**QUESTIONNAIRE**

**“Violence and its impact on the right to health”**

**Contact Details**

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| --- | --- |
| Type of Stakeholder (please select one) | Member State  Observer State  Other (please specify) |
| Name of State  Name of Survey Respondent | Albania  Ministry of Health and Social Protection |

# Key questions

*You can choose to answer all or some of the questions below. (750 words limit per question).*

1. **Please describe, share data and information on the characteristics, number of cases, and the profile of victims and perpetrators in your country regarding:** 
   1. **gender based violence against women**
   2. **gender based violence and other forms of violence against children:**
   3. **gender based violence against LGBTI or other persons based on real or imputed sexual orientation, sex characteristics, and gender identity:**
   4. **violence against persons with disabilities, including GBV.**
   5. **gender based violence against men**
   6. **conflict gender-based violence, including sexual violence**
   7. **Please share analysis and available evidence on the impact of COVID on the above**

***Answer:***

The Ministry of Health and Social Protection plays a very important role in the periodic collection of data on domestic violence’ cases (DV cases) by some key institutions such as the Albanian State Police, public institutions who provide specialist support services, etc. Data reported by the State Police:

* ***During 2020,*** there are identified and treated **4701 DV cases** (1.5% more than during 2019). While for the period ***1 January-30 September 202l***, there are identified and treated **3997** **DV cases.**
* Injured from violence and crimes in family ***for 2020*** were **4867 persons** and for ***1 January – 30 September 2021*** there are **4123 persons** *(we’d like to clarify here that the difference between number of cases identified and number of injured persons comes from the fact that there are cases when the injured person has been provided with a claim, but at the same time the criminal proceedings against the perpetrator is initiated, or there is more than one injured person from a criminal offense, so in one case)*
* ***During 2020***, there were treated with a request-lawsuit "On the issuance of an Immediate Protection Order / Protection Order", **2816 DV cases** (or 0.7% less than during 2019) while during ***1 January - 30 September 2021*** there were **2495 DV cases**.
* ***For 2020***, victims of domestic violence were **3497 women/girls** or 71.9% of the total number of violence’ victims, while 1370 or 28.9% were men / boys. Injured spouses were **1602 women** (or 67% of the total number of DV’ victims, or 54.1% of the total number of women/girls injured by DV). For the period ***1 January – 30 September 2021***, injured spouses are **1432 women**, within a total of 2965 women/girls injured by DV.
* ***During 2020***, there were identified **138 cases** of violation of Protection Orders (9 cases more than during 2019) and during ***1 January - 30 September 2021***, there are **119 cases** identified.
* ***During 2020***, according to Article 130/a "Domestic Violence" of the Criminal Code, there were initiated criminal proceedings for **1505 cases** and **615 perpetrators** have been arrested, while in for ***1 January – 30 September 2021*** criminal proceedings have been initiated for **1200 cases** with **441 perpetrators** arrested.
* ***During 2020*** there were **6 murders** in the family, with 7 victims, of whom **6 were women/girls** and of these 3 wives. For ***1 January – 30 September 2021*** there are **15 murders** in the family with 15 victims, of whom **10 are women/girls** and of these 8 wives/ex-wives.

An important role in data collection of cases identified and managed in a coordinated multi-sectoral approach through Coordinated Referral Mechanisms at the local level, plays the **REVALB system**, prepared specifically for this purpose. REVALB also collects data on the institutions’ performance, protection orders issued and their monitoring, etc. The system also generates data according to disadvantaged groups such as Roma, persons with disabilities, by age group, division rural/urban area; according to employment, education, etc. Actually, support is being provided to all municipalities to upload and update data in the system and this support is planned to continue even during 2022. So far, about 65% of municipalities are active in the system, with the following data:

**For 2020:** For 40 municipalities (out of 61 in total) there are 1003 cases entered into the system of which: women 819 and men 184; minors 30 of whom 22 girls and 8 boys; The number of people with disabilities is 9, of whom 7 women/girls and 2 men/boys. From the Roma-Egyptian minority 12 cases, 9 women/girls and 3 men/boys. According to the urban/rural area: 574 cases in urban and 429 cases in rural area.

**For the period 1 January-30 September 2021:** For 38 municipalities (out of 61 municipalities in total) there are 943 DV cases entered into the system of which 791 women/girls and 152 men/boys; 26 minors of whom 4 boys and 22 girls; persons with disabilities 7 of whom 6 women/girls and 1 man; from the Roma-Egyptian minority 11 cases of whom 8 women/girls and 3 men/boys.

1. **Please describe whether the legal framework prohibits and sanctions these forms of violence and the definitions and forms of violence included in the legal system. Please explain redress options for survivors of violence, (the pathway they go through if they decide to file a complaint), levels of impunity and if access to comprehensive physical and mental care for GBV-survivors is recognized as a form of reparation.**

***Answer:***

In the administrative-civil legislation **there is a law dedicated to the treatment of domestic violence**, but still in Albania **there is no law for all forms of violence against women**, or for gender-based violence.

In criminal legislation, **physical and psychological DV** is recognized as a criminal offense (Article 130/a added in 2012 and updated in 2013 and 2020).

The Criminal Code also provides for offenses such as:

* termination of pregnancy without woman’s consent;
* sexual/homosexual relations with minors;
* forced sexual/homosexual intercourse with minors 14-18 years old; as well as with adults (or between spouses/cohabitants);
* sexual/homosexual intercourse with persons incapable of protection; by threatening to use a weapon; by abuse of official position; with consanguine persons and persons in the position of trust;
* sexual violence;
* sexual harassment;
* trafficking;
* prostitution;
* exploitation of prostitution;
* pornography;
* stalking;
* maltreatment of children;
* coercion or obstruction of cohabitating, concluding or dissolving a marriage;
* dissemination of racist or xenophobic materials; and insulting due to racist or xenophobic motives, through the computer system;
* Incitement of hatred or disputes (on the grounds of race, ethnicity, religion or sexual orientation, as well as intentional preparation, dissemination or preservation for purposes of distributing writings with such content, by any means or forms), etc.

"Murder" as a criminal offense, the forms and ways of its punishment are regulated respectively in the Criminal Code[[1]](#footnote-1) and in the Criminal Procedure Code.[[2]](#footnote-2)

Child protection is also provided for in the Law on the Rights and Protection of the Child, as well as in the Juvenile Justice Code.

There is a lack of legal provisions for certain offenses, such as ***female genital mutilation*** or ***forced sterilization***, as an obligation deriving from the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention). Also, the necessary legislative measures have not been taken yet, to fulfil the recommendation of the Committee of the Parties 12,IC-CP/Inf (2018), especially when it comes to "in the case of rape involving children aged 14 to 18, it does not depend on whether or not the victim has reached puberty."

**Protection:** Law 9669, dated 18.12.2006 "On measures against violence in family relations", as amended, provides for the protection of DV victims through: the Order for Precautionary Measures of Immediate Protection (OPMIP), the Immediate Protection Order (IPO) and the Protection Order (PO) for all DV forms, as well as for the protection of all family members who may be abused. Risk assessment prior to the issuance of OPMIP/IPO/PO is considered a necessity. A protection order may include, inter alia, the removal of the perpetrator from the victim's apartment (regardless of his ownership), the prohibition of the perpetrator approaching the victim/victim's family beyond a certain distance, the prohibition of the perpetrator to enter or stay in the temporary or permanent residence of the victim or in any part of it, the participation of the perpetrator in rehabilitation programs, etc. Violation of the protection order is a criminal offense. The issuing of OPMIP/IPO/PO does not prevent the victim from initiating criminal proceeding under the Criminal Code. When the request is made by the police or the prosecutor, the withdrawal by the victim does not lead to the dismissal of the case.

**Compensation:** In the Civil Code, there are provisions for compensation for damage to property, health, physical or mental integrity, or violation of honour, personality, reputation, or respect for private life. Albania has ratified and implements the CEDAW Convention and its Optional Protocol, as well as the Istanbul Convention. In both of these instruments there are clear definitions of compensation. However, there is still no state compensation scheme for victims of violence against women (as cited in the 2017 GREVIO report on Albania, paragraph 115).

1. **Please share examples of the types of structural and institutional violence with origins within the State, (perpetrated or condoned by the State) or perpetrated by those not representing or affiliated to the state in your country, and who is affected. In particular, describe structural/institutional violence in medical settings against women and girls, LGBTI persons and persons with disabilities or any other individuals or groups relevant in your country.**

***Answer:***

In the Criminal Code, Article 253 “Violating equality of the citizens” it is stated: “Discrimination by a worker holding a state function or public service conducted because of his capacity or during its exercise, when the discrimination is based upon origin, sex, sexual orientation or gender identity, health situation, religious or political beliefs, trade union activity or because of belonging to a particular ethnic group, nation, race or religion,

which consists in creating unfair privileges or in refusing a right or benefit deriving from law, is punishable by a fine or up to five years of imprisonment.”

In the Criminal Code, committing crimes with SOGI motives is given as an aggravating circumstance; hate speech is criminalized for reasons of sexual orientation; discrimination against persons by a state employee for reasons of SOGI is prohibited; it is criminalized forced homosexual intercourse with adults; by abuse of official position; with threat of using a weapon, etc. Regarding unnecessary medical interventions in intersex persons, the Criminal Code does not contain any provision, because this issue is addressed by Law no.10107, dated 30.3.2009, "On health care in the Republic of Albania", as amended, and Law no.8876, dated 4.4.2002, "On reproductive health", as amended, which prohibit any intervention without the prior consent of the person himself, but the consent in the case of children is given by their parents or legal guardians.

The right to health care is guaranteed in the Constitution. Public health care is the basic responsibility of the government and Law no. 10107, dated 30.3.2009, "On health care in the Republic of Albania", as amended, guarantees the right to health for all. Hospitals, clinics and other health institutions, public or private, are open to the general public. All legislative documentation in the field of health care is general and does not specifically mention SOGIs or the health needs of LGBTI+. As the legal basis provides for health care for all, LGBTI+ persons benefit from health care on the same basis as other citizens.

In the strategies and other important policy documents of the Government of Albania, special attention is paid to the provision of social and health care services for victims/survivors of gender-based violence. Thus, in the National Strategy for Gender Equality 2021 - 2030, in Strategic Goal III "Reduction of all forms of harmful practices, gender-based violence and domestic violence", there is a specific objective dedicated to health III.5 "Empowerment of women, young women and girls **in all their diversity**, to have full control, to decide freely and responsibly on issues related to sexual and reproductive health." The term "in all their diversity" means: from rural areas, ethnic minorities, people with disabilities, LBTI +, the elderly, single mothers, survivors of violence/trafficking, girl-mother, migrants and asylum seekers, etc. Improving the capacities of health professionals to provide quality sexual and reproductive health services to women, men, young women, young men, girls and boys in all their diversity, including in situations of civil emergencies and natural disasters; as well as Creating a conducive environment for girls, young women and women in all their diversity to take informed decisions about their lives, sexual relations, use of a contraceptive method and care for their sexual and reproductive health, are two measures provided under this objective, which will be further broken down into actions and activities. The expected result from the successful implementation of these measures consists in improving the health situation, access to information and health services for women, girls and teenage boys and girls in all their diversity, to enjoy their sexual and reproductive rights and health. This result is expected to be measured through indicators such as: Percentage of women and men, young women and men, girls and boys in all their diversity, who receive comprehensive information on their sexual and reproductive health, disaggregated by sex, age and other personal characteristics; Percentage of contraception among women who are married or in a relationship, ages 15-49 (SDG 3.7.1).

Providing accessible and affordable health care for all categories of persons with disabilities, constitutes goal 6 of the National Action Plan for Persons with Disabilities 2021 - 2025.

1. **Please also share information on the impact of criminalization of sex work, same sex relations, transgender persons, abortion, drug abuse, harmful practices in obstetric care, female genital mutilation on the violence experienced by the affected individuals and their enjoyment of the right to health.**

***Answer:***

As mentioned above, "Prostitution" is an article that still exists in the Criminal Code (Article 113), according to which: “Exercise of prostitution is punishable by a fine or up to three years of imprisonment. Giving a payment for personal benefit of prostitution shall be punished by a fine or imprisonment of up to three years”

Same-sex relations (homosexuality) has been abolished since 2001, so it is no longer a criminal offense in Albania, on the contrary, non-discrimination and protection of the rights of LGBTI+ are already included in the legislation and there is a National Action Plan for LGBTI + in Albania 2021-2027 (the third of its kind).

Albanian legislation does not recognize same-sex partnerships. The Constitution of the Republic of Albania recognizes the right to marriage and family for all (Article 53), while the Family Code defines marriage as an institution between a man and a woman, which essentially prohibits same-sex marriage (Article 163). Regarding cohabitation, there is no prohibition on homosexual cohabitation.

According to Law no. 9695/2007, "On adoption", as amended, same-sex partners cannot adopt children together, because a minor cannot be adopted by more than one person unless these persons are spouses, meaning husband and wife (Article 242). According to law no. 9695, dated 19.3.2007, "On adoption", amended (Article 16/2), the person who makes an application for adoption of a child must meet the conditions under the Family Code, which means to be in a marital relationship (Article 242).

The European Commission Report on Albania 2020[[3]](#footnote-3) states that: Albanian legislation prohibits discrimination against lesbian, gay, bisexual, transgender and intersex (LGBTI) persons. However, more efforts are needed to protect LGBTI+ persons from discrimination when it comes to access to health care, education, justice, employment and housing. Awareness and public acceptance of LGBTI+ persons remain low, especially in rural areas. Hate speech and discrimination continue to be a problem in the media, especially online media. Violence and discrimination against transgender people is worrying phenomenon in the country.

In the Sixth Report of the European Commission against Racism and Intolerance (ECRI) for Albania 2020[[4]](#footnote-4), it is noted that: The People's Advocate and the CPD have made the speech of racist and homo-/transphobic hatred a prominent topic in their work, recognizing that this problem must be solved effectively. LGBTI persons continue to face a number of problems in Albania and often face obstacles to effective equality.

The Universal Periodic Review Report for Albania 2019[[5]](#footnote-5), contains a set of recommendations, including: Protection of LGBTI+ persons from stigma and discrimination in access to health care, among others, through training for all health personnel on the rights and importance of equal access of LGBTI+ persons to health care; Develop programs in schools to eliminate bullying of LGBTI+ children and adolescents and implement psychological support measures to reduce their dropout rates; Amend the Family Code to provide legal recognition for same-sex couples and adopt provisions allowing legal recognition of the gender of trans individuals; etc.

Voluntary termination of pregnancy within the twelfth week, with the consent of the woman and performed in safe conditions for the woman's health, or termination of pregnancy for health reasons up to her 22nd week, are recognized by law since 1995 in Albania. While termination of pregnancy without the consent of the woman, termination of pregnancy performed in places and by unauthorized persons, providing means for termination of pregnancy, negligence in medical treatment, are criminal offenses.

The production and sale of narcotics, the trafficking of narcotics, the creation of facilities for taking and use of drugs, as well as the cultivation of narcotic plants, are criminal offenses.

The Albanian legislation still lacks the criminal provision for the offense of female genital mutilation.

1. **Please share information on the health and other type of responses provided by the State and/or other actors in your country in focus to survivors of each/some of the aforementioned forms of violence. Please assess what works well and not so well, and whether COVID-19 impacted the response and how.**

***Answer:***

Despite the difficulties created by coping with the COVID-19 pandemic, there have been significant developments to address violence against women and girls and domestic violence, both in terms of improving the legal and policy framework, as well as in terms of strengthening the capacities of the members of the Coordinated Referral Mechanisms, or raising public awareness, etc. During the Covid-19 restriction and lockdown, the Ministry of Health and Social Protection (MHSP) undertook a series of actions to inform women, young women, girls and the community in general about the importance of supporting and providing services to victims of violence against women and domestic violence, throughout the period of the state of natural disaster. MHSP also initiated joint actions with line ministries and local self-government units to ensure immediate protection of cases of family members who could suffer violence in isolation due to the pandemic, as well as to adjust and not interrupt specialist support services. In all actions taken, MHSP relied on international guidelines and took care to report to important bodies that take care of maintaining service standards and protecting women and families from violence. All these initiatives or measures have been taken in close cooperation with central and local public institutions, independent institutions, civil society, international organizations operating in Albania in the field of protection of the rights of women and girls, etc.

As main actions we can mention:

* Approval of Standard Operating Procedures (SOPs) in the field of health and social care services.
* Approval of the "Protocol on the operation of public and non-public residential centres providing sheltering services for victims/survivors of domestic violence and victims/survivors of trafficking in the COVID-19 pandemic situation".
* Approval of the "Instruction on case management involving children in need of protection during the COVID-19 emergency".
* Normative Act of the Council of Ministers no. 9, dated 25 March 2020 "On taking special measures in the field of judicial activity, during the duration of the epidemic caused by COVID-19" provided for the suspension of deadlines for filing lawsuits, complaints and to carry out any procedural action in the process administrative, civil and criminal, according to the provisions of this normative act. *But this rule did not apply in cases related to domestic violence, child custody, children's rights and the adoption process, as well as in some other civil and criminal cases.*
* The free green line 08004040 was opened on the MHSP website, which offered counselling and psychological support in case of fear, anger, stress, etc., due to COVID-19, which operated every day from 08.00-22.00, also as another option that tracked any possible cases of violence against women and domestic violence.
* The internal regulation of the functioning of the "Lilium" Centre for Crisis Management of Sexual Violence was drafted, an additional document along with the approved Protocol, focusing on all the specifics of services provided to this centre during the COVID-19 pandemic.
* A rapid assessment of the needs of specialized support services providing shelter (short-term or long-term) for victims/survivors of violence against women and domestic violence, was conducted to identify: their needs for protective and hygienic materials for staff and their beneficiaries; their capacities and potentials to create isolation room within housing spaces; their needs for training and capacity building activities, etc.
* With DCM No. 85, dated 10.02.2021 “On an addition to the decision no. 597, dated 04.09.2019, on the conditional fund for economic assistance"[[6]](#footnote-6), in order to mitigate the effects caused by the Covid-19 pandemic, vulnerable groups including DV victims equipped with PO benefit from doubling economic assistance for a period of 6 months, starting financial effects from 1 January 2021.
* - Through the financing mechanism of the Social Fund for 2021, two counselling lines and 3 services for the DV prevention have been financed, through the empowerment of the family, as well as the provision of community service for victims of violence.
* Changes / improvements in the legal framework, such as the Law on Domestic Violence, the Criminal Code, CoM Decision for CRMs, etc.

1. **Please specify the budget allocated in your country/ies in focus, to health related response to survivors of all/some forms of violence mentioned above. Please indicate the percentage of the national budget devoted to this; the percentage of the international aid provided or received for this. Please explain the impact of Covid 19 to the funding of responses to all/some forms of violence in your State/institution.**

***Answer:***

Detailed data on the national budget dedicated to survivors of violence are provided in detail in the answer to question 9 in this questionnaire. However, we can clarify that:

The Social Fund is an important source of financial support in terms of financing or co-financing services and projects in the field of violence against women and domestic violence. The first call for applications to the Social Fund was announced in April 2019 and the winning applications were announced in November 2019 [14 municipalities won projects with a value of ALL 69,117,366 (about 690 thousand Euro) to be financed from the budget of the Ministry; these would go towards funding social services for a 12-month period]. One such winning project, whose implementation started in 2020, aimed to use the Social Fund money for the provision of emergency services to women victims of violence or domestic violence. In 2021, the total amount from the Social Fund allocated to four municipalities to be used for the purposes of services to victims of domestic violence and persons at risk is 11,258,165 ALL (about 94 thousand Euro).

The proper implementation of **Gender-Responsive Budgeting**, both at the central and the local self-government level, is of paramount importance in allocation of funds for activities aimed at preventing and combatting all forms of violence against women covered by the Istanbul Convention. In the 2017-2019 Medium-Term Budget Programme (MTBP), the budgetary funds to which gender responsive budgeting is applied amounted to USD 90 million; in the 2018-2020 MTPB this went up to USD 120 million and in the 2019-2021 MTPB, USD 285 million.

The Law on Local Self-Government Financing (2017) has made it possible to effectively apply GRB at all stages of the local financial management cycles (annual and medium-term budget programming, monitoring and reporting, evaluation and auditing). LSGUs are required by law to address gender inequality issues and demonstrate full respect for gender equality in at least one of the programme policy objectives, by clearly identifying the related gender indicators and outcomes. In their reporting, LGSUs must also mandatorily indicate what percentage of their overall expenditures goes towards supporting policies for the promotion of gender equality. In this frame:

* In its 2020 budget, **the Municipality of Elbasan** allocated a fund amounting to 8,700,000 ALL (72,500 EUR) in support of abused women or women with social-economic problems, which demonstrates greater sensitivity on the part of the local authority and the members of the municipal council towards this social group. This fund is further subdivided into: the 2020 social fund, with a value of 2,000,000 ALL (16,667 EUR); the joint participation projects fund, with a value of 3,500,000 ALL (29,167 EUR); the gender equality fund, earmarked for addressing gender equality issues, with a value of 500,000 ALL (4,167 EUR), and the social assistance fund, drawn from municipality revenue, with a value of 3,200,000 ALL (26,667 EUR), of which social assistance payments for abused women who have been granted protection orders or emergency protection orders amount to 2,000,000 ALL (16,667 EUR). In the period September 2018-September 2020, as part of a joint project with the UNDP, the Elbasan municipality co-funded, with a contribution of 25,000USD, NPO activities both in Elbasan proper and in the surrounding areas, which focused, among others on domestic violence and gender-based violence. This project was part of the Regional Programme on Local Democracy in the Western Balkans (ReLOaD), funded by the European Union and implemented by the United Nations Development Programme (UNDP) in six countries of the Western Balkans. In 2020, the municipality of Elbasan and the Ministry of Infrastructure and Energy supported 117 families with social assistance payments. The total value of payments was 14,794,394 ALL (123,287 EUR), of which the municipality contributed the sum of 4,173,553 ALL (34,780 EUR). Out of the 117 beneficiaries of the social assistance payments, 43 were women.
* As of 2018, **the Municipality of Lezha** has been allocating 500,000 ALL (4,167 EUR) for activities on preventing and combatting all forms of violence against women.
* In its 2021 budget, **the Municipality of Devoll** allocated the sum of 200,000 ALL (1,667 EUR) for activities on preventing and combatting all forms of violence against women.
* As of 2018, **the Municipality** **of Korça** has been allocating 424,900 ALL (3,541 EUR) of its budget for these issues, of which 288,000 ALL (2,400 EUR) go towards covering the needs of the emergency shelter for victims of domestic violence and 136,900 ALL (1,141 EUR) go towards awareness raising activities.

1. **Please describe the needs of survivors of the abovementioned forms of violence as identified by your State/institution. Please share survivor-self identified needs and those of their families, with a focus on health emergency and long-term needs.**

***Answer:***

MHSP constantly pays attention to identifying and addressing the emergency and long-term needs of domestic violence survivors and their dependent families, both in terms of health and in other aspects.

As provided by the Law on Domestic Violence, the Ministry responsible for health provides medical assistance in the family, in emergency services, family doctor and in health centres near local self-government units:

1. to provide at all times medical, social and psychological assistance to victims of domestic violence;
2. to make at any time the necessary examinations in the relevant public health institutions;
3. to identify cases of domestic violence in the relevant medical documentation approved by the Ministry of Health;
4. to provide the victim with the relevant medical report;
5. to refer and orient the victim to other services of support and protection from domestic violence.

The Ministry responsible for health also performs the following tasks:

1. organizes trainings and specializations for the medical, psychological staff and social workers in the field of domestic violence, preparing a list of trained and specialized professionals in these fields, in cooperation with the orders established according to the legislation in force;
2. monitors the fulfilment of the obligations provided by this law, by the medical staff;
3. provides for the establishment of crisis management centres for cases of sexual violence, to ensure the possibility of functioning rooms, which serve for emergencies near hospitals where the victim is treated. The standards for the establishment and operation of crisis management centres for cases of sexual violence are determined by instruction of the minister responsible for health.

In the Cooperation Agreements signed at the level of local self-government for the functioning of the Coordinated Referral Mechanisms, the Local Health Care Unit, the Hospital and the Health Centre undertake:

* To appoint a responsible person as a member Multidisciplinary Technical Team (MTT) and to enable his/her regular participation in the monthly meetings, as well as for the exchange of information upon request.
* To provide immediate and confidential medical care according to the need of the victim, notifying the Local Coordinator and the Police Commissariat, in accordance with the obligations and provisions in the legislation in force.
* To provide medical, social and psychological assistance to victims of domestic violence at all times.
* To perform at any time the necessary examinations in the relevant public health institutions.
* To identify cases of domestic violence in the relevant medical documentation approved by the Ministry of Health and Social Protection.
* To provide the victim with the relevant medical report, as well as to submit accurate reports to the court, respecting the principle of confidentiality.
* To refer and orient the victim to other services of support and protection from domestic violence.
* Take the necessary measures to train medical staff to identify domestic violence and provide resources and services to victims who may seek assistance, referring cases according to MTT procedures.

Risk assessment is the first moment in which begins the identification of emergency needs of survivors for health care for themselves or their dependents. While afterwards, the identification of short-term and long-term needs is done during the preparation of the Joint Intervention Plan (as defined in the DCM for CRM but also in the relevant protocol for case management in a multi-sectoral coordinated approach). The implementation of this plan is carefully monitored by the Local Coordinator and is continuously evaluated by the MTT members.

The victims themselves identify emergent needs for protection and security, for emergency and long-term sheltering, for health treatment depending on the damage caused by the violence, for psychological counselling, for economic support, employment, and other services aimed at their sustainable reintegration and empowerment.

An issue that is constantly raised and that has been decided to be addressed through the measures foreseen in the NSGE 2021-2030, is related to the treatment of victims who suffer from mental health problems, but also the adaptation of services and increasing accessibility for survivors with disabilities, the ones dependent on using substances, etc. The establishment of specialized support services that consider the provision of services in this regard, is expected to be realized during the implementation of the NSGE 2021-2030.

All identified needs are considered with priority and addressed by members of CRMs at the local level, or by specialized NGOs, as well as by a set of central services and institutions.

1. **Please share examples of good practices and examples of comprehensive health responses to survivors of violence and indicate efficient multi-sectorial efforts at the community, national, regional and international levels by State or non-State actors.**

***Answers:***

Effective multi-sectoral efforts at the community level are realized through the functioning of the Coordinated Referral Mechanisms for Cases of Domestic Violence (CRM), led by municipalities (authorities responsible for the establishment and strengthening of these mechanisms) and based on the philosophy of the multi-sectorial coordinated approach. The CRM consists of: a) Steering Committees, b) Multi-disciplinary Technical Teams and c) Local Coordinators and consists of all local institutions responsible for implementing the legal framework in the field of violence against women and domestic violence, including specialized civil society organizations to provide the necessary support services for case management and intervention in the direction of prevention and awareness of society in general.

CRMs have been set up in all municipalities in the country (61 municipalities) and work is underway to strengthen and increase their effectiveness and accountability in the way cases are handled according to their philosophy. For this purpose, DCM 327 was approved, dated 02.06.2021 "On the mechanism of coordination of work between the responsible authorities, on the referral of cases of domestic violence, as well as its processing, on the support and rehabilitation of victims of violence." To improve the effectiveness of the operation of CRMs throughout the country, MHSP has undertaken, inter alia, the following actions:

* Support with mentoring and information of 246 members of 18 CRMs which faced more with case management during the period of limitations due to the Covid-19 pandemic.
* Establishment of a virtual network of local coordinators against domestic violence and organization of online meetings, trainings and ongoing mentoring with this network or with some of its members (e.g. county-based meetings, or problem-based meetings similar in case management). 40 local coordinators were involved in interactive discussions on the importance of creating this network, emphasizing the need to exchange positive experiences but also the challenges encountered in dealing with and managing DV cases, in the online meeting in October 2020. While All 61 CRM local coordinators were involved in online trainings organized for the functioning of the CRM according to DCM 327/2021, during July 2021. This network is also constantly informed about legal changes, positive practices or other important materials for their job.
* Preparation and dissemination for approval by the Steering Committees of three protocols for the management of domestic violence cases in a multi-sectoral coordinated approach, namely: a) Protocol for the management of DV cases at the local level through CRM (September 2020) ; b) Protocol for the management of DV cases at the local level through the CRM during the situation of Covid-19 (July 2020) and c) Protocol for the management of cases of sexual violence against adults at the local level, through coordinated multi-sectorial approach (April 2021). For the effective use of each protocol in daily work, a series of trainings have been organized and are continuing to be organized with CRM members throughout the country.
* Continuous training and strengthening of the capacities of CRM members to effectively handle cases in a coordinated multi-sectorial approach, by addressing the emergency and long-term needs of victims/survivors.
* Updating the data in the REVALB system.
* In six municipalities in the country, work is being done on the model of socio-economic reintegration of victims of gender-based violence, etc.

As an example of a comprehensive health response to survivors of violence, we can mention the implementation of Standard Operating Procedures for the identification, referral and treatment of cases of violence against women and domestic violence, from the health care professionals, as members of CRMs, approved by Order of the Minister of Health and Social Protection. In this context, dedicated two-day trainings are being organized, coordinated by MHSP, accredited by the National Centre for Continuing Education (NCCE) and supported by UNFPA. 41 health workers were trained during November - December 2020 and about 110 health workers were trained during April - July 2021. Trainings with health workers are foreseen to continue even during 2022. Another module of training for health workers for the treatment of cases of domestic violence and violence against women in civil emergency situations, in accordance with the relevant SOPs adopted for this purpose, was prepared with the support of UNFPA and will be accredited in NCCE. This module will start to be implemented during 2022.

1. **Please describe State and other actors’ initiatives and measures to prevent these forms of violence, specific budget allocated to prevention, and good practices in this regard.**

***Answer:***

The Social Fund is an important source of financial support in terms of financing/co-financing services in the field of VAW&DV. For 2021, the value financed by the Social Fund for services for DV victims and in dangerous situations, in four municipalities is 11,258,165 ALL (or about 94 thousand euros), as presented in the following table:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **NO** | **MUNICIPALITY** | **PROJECT** | **FINANCED AMOUNT** | **BENEFICIARIES** |
| 1 | Gjirokastër | "Providing Services for Victims of Gender-Based Violence".  (2nd year of implementation) | For 2020 it has been financed in the amount of 6,400,138 ALL (in the first year of implementation).  For the year 2021  4,120,396 ALL | During 2020, this centre has treated:  - 40 unaccompanied children (from foreign countries);  - 40 adult beneficiaries (women);  - 3 children aged 7-11 years;  - 25 families with food packages |
| 2 | Berat | Rehabilitation and establishment of the Shelter. | 3,087,000 ALL for the year 2021 | 50 DV victims; 15 children DV victims; 40 children with socio-economic problems. |
| 3 | Kukës | Establishment and operation of an emergency shelter for abused women and girls living in rural areas. | 3,181,245 ALL for the year 2021 | Girls and women with domestic problems, DV victims |
| 4 | Maliq | Emergency centre for children in immediate danger situations. | 869,524 ALL for year 2021 | Children 0-18 years old in emergency situation. |

The Ministry of Health and Social Protection also funds two specialized national support services, which provide long-term housing and treatment focused on reintegration for DV victims and trafficking in human beings, as shown in the table below:

|  |  |  |  |
| --- | --- | --- | --- |
| **Institution** | **Year 2020**  **(ALL)** | | **Year 2021 (ALL)** |
| **Planned** | **Allocated** | **Planned** |
| National Centre for the Treatment of Domestic Violence Cases | 22,840,000 | 22,735,294 | 21,530,000 |
| National Reception Centre for the Victims of Trafficking | 20,920,000 | 20,854,580 | 22,350,000 |

The state budget (from the Region) supports the following centers that provide specialized housing services:

|  |  |  |
| --- | --- | --- |
| **SERVICE CENTRES** | **FUNDS TRANSFERRED BY YEAR** | |
| **2020** | **2021** |
| “Different & Equal” Organization, Tirana | 9,054,487 ALL | 9,091,458 ALL |
| “Other Vision” Association, Elbasan | 7,982,615 ALL | 9,034,794 ALL |
| “Vatra” Centre, Vlora | 11,283,364 ALL | 11,753,072 ALL |

The Counseling Line for Women and Girls (116117) was financed by MHSP in 2020 in the amount of 3,901,500 ALL; while for 2021 it has been approved and financed for salaries and social insurance for 8 employees in the amount of 6,768,552 ALL. The Municipality of Tirana, starting from 2018, offers a support in the amount of 474,000 ALL for CLWG 116117. During 2020, an addition was made to this budget in the amount of 922,725 ALL, with a special agreement for the strengthening of the CLWG and the Counseling Line for Men and Boys in support of victims of domestic violence, after the pandemic caused by COVID-19.

**The Ministry of Justice** has allocated funds for:

1. Free legal aid for women and girls in need, in the amount of, respectively, 18,000,000 ALL (about 150 thousand Euro) in 2020; and 28,000,000 ALL (about 233 thousand Euro) in 2021;
2. Women convicts serving sentences in Institutions for the Execution of Criminal Decisions, in the amount of, respectively: 94,000,000 ALL (about 783 thousand Euro) in 2020; and 94,000,000 ALL (about 783 thousand Euro) in 2021;
3. Convicted women on probation, in the amount of 15,047,000 ALL (about 125 thousand Euro) in 2020 and 202;
4. Protection orders granted to women, in the amount of 3,195,000 ALL (about 26.6 thousand Euro) in 2020; and 4,492,000 ALL (about 37.4 thousand Euro) in 2021

In 2019, the Ministry of Justice signed a joint project with the UNDP “On expanding free legal aid services for women and men in Albania” in the amount of 1,000,000 (one million Euro) for the period 2019-2022.

The total cost of the implementation of the 2021-2030 NSGE is 3,358,697,259 ALL (or 27,086,268 Euro). The state budget will cover 50.5% of the total funds; 33.9% is expected to be covered by other sources and donors, with a funding gap of 15.6%. Current expenditures will comprise about 80.1% of total expenditures, while the remaining 19.9% will go towards capital expenditures. In financial terms, Policy Goal III (reduction of GBV & DV), is expected to receive the largest amount of funds in the strategy implementation, namely 63.8%.

Starting from 2022, the Government of Albania has foreseen the tripling of economic aid for abused and trafficked women (until now this measure was in the amount of 3000 ALL/month or 25 Euros).

1. Approved by law No. 7895, dated 27.01.1995 (amended in 2017) [↑](#footnote-ref-1)
2. Approved by law No. 7905, dated 21.03.1995 (amended in 2017) [↑](#footnote-ref-2)
3. <https://ec.europa.eu/neighbourhood-enlargement/sites/default/files/albania_report_2020.pdf> [↑](#footnote-ref-3)
4. <https://rm.coe.int/report-on-albania-6th-monitoring-cycle-translation-in-albanian-/16809e8240> [↑](#footnote-ref-4)
5. <https://www.ohchr.org/EN/HRBodies/UPR/Pages/ALIndex.aspx> [↑](#footnote-ref-5)
6. <http://www.sherbimisocial.gov.al/wp-content/uploads/2021/07/Doc1.pdf> [↑](#footnote-ref-6)