**Key questions**

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

When responding to the questions below, please use the glossary with definitions at the end of the questionnaire, and refer to all or some of the forms of violence in focus for this study as applicable in your country, countries or region in focus:

***1. Please describe, share data and information on the characteristics, number of cases, and the profile of victims and perpetrators in your country/ies or region(s) regarding:***

1.1. gender based violence against women

1.2. gender based violence and other forms of violence against children:

1.3. gender based violence against LGBTI or other persons based on real or imputed

sexual orientation, sex characteristics, and gender identity:

1.4. violence against persons with disabilities, including GBV.

1.5. gender based violence against men

1.6. conflict gender based violence, including sexual violence

1.7. Please share analysis and available evidence on the impact of COVID on the above

**Number of reports filed with the Croatian Health Insurance Fund – injuries inflicted by a family member**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Year | 2018 | 2019 | 2020 | 2021 |
| Women | 387 | 366 | 471 | 418 |
| Men | 209 | 192 | 230 | 177 |
| Younger than 18 | 70 | 40 | 82 | 52 |

***2. 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.***

***3. 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/ies of region, and who is affected. In particular, describe sructural/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/ies or regions.***

In medical institutions in the Republic of Croatia, there is no structural or institutional violence, i.e. violence related to institutional practice, laws or procedures that adversely affect groups or individuals in a psychological, mental, cultural, economic, spiritual or physical manner, which would constitute a major obstacle to the exercise of the right to health, rights that are interconnected with the rights to fundamental health determinants.

***4. 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.***

In the Republic of Croatia, every person has the right to health care and the possibility of attaining the highest possible level of health, in accordance with the provisions of the Health Care Act (Official Gazette no. 100/18 and 147/20), the Compulsory Health Insurance Act (Official Gazette no 80/13, 137/13 and 98/19), the Protection of the Patient Rights Act (Official Gazette no 169/04 and 37/08) and numerous other acts and bylaws.

In exercising their right to health care, every person shall have, in line with the provisions of this Act and the act governing compulsory health insurance, among other things, the right to equality throughout the entire procedure of exercising health care, the right to health service of standardised quality and equal content, the right to accept or reject a particular diagnostic or therapeutic procedure, except in the case of an immediate medical intervention, where the failure to take action would endanger person's life and health or cause permanent damage to their health.

The Law on Combating Drugs Abuse regulates the issues of drug abuse, measures and system for the prevention of addiction. The basis for implementation is the National Strategy and Action Plan on Combating Drugs Abuse. In accordance with these acts, individual programs from various areas of drug abuse policy are created and implemented.

Related to drug use an important amendment to the legal framework related to combating drug abuse was made by adopting the new Criminal Code which entered into force on 1 January 2013, and which, inter alia, amended the provisions regarding the criminal offence of drug abuse and supplemented the provisions regarding the enforcement of the addiction treatment measure. The above novelty allowed for the distinguishing of possession of drugs for personal use from possession intended for drug trafficking. Possession of drugs in quantities for personal use is sanctioned as a misdemeanour offence with a fine and compulsory treatment measure pursuant to the provisions of the Drug Abuse Law. The aim is to distinguish the perpetrator of criminal offences of drug abuse (manufacturing, trafficking, offering) from drug users. This have significant impact on the disburdening of the penal system and saving of assets. A more flexible misdemeanour procedure enable quicker inclusion of drug users and addicts into the treatment and rehabilitation system. The assessment of whether a quantity is intended for personal use is made by state attorneys and courts on a case-by-case basis.

Guidelines for pharmacotherapy of opiate addicts with methadone and buprenorphine and Guidelines for psychosocial treatment of drug addiction in the health, social and prison systems are in place to ensure the quality of drug treatment through the definition and standardization of evidence-based interventions.

There are no harmful female genital mutilation practices in the Republic of Croatia for non-medical reasons.

Cases caused by migratory movements from countries where this practice is implemented may occur.

***5. Please share information on the health and other type of responses provided by the State and/or other actors in your country/ies or regions 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.***

During the current COVID-19 epidemic, as in other routine situations, every person, including the victim of any form of violence, has the right to health care and the possibility of attaining the highest possible level of health in accordance with the provisions of the Health Care Act (Official Gazette no100/18 and 147/20), the Compulsory Health Insurance Act (Official Gazette no 80/13, 137/13 and 98/19), the Protection of the Patient Rights Act (Official Gazette no 169/04 and 37/08) and numerous other acts and bylaws.

Health institutions shall, within the framework of their regular activities, take all necessary measures in order to continuously apply the applicable rules of procedure (Rules of procedures in cases of sexual violence, Rules of procedure in cases of child abuse and neglect, Rules of procedures in cases of domestic violence, etc.).

All diagnostic and therapeutic procedures are carried out in accordance with professional guidelines and priorities.

In the context of the COVID-19 crisis, actions to ensure continuity and accessibility of healthcare at all levels and to the whole population, with a particular focus on vulnerable groups, including victims of violence, have been identified as a priority in the healthcare system, while applying all the protective measures required.

With regard to protection against SARS-CoV-2 infection, a number of recommendations have been published on procedures in different situations, some of which are available on the website of the Croatian Institute for Public Health [Koronavirus — the most recent recommendations by the Croatian Institute for Public Health (hzjz.hr)](https://www.hzjz.hr/sluzba-epidemiologija-zarazne-bolesti/koronavirus-najnovije-preporuke/).

The recommendations are continuously updated.

To implement protective measures against COVID-19 while providing support to victims of violence, it is necessary to follow the expert recommendations made by the Croatian Institute of Public Health.

Doctors of professional societies of the Croatian Medical Association are also actively working to provide recommendations. Their recommendations, opinions and guidelines are available on <https://www.hlz.hr/strucna-drustva-hlz/>.

Additionally, we would like to underline the importance of informing citizens about the availability of assistance and support in cases of violence, as well as general psychological and psychiatric aid provided both in-person and remotely. The Institutes of Public Health set up several phone lines for the psychological support of citizens.

The Ministry of Health, in cooperation with all competent institutions, continuously improves and adapts measures and activities depending on the COVID-19 developments in order to ensure that all citizens are able to attain the highest possible level of health, all in accordance with positive legal regulations.

We stress that continuously adhering to the recommendations of the National Civil Protection Headquarters, based on epidemiological assessments, with the aim of preventing the transmission of the disease via contacts, is of the utmost importance.

On a daily basis, the National Civil Protection Headquarters adopts a wide range of other measures made specifically to protect both the entire population and the most vulnerable groups from COVID-19.

On the primary level of health care there are services for mental health, outpatient treatment and addiction prevention in public health institutes who are ensuring the protection of mental health in the community. They are providing services for prevention, diagnosis, counseling, and treatment of mild forms of mental disorders as well as treatment of addiction. Their work is regulated by the Health Care Act. There are 21 county institutes of public health in the Republic of Croatia. Each county institute has a mental health service with the number of teams in accordance with the number of inhabitants and the expressed needs. In total, there are 50 teams in all institutions that provide services to citizens in order to protect mental health, prevention and outpatient treatment of addiction. Related to addiction tretment service are avaiable also in the social care system, therapeutic communities, associations, and in the prison and probation system. Coordination, organization and financing of different types of treatment is divided between several agencies, depending on the type of treatment in question, as follows: in the health care system, between the Ministry of Health, Croatian Health Insurance Institute, Croatian Institute of Public Health, in the social care system in charge is Ministry of Labour, Pension System, Family and Social Policy; and in the prison and probation system, treatment is within the purview of the Ministry of Justice and Public Administration.

Objectives of the overall national policy on drug addiction treatment is to enhance treatment quality on a continuous basis and provide drug users or drug addicts with the optimum form of treatment in line with their respective needs. In order to achieve that objective the fundamental principles of the national policy on addiction treatment are follows: identification of addicts as early as possible, provision of timely treatment under professional medical supervision, easy access to programmes without stigmatisation and discrimination, promote individual approach, adaptation of the treatment programme to suit the needs of patients according to their clinical picture, motivation, age, sex, social conditions and other characteristics. The objective of these principles is to ensure equal access to different programmes of treatment, rehabilitation and harm reduction.

In order to ensure continuity in the provision of addiction treatment services and to adjust interventions during the COVID-19 pandemic, numerous trainings for experts from the health and social care system were held; for the preventive program "MOVE - Short Motivational Intervention" to support professionals working with young people with the general aim of reducing the incidence of experimentation and consumption of legal and illegal addictions; Regional trainings on Guidelines for the psychosocial treatment of drug addiction in the health, social and prison systems with the aim of adapting the provision of psychosocial and drug-related harm reduction interventions during COVID-19.

***6. 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.***

The costs of working with victims of violence are covered by the State budget under operating costs/regular funds.

The COVID-19 pandemic has had no impact on funds provided to the health care system for the needs of victims of violence.

***7. 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.***

Health care for victims of violence, including medical examinations, treatment and monitoring of the victim’s state of health, is carried out within the frameworks laid down by the Health Care Act, the Compulsory Health Insurance Act, Protection of the Patient Rights Act and other legal regulations in this field.

Medical examinations for victims of sexual violence are carried out at general hospitals and clinical healthcare facilities — clinics, clinical hospitals and clinical hospital centres. These health facilities are required to provide the victim with urgent and comprehensive medical care in order to preserve the victim's physical and mental health in accordance with modern standards and practices, regardless of when sexual violence has been committed.

**Rules of Procedure in Cases of Sexual Violence** (OG No 70/18; <https://narodne-novine.nn.hr/clanci/sluzbeni/2018_08_70_1418.html>;

https://zdravlje.gov.hr/protokoli/1566), describes, inter alia, a medical protocol (which includes a description of obligations regarding the victim’s informed consent to a full examination and treatment; determination of general medical history and review; prescribing therapies and instructions for further procedures; liabilities vis-à-vis other bodies) and the responsibilities of health institutions.

The Rules of Procedure also describes institutional and non-institutional assistance and support for victims of sexual violence with regard to protection of mental health, etc.

**According to the Rules of Procedure in Cases of Child Abuse and Neglect (**<https://zdravlje.gov.hr/protokoli/1566>), examinations of the child victim of abuse or neglect are carried out in hospitals and clinical institutions. After examination and provision of emergency medical assistance at the primary healthcare level, when suspected abuse and neglect are identified, the doctor shall refer the child to a hospital or clinical institution. Health care institutions are required to provide a child victim of abuse or neglect with urgent and comprehensive health care to preserve the victim’s physical and mental health in accordance with modern standards and practices.

The Rules of Procedure in Cases of Child Abuse and Neglect sets out, inter alia, the medical protocol, the victim’s informed consent to full treatment, the identification of patient's general medical history and examination, the provision of basic health care and the responsibilities of health care facilities.

The Ministry of Health, within its capabilities, continually undertakes actions to improve the system to ensure comprehensive health care for victims of violence in line with modern standards and practices.

***8. 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.***

Within the health system with the aim of strengthening training and education programs, activities related to education on psychosocial treatment and resocialization of women with the addiction problem and who are often also victims of some form of violence were carried out. Taking into consideration that according to the available data, out of the total number of persons in the treatment of drug addiction in the hospital, outpatient system and in therapeutic communities, 33.6% are women and that there are many problems they are facing, such as: absence of primary family support, scarce social networks, unemployment, inability to solve the housing issues, in coordination with the Croatian Institute of Public Health, activities focused at developing services for women with addiction problem as well as on strengthening cooperation in providing these services were carried out.

As part of the drug addiction resocialization Project, which has been implemented since 2007, recovery and rehabilitation programs for women with drug addiction problem were implemented through the provision of service packages focused on successful maintenance of abstinence and their social reintegration. With the aim to encourage the employment of socially vulnerable groups, including women treated for drug addiction, measures were implemented in order to encourage their education and employment through active policy measures for co-financing and financing education and employment. With the aim of more efficient implementation of project activities, in 2019., 2020 and 2021 Regional trainings on the Project was held, in which participated the representatives of the health, justice, social care systems.

In addition in 2020, a round table, organized by the Croatian Institute of Public Health was held on the topic of the challenges of care and treatment of women with drug addiction problem, which brought together representatives from the health system, social welfare system, ombudsman for gender equality, ombudsman for children and other relevant institutions. In the framework of the round table the importance of developing specific treatment and rehabilitation programs for women addicts according to their characteristics was discussed. At the same time, the development of protocols between health care institutions and social care centers was initiated, with the aim of strengthening cooperation between the health and social system in form of improving the quality of services provided to women and in order to facilitate and accelerate prompt and appropriate intervention as well as improving the integration of data from different services.

In order to ensure quality and standards in the provision of preventive interventions related to the protection of mental health in the field of addiction, a Commission was established to assess the quality of projects implemented in the field of drug demand and addiction. Minimum standards for addiction prevention for children and youth in the educational system were adopted in 2017, implementation and supervision is ensured by the Ministry of Science and Education. The aim of this document is to ensure consistent and continuous implementation of prevention programs in all educational institutions and to improve the quality, sustainability and effectiveness of preventive interventions implemented within the educational system according to evidence-based recommendations. During 2021, several trainings were organized to improve the competencies and skills of experts - decision makers, public opinion makers and policy makers in the field of prevention work on quality standards and prevention science. In addition to the above, regional trainings in the field of science-based prevention are conducted for experts from various systems.

The Croatian Institute of Public Health, in 2020 formed an expert team that developed a Pilot addiction prevention project for young Roma population in Međimurje county. The main goal of this Project which implementation started in 2021, is to reduce the addiction among children and young Roma population, by strengthening the skills of children and young people, their parents and the local community, and to create opportunities for prosocial involvement in community life. Specific goals are defined and interventions are recommended at all three levels of prevention: universal, selective and indicated, and at the level of environmental strategies.

The implementation of a scientifically based and proven effective prevention program "I have an attitude - Unplugged" in 2021.in Zagreb County has begun. It is a comprehensive universal program for the prevention of alcohol, cigarettes and drugs in the school environment and includes components that focus on critical thinking, decision making, problem solving, creative thinking, effective communication, interpersonal skills, self-awareness, empathy, coping with emotions and stress, normative beliefs and knowledge of adverse health effects. Twelve trainers were trained, who in 2021 educated 60 professional associates and teachers who started implementing the program. As part of this pilot project, a scientific evaluation was conducted in 12 experimental and 12 control schools. In case of obtaining positive preventive outcomes, further expansion of this program to other counties is planned.

The Croatian Institute of Public Health is also participating in the Pompidou group project on Children whose parents or guardians are use drugs with the aim of contributing to the future Strategy for the Rights of the Child of the Council of Europe.

The example of good practice in relation to multi-sectorial efforts in the field of gender based sexual violence against women was the one-day training for psychiatrists and psychologists employed in health care institutions "Protection of mental health of persons after surviving the trauma of sexual violence"! organized by the Women's Room – Centre for Sexual Rights. Two psychologists from the Counselling Centre for Mental Health Promotion of the Croatian Institute of Public Health participated in the training together with mental health professionals from other county institutes.

***9. 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.***

The Croatian Institute of Public Health participates in the celebration of the national and international day against violence in order to raise awareness of the importance of recognizing this public health problem.

In accordance with the objectives of the project "Living Healthy" promotes protective factors of mental health and psychological resilience and healthy lifestyles that contribute to the psychological and social well-being of individuals and communities, thereby directly supporting or promoting respectful and nonviolent relationships in the family, workplace and community.