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THIRD PART

3.1 Promising practises in EU Member States

A practice is a particular way of carrying out an action aimed at a target group. It may concern an entire programme or may simply refer to a usual procedure or targeted intervention or a way of looking at things from a practical and not just a theoretical point of view. A practice is usually a set of activities or an initiative aimed at achieving an overall result, which can have a positive impact on a specific situation. In this sense, and in the context of the mental health of victims of gender-based violence, practices have the potential to effectively address issues that can reduce the consequences and effects of traumatic experiences they have undergone, with a positive impact on their lives and possible social reintegration. In order to identify and compare good practises and promising interventions related to the mental health impact of violence in the context of migration, Comunità Papa Giovanni XXIII, Differenza Donna and Fundaciòn de solidaridad Amaranta mapped practises from the following countries: Belgium, Bulgaria, Finland, France, Germany, Greece, Italy, the Netherlands, Spain and Sweden. Fifteen promising practices were chosen to be included in this Report, divided into the following categories: mental health training initiatives; counselling and support for migrant women in severe vulnerability; artistic and expressive workshops, psychosocial and mental health support pathways, multi-sectoral approaches.



3.1.1 Mental health training initiatives

Training of health workers with narrative ethno-systemic approach



ETNOSI
SCUOLA DI PSICOTERAPIA
ETNO*SYSTEMICO*NARRATIVA

Ethnopsi, Italy

Website www.ethnopsi.it

CONTEXT

The School of Ethno-Systemic Narrative Psychotherapy in Italy periodically collaborates with NGOs, local health and social services and also with the Departments of Mental Health. The Departments of Mental Health are the set of structures and services that, since the 1980s, have had the task of taking charge of the demand for care, assistance and protection of mental health within the territory defined by the local health authority. The training course promoted in 2020 and entitled *The mental health of forced migrants: construction of a territorial "care" pathway in the Marche Region* involved the mental health centres, which in the public service in Italy are the first reference centres for citizens with mental distress. They coordinate all prevention, treatment and rehabilitation interventions for citizens suffering from psychiatric pathologies. Mental health centres are headed by a multi-professional team consisting of at least one psychiatrist, one psychologist, one social worker and one professional nurse.

DESCRIPTION

The online course, consisting of 13 seminars, conferences, and specific weekly case supervision, aimed to develop an organisational model of integrated territorial psychiatry in the region and to adopt a common culturally sensitive approach that respects the systems to which the subject belongs. In addition, the ethno psychiatric skills for understanding the different cultural horizons, decoding the signs of suffering, taking care of the person - from prevention to treatment and rehabilitation - and the actions aimed at facilitating and stabilising the relationship between the public health service and private subjects have been deepened. Ethno Psychiatric theory and technique are based on the narration of one's own biographical journey in order to underline the holding character of suffering: a tool to relocate events in an order and a constellation with meaning. Ethnopsychiatry deals with the mental health of migrants. In the migratory experience, especially if it is forced and accompanied by traumatising events, storytelling and memory can be a valid moment of re-organisation of long-term projects and desires, which are often blocked or broken. It is precisely the practice of storytelling that allows us to co-construct with the patient, and with the ethno-psychiatric team, the meaning of migratory violence, thus controlling its devastating effects and the repeated crises that cannot be contained.

TARGET

The direct beneficiaries are 50 operators, nurses, social workers, psychologists, psychiatrists of the Departments of Mental Health of the Marche Region and of some social cooperatives in the territory working with migrants. The indirect beneficiaries are the migrants taken care of by the cooperatives in the area: asylum seekers, forced migrants and victims of trafficking for the purpose of sexual exploitation, labour and begging; women victims of forced marriages, genital mutilation, forced abortion, domestic violence, rape.

FUNDING

The course led by the Ethnopsi trainers was part of a FAMI project implemented by On the Road with the involvement of the Departments of Mental Health of the Marche Region, funded by the Ministry of Interior and co-financed by the EU Asylum, Migration and Integration Fund (FAMI) 2014-2020.

3.1.2 Artistic and expressive workshops

Theatre workshop for people with mental disorders



Pope John XXIII Community Association, Italy

Website www.apg23.org

CONTEXT

Pope John XXIII is an international organisation, founded in 1968 by Don Oreste Benzi, and committed to the fight against marginalisation and poverty. Since 1996, it has set up an anti-trafficking service, particularly for victims of sexual exploitation, with an intersectional and intercultural approach. In fact, it is currently registered in the register of implementing bodies of the single programme for the immersion of trafficking. The service includes 27 street units and 5 indoor first contact teams; reception in shelters and/or family houses providing health care, psychological support and legal assistance, language and vocational training, reintegration into the world of work, social integration, financial education and, in the case of mothers, maternity support; awareness raising and political action to remove the causes of serious forms of exploitation and gender-based violence, prevention initiatives in schools and universities.

This good practice is carried out by the Pope John XXIII social cooperative, which was created by Don Benzi's Community to provide a therapeutic programme for marginalised people with alcohol, drug or gambling addictions and mental health problems.

DESCRIPTION

The aim of the theatrical and expressive workshop, run by educators and art therapists, is to regain possession of one's dignity, expressing one's emotions and talents, and a healthy relationship with one's body. The workshop is based on the principles of nonviolent empathic communication, with a focus on gender equality. Moreover, the beneficiaries are protagonists in the construction of skills useful in the process of social and work reintegration. They also experience the value of human rights and develop self-awareness to improve relationships in the community in which they live and in the society in which they will have to re-integrate, overcoming the stigma of mental health. The first phase is about expressing one's emotions and building empathy. Beneficiaries learn which conditions hinder them, they also improve active listening, attention to emotions and needs, practice orientation in space and time, breathing, posture, eye and body contact. The second phase consists of externalisation and staging, starting from the identification of a theme, an author, a literary/poetic text through improvisation to the construction of the script and set design.

TARGET

The beneficiaries are marginalised people, women and men, who live in the "San Giovanni Battista" shelter, sent by the mental health services and territorial social services or also by the pathological addiction services or other shelter communities. They include women prisoners and their children under alternative sentences, in cooperation with the General Inspectorate of Prison Chaplains, and women victims of sexual exploitation and domestic violence. Generally, the victims of sexual exploitation come from Italy, Nigeria, Romania, Albania, Bulgaria, Moldova, Ukraine and Brazil and are between 25 and 50 years old. Victims of domestic violence are older women between 35 and 50 years old.

FUNDING

The workshop receives annual contributions from municipal public institutions or local foundations or private donations and is also included in the life project established for each beneficiary by the social services.

3.1.3 Counselling and support to migrant women in conditions of serious vulnerability

Counselling centres for women detained in deportation centres



Differenza Donna, Italy

Website www.differenzadonna.org/

CONTEXT

Differenza Donna has been involved since the 1990s in the development of specific forms of accommodation dedicated to women involved in human trafficking. It is registered in the register of the implementing bodies of the single programme for the emergence of trafficking, and has supported hundreds of women in their escape from the condition of sexual exploitation and in their social and judicial paths, also participating actively in court proceedings by acting as civil plaintiff before the Assize Courts which, in addition to the crime of exploitation of prostitution and trafficking, have also ascertained the condition of enslavement of women. It also contributed to raising the awareness of the authorities on the vulnerability of asylum seekers, promoting a collaboration formalised first in the referral system before the Territorial Commissions and then in the cooperation protocol signed with section XVIII of the Court of Rome for the recognition of victims among asylum seekers challenging the refusal orders of the Territorial Commissions for International Protection. In addition to the reception of victims of sexual and/or labour exploitation or begging in the "Prendi il volo" centre, it has set up a desk at the Centre of Permanence for Repatriation (C.P.R.) in Ponte Galeria with the aim of bringing to light situations of exploitation. Being present at the C.P.R., which has a capacity of 125 places, with a weekly desk allows us to monitor the situation and support the women victims on Italian territory. Over the years, Differenza Donna has also been able to support other women within the C.P.R. who have been victims of gender-based persecution, forced marriages, female genital mutilation, ill-treatment and stalking, thanks to the strategic presence of expert operators. Over the years, they have been supported not only in their exit from the C.P.R. but also in their escape from violence. In every C.P.R. (not only nationally, but also in the countries of the European Union) the presence of an association dealing with gender-based violence is therefore recommended.

DESCRIPTION

Differenza Donna has structured a specific reception methodology and at the same time a network, which also includes the staff of the C.P.R., consultants, doctors and territorial commissions. It is a desk that is relevant to the emergence of all forms of violence and exploitation, to the taking into account and support of victims and that uses a gender, intersectional and feminist perspective. In addition to specialised operators, lawyers are involved who are experts in immigration, criminal, civil and juvenile law. Differenza Donna has an institutional network (hospitals, advice centres) where, if necessary, the women received or hosted can be sent for trauma-related treatment. Over the years, Differenza Donna has also made use of ethno-psychiatric associations for individual or group consultations. Since 2016, with the project Stay - Start to talk about you, financed by the Lazio Region, the counter activity for migrant women waiting for repatriation has been implemented at Ponte Galeria.

TARGET

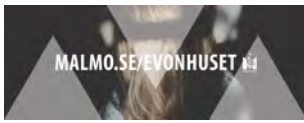
It is aimed at women victims of trafficking for the purpose of sexual/labour exploitation and/or begging. The Help Desk within the Ponte Galeria C.P.R. welcomes women detainees without valid residence documents. Prevalent age 20-35 years. The nationality is mainly Nigerian and Romanian.

FINANCING

Two years of funding by the Lazio Region and the Equal Opportunities Department.

3.1.4 Counselling and support for migrant women in a severely vulnerable situation

Advice and support centre for people in the sex trade



Evonhuset, Sweden

Website <https://malmo.se/evonhuset>

CONTEXT

In Sweden, prostitution is considered to be a social problem; therefore the Evonhuset service offers help and support to anyone who has fallen into the web of the sex trade. The legislative framework is broad in the sense that trafficking involves migrants and therefore the whole legal context of asylum law is linked to it. There are two main practices within this activity.

Evonhuset is the reception, listening and support centre for people who sell or buy sex, their relatives, as well as people with pornography addiction problems. The following services are provided here: support interviews, advice and support in organising one's life, support in contacts with the authorities and in finding work and training. The service is aimed at people aged 15 and over.

Regional coordinators also work in Malmö municipality to strengthen support for victims of trafficking and people involved in prostitution, as well as victims of forced marriages, organ sales, exploitation for begging, etc. The coordinators intervene personally to support victims of trafficking and prostitution. The coordinators intervene personally to support the beneficiaries in knowing and putting into practice their rights and in networking with local authorities and organisations. Another function of the coordinators is to identify gaps in the system, including through relations with migration agencies and the police.

DESCRIPTION

All the operators involved are socionom or sociologists and not therapists. The modalities they refer to in the support interviews are linked to the "advice and support" method. This method is inspired by cognitive-behavioural therapy and is based on motivational interviewing but also on grief counselling. They are also trained to support the relatives of the beneficiaries. The counselling is based on an alliance and cooperation with the beneficiary, on the stimulation of personal motivation and on the fact that no predefined help is provided, but that together we try to find a way, and to shape the ways of helping that can be functional for the beneficiary ensuring her involvement.

TARGET

Evonhuset meets more people who are rooted in Sweden, i.e. Swedish by birth or residents with a regular residence permit. The majority of the people she meets sell sex, followed by those who buy sex, their relatives and finally people with pornography addiction. In the work of regional coordinators, however, many undocumented or homeless people of various nationalities are encountered. The majority of people contacted come from Romania, Nigeria, Vietnam, Thailand, Sweden, Syria, Ghana and others.

FUNDING

Evonhuset is fully funded by the municipality of Malmö, and the two regional coordinators are also employed by the municipality of Malmö, with co-financing from a national authority called Nationellt metodstöd mot prostitution och människohandel (Methodical support group against prostitution and human trafficking).

3.1.5 Psychosocial and mental health support pathways

Assistance and accompaniment of victims of political violence, ill-treatment and torture



Red Sir[a], Spain

Website <http://redsira.psicosocial.net/>

CONTEXT

Sira is a network of therapeutic, legal and psychosocial support in a context of violence. It is based in Madrid, has a team also in Barcelona and a network of professionals in Valencia and the Basque Country. Its objective is to provide comprehensive and specific assistance and support to victims of various forms of personal and structural violence that cause psychological distress. Sira provides specialised multidisciplinary clinical care to individuals or groups and especially to those who have been directly or indirectly affected by traumatic situations, losses or crises and survivors of political violence or disasters. The main 'areas of rupture' identified over the years are related to the feeling of loss of control over one's life and the ontological and identity impact of traumatic experiences. Sira works around the narrative, trying to re-signify those elements of experience that cause the most suffering.

DESCRIPTION

The approach used in accompaniment starts from a psychosocial and transcultural perspective, incorporating key elements of the cultural understanding of symptoms into the recovery process. Individual, couple and family sessions are carried out. As far as possible, work is carried out in the mother tongue of the person in care. To this end, priority is given to collaboration with interpreters, who are given a key role in the interaction.

In the area of clinical care, individual psychiatric care, brief counselling interventions, including walk-in therapy, and crisis intervention and psychotherapeutic accompaniment with a multidisciplinary approach are carried out. Therapeutic accompaniment is understood as an integral process in which all professionals involved in the person's repair process can be involved. Within the clinical or psychotherapeutic intervention, body techniques - mindfulness - are incorporated. In addition to clinical care, Sira's team works with medical-psychological expertise in relation to strategic litigation of cases, criminal complaint or defence proceedings in relation to situations of aggression, mistreatment or institutional violence or violence between individuals, when related to human rights violations, psycho-legal assessment processes, preparation and accompaniment of witnesses and victims, and reports for international protection applications. On some occasions, it also works with community psychosocial accompaniment.

TARGET

People who have been victims of various forms of personal and structural violence.

Women beneficiaries come from different parts of the country: Spain (34.5%), Latin America (33.4%), West Africa (17.8%), Middle East (4.3%), Maghreb (3.9%), Romania and Russia (3.9%) and East Africa (2.2%).

FUNDING

Funding is indirect public, from sub-contracts from various organisations within the international protection system; private funding from organisations or individuals who can pay for the services they receive; other grants and private donations. Currently, funding is also provided by the UN Voluntary Fund for Victims of Torture.

3.1.6 Psychosocial and mental health support pathways

Psychological support in the AFJ Foyer



Foyer AFJ, France

Website www.foyer-afj.fr/

CONTEXT

AFJ is an association specialising in the accommodation, protection and support of women who are victims of trafficking for the purpose of sexual exploitation. Thanks to 17 shelters and a multidisciplinary professional team, global and daily support is offered: material, medical, psychological, educational, administrative and legal support. The association offers a safe environment by working on a humanist approach that contributes to the creation of a bond of trust. Community life allows residents to feel surrounded and to share their experiences with women who have had the same experience. It also allows them to work on coexistence and openness to other cultures.

DESCRIPTION

The action in the Foyer AFJ is structured around four areas of activity for the identification and orientation of victims of trafficking and sexual exploitation. Before any treatment, the team carries out a rapid assessment of the person's situation and psychological state. The first contact is made by telephone on the initiative of the organisation (association, police, hospital, etc.) that wishes to refer the victim. An appointment is then made to assess the situation outside the foyer and an explanation of how the structure works is given. Then the team decides and proposes a date of entry to the person concerned. During the identification phase, special attention is given to women in a socially and psychologically vulnerable situation. As soon as they arrive at the Foyer, women are welcomed by the psychologist who makes a psychological assessment to identify various disorders and traumas. If necessary, they can be referred to a psychiatrist for pharmacological treatment. Psychological assistance continues throughout their stay at the Foyer. The psychologists offer regular individual interviews and group workshops once a week, conversation workshops and art therapy. There are 14 places available in the Foyer and 3 in a semi-autonomy consisting of flats opened in 2016 on an experimental basis and intended for victims engaged in legal proceedings against the exploitation network. Support is also guaranteed for victims accepted after leaving the Foyer on the basis of global and multidisciplinary support adapted to each victim.

TARGET

The Foyer is open to women over 18 years old. The average age of the residents is 25. The Foyer does not accept minors or women with children. 88% of the victims are foreign women of 26 different nationalities and 12% of the victims are French women. Most of the women have post-traumatic disorders. Each year, the team of professionals and volunteers accompany about 40 women. More than 800 victims have been helped since 2000.

FUNDING

The Foyer is financed by public institutions for up to two thirds and by private donors for one third. During the last 5 years, only three public funders (DRIHL, La Maire de Paris, Cour d'Appel de Paris) representing 55% of the budget have dedicated a constant amount to support the Foyer.

3.1.7 Psychosocial and mental health support pathways

Health and psychiatric care according to the Open Dialogue approach



Open Dialogue, Finland

Website <https://open-dialogue.net/>

CONTEXT

Since the early 1980s, a new type of psychiatric system has been developed, now known as the open dialogue system of care. The development of this approach was based on the vision of considering the patient and his or her family as active participants in planning and implementation, rather than as objects of treatment (Seikkula et al., 1995). A modification of a family-oriented approach to the treatment of psychosis, the needs-adapted approach developed by Alanen and his team (Alanen, Lehtinen, Rakkolainen, & Aaltonen, 1991), was applied and further developed in Western Lapland, Finland. The concrete objectives were to develop a comprehensive family - and network - centred psychiatric treatment model at the border between the outpatient and inpatient care systems. Since the 1990s, the entire psychiatric service system of the West Lapland Health District has been organised according to Open Dialogue principles and applied to the treatment of any mental health problem, not just psychotic crisis. The aim of the work is to respond promptly to crises, while trusting and supporting the resources of the family and other network members. From the beginning of treatment, care is taken to listen carefully to the concerns and hopes of the persons involved in the treatment in order to allow for a dialogic interaction. Open dialogue is widely implemented in different contexts around the world, where the aim is to increase people's psychological and emotional resources, emphasising human rights and empowerment in care and support processes.

DESCRIPTION

The central idea of psychiatric services is based on collaboration. There is an active position in creating and maintaining dialogue with partners and other agencies in the community. Service provision in Western Lapland is based on the seven principles of open dialogue. These principles were developed on the basis of a study carried out in the area since 1980. The basic principles on which the services are built and which they aim for in their clinical practice are: immediate help, a social network perspective, flexibility and mobility, responsibility, psychological continuity, tolerance of uncertainty and dialogue.

TARGET

Dialogue-based, needs-adapted and collaborative practice is used in all situations where people are in crisis. Women and men use the services equally. Since all kinds of crises are treated in Finland, violence and abuse are part of these situations. In these cases, cooperation with social services is very important. The approach to victims also involves targeted interventions such as accommodation in a shelter (which is 130 km away and belongs to another organisation) and a trauma-informed therapy team. The people involved are mainly Finnish-speaking. But in several cities groups of refugees from Syria and Iraq are received and with this target group the collaboration of interpreters alongside mental health professionals is indispensable.

FUNDING

Health care systems in Finland are supported by public funding.

3.1.8 Psychosocial and mental health support pathways

Counselling and support for victims of honour-based violence, forced marriage and abduction



Papatya, Germany

www.verschleppung.papatya.org/

CONTEXT

In Germany there are in particular two networks dedicated to forced marriages in which Papatya takes part. The Federal Conference against Forced Marriages (BuKo) is a network of protection organisations and counselling centres specialised in forced marriages, committed to the exchange of experiences and the development of common policy demands. The Berlin Working Group against Forced Marriages, founded in 2001 on Papatya's initiative, is coordinated by the Officer for Women and Equal Opportunities of the district of Friedrichshain-Kreuzberg and is composed of representatives of reception centres, counselling centres, schools, youth welfare offices, immigration officials and other institutions. Papatya is thus an interculturally competent team of women in the fields of social work, psychology, politics and law, which for over 35 years has been providing advice and assistance to girls and young women - who have to flee their families - currently in Turkish, Kurdish, Arabic, Farsi, English and German.

DESCRIPTION

Papatya offers three forms of support. Papatya Shelter is a secret shelter with 8 places available for girls and young women facing family violence, forced marriage, honour-based violence. Established in 1986 because Turkish girls could not be adequately protected in ordinary youth welfare institutions (parents would turn up at the service premises and take them back to their families by force and staff would be threatened), this specialised shelter has become a model for shelters in other German federal states. Entry is based on voluntariness and the stay should last about 6-8 weeks but can be longer. The young people are seen as a resource for others facing the same problems, perceiving that "they are not just one black sheep". During the stay, they are supported in developing future perspectives - in cooperation with the youth welfare office, the job centre and other institutions - including returning to their parents or relatives or being sent to a youth community/women's home in Berlin or outside.

SIBEL is an anonymous and free counselling line, mainly via email, for victims of honour-based violence, forced marriage and abduction but also for men, LGBTIQ and couples opposed by their families. Since 2004, advice has been offered in German, English and Turkish.

Since 2013, the Coordination Centre against Abduction and Forced Marriage has been offering advice and help to girls and young women who are afraid of being deported abroad, of being forced into marriage abroad, or who are already detained abroad against their will. Once taken to Turkey, Iraq, Lebanon or another country, most of them without a passport or mobile phone, they are unable to defend themselves against marriage to an unloved man.

TARGET

The shelter is for girls and young women (aged 13 to 21) with a migration background. The girls are admitted under Section 42, the young women under Section 41 of the Children and Youth Welfare Act.

FUNDING Papatya/Shelter is funded by the Berlin Youth Senate and the local youth welfare authorities. The online counselling is funded by the Berlin Women's Senate from 2020.

3.1.9 Psychosocial and mental health support pathways

Person-centred psychotherapeutic accompaniment based on the hermeneutic phenomenological method of competence-centred psychotherapeutic interviewing



Fundación de solidaridad Amaranta, Spain
Website www.fundacionamaranta.org/

CONTEXT

Psychological and psychotherapeutic assistance is included in the programme of Fundación de solidaridad Amaranta, which has maintained its services during the pandemic through telematic means. The Foundation operates in Algeciras, Asturias, Granada, Balearic Islands, Logroño, Ourense and Valencia. Women victims of sexual exploitation and/or prostitution access psychotherapeutic accompaniment because they manifest a personal mismatch and are referred by services or other institutions. In April 2021, the plenary session of the Sectoral Conference on Equality (CSI) approved the creation of comprehensive 24-hour support services for victims of sexual violence. And in 2022, an implementation of care and protection services in a single Trafficking Victims Plan and a new Sexual Freedom Act is planned from the Comprehensive Plan to Combat Trafficking in Women and Girls for Sexual Exploitation 2015-2018.

DESCRIPTION

Accompaniment, in the person-centred approach, better defines the psychotherapeutic action, approaching in a multidimensional way the world experienced by the woman (satisfaction of vital, social and cultural, affective and emotional, cognitive and intellectual, existential and spiritual needs). The person's experience does not categorise her in the symptom and does not 'mutilate' her, leaving out the construction of her subjectivity and the consideration of the person as the bearer of a life project. Psychotherapeutic intervention must be aimed at promoting conditions that facilitate the development of one's potential and resources in solving problems related to social well-being. Mental health is understood as a woman's "social well-being", which also means meeting needs and developing potentialities/competences. At a methodological level it is necessary to work with the phenomenon that emerges at the moment: it is the woman who gives the direction to the pathway, she allows the psychotherapist to enter her existence. It is necessary to work on the perception of oneself, of one's own reactions and on the expression of one's own vision of the world, of emotions and feelings. The woman and the therapist are involved in an intersubjective interaction and narrative intervention, in which she is the focus and the therapist the instrument/resonance box.

TARGET

The target group includes a wide diversity of subjects: women from Spain, Latin America and the Caribbean, Eastern and Sub-Saharan countries. They are single parents and/or have several children in their country of origin, or are women from large families or different households. They are used to surviving with their children and have been forced to migrate to support their families. They have poor literacy, limited health education and culture. They are often lured by psychological and physical networks, or by deception with job expectations, or by emotional-dependent and perverse ties, or through Yu Yu (ritual submission and family threat).

FUNDING

Law 11/2020 of the General State Budget for 2021 provides grants for organisations that provide assistance to victims of sexual exploitation and trafficking. Some of Fundación de solidaridad Amaranta's services are therefore guaranteed by the Ministry of Equality and others by regional governments.

3.1.10 Psychosocial and mental health support pathways

Group intervention programme for women victims of GBV



ROSARIO VACA FERRER

Centre of Psychology Rosario Vaca Ferrer, Spain

Website www.rosariovaca.com

CONTEXT

The centre's programme is aimed at women who have experienced various forms of violence. Through the programme, not only women with PTSD are treated but also those with other psychological problems resulting from GBV and which can be equally disabling. The objectives of the programme include improving the quality of women's lives, recognition, clarification of personal values (partner, family...), behavioural activation, taking actions that promote values to protect themselves and solve problems in their lives (legal, economic...), recognising indicators of abuse in a relationship, acceptance of personal history, and feelings and thoughts related to traumatic experiences. This programme is implemented, together with other therapeutic approaches, within the Group Psychological Assistance Service for women victims of gender-based violence by a partner or ex-partner. It is managed by UTE FUNPSI (Spanish Foundation of Psychology and Health) and FUNCOP (Foundation for the Training and Practice of Psychology) created by the professional orders of Psychology of Eastern and Western Andalusia. More concretely, the group intervention programme for women victims of gender-based violence with Contextual Therapies is practised in the province of Cadiz, Spain.

DESCRIPTION

The group intervention - consisting of 6 to 12 women - starts from a hypothesis about possible problematic behaviours and factors common to all participants, namely guilt feelings, justification of violence, difficulty in identifying the risk, not recognising the effect of violence on sons and daughters, not wanting to leave the relationship or feeling unable to do so, and others. Therapeutic goals are defined according to the assessment and the concrete problem of the participants. In general, the goals include making the woman feel recognised, promoting acceptance of her negative feelings and emotions, putting emphasis on acting, making decisions and engaging in actions that will lead her to a more meaningful and valuable life, even if initially symptoms persist and may even increase. In the first phase of the workshop where the first contact between the women and the therapist takes place, the assessment begins: the women start to tell about their experience and the basis is laid for creating a good therapeutic relationship and connection in the group, contextualising the violence. The second phase addresses in depth the issues raised in the initial sessions. The 11 sessions and the objectives are adapted to the needs of the participants and address issues related to the couple, the concept of love, the need to choose and protect oneself, guilt and feelings of fear and pain about the experiences. Strategies are offered to manage anxiety, to get out of a depressive situation, to deal with legal problems, or difficulties with sons and daughters and the ability to make decisions. In this perspective, working on one's own values, and acting from them, is essential.

TARGET

Migrant and Spanish women victims of violence, resident in Andalusia, who have suffered psychological, sexual, economic and physical violence and who have been victims of violence by their partner or ex-partner, or victims of trafficking, sexual exploitation, forced marriage, among others.

FUNDING

The service was launched in 2005 by the collaboration between the Andalusian Institute of Women and the Official School of Psychology of Western and Eastern Andalusia.

3.1.11 Psychosocial and mental health support pathways

Prevention and rehabilitation programme for people affected by or at risk of violence



Фондация П.У.Л.С. Puls Foundation, Bulgari

Website www.pulsfoundation.org/bg/

CONTEXT

The priority of the PULS Foundation, which for over 20 years has been providing assistance and support to victims of violence and/or trafficking through a crisis centre, hotline and counselling programme, is to create and establish effective regional treatment programmes for children, adolescents, adults - and their families - who have experienced or are at risk of violence. In fact, Puls launched in 2020 the first national monitoring of existing institutional policies and practises in the field of gender-based violence in collaboration with the Centre for the Study of Democracy. To date, there is no such monitoring review in Bulgaria, despite data reporting that 1 in 4 women experience violence. The aim is to facilitate the effective implementation of the Child Protection Act, the Domestic Violence Act and the Anti-Trafficking Act in Bulgaria. In 2008 Puls opened a crisis unit for emergency accommodation of women experiencing violence and a shelter for long-term accommodation of people living on the streets to change their life situation.

DESCRIPTION

Pulse Foundation offers two types of activities that can be considered good practice in Bulgaria: prevention and rehabilitation. The first action addresses attitudinal and institutional prejudices that exist in cases of domestic violence and child abuse and adopts an educational approach and planning of community structures; the second one refers to identified cases of violence and adopts an individual and family approach. The first step is to ensure an emergency intervention in cases of violence before any family or individual care and trauma treatment. The social worker therefore cooperates with the Child Protection Department, the Children's Pedagogical Unit, the Public Prosecutor's Office and the Court. The multidisciplinary approach enables the provision of therapeutic psychological, social, legal and employment support. Also included in the programme is the Centre for Social Rehabilitation and Integration "Tatyana Arsova" for the provision of housing and recovery services after trauma. Inclusion in the Crisis Centre for people and children who are victims of violence and/or at risk enables the mobilisation of resources to overcome the situation of dependency on the abuser. Accommodation is guaranteed immediately and can only be provided on the basis of the application-declaration submitted by the beneficiary. When the person is accompanied by a child and is his/her parent or guardian, or a person providing substitute care, the child is accommodated with her/him. When the victim of domestic violence is a pregnant woman or the mother of a child under the age of 3 and is at risk of abandoning the child, she is immediately accommodated with the child. Training courses for exploitation specialists, preventive courses for children, young people and adults at risk of trafficking are also promoted to build behaviours based on equality.

TARGET

The target population are men, women and children who have suffered domestic violence, physical violence, mental violence, sexual violence, abandonment, trafficking for the purpose of labour exploitation, for the purpose of sexual exploitation/prostitution, for the purpose of begging, for the purpose of pickpocketing, for the purpose of marriage. Mainly Bulgarian nationals but also other nationalities: Ukrainians, Arabs etc.

FUNDING

The funding of the Crisis Centre is guaranteed by the State Budget and other practices are implemented on the basis of project funding.

3.1.12 Psychosocial and mental health support pathways

Identification and integration programme through peer mentors



Sisa Project, Germany - Spain - Italy

Website <https://sisa-europe.eu/>

CONTEXT

The Identification and Integration through Mentoring Programme is part of the project SISA. Strengthening the Identification and Integration of Survivors of Sex Trafficking from West Africa through a Peer-to-Peer-Approach and through Transnational Dublin Return Counselling and Assistance, promoted by German NGOs in cooperation with Italian and Spanish NGOs. Trafficking survivors selected by NGOs in Germany are trained to identify potential victims among asylum seekers using a peer-to-peer approach. In this way, more women receive information about their rights, get in touch with social workers to whom they can report their victimisation during the asylum process and are informed about services offered by specialised local NGOs. In Spain and Italy, the peer mentoring programme aims to support the reception and integration of West African victims already identified by NGOs. In Spain, migrants in an irregular situation have access to emergency public health care. However, in order to access specialised services, they must be registered and have a social security number (and to obtain this, a residence permit is required). Due to the lack of public services, NGOs often provide psychiatric assistance and given the difficulty of many women to rely on psychological assistance services, they also offer therapeutic paths. In Italy, the provision of services is carried out through a single programme of emergency, social assistance and integration of territorial social services and/or private individuals, registered in section II of the register of associations and bodies that carry out activities in favour of immigrants (art.52 D.P.R. 394/1999). Access to emergency health services is guaranteed to all, as is short-term pharmacological treatment. Psychotherapeutic and/or rehabilitative support paths are rarely free of charge and guaranteed by the public service if the women are not residents. This is why women - and their children - expelled from northern Europe, under the Dublin Regulation, are at greater risk of not receiving assistance.

DESCRIPTION

The Peer Mentoring Programme for Identification aims to develop a training course that equips survivors to identify other victims within refugee reception centres in Germany. This educational strategy is based on the influence of peers within a group in terms of behaviour and social skills because they are also perceived as credible subjects. Peers are in turn supported by supervisors in their emotional stabilisation. The peer mentoring programme for integration takes place in two phases: a training phase (6 months) and an active phase (12 months). In the active phase, the mentors are able to use the information and skills they have acquired to support the integration of their peers, receiving support from the trainers and a constant exchange with the team of operators.

TARGET

The beneficiaries of the peer support are survivors of trafficking, mostly between 18 and 34 years old, Nigerian and Cameroonian, mothers with minors, also with disabilities, and have been victims of GBV in the countries of origin and transit: gang rapes, forced marriages, domestic violence, torture, forced abortion, FGM. Women assisted through Transnational Dublin return counselling and assistance were also exposed to the risk of re-victimisation and negative psychological impact (PTSD).

FUNDING

The practice is funded by the EU Asylum, Migration and Integration Fund for two years.

3.1.13 Psychosocial and mental health support pathways

Support in the transition from shelter to independence



Payoke, Belgium
Website www.payoke.be/

CONTEXT

Founded in Antwerp in 1987, Payoke was the first anti-trafficking NGO in Europe. Payoke, an organisation fighting against the trade and exploitation of people, aims with its Life Beyond the Shelter project to ensure a long-term positive integration of trafficked third-country nationals into the host society by strengthening support in the transition from shelter life to independence through practical, innovative and empowering tools and solutions. Implemented by five victim support organisations from Belgium, Germany, Italy and Spain, LIBES was designed to produce and implement real-life solutions such as a long-term intervention kit, an independent living skills training curriculum, dedicated helplines, a mentoring programme, a befriending programme and a transitional house.

DESCRIPTION

An independent living skills curriculum has been developed that addresses areas such as managing personal finances, accessibility of public administration services, finding a flat, managing a family, finding a job, communication between cultures and self-care. In Antwerp, Belgium, to facilitate beneficiaries in their transition to independence Payoke offers a temporary residence to meet their special needs and provides centralised support services to strengthen their self-sufficiency. It has also developed a training curriculum that teaches independent living skills and offers survivors guidance for daily living on topics such as budgeting, home management, self-care, safety, social skills, finding work and housing, and navigating government systems. In addition, through a peer mentoring programme, it matches female beneficiaries leaving the shelter with former victims of trafficking who have successfully integrated or local volunteers to promote their social inclusion and independent problem solving.

TARGET

The interventions were mainly implemented with women victims of sexual exploitation, mostly Nigerian women between 20 and 30 years old.

FUNDING

The project was funded by the EU's Asylum, Migration and Integration Fund.

3.1.14 Multidimensional and network approaches

FGM and forced marriage helpline



Differenza Donna, Italy

Website www.differenzadonna.org/

CONTEXT

In Italy, the Department for Equal Opportunities coordinates actions aimed at preventing and combating FGM, in accordance with Law 7/2006 containing "Provisions concerning the prevention and prohibition of female genital mutilation practices". The Italian law has also been defined as an example of best practice by the UN Secretary-General in the 2011 Report on FGM. FGM is prevalent mainly in 28 countries in Sub-Saharan Africa, but is also present in Oman, Yemen and Indonesia. Women and girls who have undergone FGM or are at risk of undergoing it also live in Italy and Europe. As several NGOs have reported particular situations of discomfort and discrimination especially in first reception centres towards migrant women and in centres for asylum seekers, in 2017 Guidelines for the early recognition of victims of female genital mutilation or other harmful practices were produced and disseminated.⁵⁵

The Differenza Donna telephone line is therefore aimed at migrant women present on Italian territory who are victims of FGM and/or forced marriages. The main objective is to receive women's requests in order to direct them to services, such as hospitals, counsellors, associations dealing with FGM/forced marriages on the national territory. If the woman who contacts the line is in Rome, she will be taken care of by one of the anti-violence centres managed by Differenza Donna in the Lazio region.

DESCRIPTION

The methodology applied is based on a gender, intersectional and feminist perspective. The telephone line answers 24 hours a day, 7 days a week. Operators specialised in gender-based violence and FGM answer the phone. It is possible to ask for information via whatsapp or email or to watch videos on the website in ten different languages. The multi-sectoral support network also includes the advice centres and hospitals in the Rome area, as well as Differenza Donna's legal office. Over the years, Differenza Donna has built up an institutional network where, in case of need, women who receive counselling or shelter guests can be sent for trauma-related treatment.

TARGET

The helpline targets migrant women who are mainly victims of FGM. Although, over time, requests for help have also been received from women victims of forced and arranged marriages. The most contacted nationalities are Nigerian and Somali in the age range of 20-30 years. In addition to being victims of FGM and/or forced marriage, the women were also victims of mistreatment.

FUNDING

Between 2018 and 2020, the line was funded by the BEFORE project. At the end of the project, Differenza Donna, recognising the importance and effectiveness of this unique helpline, saw fit to support it at its own expense.

⁵⁵ Online: http://www.pariopportunita.gov.it/wp-content/uploads/2018/01/file-unico-mgf_eng.pdf

3.1.15 Multidimensional and networking approaches

Networking and victim support, Sweden



Noomi - Hela Människan i Malmö

Website www.noomimalmo.se/

CONTEXT

Noomi is an organisation that offers support to people exploited in sex trafficking or prostitution. Noomi runs sheltered accommodation, awareness-raising initiatives and a legal advice centre for victims of sex trafficking and people engaged in prostitution. In addition to this, the organisation has a project focused on supporting people in the Thai massage industry in Malmö. The activities are run by the non-profit organisation Hela Människan in Malmö. Noomi supports victims of sex trafficking and people involved in prostitution. The organisation mainly employs sociologists and social workers and deals more with the social, legal and practical aspects of their clients' lives and works in synergy with clinics and organisations that help support the target group also in medical and mental health aspects. In Sweden two laws facilitate access to medical support also for non-residents: Act 407 of 2013 "On health and medical care for certain foreigners staying in Sweden without the necessary permits" and Act 344 of 2008 "On health and medical care for asylum seekers etc."

DESCRIPTION

Noomi does not provide direct health care but works in a network with other bodies. "Doctors of the World" provides free medical support to all those who are not resident in Sweden and therefore do not have access to health care (only first aid); "Flyktinghälsan" is a clinic for refugees and allows all asylum seekers and refugees to have access to health care at an affordable price, many medical centres. All those who do not have a social security number can also access their services at a modest price for physical care, but also mental care as they offer psychological counselling. Before booking an appointment, Noomi's social worker meets the beneficiary, assesses her risk level, tries to understand her needs, and collects her personal history in a diary. Finally, the social worker proposes a plan to the beneficiary and, if the beneficiary's response is positive, she starts to organise appointments, explaining her particular situation to the partner organisations. The beneficiary, after being accompanied to the first appointment, will be able to organise the meetings by herself, even if she is supported with medical and transport costs.

TARGET

The beneficiaries are women in shelters (sometimes with their children), minors supported indirectly through their parents and people who come into contact with Noomi through outreach work including prostitutes, trafficking victims, refugees, asylum seekers. Most of them are non-European citizens and are mostly between 20 and 50 years old, including trans women. The prevailing nationalities are: Latin American women - from the Dominican Republic and Ecuador but resident in Spain - and women from Africa (Nigeria, Cameroon, Kenya). Women in prostitution are often victims of physical risks (assault, theft, sexually transmitted diseases) and subjected to psychological violence. They therefore need specialised support because of the trauma they have suffered. Many of them suffer from anxiety and PTSD.

FUNDING

The practises are supported by state funds, contributions from the Gender Equality Agency, support from other organisations, funds from Malmö municipality and social services, and donations from private individuals.