative has not yet been implemented.

Medical and legal support services

All selected Member States provide specialised services for women, generally outside the facilities. At the Traiskirchen centre in Austria, a gynaecologist is available within the facility.⁷² In most of the Member States, authorities pay attention to ensuring gender balance among health professionals working at reception centres. In Slovenia, where most of the medical staff and the translators at the centres are male, a female doctor and translator can be provided upon request.⁷³

Even though access to healthcare is sometimes provided under the same conditions as for nationals, there can be practical challenges in accessing health services. For example, in Germany, it has been observed that women lack information about existing services, experience administrative delays with insurance, lack interpreters, or cannot afford translation costs, which are not covered by the health insurance.⁷⁴ In Bulgaria, asylum seekers have difficulties registering with a General Practitioner (GP) due to a lack of interpreters. Reporting formalities that each GP has to comply with regarding his/her patients is another challenge. When asylum seekers leave the country, the GP cannot comply with

⁶⁹ Austria, Federal Ministry of the Interior, Department III/9 (*Bundesministerium für Inneres, Abteilung III/9 Grundversorgung und Bundesbetreuung*).

⁷⁰ Greece, Reception and Identification Service.

⁷¹ Slovenia, Centre for Foreigners in Postojna (*Center za tujce Postojna*), Senior Police Inspector.

⁷² Austria, interview with frontline healthcare staff working at EAST Traiskirchen.

⁷³ Slovenia, Slovenian Philanthropy (*Slovenska filantropija*).

⁷⁴ Germany, Welfare organisation, department of health.

these formalities and may be sanctioned.⁷⁵ For this reason, GPs sometimes refuse to treat asylum seekers.

With respect to specifically addressing gender-based violence, a few Member States use the initial health screening to identify victims. For example, questions concerning violence are always asked during the mandatory health screening in Hungary. In Sweden, a voluntary health screening includes both a medical examination and a health dialogue on the current health status.⁷⁶ This is conducted individually and the nurse asks about the situation in the country of origin, their travel route to Sweden, family background and health history. If, during the conversation on health status, there are signs that the patients are suffering psychiatric stress or are victims of violence, they are referred to a counsellor or a midwife.⁷⁷

The Reception Directive⁷⁸ requires Member States to provide access to appropriate medical and psychological treatment or care for persons who have been subjected to rape or other serious acts of violence. **Providing healthcare assistance and psychosocial support to migrant women who are victims of gender-based violence** was mentioned in several Member States. In **Croatia**, when cases of gender-based violence are reported to the police, psychosocial help and support is provided at the reception centre.⁷⁹ In **Hungary**, a victim of gender-based violence is entitled to proper medical assistance. In **Austria**, if issues concerning gender-based violence emerge at the Traiskirchen reception centre, three different courses of action reportedly take place, depending on the gravity of the issue. If acute measures are necessary, female victims of gender-based violence are brought to the psychiatric ward of the hospital in Baden, and child victims are brought to the specialised ward in Hinterbrühl. In less acute situations, the possibility to schedule a separate appointment with a psychologist is offered. If the migrant women mention problems that are not acute, they receive an information sheet and may schedule a separate appointment with a psychologist on the same day.⁸⁰

⁷⁵ Bulgaria, State Agency for Refugees.

⁷⁶ Sweden, National Board of Health and Welfare, National Board of Health and Welfare's regulations and general advice concerning the health screenings of asylum seekers and others (*Socialstyrelsens föreskrifter och allmänna råd om hälsoundersökning av asylsökande m.fl. (SOSFS 2011:11)*), available at: www.socialstyrelsen.se/sosfs/2011-11.

⁷⁷ Sweden, Health Centre in Boden, County council of Norrbotten.

⁷⁸ Directive 2013/33/EU of the European Parliament and of the Council of 26 June 2013 laying down standards for the reception of applicants for international protection (recast), OJ L 180, article 25.1.

⁷⁹ Croatia, Ministry of Interior (*Ministarstvo unutarnjih poslova*), email received on 4 June 2016.

⁸⁰ Austria, frontline healthcare staff working at EAST Traiskirchen.

Improving the provision of healthcare for victims of gender-based violence at pre-removal centres (Rome, Italy)

At the CIE (*Centro di identificazione e espulsione*) pre-removal centre in Rome, a protocol has recently been approved that aims to establish a cooperation system between the CIE management and the local healthcare assistance service.⁸¹ This protocol allows specialised doctors to have access to the centre.

Some countries report a lack of access to **legal support services** at reception centres. In Hungary, there are reports that in some cases the authorities make it difficult to establish contact with claimants, especially if the claim was rejected and the claimant is waiting for deportation.⁸² In Germany, whether legal staff has access to reception centres depends on the decision of the operator of the facilities. Lawyers from several federal states have reported that they were denied access in the past. In these situations, operators referred to the possibility of making an appointment outside the facilities.⁸³

In cases of **gender-based violence, Member States do not provide specialised legal support services, but refer cases to women’s organisations working with victims of gender-based violence.** According to the Legal Information Centre in Slovenia, victims rarely file a complaint, let alone a lawsuit.⁸⁴ In Austria, families are usually provided legal counselling together. However, if a woman is particularly quiet in a counselling session, the counsellors try to speak with her alone.⁸⁵

Whenever possible, Member States try to provide legal support to women in terms of female lawyers and female translators, such as in Austria⁸⁶, Croatia⁸⁷ and Sweden.⁸⁸ In practice, many Member States face challenges with the availability of translators and lawyers; thus, requests for female lawyers and translators cannot always be accommodated.

⁸¹ Italy, information provided by the cooperative ‘Be Free’, interview given on 30 May 2016.

⁸² Hungary, UNHCR.

⁸³ Germany, asylum lawyer, Berlin.

⁸⁴ Slovenia, Centre for Foreigners in Postojna (*Center za tujce Postojna*), Senior Police Inspector.

⁸⁵ Austria, Association Human Rights Austria.

⁸⁶ *Ibid.*

⁸⁷ Croatia, Law on International and Temporary Protection (Official Gazette 70/15), Article 14/3.

⁸⁸ Sweden, Swedish Migration Agency.