



ATHENA

BEGIN

STATE OF ART

& Country Background Research

**ATHENA BEGIN: 856613 — EUROPEAN COOPERATION AGAINST DOMESTIC VIOLENCE
TOWARDS PEOPLE WITH INTELLECTUAL DISABILITIES.**

**WP2: DATA COLLECTION ON PROFESSIONALS NEEDS AND DEVELOPMENT OF
MATERIAL FOR IMPROVEMENT OF COMPETENCES**

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The present document is one of the outputs of the “ATHENA BEGIN” project¹. The project aims to offer resources and tools to professionals who assist women with intellectual disabilities victims of domestic violence and empower the victims themselves to improve their quality of life by developing their skills and personal abilities. The document will be divided into two parts: PART I) A state of the art regarding gender-based violence and more specifically domestic violence among risk groups, particularly girls, adult and elderly women with intellectual disabilities; and PART II) A Country Background Research towards national laws and reports on this topic from partner countries seeking to identify significant similarities and differences between partner countries, regarding representation and responses related to this specific group of victims.

Introduction

Over the decades, the relation between women with disabilities and gender-based violence have been neglected, and victims remain overwhelmed and left out both in theoretical as well as in practical terms (Thiara, Hague, & Mullender, 2011). As refereed by Meer and Combrinck (2015), this marginalisation is more apparent regarding women with intellectual disabilities (ID), and those victims remain in an invisible intersection between gender and their disabilities – even though being an intellectually disabled woman means an additional risk factor for gender-based violence, namely, domestic violence (Pestka & Wendt, 2014). In the same way, being exposed to abuse can substantially increase the odds of mental disorders and suicidal behaviour among women (Rees et al., 2011; Rees et al., 2014; Walsh, Keyes, Koenen, & Hasin, 2015). For this research, women with intellectual disability will be understood as the adult women who have a “long-term (...) mental, intellectual (...) impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others” (FRA, 2013, p. 10).

¹ Project reference: ATHENA BEGIN: European cooperation against domestic violence towards people with intellectual disabilities - REC-RDAP-GBV-AG-2018

PART I

State of the art

1. Gender-based violence against women with ID

Gender-based violence against women (GBVAW) is an umbrella term that encompasses several forms of abuse which affect women and girls disproportionately such as rape, sexual exploitation, genital mutilation and domestic violence. GBVAW is a pervasive form of human rights violation, affecting 1 in 3 women worldwide (WHO, 2013). The everyday risk is especially experienced by disabled women, since evidence shows that abuse is more frequent against this vulnerable group (FRA, 2014; Dunkle, Van Der Heijden, Stern, & Chirwa, 2018).

Domestic violence is one of the most prevalent forms of GBVAW around the world (García-Moreno, Jansen, Ellsberg, Heise, & Watts, 2005; Alhabib, Nur, & Jones, 2010). Its roots are profoundly related to inequality between genders and male dominance over the women (Dobash & Dobash, 1979; Yodanis, 2004). Although domestic violence is not restricted just to that violence perpetrated *behind the closed doors*², throughout the History women have been abused by men inside their homes because of remaining myths such as “ideal families” and the “safe, intimate private world” (as refereed by Saraga, 2001). Some authors nominate the systematic abuse suffered by women as a form of terrorism (Pain, 2014) or patriarchal terrorism (Johnson, 1995; Bosch, Ferrer & Alzamora, 2006). Domestic violence can be defined as

“(…) the threat or exercise of physical, psychological, and/or emotional violence; i.e., any type of force against another person with the intent of inflicting harm or exercising power and control over them. The perpetrator belongs to the victim’s “domestic environment”: an intimate partner, husband, former intimate partner, family member, friend or acquaintance.” (Flury & Nyberg, 2010, p. 02)

² As a reference to the Straus, Gelles and Steinmetz (1988).

In many cases, forms of abuse overlap, and it is common for a victim of domestic violence to experience more than one form of victimisation at the same time insofar the consequences can be even more pervasive for victims (WHO, 2012). The abuse may impact victims' physical and mental health severely, and due to its prevalence and consequences, domestic violence is also considered as a public health problem (Flury & Nyberg, 2010). Despite the various manifestations and dynamics of this form of abuse, in this state of the art, domestic violence will be used to refer only to the violence perpetrated by men against adult women with intellectual disabilities. In this regard, It is essential to mention that women with ID are equally exposed to the same forms of violence than non-disabled women. However, the "additional vulnerability factor" (as referred by Nosek, Foley, Hughes, & Howland, 2001, p. 186) creates some particular forms of violence³ which only affect disabled women, since that is intrinsically related to their limitations and healthcare needs (Walter-Brice, Cox, Priest, & Thompson, 2012).

2. Risk factors for gender-based violence and domestic violence against women with ID

Women with ID are more vulnerable to suffer gender-based violence, as well as domestic violence (Barger, Wacker, Macy, & Parish, 2009; Pestka & Wendt, 2014; Douglas & Harpur, 2016). Researchers argued that this vulnerable group is especially under increased risk for sexual violence (Plummer & Findley, 2012; Bowen & Swift, 2019), and this risk can be four times higher compared to non-disabled women (Martin et al., 2006). Despite that, data related to the risk factors for abuse is scarce.

As pointed by Brownridge (2006), there are three main categories according to which the risk factors can be gathered, and for each category, the author lists the main risk factors associated: category 1) *Relationship factors* (e.g. direct dependence associated to the severity of disability and duration of the relationship); category 2) *Victim-related characteristics* (e.g. socioeconomic status and age); category 3) *Perpetrator-related characteristics* (e.g. control over victims and substance use).

³ "(...) such as withholding (...) medications, and essential personal assistance (...). Without ever touching the woman, a perpetrator can use these tactics as a means of coercion and punishment, with resulting physical injury that could be as serious as battering" (Nosek, et al., 2001, p. 186).

Additional to the Brownridge (2006) proposition, an extra category of risk factors can be mentioned, and it is the category 4) *Society-related characteristics*. This category encompasses the specific social constructions and social representations about women with ID and about GBV in a particular society and the potential interaction between those factors that may increase the victimisation risk for women with ID. Some society-related factors are, for example, the stigmatisation and stereotypes. Disabled women are invisible, undervalued and often labelled as an undesirable and asexual person (Foster & Sandel, 2010), or as someone who is unable to understand and to give or withdraw consent in intimate relationships. The economic oppression (or disadvantage) is another risk factor related to the status of disabled women in the society, namely in the labour market since women with disabilities have been historically marginalised from participating actively in these contexts (Mays, 2006).

Through semi-structured interviews with women with ID, Taggart, McMillan and Lawson pointed that there are three potential risk factors for abuse identified by the participants in the study: “‘being female and having an intellectual disability’, ‘not feeling like a woman and wanting a family’ and experiencing a range of ‘negative life events’” (2009, p. 327). In a qualitative study conducted by Pestka and Wendt (2014), the authors found that the search for belonging is a significant factor which keeps women with ID in abusive relationships. Some women both with or without ID believe in romantic love and are affected by its rules, and under what society define as the women’s role in this world, they “fight very hard to conform to the ascriptions that give women value, and possibly settle with or accept abuse in their lives to gain social value that has often been missing throughout their life course” (Pestka & Wendt, 2014, p. 1042).

3. Challenges for supporting services

Violence against women with disabilities is a complex and multidimensional challenge for supporting victims. The intersection between gender, type and severity of the disability may increase the challenge to provide more appropriate services for victims. It is what Bowen and Swift call as the “appropriate evidence-based services” (2019, p. 703), meaning that in the front-line support, the various professionals need

some specific knowledge and the adequate training to give effective care, reducing risks for victimisation. However, there is a lack of studies in this field, and this gap is even more significant considering intellectual disabilities. For example, in the recent meta-analysis on the prevalence and correlates of partner violence experienced by adult people with ID, Bowen and Swift (2019) just found six articles that have been published in a peer-reviewed journal in English, before 2017, which used original quantitative or qualitative data. Additionally, because disabled women are exposed to the same forms of GBV and domestic violence as well as non-disabled women, it is essential to “develop disability-sensitive abuse screening instruments and techniques for determining the vulnerability for abuse that can be attributed to disability, beyond the vulnerability experienced by women in general” (Nosek, et al., 2001, p.187).

Using data from two focus groups with primary care professionals in Spain, Ruiz-Pérez, Pastor-Moreno, Escribà-Agüir and Maroto-Navarro (2018) mention that the healthcare system is not adapted to the need of disabled women. Sometimes, the indifference experienced and a lack of staff with the appropriate training or proper information, leave the victims in uncertainty, and the support system can have negative impacts on women’s lives and, at the same time, losing its credibility (Ruiz-Pérez, et al., 2018; Taggart, McMillan, & Lawson, 2010). Another critical challenge for support services is related to the victim’s capacity to recognise the abusive behaviour (Nosek, et al., 2001), which is directly related to the severity of the ID. Even when victims are able to identify the violence suffered, they may have to face some discredit on reporting abuse since the perpetrators frequently hold a trustworthy status (Plummer & Findley, 2012).

According to Khemka and Hickson, there are five main components which have to integrate to an effective prevention intervention plan against abuse: “(1) strengthening individual competences through direct training, (2) fostering friendship networks and circles of support, (3) providing training and support for family and caregivers, (4) increasing services and collaboration across systems, and (5) promoting societal attitudes that support self-determination” (2017, p. 75).

Therefore, empowering women with ID is an effective way to protect them against abuse (Plummer & Findley, 2012) as well as fighting social stigmas and prejudices on support services and also in society.

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PART II

Country Background Research

1. National Background Information



_Portugal

According to the European Parliament's Policy Department for Structural and Cohesion Policies: "Portugal has over 10 million inhabitants. With 113.5 people per square kilometre, it is close to the EU average (117.5 inhabitants per km² in the EU-28) (...). Since 2010, the Portuguese population has slowly been declining - from 10.57 million inhabitants to 10.29 million in 2018. The level of education is systematically improving. In 2000, only 11 % of the population aged 30 to 34 had completed tertiary education. In 2017, the equivalent figure was already 33.5 % (the average for the EU was 39.9 %)"⁴.

Lisbon is the capital of Portugal. With 17 municipalities, it is composed of a population of over 550 000 inhabitants. The second metropolitan area is formed by Porto (with 16 other municipalities). These two metropolitan areas concentrate nearly half of the Portuguese population.

Portugal's economy was severely affected by the economic crisis (the 'austerity' crisis and subsequent public deficit and debt). "In 2011, Portugal had to apply for financial assistance and obtained a bailout worth EUR 78 billion from the EU and the International Monetary Fund (IMF). Since then, Portugal's economy has registered a gradual recovery."⁵ The structural reforms introduced with the help of the EU and the IMF were heavy on Portuguese citizens, but they have improved productivity and competitiveness. The current government has managed to reduce the public deficit effectively. In 2017, the real Gross Domestic Product (GDP) growth reached 2.8 %, the highest rate since 2000. This growth generates new job opportunities. "Consequently, the unemployment rate has dropped from 16.4 % in 2013 to 7.0 % in 2018 (from 38.1 % to 20.1 % for young people). However, the very high public debt (of around 120 %) is still an important vulnerability of the country's economy. Since its accession, Portugal has been one of the EU's least developed Member States"⁶. Since the economic crisis recovery, Portugal's imports have been stable, and exports have been almost constantly growing. "In 2017, exports accounted for 42.7 % and imports for 41.9 % of GDP, resulting in a trade surplus of 0.8 % of GDP. Major export destinations are Spain (20.9 %), France (13.4 %), Germany (10.7 %), the UK (9.5 %) and USA (5.5 %). For historical reasons, the former Portuguese colonies are also important trade partners. In 2017, exports to Angola accounted for 3.3 % of total exports while for Brazil the corresponding figure was 2.7 %."⁷

It is essential to mention that due to the effects of the pandemic crises (COVID-19), Portugal, as well as other countries, have been experiencing a substantial economic impact in many different areas. Since the Portuguese GDP is highly dependent on tourism, the confinement restrictions directly hit this trade sector.

⁴ Policy Department for Structural and Cohesion Policies (2009; p 01)

⁵ Policy Department for Structural and Cohesion Policies (2009; p 01)

⁶ Policy Department for Structural and Cohesion Policies (2009; p 01)

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According to World Population Review: “Greece, officially the Hellenic Republic, is located in southeastern Europe with the mainland at the south end of the Balkan Peninsula. Greece is bordered by Bulgaria, Albania, the Republic of North Macedonia, the Ionian Sea, the Mediterranean Sea, the Aegean Sea, and Turkey. In 2020, Greece has an estimated population of 10.42 million, which ranks 87th in the world. The largest city and capital is the ancient city of Athens. Athens is one of the oldest cities in the world with a recorded history going back at least 3,400 years. Athens has an urban population of 3 million with a metro population of 3.75 million divided into 54 municipalities. Athens is the most densely populated region of Greece with 19,000 people per square mile in the city proper. About 2/3 of Greek people live in urban regions. Along with Athens, other major cities include Thessaloniki (788,000), Patras (214,000), and Heraklion (174,000)”.⁸

According to the 2011 census, 199.121 people were citizens of other E.U countries, 708.054 people were citizens of other countries, and 4.825 people were without citizenship or had no specified citizenship making up 8,7% of the total population (Hellenic Statistical Authority, 2019).

Greece, as well as Italy and Spain, during the past years, have faced large movements of refugees, asylum seekers and migrants due to war, socioeconomic and political implications of the broader area. Most of this humanitarian pressure in Greece is located on its eastern border with Turkey.

In the SPECIAL PAPER: The impact of the long-lasting socio-economic crisis in Greece, Stylianidis and Souliotis reported that: “In 2009 Greece entered a period of lasting recession and austerity with wide-ranging socioeconomic, “demographic and political implications. This has led to sharp rises in unemployment rates, precarious work regimes, rapid increases in poverty level, dramatic increases in the number of uninsured citizens, substantial income loss, widened income inequality, exacerbation of the demographic problem, disruption of social cohesion, political instability, and migration and refugee issues. In particular, unemployment rates rocketed from 7.8% in 2008 to 24.9% in 2015 and 23.1% in December 2016” (Stylianidis & Souliotis, 2019: p.16).

“Concomitantly, the proportion of the population that is at risk of poverty or social exclusion rose from 28.1% in 2008 to 36% in 2014 and 35.7% in 2015 (Hellenic Statistical Authority, 2015). Similarly, a survey by the Hellenic Confederation of Professionals, Craftsmen and Merchants have documented substantial income loss for 93.7% of households since the outset of the crisis, and 75.3% of them reported further reductions between 2015 and 2016. It is noteworthy that the increasing income inequality was in favour of the high-income sectors of the population (Hellenic Confederation of Professionals, Craftsmen and Merchants, 2015). The demographic problem is due to lower birth rates, causing a negative natural population change, coupled with elevated (net) migration (Eurostat, 2015). Consequently, the sustainability of social health insurance and pension system is at stake. Arguably, this socio-

⁸ World Population Review (2020): Available in <https://worldpopulationreview.com/countries/greece-population/>. Access in 10.05.20

economic climate has incurred adverse consequences on the health of the population and healthcare system”⁹.



_Spain

Spain is located in the South of Western Europe and North Africa. Most of the Spanish territory is located in the Iberian Peninsula. On the African continent are the autonomous cities of Melilla and Ceuta, and off the northwest coast of Africa is the Autonomous Community of the Canary Islands, forming the famous Canary Island archipelago. Taking this into account, Spain is a country that borders France, Andorra, Portugal, Morocco, the Atlantic Ocean, the Cantabrian Sea and the Mediterranean Sea.

In 2020, Spain has an estimated population of 47 million inhabitants (INE, 2020), occupying the 29th place in the world. The capital of the State is the city of Madrid, located in the centre of the Autonomous Community of Madrid and the Iberian Peninsula. Madrid is also the most populated city in the country, with a population of 3.26 million inhabitants (INE, 2020). The second most populated city is Barcelona, with a population of 1.63 million (INE, 2020). It is estimated that 80% of the Spanish population lives in cities, according to the World Bank (2018). Taking into account the extension of the Spanish territory and the high concentration of population in urban areas, we find large regions of the peninsula depopulated, with great problems to access essential public services such as health.

According to the 2019 census, 1.83 million people living in Spain were citizens of other European Union countries, and 4.53 million people were citizens of other countries (INE, 2020). It should be noted that the most numerous communities in Spain are the Moroccan community with a census in 2019 of 813,587 people and the Romanian community with 671,985 people (INE, 2020).

In 2008, Spain was also affected by the world economic crisis (the ‘austerity’ crisis) that originated in the United States. Unemployment in Spain, which in 2007 was at an all-time low of 7.95% after the start of the economic crisis, reached an all-time high of 27.16% in 2013 (INE, 2020b). In 2020, the unemployment rate in Spain was 13.78% (INE, 2020b). The most affected sector was the construction sector due to the end of the colloquially called "real estate boom", the fall of the construction companies derived in a multitude of suspension of payments, which caused a domino effect leading to a crisis of the banking sector, which in turn, led to a rescue of almost 40% of the banking system by the Fund for Orderly Banking Restructuring (FROB). All this led to an increase in the country's public debt, which caused a series of economic cuts that affected the weakest strata of society the most, widening the gap between the social classes with less purchasing power and the classes with greater purchasing power. According to Oxfam Intermón (2019), last year Spain was in fourth place in the ranking of the most unequal countries in the entire European Union.

⁹ Stylianidis & Souliotis, 2019: p.16.

2. Most important national statistical data and legislation concerning people with intellectual disabilities (ID)



_Portugal

The *Instituto Nacional para a Reabilitação, INR I.P.*, (National Institute for Rehabilitation) is a public body that operates under the surveillance of the *Ministério do Trabalho, Solidariedade e Segurança Social* (Ministry of Labour, Solidarity and Social Security). This entity is responsible for the research on disability equality and for the collection of data and statistics on disability in Portugal (Decree-Law 217/2007).

The National Institute for Rehabilitation, in collaboration with the National Statistics Institute), shows that the total prevalence of people with Intellectual Disabilities (ID) is 18% in Portugal (INE, 2011). Analyzing the results in each age group, we found that the prevalence of disability is 5% in a resident population aged between 5 and 14 years; 4% from 15 to 24 years; 11% between 25-64 years old and 42% with 65 years old or more. Data related to children with disabilities under the age of five is non-existing.

An analysis of the distribution of the population with disabilities reveals that the most frequent difficulties are related to memory or concentration problems (10%) and mobility (walking or climbing steps, 9%) (INE, 2011). The prevalence of disability tends to be higher among women (42% in the male population and 55% in the female). INE (2011) reports that the distribution of the population with disabilities by region (population aged 5 or more) has a higher population prevalence in the North (34%), followed by the Center (26%), the South with Alentejo (8%), Algarve (4%) and the Autonomous Regions of the Azores (2%) and Madeira (2%). In regards to statistical data specifically in the frame of people with intellectual (mental) disabilities, there is a gap in the Portuguese situation. According to the Disability and Human Rights Observatory (2019), the overall numbers show a positive shift in regards to education, employment, social protection and discrimination, where the approval of the Law that prohibits and punishes discrimination based on disability (Decree-Law 46/2006) and the Basic Law for Prevention, Rehabilitation and Integration of Persons with Disabilities (Decree-Law 38/2004) stands out. However, gaps on legal and support/intervention programs persist in terms of gender issues within the field of disability. “The gender perspective has been absent from disability legislation and public policy in Portugal”¹⁰. There is one single measure focused on this issue (V Plan for Gender Equality, Citizenship and Non-discrimination, 2014-2017), which calls for awareness-raising actions.

In the last population census “disaggregated data on persons with disabilities are not systematically collected in the most important surveys and national statistics, which makes it difficult to compare persons with and without disabilities.”¹¹ Furthermore, the first official data collection on persons with disabilities – the National Survey on Impairment,

¹⁰ Disability and Human Rights Observatory, 2015: p.01.

¹¹ INE, 2011; p.01.

Disability and Disadvantage – was conducted in 1993/1995, and has not been repeated since then (Pinto, s.d, p. 4).



The Greek Constitution establishes the term “persons with disabilities” (revised Constitution of Greece 2001) and guarantees the right to measures for their inclusion in society, in line with Greece’s obligations as a signatory to the major international instruments offering protection to people with disabilities.

Greece has ratified most of the major international conventions with provisions related to access to education and employment for people with intellectual disabilities, as the Revised European Social Charter or Protocol No. 12 to the European Convention for the Protection of Human Rights and Fundamental Freedoms (2012) and the Revised European Social Charter (2016) (Law 4074/2012 and Law 4359/2016).

There is no unified definition of intellectual disability in Greek legislation. Various terms and definitions, some of them stigmatising, are used to refer to people with intellectual disabilities in Greek law and policy. Internationally recognised standards – including the World Health Organization’s International Classification of Diseases, Tenth Revision and the Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition – have been incorporated into relevant law, and these standards are generally used in the diagnosis of intellectual disability by medical professionals (Monitoring Plan, 2006. p.14). The procedures for diagnosis and assessment of disability, both for educational and employment purposes, are extensive and time-consuming; parents have called for these processes to be streamlined. Several forms of guardianship exist under Greek law (ibid, p.14).

Plenary guardianship appears to be the most prevalent option. However, it is difficult to be certain because there is no statistical data regarding the numbers of people with intellectual disabilities who are placed under guardianship. Overall, there is very little statistical information regarding either people with intellectual disabilities or the services available to this population. Census data significantly underestimates the total number of people with intellectual disabilities at around 150,000. Lack of data severely curtails the possibilities of developing informed, appropriate policy for people with intellectual disabilities, and the Government should make the regular collection of data a priority. There has been an important process of deinstitutionalization over the last decade, but up to 10,000 people with intellectual disabilities are thought to remain in institutional care (ibid, p.14).



The Spanish Constitution of 1978 represented a new stage in the legal and social treatment of people with disabilities. Article 14 of the text mentioned above establishes that we are all equal before the law; therefore, no precept may generate discriminatory legal treatment. The term "handicapped" is used to refer to the term "disability" in Article 49 of the

EC, where it refers to the fact that the public authorities will carry out a policy of prevention, treatment, rehabilitation and integration of the physically, sensorial and psychologically handicapped to whom they will provide the specialized attention they require in order to enjoy the rights granted to all citizens.

Legal regulations must fulfil a protective function for people with disabilities, which is evolving towards the complete normalisation and integration of these people into society. This protective function when we refer to intellectual disability implies the recognition of certain social rights for this group, and that respond to the individual needs that may be required for the correct development of equality. To this end, different laws have been developed in Spain that is aimed at fulfilling these objectives.

Law 13/1982, of 7 April, on the Social Integration of the Disabled, was the first law to recognize this special protection for people with disabilities and became a framework law establishing guidelines for action in the field of disability. Since then, the derived legal regulations are extensive until today.

Another important step forward in Spain is Law 26/2011, of August 1, on the adaptation of regulations to the International Convention on the Rights of Persons with Disabilities and Royal Decree 1276/2011, of September 16, on the adaptation of regulations to the International Convention on the Rights of Persons with Disabilities, through which modifications in transport and health are assessed. Moreover, the existence of laws with the aim of regulating the basic conditions that guarantee equality in the exercise of the individual right of citizenship to the promotion of personal autonomy and care of people in a situation of dependency as provided for in Law 39/2006, of December 14, on the Promotion of Personal Autonomy and Care of People in a Situation of Dependency.

In Spain, recognition of the rights of persons with disabilities is defined and outlined in Royal Legislative Decree 1/2013 of 29 November, which approves the Revised Text of the General Law on the Rights of Persons with Disabilities and their Social Inclusion. This provides a definition of disability in its article 2, which states "a situation resulting from the interaction between persons with foreseeable permanent impairments and any type of barrier that limits or prevents their full and effective participation in society, on an equal footing with others". Article 4 of the Act mentioned above states that "persons with disabilities are those who have predictably permanent physical, mental, intellectual or sensory impairments which, in interacting with various barriers, may prevent their full and effective participation in society on an equal footing with others". The second paragraph of the aforementioned article also specifies that for all purposes, persons with disabilities are those who have been recognized as having a degree of disability equal to or greater than 33 per cent.

In this line and according to the updated IMSERSO database, dated 31 December 2017, the data provided by all of the territories of the Spanish State are integrated, registering a total of 3,177,531 persons with disabilities, of which 1,596,114 are men and 1,581,417 are women. In the same study, it is collected that, focusing on registered persons with an intellectual disability the figure rises to 273.418, being the age with the highest prevalence from 35 to 64 years old, adding up to 43% of the total persons with intellectual disability in our nation.

It is foreseeable that the data nowadays have varied, in the same way, we have to take into account that the data collected by the public administrations are not entirely accurate, since they only gather those people who have a disability certificate. The experience tells us that there is an unknown percentage of people who have not been valued.

Of the latest modifications and updates that follow the guidelines of the agreed international conventions, the reform of the Organic Law 1/2015 of 30 March stands out, which modifies the Criminal Code and includes some improvements in the legal protection of the collective of people with intellectual disabilities. Or the right to vote, recognized in 2018 through Organic Law 2/2018 of December 5, to guarantee the right to vote of all persons with disabilities.

3. Most important national statistical data concerning Domestic Violence and Gender-Based Violence (DV_GBV)

Gender-based violence is a violation of a person's fundamental rights and is a cause and consequence of gender inequality and, aside from its repercussions in the human being, it also has its economic impact. This is to say an estimated 226 billion euros per year, with the total cost of gender violence estimated at 259 billion euros per year in Europe (UE, 2014).



_Portugal

Although Portugal is considered a peaceful country, gender-based violence is an increasing public concern. According to the Annual Internal Security Report from 2019, domestic violence is one of the most prevalent crimes in the country (RASI, 2019). The public authorities recorded 29,498 complaints related to domestic violence, which represents 11% of increase over the previous year of approximately. Figure 1 summarises these numbers, as well as provide the geographical distribution (by Districts) of complaints registered both in 2018 and 2019:

Distritos	Ano 2018	Ano 2019	Var %	Dif	Distritos	Ano 2018	Ano 2019	Var %	Dif
Aveiro	1.805	2.036	12,8 %	231	Portalegre	330	312	-5,5 %	-18
Beja	326	310	-4,9 %	-16	Porto	4.618	4.998	8,2 %	380
Braga	1.802	1.954	8,4 %	152	Santarém	783	1.057	35,0 %	274
Bragança	293	343	17,1 %	50	Setúbal	2.466	2.829	14,7 %	363
Castelo Branco	467	593	27,0 %	126	Viana do Castelo	579	636	9,8 %	57
Coimbra	906	973	7,4 %	67	Vila Real	448	486	8,5 %	38
Évora	367	378	3,0 %	11	Viseu	813	929	14,3 %	116
Faro	1.408	1.612	14,5 %	204	Madeira	877	860	-1,9 %	-17
Guarda	367	407	10,9 %	40	Açores	950	998	5,1 %	48
Leiria	882	1.058	20,0 %	176	Não especificado	5	8	60,0 %	3
Lisboa	5.991	6.721	12,2 %	730	Total	26.483	29.498	11,4 %	3.015

Figure 1: Geographical distribution of the complaints on DV registered in Portugal (2018 – 2019) - Retrieved from RASI, 2019.

It is important to mention that regarding victimization, women were victims in 76% reported cases, while men were the perpetrators in 82%. The majority of cases (84%) are related to violence perpetrated between intimate partners, and violence against direct ascending relatives is also significant (16,2%). According to the same report, in 2019, rape has increased about 2,4% face to the previous year, and similarly to DV, women are disproportionately affected (91,9%). Regarding child sexual abuse, 77.7% of victims are female, while 22.3% are male, predominantly aged between 8 and 13 years. In almost all cases (95.2%) the offenders are adult male, especially in the 41-50 age group; the crime was perpetrated mainly by family members (44.6%).

Data provided by the Women's Association Alternative and Answer (UMAR), through its Observatory of Murdered Women (OMA, 2019) states that between 2004 and November 2019, there were a total of 531 victims of femicide in intimate and family relationships and 618 attempts to attempt femicide in these same relationships. Again, we continue to see that 53% of the murdered women maintained an intimate relationship with the homicide, while 21% had already tried to break this relationship.



The latest statistical data concerning Domestic Violence and Gender-Based Violence (DV_GBV) in Greece are provided by the 23rd issue of the Gender Equality Observatory which has been posted on the website of the General Secretariat for Family Policy and Gender

Equality. Within this issue, statistics were presented for the 13 indicators proposed by the European Institute for Gender Equality to monitor the phenomenon of intimate violence (General Secretariat for Family Policy and Gender Equality, 2019).

The most important national statistical data presented were the following:

1) The number of women who have reported domestic violence to the police in the period 2012-2017 has increased by 49%;

2) Of the 2,833 perpetrators of domestic violence in 2017, which reported gender information, 84.5% were men and 15.5% women;

3) The total number of rapes reported annually to the Greek Police in the years 2010-2017 ranged from 163-264;

4) In 2017, seven women were murdered in Greece by a member of their family - in 2016 and 2018 the murders of women by their relatives amounted to 13 in each year respectively;

5) of the total of perpetrators prosecuted for domestic violence 86.2% in 2016 were men, 84% in 2017 and 85.4% in 2018;

6) The indictments of the Prosecutors for domestic violence in 2016 were 92.8% for men, 93.4% for 2017 and 92.2% for 2018;

7) From Monday 2 April 2012 until Thursday 15 November 2018, 25,079 women were served in the 41 Counselling Centers across the territory, in person and through third parties - 22,183 cases of violence;

8) Of the 3,325 women who applied in 2018 to GGOPIF's SOS hotline 15900, 88.8% of the cases concerned domestic violence cases.

(General Secretariat for Family Policy and Gender Equality, 2019).

The most recent score for gender equality in the EU is 66.2 out of 100, according to the third edition of the Gender Equality Index 2017. During the past 10 years the score has increased by only 4 points. The top scoring country in the EU is Sweden (82.6), while Greece has the lowest score (50). The most improved country is Italy — up 12.9 points in the past 10 years to reach the 14th position. All countries have room to improve according to the 2018 European Commission report (Report on Equality, 2018).



Spain

Since 2002, in Spain, we have the Observatory against Domestic and Gender Violence (OVDG). This observatory analyses the situation of domestic and gender violence in Spain through the administration of justice in collaboration with different public bodies that also deal with this problem.

According to their latest reports, we can observe that:

- In 2019, a total of 168,057 complaints of gender violence were registered. Of these, only 3,928 (2.34%) were filed directly by the victim. The rest were presented by: family members (0.57%), police reports with the victim's complaint (69.56%), other police reports (15.56%), part of injuries received in court (9.58%), assistance services-third parties in general (2.80%), (OVDG, 2019).

- In the year 2019, 161,378 women were victims of Gender Violence, of whom 108,619 (67.31%) were of Spanish nationality, and 52,759 (32.69%) were of other nationalities, (OVDG, 2019).

- The interannual average of femicides between 2011 and 2018 stood at 54.3 women murdered per year (OVDG, 2019b).

- The average age of the victims of gender-based violence between 2016 and 2018 was 43.5 years (OVDG, 2019b).

- A total of 102 children were orphaned by the murder of their mothers in gender-based violence attacks during the three years 2016-2018. On average, 43% of those killed had minor children in common with the perpetrator or from previous relationships (OVDG, 2019b).

- The average number of children killed in the context of gender-based violence between 2013 and 2018 is 5.3 per year (OVDG, 2019c)

As for the data on domestic violence in Spain, we can see that:

- In 2018 the number of victims of domestic violence grew by 6.9% compared to the previous year. The number of victims in 2018 was 7,388. 37.79% of the victims of domestic violence were men, and 62.21% were women (INE, 2019)

- Unlike gender violence, domestic violence affected all ages more uniformly, with the incidence in the group under 18 years of age standing out, with one in every four victims (24.3% of the total), (INE, 2019)

- The report on "Child abuse in the family in Spain" (MSPSI, 2011), determined that children with some disability suffer higher rates of abuse (23.08%) compared to those without any (3.87%), concluding that disability is a factor that increases the risk of abuse.

4. Data concerning Domestic Violence and Gender-Based Violence during the pandemic (COVID-19)

At the end of 2019, China detected, in a central area of its territory, a worrying increase in cases of pneumonia, unaware of the type of virus that was causing it. On January 7, 2020, the Chinese authorities announced that they had identified the type of virus that was causing this exaggerated increase in patients with pneumonia, it is a new Coronavirus, with high

contagion capacity, initially called 2019-nCov, being later named by the World Health Organization (WHO) as COVID-19. Once the genetic code of the virus was known, cases of pneumonia caused by COVID-19 were confirmed in different countries of East Asia. In early 2020, the first cases of COVID-19 are reported in Europe.



_Portugal (Accessed July/ 2020)

As Phumzile Mlambo-Ngcuka, executive director of the United Nations department dedicated to Women, said, the situation of physical and social isolation that many states are currently experiencing is “a perfect storm for violent and controlling behaviour behind closed doors”. (ONU, 2020)

In Portugal, like in other countries the pandemic Covid-19 and the national emergency state, the safety of many women was compromised, due to the isolation and mandatory confinement with their aggressors, making them more vulnerable and unprotected in the face of domestic and gender violence. The quarantine declaration had a negative impact on the safety of women. Confinement can increase abusive control behaviours, including practices of social isolation. Limits to physical mobility potentially increase the vulnerability of women who experience gender violence.

According to Republican National Guard, complaints about domestic and gender violence decreased by 26% during March compared to the same period last year (GNR, 2020). This data, examined in relation to the number of complaints, gives an idea of the difficulties that women may encounter in filing a complaint due to confinement and direct coexistence with the abuser.

Help requests grew 180% between March 19th and June 15th compared to the first quarter of 2019. Aware of this, the Commission for Citizenship and Gender Equality (CIG) created the SOS Line 3060 and a complaint line by neighbours (800 202 148) to help facilitate support for victims in isolation. In this regard and recognizing the limits of the measures envisaged to support victims of gender violence, UMAR also recommends the “immediate removal of the aggressor from the residence when the police report the crime”.

During the Pandemic, Covid-19, Portuguese Government, through the Commission for Citizenship and Gender Equality, developed additional protective measures to support women and their children, victims of domestic and gender violence. The main measures adopted by the Government regarding domestic violence and gender-based violence were:

- Two temporary emergency reception facilities were created, with vacancies for 100 people, to support victims of domestic and gender-based violence. The two reception facilities join the 65 existing structures that are in full operation.

- Responded to the current situation of imposed social isolation, having initiated in early March a coordinated contingency plan in terms of preventing and combating domestic violence in conjunction with the National Support Network for Victims of Domestic Violence (CIG, 2020).

- It included the creation and reinforcement of means of remote assistance, the reinforcement of telephone assistance, the monitoring of situations being monitored more regularly, the appointment of a team for urgent situations and requests, presential assistance in urgent situations and the articulation with municipalities if there is a need for immediate reception (CIG, 2020).

- The creation of residential structures for elderly women due to the increase in the number of domestic violence situations among elderly women during the confinement caused by the Covid-19 pandemic. According to the data, between April 13 and June 7, there was 1171 attendance to women over the age of 65 (Monteiro, 2020).

According to the infographic displayed below, we can see the data related to assistance, face-to-face and not personal and referrals to shelters for women victims of VD / VG in the Calamity Situation and the State of Emergency. This information compiled regarding the monitoring of structures - *Rede Nacional de Apoio às Vítimas de Violência Doméstica* (RNAVVD) - National Support Network for Victims of Domestic Violence. According to the infographic:

- During the State of Emergency (March 30 to May 10) 6753 women were provided with online assistance; 308 face-to-face support were carried out; 150 women were sent to shelters, and 162 left those same structures.

- During the Calamity Situation (11 May to 7 June), 6343 women were provided with online assistance; 805 face-to-face support were carried out, 119 women were sent to shelters, and 208 women left the shelters.

- Almost 16 thousand requests for attendance were carried out by the national support network during the lockdown period.

- Data on shelters indicate that 564 people were taken in, of which 329 women and 220 children. However, there were also departures from these support structures, since 370 women completed the autonomization process at this stage (Monteiro, 2020).

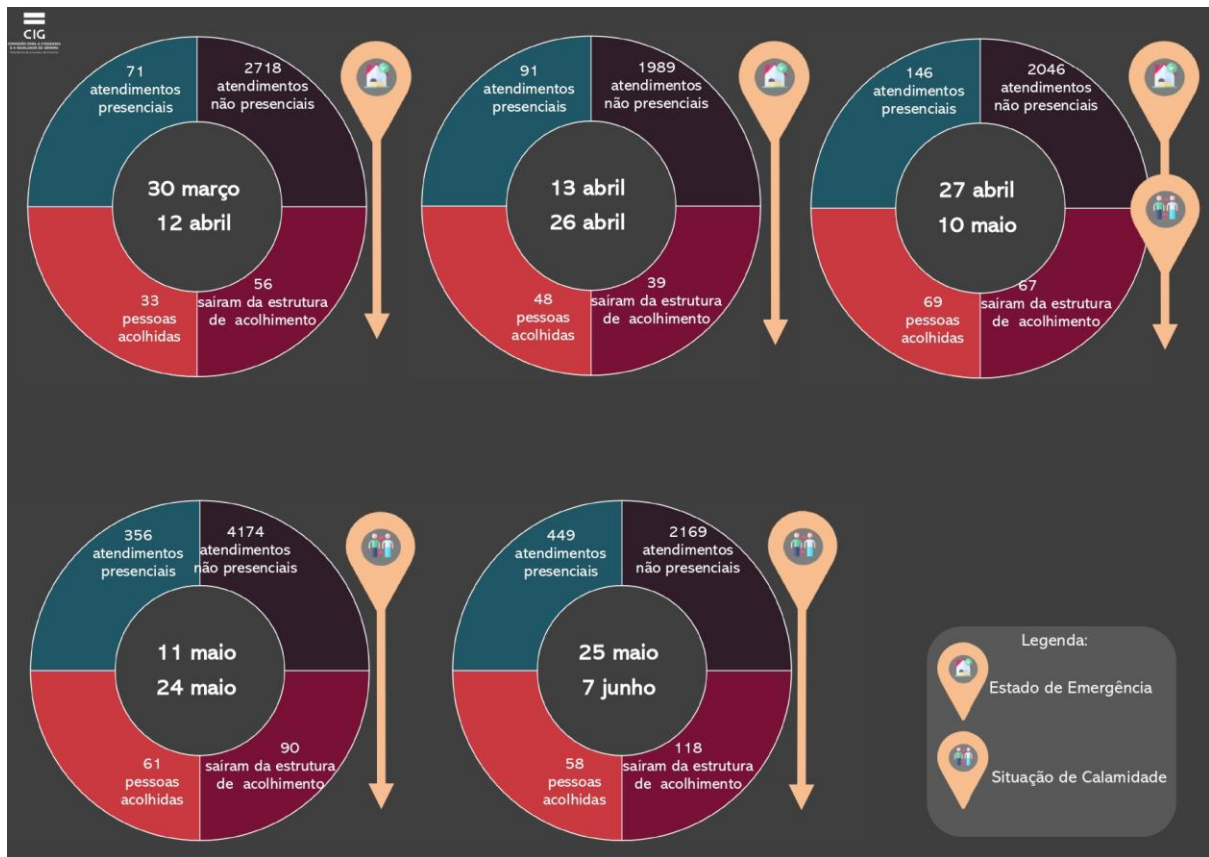


Figure 2: CIG - Infographic (data between April and June /20)

 Greece

During COVID -19 quarantine in Greece, it has been recorded, as it also has been pointed out all over the world that the victims experiencing domestic violence are in great danger of getting trapped in their homes with their abusers (Godin: 2020). The phone calls received in Greece by the Hot Line SOS 15900, which is operated by the General Secretariat for Family Policy and Gender Equality (GSFPGE), have been increased significantly, especially since the information campaign “ We stay home, but we do not remain silent” started at the beginning of April 2020 (GSFPGE: 2020).

The increased number of calls was mostly related to domestic and gender-based violence, such as sexual harassment at work or attempted rape, which, according to the Secretary-General, must be reported to the police. The first woman President of the Hellenic Republic (current President), Katerina Sakellaropoulou, in a twitter post, also quoted the relevant post by the Prime Minister on combating domestic violence, offering her own personal and symbolic contribution (President GR: 2020).

The Greek department of Amnesty International during the same period, also published a guide of 10 points for addressing the pandemic in Greece pointing among others that: "Domestic violence in conditions of stay at home restrictions it is likely to increase significantly given that women who fall victim to it no longer have way out, but also as a result

of the restriction itself. The state has to ensure that the relevant services, such as the care of women who experience gender-based violence, continue to function and that their protection is guaranteed in a time of particular danger, such as home restraint. "(Amnesty International: 2020).

According to the Secretary-General, the number of calls for violence in April 2020 reached 1,070, while the corresponding number of calls in March was 325. Equally alarming was the increase in calls for incidents of domestic violence in April, with 648 calls. Calls for domestic violence cases almost quadrupled in the quarantine month compared to the previous month, in March, when 166 calls were recorded for similar incidents (GSFPGE: 2020, Ψωμοπούλου: 2020).

The same figures showed that victims reported seven out of ten cases of violence, and three out of ten were reported by third parties, such as parents, children, siblings, neighbours, and friends. "It is clear that the campaign for the support of women victims of violence has mobilized the beneficiaries, as well as third parties, to contact the SOS line and report incidents of violence," noted Secretary-General, emphasizing that it is especially important that nine out of ten people who called the SOS 15900 line dared to report the incident of violence for the first time, to ask for support and in turn to send the message to all women "We stay home but we do not remain silent." (Naftemporiki: 2020).



On January 31, 2020, the first case of COVID-19 was detected in Spain. At this time, an exponential increase in cases of this type of coronavirus begins throughout the national territory, with the majority of the affected population concentrating in the urban centres of Madrid and Barcelona.

On March 11, 2020, the WHO declared that the new outbreak of COVID-19 is a worldwide pandemic. On March 14, 2020, by Royal Decree 463/2020, the government of Spain decrees the state of alarm throughout its territory for 15 days to face a health emergency, due to the considerable increase in infections. The state of alarm supposes a series of severe restrictions of movement for the general population and economic activity. The displacements are limited to what is essential. On March 16, the borders of the Spanish territory are closed, except for the return of residents. On March 26, the Congress of Deputies authorizes an extension of the state of alarm for 15 days. On April 1, 2020, more than 100,000 infected and 9,000 people died in Spain¹²and the situation of occupation of the beds of the Intensive Care Units of critical hospitals.

On April 9, the second extension of the alarm status is authorized for 15 days. On April 18, 20,000 deaths due to COVID-19 were verified in Spain. On April 23, a third extension of the alarm status is authorized for 15 days, and it is necessary to extend the alarm status for periods of 15 days, on May 7, May 21 and June 4, 2020. Planning for de-escalation by sector and planning for the transition to new normality is carried out in Spain, dividing the transition

¹² State of alarm chronology. <https://www.lavanguardia.com/cronologia>

period into three phases, each having standard criteria for access. As the territory controlled the number of COVID-19 infections, the Autonomous Communities have been able to gradually ease the movement restriction measures for the population and economic activity and implement sanitary protection measures to contain the spread of COVID-19.

The end of the state of alarm and the transition plan towards new normality was on June 21, 2020, maintaining a series of personal and social protection guidelines to limit the number of infections by COVID to levels acceptable to the health system. -19. At the moment, there is no known treatment or cure for this type of coronavirus, although many countries have started a health race to find a vaccine.

On July 1, the borders of Spanish territory were reopened, allowing the movement of people. At that time, the figures were 28,363 dead and more than 249,000 infected. The economic consequences in Spain of this health crisis have been considerable, at the beginning of April 2020 the figure of workers who had temporarily stopped working covered by Temporary Employment Regulatory Records due to force majeure was 3,140,772¹³.

On a social level, the consequences of the alarm period are also relevant. The situation of confinement that the population has had to go through has led to an increase in tensions within family nuclei, especially in those where the situation was already complicated before the onset of the health crisis.

The delegate of the Government of Spain against Gender Violence, Victoria Rosell reported, on June 4, 2020, that the number of calls to the assistance number on gender violence (016) increased by 41.4% during the period of the alarm status compared to 2019, going from 14,662 to 20,732, 6,070 more calls. In addition to these types of assumptions, we must add the consequences at the mental health level that have yet to be analyzed.

5. National legal framework concerning Domestic Violence and Gender Based Violence (DV_GBV).



_Portugal

In Portugal, although marital abuse was present in law documents since decades, this form of violence was officially recognised as a crime and a social problem only in the 1980s, with the ratification of the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) in 1980 (which came into force in September 1981). However, only in 2000 (reinforced in 2007 by the changes in Penal Code), domestic violence with an emphasis in gender inequalities was established as a crime of public concern. At the moment, gender violence poses a severe problem in Portuguese society, due to the alarming number of femicides and also for the setback in issues that women are facing. Portugal was a pioneer country when learning about violence against women while contemplating abuse as a public crime in the Penal Code (1982). (Castro, Ruido, & Magalhães, 2016). There is also other

¹³ Information available at: <https://www.eleconomista.es/economia/noticias/>

scarce legislation hardly applied on other crimes against person physical and sexual integrity, including against rape, childhood sexual abuse and sexual “teasing”¹⁴ .

Some advances in law and public services for women are also the result of the Istanbul Convention (2011, ratified by Portugal in February 2013), as well as the growing public awareness that the prevention of gender-based violence should be considered a priority. Successive Portuguese governments have been allocating funding to projects (national and international) with regards to the prevention of gender and domestic violence, mainly since 2001, when the legislation on the support network for victims of domestic violence was implemented.

Since 1999, a total of five National Plans have been approved and implemented in Portugal. More recently, Decree-Law 112/2009, September 16, represents an essential step forward in the fight against gender violence in Portugal. It shed light on the prevention of gender-based violence (domestic violence according to Portuguese rules), offering protection and assistance to many victims from this atrocious tanning violence. This law establishes a series of measures, among which we can highlight: Providing the rights of victims, which guarantees rapid and effective protection.

For the first time, the Victim’s Statute is created. This provided women with a series of tools as a means to fulfil victims’ rights, such as information about legal processes, services and organizations where you can find help. Additionally, this protection awoke the competent authorities to consider that:

1. there is a risk in the lives of these women and that specific assistance (legal advice and assistance) is needed not only when the criminal process is adopted but also when there is termination of compensation and restitution of assets;
2. it is needed to place a national network for the many victims of domestic violence in the format of support services by the Public Administration responsible for Citizenship and Gender Equality (CIG), Shelters and Victim Care Centers;
3. it is needed to develop awareness policies in the fields of education, information, health and social support. Specialized domestic violence courts have also been created (Magalhães, 2016).

National Plans are guiding instruments for the development of policies designed to prevent and intervene in the field of domestic violence. Its design, implementation and monitoring are the responsibility of the Secretary of the State for Citizenship and Equality (SECI) and the Citizenship and Gender Equality Commission (CIG).

This plan adopts a gender perspective explicit in the general policies against domestic violence, “extending its scope, hitherto limited to domestic violence, to other types of gender violence”, namely, female genital mutilation and sexual assaults.

¹⁴ Which includes some behaviours of sexual harassment.



The following information about National legal framework concerning Domestic Violence and Gender-Based Violence has been extracted from the Administrative Database on GBV in Greece of the European Institute for Gender Equality:

“Domestic Violence

In Greece, "domestic violence" is the commission of one of the following offences against a family member (Articles 6, 7, 8 and 9 of this act and Articles 299 and 311 of the Criminal Code):

- Domestic physical injury
- Domestic illegal violence and threat
- Rape and abuse in lewdness (lechery)
- Sexual abuse
- manslaughter by intention
- fatal injury

Observations

In the framework of the Domestic violence law, the definition of family or family in a wider definition includes spouses or parents and relatives first and second degree by blood or by marriage and by the adoption of children. The term “family” includes, where there is cohabitation, relatives by blood or marriage to the fourth degree and persons whose commissioner, court attendant or foster parent are designated as family members and any minor person who lives in the family. The provisions of this law apply to a permanent companion of the man or the woman and the children, common or one of them, provided they cohabit. They also apply to former wives and husbands.

Victim of domestic violence is also the member, in whose family was committed manslaughter by intention and fatal injury (Criminal Code, Articles 299 and 311), and the minor who witnessed one of the offences of domestic violence. Additionally, in the framework of the domestic sexual abuse, the offender is the one who works in social care provider institution when the act is directed against a person, who receives services from that institution. This act also includes measures for physical violence against a minor as a means of punishment in the upbringing. However, the domestic violence law does not include the former intimate partner violence.

Legal Source:

Act 3500/2006

Legal provisions on protection orders:

The law describes the legal provisions, the prosecution, the protection orders and provisions for the victim's assistance.

Rape

The use of physical violence or threat by person A to force person B to intercourse or other lewd acts or tolerance of them.

Observations

Special circumstance: Anyone with abuse of insanity another or incapacity to resist acting on that intercourse or other lewd acts (Criminal Code, Article 338)

Legal Source:

Criminal Code 3500/2006, Article 336

Sexual Assault (excl. rape)

Lewd gestures or suggestions regarding lewd acts brutally offending the dignity of another person in the field of sexual life.

Observations

Related information:

- An adult, who via the internet or other means of communication, acquires contact with anyone who has not completed fifteen years, gestures or indecent proposals, offends the dignity of a minor in the field of sexual life.

Anyone who abuses another person's insanity or incapacity to resist offends the dignity of this person in the field of sexual life with lewd gestures or suggestions relating to lewd acts.

Legal Source:

Criminal Code 3500/2006, Articles 337 and 338

Sexual Harassment

When any form of unwanted verbal, non-verbal or physical conduct of a sexual nature occurs with purpose or effect of violating the dignity of this person, in particular when creating an intimidating, hostile, degrading, humiliating or offensive environment.

Observations

General "harassment" is when an unwanted conduct related to the sex of a person occurs with the purpose or effect of violating the dignity of this person and of creating an intimidating, hostile, degrading, humiliating or offensive environment.

Greek law distinguishes between gender harassment and sexual harassment. The Greek law is called: "Application of the principle of equal opportunities and equal treatment of

men and women in matters of employment and occupation - Harmonisation of existing legislation with Directive 2006/54/EC of the European Parliament and of the Council of 5 July 2006 and other related provisions (Act 3896/2010)". This law provides the definitions of harassment and sexual harassment

Legal Source:

Act 3896 of 2010

Legal provisions on protection orders:

The law describes the legal protection, the civil, administrative and criminal sanctions and a regulation on the burden of proof

Stalking

Observations

There is neither a legal definition for stalking, nor relevant legislation (however the victim can be protected by other legal provisions e.g. provisions for threat)¹⁵

With the Law 4531/2018 the Greek government ratified the Council of Europe Convention on the Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention, 2018).



Spain

In Spain, until the approval of the Law on Comprehensive Protection Measures against Gender Violence in 2004, assaults against women were considered as assaults in the domestic sphere, regulated in article 173.2 of the Penal Code.

In 2004, the current law against gender violence was approved to increase the protection of women who suffered abuse by their partners and ex-partners and sensitizing society about this problem, so that it was not only treated from the Penal Code.

Both crimes, both gender violence and domestic violence are included in the Penal Code, although for the latter, there is no specific law.

The Comprehensive Protection Measures Against Gender Violence Law approved in 2004 defines this type of violence as that which "as a manifestation of discrimination, the situation of inequality and the power relations of men over women, is exercised over them by those who are or have been their spouses or those who are

¹⁵ European Institute for Gender Equality (2020). Administrative data sources on GBV in Greece available at <https://eige.europa.eu/gender-based-violence/countries/greece>. Access 11.05.2020

or have been linked to them by similar relationships of affectivity, even without coexistence. "

This law includes physical and psychological violence, as well as assaults on sexual freedom, threats, coercion or arbitrary deprivation of liberty. With this definition, only victims of gender violence are considered to be women who suffer some type of aggression by a man with whom they have or have had some type of romantic relationship. Since 2014, the minor children of women who suffer this type of violence have also been considered victims of gender violence.

However, this law does not contemplate certain types of aggression against women that the Spanish State would have to include to comply with the Istanbul Convention ratified in 2014. These include forced marriages, female genital mutilation, trafficking, abortion and forced sterilization, sexual harassment, sexual violence or even the assistance, complicity or attempt of some of these actions.

Today, crimes such as forced prostitution, sexual harassment, sexual abuse or assaults on a family member are included in the Penal Code, without being considered as a specific type of gender violence. Therefore, all these crimes are prosecuted by the Penal Code. However, there are no aggravating factors of the crime of gender violence nor the special protection that is contemplated for its victims.

Thus, the aim of the Comprehensive Protection Measures against Gender Violence Law is to provide comprehensive treatment to the problem of family abuse and specifically focused on violence against women, not only in the strictly criminal measures of the Penal Code, but also of sensitization, prevention and detection, social and legal assistance, institutional and judicial protection, psychological, and economical.

The objectives are to protect the victim, deter the aggressor, and "protect the weaker party by humanizing criminal law." Thus, for example, specialized organizations such as the Violence against Women Courts and the Prosecutor's Office against Violence against Women are constituted; and changes are made to the Ordinance automatically considering the lack of injuries, threats and coercion as a crime if the active subject of the crime is male and the taxable person "is or has been his wife or has maintained a relationship of similar affectivity, whether there has been coexistence or not, that is, a particularly vulnerable person who lives with the aggressor".

Besides, the protection measures that were being carried out depending on the severity of the cases are contemplated: the departure of the aggressor from the home, the restraining order, the order to suspend communications and the deprivation of parental authority and custody of minors or suspension of the visitation regime. Lastly, to report cases of gender violence, an institutional helpline for assaulted women is enabled, 016, which is permanently active (24 hours a day, 7 days a week, and every day of the year), is free and leaves no trace on the phone bill, to prevent the abuser from discovering that your partner has called there.

Finally, it should be noted that, according to Spanish regulations, it is a legal obligation for all citizens to report to the competent authority any crime of gender and domestic violence, especially if they are aware of them due to their positions, professions or trades (articles 259 and 262 of the Criminal Procedure Law).

6. Existing social policies for victims/survivors of DV_GBV with ID



_Portugal

As established in Penal Code (article 152^o), domestic violence is the act by he/she who, repeatedly or not, inflicts physical or psychological abuse, including corporal punishments, freedom deprivation and sexual assaults towards (amongst many others): d), a person who is particularly defenceless due to age, disability, disease, pregnancy or economic dependency, that resides with the perpetrator. All these are punished with a prison sentence from one to five years if a more severe penalty does not fit the perpetrator by force of legal dispositions.

Thus, in the face of the experience of violence, the person with a disability is placed in a situation of more significant disadvantage and fragility, when compared to a person without a disability (SNaP: Specific Needs and Protection, 2016).

This being stated, it was possible to verify that, in terms of existing social policies, namely, in the areas of healthcare and human services, Portugal still has a long road ahead in order to tackle this lack.

Currently, there are 133 support structures, 39 house shelters and 26 emergency shelters and 68 counselling centres (Rede Nacional de Apoio às Vítimas de Violência Doméstica, 2019). Also, there are counselling offices in police forces and local authorities (mostly in Lisbon and some small towns of the hinterland).

Out of the 39 house shelters, only one¹ is suited for women victims of violence with disabilities. It temporarily accommodates 7 people and the conditions to admission are as follows:

- there must be a moderate or severe intellectual disability, temporary or permanent, associated or not with a physical disability;

- these women are framed in specific social responses, that is, Occupational Activity Centers, Vocational Training Centers and / or Residences for people with disabilities;
- if not, they are signalled by the National Social Security Services.

This research presents a severe lack of support in terms of existing social policies for victims/survivors of DV_GBV with ID and it highlights the underlying need that victims of DV_GBV with ID go through when seeking support in these terms.

¹ CERCIAG: Casa de Abrigo para Mulheres Vítimas de Violência com Deficiência e/ou Incapacidade (<http://www.cerciag.pt/servicos/casa-de-abrigo>)



The General Secretariat for Family Policy and Gender Equality (GSFPGE) is the main public body to set up and operate Counselling Centers for Violence against Women.

The Hotline SOS 15900, which is operated by GSFPGE is a nationwide service that enables women victims of violence or third parties to communicate directly with a gender-based violence agency. The service is staffed by psychologists and sociologists who provide immediate assistance in emergency and emergency violence incidents on a 24-hour basis, 365 days a year. At the same time, there is a possibility for electronic communication of women through the email address: sos15900@isotita.gr as also the provision of all necessary information from the web page: <http://womensos.gr/>. In addition, GS runs multimedia campaigns and events, as also it launches institutional documents, information material and publications.

Under the authority of the General Secretariat, there is a nationwide network of Counseling Centers operated by specialized scientific staff of consultants focusing on gender perspective (psychologists, social workers, and lawyers) and provide FREE information and counseling services to women targeting psychosocial support to them.

GS's Counseling Centers are already operating in the 14 regional capitals of Greece namely in Athens, Piraeus, Heraklion, Lamia, Patra, Tripoli, Ioannina, Corfu, Komotini, Larissa, Mytilene and Ermoupoli, Thessaloniki and Kozani.

The GS's Counselling Centers are part of a nationwide network of 61 structures to prevent and address all forms of violence against women (domestic, rape, trafficking, sexual harassment) designed and created by the GS with the funding of the NSRF under the National Program on Gender Equality 2010-2013 (see figure 1).

Δομές για την Αντιμετώπιση της Βίας κατά των Γυναικών

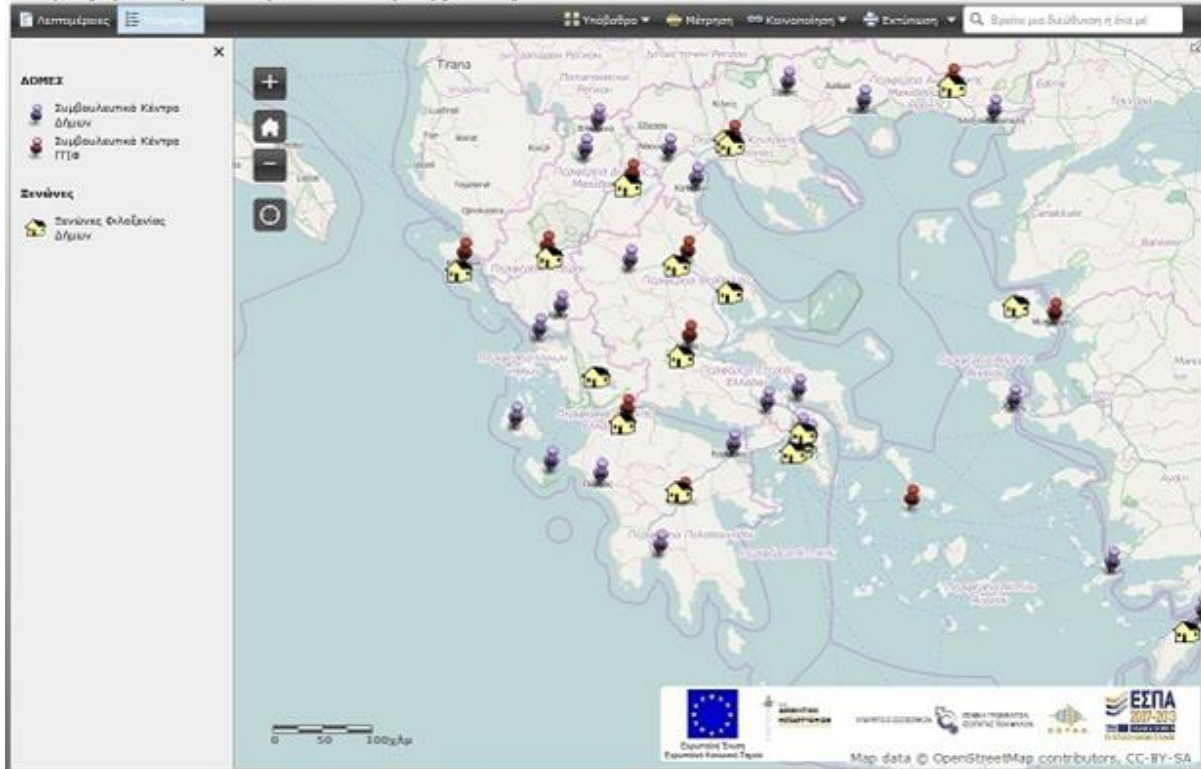


Figure 3: Geographical dispersion of counselling centres and hostels in Greece. 2019. From www.isotita.gr

The network also includes 27 municipal counselling centres, 18 hosting centres, and 2 hosting centres operated by the National Solidarity centre.

The twenty-seven (27) Counseling Centers have been set up in the following municipalities: Alexandroupolis, Artaion, Veria, Elefsina, Zakynthos, Thebes, Kavala, Kalamata, Karditsa, Kefalonia, Kastoria, Katerini, Keratsini- Drapetsona, Corinth, Kos, Peristeri, Preveza, Pyrgos, Rethymnon, Rhodes, Serres, Trikkala, Florina, Fili, Chalandri, Chalkida and Chios.

The eighteen (18) Hostels for Women Victims of Violence and their Children have been set up in the following municipalities: Agrinio, Athens, Volos, Heraklion (Crete), Thessaloniki, Ioannina, Corfu, Kozani, Komotini, Kordelio Lesvos, Patras, Piraeus, Rhodes, Tripoli and Chania. The two (2) Hostels under the authority of the National Center for Social Solidarity (EKKA) are in Athens and Thessaloniki.

(Source, General Secretariat for Family Policy and Gender Equality (GSFPG), 2020)

The Hellenic Civil Protection Ministry also operates a management centre on the issue of domestic violence and victims' rights. Under this arrangement, which was recently announced in November 2019, domestic violence cases receive specialized support from staff who are adequately trained to handle these incidents at County and Regional level.

The operation of the Domestic Violence Response Services aims to:

- Protecting and supporting victims, with a focus on preventing secondary victimization.
- Encouragement and better management of complaints;
- Preventing and tackling domestic violence crimes;
- Coordination of all services involved and systematic monitoring of cases;
- The training and continuous training of the Greek Police staff;
- Raising citizens' awareness.

The new operational structure is coordinating and supports the Police Services that receive and handle complaints of domestic violence cases. The structure includes 73 services with the Department of Domestic Violence Response Unit of the General Police, Directorate of the Hellenic Police Headquarters and the Domestic Violence Response Offices at the offices of the General Police Divisions in the fourteen regions of the country and the Police Divisions of each Prefecture.

As the exercise of all forms of violence or abuse: psychological, physical, sexual and emotional, is prosecuted by the Law, the Hellenic Policy encourages victims of domestic violence and persons who can identify these cases to contact the nearest Police Station, and specifically to:

-Call 100 (national emergency police hotline) in case of emergency or contact the nearest Police Department;

-Get immediate medical care and necessary diagnostic tests. Tell the doctor the truth about what happened to you;

-Call the SOS 15900 hotline of the General Secretariat for Family Policy and Gender Equality who provides psychosocial support, legal counselling, and hostel accommodation and reach out to specialist services for abused women;

(Source: Hellenic Police, 2019. Domestic Violence, press release on 4.11.2019)

Additional services are also provided by NGOs operating on the field of discrimination against women at all levels of social, political and economic life (see below section 7).



_Spain

In Spain, there are no social policies aimed explicitly at victims of gender and domestic violence with intellectual disabilities. However, several rules regulate assistance and support for victims of this type, with and without disabilities: Law 35/1995, of December 11, on aid and assistance to victims of violent crimes and against freedom sexual; Organic Law 1/2004, of December 28, on Comprehensive Protection Measures against Gender Violence; and Law 4/2015, of April 27, of the Statute of the victim of the crime.

The first establishes a public aid system in favour of direct or indirect victims of intentional and violent crimes committed in Spain resulting in death, or serious injury, or serious

damage to physical or mental health. Besides, aid is provided for the direct victims of crimes against sexual freedom, even when they are perpetrated without violence.

On the other hand, the aforementioned Law on Comprehensive Protection Measures against Gender Violence includes a series of social aids and benefits for victims of gender violence.

Lastly, the Statute of the Victim has the vocation of being the general catalogue of the rights, procedural and extra-procedural, of all victims of crime, despite the references to special regulations on victims with special needs or with a special vulnerability.

For certain groups of victims with special vulnerability (including victims with intellectual disabilities), it is intended to grant them special protection in this text by transposing two other recent Directives: Directive 2011/92 / EU of the European Parliament and of the Council of 13 December 2011 on combating sexual abuse and sexual exploitation of minors and child pornography, as well as Directive 2011/36 / EU of the European Parliament and of the Council of 5 April 2011, relating to the prevention and fight against trafficking in human beings and the protection of victims.

Also, there are numerous public resources to support victims of this type of crime, although their structure and composition depend in this case on each Autonomous Community. For example, in the Community of Madrid, there is the Network of the Regional Observatory on Gender Violence, made up of residential and non-residential centres for victims of gender violence, the 54 municipal points of assistance to victims of gender violence, and the telephone Help 012.

7. Existing social policies for people with ID



_Portugal

The territorial distribution of responses towards people with disabilities shows a high concentration in the districts located along the coastal line. In 2018, Braga, Porto, Aveiro, Viseu, Coimbra, Leiria, Lisbon and Setúbal brought together 71% of the total supply of responses for this population and 74% of the Centers of Occupational Activities (CAO) response (Open Letter - Network of Services and Equipment Report, 2018).

The coverage rate of the main responses for children, young people and adults with disabilities has experienced, in recent years, a positive progression in the number of seats

available (+ 21 900, between 2000-2018) and in the daily frequency of users in the CAO in 88% of responses, ranged from 4 to 8 hours. Of the universe of users who participated in CAO's response in 2018, the majority (56%) participated in activities/projects for inclusion in the society considered. Of the group of users involved in activities, 97% participated in actions with people without disabilities (Open Letter - Network of Services and Equipment Report, 2018).

Approximately 18% of the population aged 5 and over said they had many difficulties or were unable to perform at least one of the six daily activities mentioned in the previous item (Census, 2011). It is understood, therefore, that this 18% of the population lack specialized care to assist in daily routine activities. According to the Open Letter - Network of Services and Equipment Report (2018), to what regards to available services, some of are addressed to this specific audience are:

1. Centro de atendimento/acompanhamento e animação para pessoas com deficiência (Center for support and animation for people with disabilities)
2. Serviço de apoio domiciliário (Service of home support)
3. Centro de atividades ocupacionais (Centers of occupational activities)
4. Acolhimento familiar para pessoas adultas com deficiência (Family fostering for adults with disabilities)
5. Lar Residencial (Residencial home)
6. Apoio domiciliário integrado (Integrated home care support).

It is essential to mention that the rural police (GNR National Republican Guard) has a specific programme for supporting people with disabilities, and according to the RASI (2019), they have received 3,113 emergency calls related to abuse, neglect and discrimination against disabled people during the previous year



Greece

According to recent Greek legislation, people with disability rights are protected for equal treatment and equal opportunities with the rest of the population in education, employment, health, and social services, with the aim of their participation in all activities of life (social, economic, cultural), following their needs and particular abilities (Ratification of the Revised European Social Charter, 2016)

The legislation complies with international criteria and international regulations, such as the United Nations Standard Rules of the UN on Equal Opportunities for People with Disabilities (1993), and guidelines on combating discrimination in space work as provided for in Article 13 of the Amsterdam Treaty and to Council Directive 2000/78 / EC of 27 November 2000 (Directive on Employment), which forms a general framework for equality employment and employment treatment (Monitoring report, 2006).

Within the Constitution, Article 25 (1) expressly stated that "human rights as an individual and as a member of the community as a whole and the principle of the rule of law

are guaranteed by the state". This applies to all members of society, and therefore to persons with disabilities, for which Article 21 (6) specifically states that 'they have the right to enjoy measures ensuring their autonomy, professional integration, and participation in social-economic and the political life of the country' (Kontiadis, Mousmouti, 2014).

In the Greek institutional context, the concepts, infrastructures and reforms associated with the independent living of persons with ID are largely linked to the psychiatric reform that began in the 1990s. This effort aimed to develop a community mental health service system and the transition from closed-type centres to different community structures mainly for people with mental disabilities and people with intellectual disabilities (who lived in institutions). Similar actions were developed in the 2000s and within the framework of the National Health and Social Solidarity System for people with disabilities at large. In Greek law, in addition to the structures created in the context of psychiatric reform, a number of structures are provided for the rehabilitation and social reintegration of people with physical, sensory and intellectual disabilities (ibid).

The Law 3329/2005 (81 / A / 04-04-2005) "Regional Establishment of the National Health and Social Solidarity System" defines the right to organize and operate services for the rehabilitation and reintegration of people with disabilities, such as protected apartments, hostels, boarding houses, protected workshops and vocational training and reintegration centers, while the terms, conditions, procedure, organization of the aforementioned services are laid down by ministerial decisions (Article 21) (ibid).

In addition to the independent living structures, there is also provision for the operation of additional structures that provide services to persons with disabilities mainly to integrate them into community life, such as Protected Productive Workshops, Creative Employment Centers for Children with Disabilities, Network of Support Centers for People with Disabilities, and Physical and Medical Rehabilitation Centers (Law 4025/2011) (ibid).



Spain

In Spain, two fundamental laws include social policies for people with disabilities: Royal Legislative Decree 1/2013, of November 29, which approves the Consolidated Text of the General Law on the rights of people with disabilities and of their social inclusion; and Law 39/2006, of December 14, on the Promotion of Personal Autonomy and Care for people in situations of dependency.

The first of these recognize persons with disabilities as holders of a series of rights and public authorities as to the guarantors of the real and effective exercise of those rights, following the provisions of the International Convention on the Rights of Persons with Disabilities. And it establishes the regime of infractions and sanctions that guarantee the basic conditions in terms of equal opportunities, non-discrimination and universal accessibility for people with disabilities.

The norm includes a series of definitions, including those of direct, indirect, association and harassment discrimination, and reinforces the special consideration of multiple discrimination. And it is governed by the principles of respect for dignity, independent life,

equal opportunities, non-discrimination, universal accessibility, design for all people, civil dialogue and cross-cutting policies. It is expressly recognized that the exercise of the rights of persons with disabilities is carried out under the principle of freedom in decision-making and that girls, boys and women with some type of disability are uniquely protected.

The areas in which this Law is applied are those of telecommunications and the information society, urbanized public spaces, infrastructures and buildings, transport, goods and services available to the public, and relations with public administrations, the administration of justice, cultural heritage and employment.

Each of these areas is addressed in the implementing regulations of the Law, which indicates the obligation that all environments, products and services must be open, accessible and practicable for all people gradually and progressively. To do this, it determines deadlines and calendars in making the necessary adaptations. It includes a title dedicated to the rights of people with disabilities, which will take their protection to all areas, from health protection to comprehensive care, including education and employment, social protection, to independent living and participation in public affairs.

Finally, concerning the right to education, an inclusive educational system is ensured, paying attention to the diversity of the educational needs of students with disabilities, by regulating the supports and corresponding adjustments.

On the other hand, the so-called Dependency Law creates and regulates the current System for Autonomy and Care for Dependency, which is the set of services and benefits aimed at promoting personal autonomy, as well as the protection and care of people, through duly accredited public and private concerted services.

8. Projects or services/NGOs working with victims/survivors of DV_GBV with ID



_Portugal

The SNaP (Specific Needs and Protection) project addresses the issue of protecting women victims of violence in intimate relationships and domestic violence, in a situation of particular vulnerability, such as very elderly women, women with disabilities and women with health problems, when they cannot live independently. The overall conclusions of this report indicate that:

1. “The system of protection of victims of domestic violence as a whole is at stake since the guiding principles of the Portuguese criminal and criminal procedural system focus on the offender and aim at ceasing the criminal activity and not the protection of the victim as a first line principle”;

2. Additionally, given the lack of data and studies on victims of domestic violence with intellectual/mental disabilities in Portugal, it is challenging, based on available information, to assess the impact of violence against these women and to adequately explore their access to protection mechanisms as there is a lack of nationwide procedures to evaluate such needs and identify them accurately;
3. Another issue is the difficulty found in the identification of their vulnerabilities;
4. “Lack of means, shortage of vacancies, unequal distribution throughout the country, the limited extent of the services that can be provided (also in the type of services available for the needs at stake), the existence of staff properly trained, the costs involved, and the bureaucracy in getting timely support in cases of financial insufficiency, are serious problems to be met;”
5. “A topic of particular concern is that of immediate protection. New solutions need to be found, as services tend to be little differentiated and specialised since the specific responses for people with ID who are victims of DV, and VG-B are almost null;”
6. “Due to the heightened social and economic vulnerability, girls and women with disabilities are more exposed to gender-based violence than boys and men with disabilities.”

Another project worth mentioning is the Disability Rights Promotion International (DRPI). Its purpose is to establish a sustainable monitoring system of the Human Rights of people with disabilities, all around the world bridging organizations of people with disabilities, researchers, organizations (governmental and nongovernmental) of human rights in the national and international framework, therefore facilitating the development of competences and skills in this field of action. DRPI started to be implemented in Portugal in October 2010, and it constitutes an unprecedented initiative in the empowerment and monitorization of the human rights of people with disabilities in our country. It is intended to set the conditions for systematic activities *in pro* of law and politic monitoring, social practices and media depictions of disabilities in the Portuguese society. This ought to be done under the principles of the Human Rights and, in particular, in accordance with the guidelines of the Convention on the Rights of People with Disabilities, with the higher purpose of contributing to the scientific knowledge of all forms of discrimination and human rights' violation of which people with disabilities are victims in Portugal.



_Greece

There is a lack of information and most probably lack of specialized provision of projects and services dedicated to victims of DV_GB with ID. The corresponding group can contact for additional information and services to the national public body, the General Secretariat for Family Policy and Gender Equality (GSFPGE), the National Center of Social Solidarity (www.ekka.org.gr) and the specialized counselling centres. Within the National Action Plan for Gender Equality 2016-2020 it is stated that special reference should be given to women with disabilities in awareness-raising and information campaigns on gender-based violence and the integration of the dimension of disability into all public policies against gender-based violence; production of relevant awareness material dedicated to people with disabilities (with different forms and "languages"); creating protocols and rules of ethics for professionals who care and

support women with disabilities in order to prevent gender-based violence and abuse as to protect women with disabilities effectively; protocols and ethics for professionals who care for and support women with disabilities in order to prevent gender-based violence and abuse and to effectively protect women with disabilities (General Secretariat for Family Policy and Gender Equality (GSFPGE, 2016).

In addition, the National Confederation of Persons with Disabilities has an active and intervening role as it can be seen from the comments addressed to the Secretary General on the occasion of the implementation of the National Action Plan for Gender Equality 2016-2020.

As it is pointed out according to NCPWD, the reference to women with disabilities / chronic diseases seems to be typical rather than substantive. Although disability / chronic disease is presented as a factor of vulnerability in the "introductory / theoretical" section of this field, none of the planned/targeted actions are addressed to women with disability / chronic disease. In most of the other fields, women with disabilities are simply ignored.

Furthermore, as it additionally stated, women with disabilities do not constitute a homogeneous group. In addition to the type and degree of disability, they can be differentiated through the interaction of multiple reasons for discrimination (national or ethnic origin, age, religious or ideological beliefs, economic status, etc.). The homogenization of women with disabilities / chronic diseases is a distinguishing factor. The General Secretariat must encourage the recognition of the different makings that may compose the identity of women with disabilities (NCPWD, 2017).

Nevertheless, there is a set of associations and NGOs operating on the frame of gender equality and the issue of domestic violence. In the following paragraphs, we will introduce the aims and the scope of three different organizations.

Diotima (<https://diotima.org.gr>) Women's Studies and Research Center is a non-profit organization with a profile of a non-governmental organization. It was created in 1989 on the initiative of a group of women from different scientific backgrounds. Throughout its multiannual activities, it has consistently promote and address the discrimination against women at all levels of social, political and economic life.

Women's Network of Europe (<http://enowhumanrights.gr>) is a voluntary women's association, operating and organizing actions on women's issues in the European Union. Members of the Network are women and groups of women participating in campaigns aimed at influencing Greek and European equality policy. The aims of the Network include human rights and gender equality, focusing mainly on personal and economic development (empowerment-participation) of socially excluded women, in particular to the extent that European policies influence them.

The **Center for Equality Research** (<https://kethi.gr/>) is a Legal Entity under Private Law, established in 1994 and supervised by the Ministry of Labor and Social Affairs. KETHI is actively engaged in promoting gender equality in all areas of social, political, cultural and economic life, with the main aim of eliminating gender discrimination and inequality. It conducts

research and studies and implements national and European action campaigns on gender equality.



_Spain

In Spain, there is only one network of services specifically dedicated to the care and assistance of victims with intellectual disabilities: the Unit for the Care of Victims with Intellectual Disabilities, currently made up of several private initiative entities (Fundación A LA PAR, Plena Inclusión La Rioja, ATADES, Laborvalía and Catalònia Fundació Creative).

This is a pioneering project in Spain, born in 2010. A new model of methodological intervention is proposed, both at a therapeutic, police and judicial level, the latter highlighting the introduction of the figure of the facilitator. This figure is based on the English model of the ISVA, a public service specialized in cases of sexual abuse of vulnerable victims that adapts the entire criminal process to their needs. Besides, forensic tools such as the "Protocol for Assessing Capabilities" have been developed, which guarantee access to justice and reduce the effect of revictimization.

The service aims, through the figure of the facilitator, to adapt the passage of people with intellectual disabilities through the police and judicial systems. This adaptation contributes to more effective access to justice for these people since it allows the procedures to be adapted to the limitations and capacities of each of the people with intellectual disabilities who have been the victim of abuse or mistreatment and have decided to report.

The direct intervention of the facilitator contributes to the awareness of police and judicial agents of the need to adapt their procedures according to the UN Convention on the Rights of Persons with Disabilities.

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10. Articles/Reports about major risk and protection mechanisms of victims/survivors of GV/DV with ID



_Portugal

Reference: FENACERCI (2010). *Roadmap for the Prevention of Mistreatment of Persons with Intellectual Disabilities and / or Multi Deficiency*. Lisboa. https://www.fenacerci.pt/web/publicacoes/fenacerci/pro4_rot_Brochura_ingles.pdf

A summary of the topic studied: This evaluation and diagnosis project is a roadmap for the prevention of maltreatment of persons with intellectual and/or multiple disabilities. It aims to identify, record and flag situations of maltreatment and set out a protocol for the prevention of and action against neglect, abuse, maltreatment and discrimination, i.e. risk and protection factors. The concept of maltreatment is based on the Ecological Systems Theory.

Targeted population/sample: women with intellectual disabilities under maltreatment circumstances

Main results: three dimensions were scoped: the risk to disabled persons and their families, protection of disabled persons and their families and crime. The following signs and symptoms must be analysed in a case of physical abuse: The most recurrent indicators of this type of maltreatment are inappropriate stories and justifications and refusal to explain the injury on the part of family or caregivers. The existence of contradictory explanations of the same situation from different interlocutors should be taken into account when analysing what the disabled person's family and caregivers have to say. Other relevant factors are delays in seeking medical attention, frequent absences from the organisation while waiting for injuries to heal, a history of old injuries and signs of violence that may not leave visible marks on the person's body (e.g. hitting with a wet towel).

Reference: SNaP: Specific Needs and Protection (2016). *Domestic Violence: Specific Needs and Protection - National Report | Portugal*. http://snap-eu.org/report/Report_Portugal_eng.pdf

A summary of the topic studied: this study focused more on the needs and protection factors of its sample and not so much in the risk factors. The authors also state that scientific studies from different countries indicate that: “the current practice of protective orders is problematic because the support needs of victims with so-called specific needs are not considered or not adequately taken into account. With that in mind, the research teams in the partner countries (Austria, Ireland, Germany, Poland, Portugal) examined national protective measures for their suitability and efficiency for different victim groups with specific needs. On the country level, SNaP therefore focused on the following issues: The focus areas for analysis of the discourse of the respondents were the following: (1) The identification of specific needs victim groups, (2) Characteristics of vulnerability in specific needs victim groups, (3) Factors influencing/affecting the access to justice, (4) Identification of vulnerabilities by law enforcement agents and judicial authorities and impact on decisions made, (5) Protection and victim support measures for victims with specific protection needs, (6) The execution, adaptation and monitoring of coercive measures, and (7) Alternatives to vulnerable victims’ protection. The study, therefore, focused on the lived practice, the essential issue was whether and how those involved are able to identify specific needs and how they react to them. Another point we needed to clarify were the factors that influence decisions about imposing protective measures in cases with victims with specific needs. We analysed from the victim’s perspective what prevented them from having recourse to measures of victim protection, and which problems confronted them when they turned to the police or other agencies.

Targeted population/sample: A convenience sample of professionals dealing with domestic violence victims was selected to be interviewed in this study based on accumulated knowledge and contacts of the research team or by the suggestion of the professionals interviewed, including during the four exploratory interviews conducted in Portugal. Professionals were selected based on their role in the judicial, police, and social protection systems towards victims of domestic violence, and experience with domestic violence cases. To the number of 25 interviews with professionals agreed for the purposes of this study we added three more interviews in order to gather additional information on specific important aspects. Out of the 30 professionals initially selected, contacted by email followed by telephone call, 28 agreed to participate in the study. On the one hand, interviews were conducted with public prosecutors in departments of criminal investigation of the public prosecution (Évora, Coimbra, Oporto and Lisbon), judges and law enforcement agents; two National Republican Guards (GNR) and two officers from the Public Security Police (PSP) in Lisbon and Coimbra. These are members of second line special police units for domestic violence victims and other vulnerable victims. On the other hand, victim support, social care and lobby organisations professionals were interviewed. Namely, victim support professionals in shelters for women victims of domestic violence and their children and in victim support centres (Oporto, Évora and the metropolitan area of Lisbon; a professional of a national lobby organisation for the rights of people with disabilities and a healthcare professional working on elderly care in Lisbon metropolitan area.”

Main results: The main results of this work give evidence that. “the system of protection of victims of domestic violence as a whole is at stake since the guiding principles of the Portuguese criminal and criminal procedural system focus on the offender and aim at ceasing

the criminal activity and not the protection of the victim as a first line principle.” Additionally, given the lack of data and studies on victims of domestic violence with intellectual / mental disabilities in Portugal, it is very difficult, based on available information, to assess the impact of violence against these women and to adequately explore their access to protection mechanisms as there is a lack of nationwide procedures to specifically evaluate such needs and identify them. Another issue is the difficulty found in the identification of their vulnerabilities. The authors also state that: “Lack of means, shortage of vacancies, unequal distribution throughout the country, the limited extent of the services that can be provided (also in the type of services available for the needs at stake), existence of staff properly trained, the costs involved, and the bureaucracy in getting timely support in cases of financial insufficiency, are serious problems to be met. A topic of particular concern is that of immediate protection. New solutions need to be found, as services tend to be little differentiated and specialised since the specific responses for people with ID who are victims of DV and VG-B are almost null. Due to the heightened social and economic vulnerability, girls and women with disabilities are more exposed to gender-based violence than boys and men with disabilities.”



There is a shortage of information related to the phenomenon of domestic violence against persons with ID. The issue is either more generally treated as part of the protection mechanism against gender, and domestic/ intimate violence or either is addressed as part of the sexual development studies and the need for sexual education for the specific target group. In the following part, examples of both streams are given.

a) Abuse of Women

Next door’s victims’ stories and shocking evidence of the rapid increase in domestic violence by the General Secretary for Gender Equality, Fotini Kouvella, 2017.

"Domestic violence has taken a huge growth," General Secretary said in the article, adding: "Gender-based violence has to do with the position of power, the way one sex dominates the other, considering the other one as a personal estate. The data are overwhelming in terms of the percentage of violence perpetrated against women by men. There are husbands who underestimate the woman, consider her inferior, and continue to practice the patriarchal stereotypes that dominate the society. The financial crisis is one of the causes that favor this situation, but the roots of the violence lie in family inequality and society's stereotypes about the role of women. "

(Source: Lifo, 2017)

b) "Domestic violence at a period of economic crisis.

The perspective of professionals and suggestions for improvement applicable policy”. The research which comes from the Hellenic division of the Action Aid organization is written by Katerina Glyniadaki, PhD Candidate European Institute, London School of Economics and Political Science, Dr. Anna Kyriazis, Postdoctoral Researcher Juan de la Cierva-Formación,

Institut Barcelona d 'Estudis Internacionals and Maria Mourtzaki, Lawyer, Head of Research and Advocacy Activities, ActionAid.

The research seeks to answer the question of whether the financial crisis has affected the increase in domestic violence cases - if indeed there has been an increase - and how public policies and structures that provide services to survivors of domestic violence and their children have been affected. The research is structured into two major themes to adequately cover the psychosocial and legal aspects of the phenomenon, including extensive recommendations to the competent authorities and a list of legislation and case law.

The survey conducted between January - September 2018 and based on the findings of interviews with professionals handling domestic violence cases in Athens and Piraeus found that despite the positive steps taken, implementation of the relevant legal framework is problematic. The impact of the economic crisis is significant not only in terms of the changes it has brought to the family environment but also in the inadequacy of the means available from the public or private sectors to cope with the increasing number of cases of violence.

In particular, as emerged from the interviews, the economic crisis seems to be cultivating the ground for tensions that often lead to violence in various forms. At the same time, more and more women are turning to counselling centers to report violence against them, usually by their partners, and against their children.

However, as a large number of these cases are not reported and, as the only data available at the moment are those of the General Secretariat for Gender Equality, the picture of domestic violence is incomplete. Inadequate recording negatively affects the design of victim prevention and support programs. As a Social Worker in an NGO for the protection of women's rights typically said, "There is a lot of violence and few hostels." The education and information of professionals who come in contact with victims of domestic violence are constantly improving, but much effort is still needed, which is hampered by the limited financial resources available.

(Source: Actionaid, 2019)

c) Sexuality of people with intellectual disability in Greece

The purpose of the study is to investigate the sexuality of people with intellectual disabilities and it is signed by Dr. Giolanda Dimou (2008). The sample of the research consists of 62 persons with intellectual disabilities diagnosed with marginal intelligence and mild mental retardation from 18 to 33 years and the control group includes 62 people from the general population equally divided by gender and age of the disabled.

The empirical data were collected using the Structured Interview Method for People with ID and the SexKen-ID Scale, while data from the general population were collected using the questionnaire "Sexual Knowledge, experience and needs"(SexKen). The Scale and Questionnaire assess the levels of knowledge, experience, feelings and needs in 12 different areas of sexuality. The analysis of the results of the research shows that: I. People with intellectual disabilities exhibit limited levels of sexual knowledge and experience in relation to individuals from the general population, negative feelings about sexuality, and increased needs for sexual awareness. II. The socio-educational level of the parents of the disabled is

not related to the sexuality of the disabled. III. The sexuality of men with intellectual disabilities differs from that of women with intellectual disabilities. IV. The sexuality of people with cognitive disabilities who are diagnosed with marginal intelligence differs from that of people with intellectual disabilities who are diagnosed with mild intellectual disabilities. V. The sexuality of people with intellectual disabilities living in the community differs from that of those who live in day care. VI. The sexuality of people with intellectual disabilities of the adolescent age group is not different from that of the younger age group. VII. Sexual knowledge, experiences, feelings and needs of people with intellectual disabilities are positively correlated with each other. VIII. Evaluation of the content of the responses of mentally handicapped people to sexuality issues shows that there are various differences in the group of people with disabilities. The findings of the study advocate the need to design, organize and implement sex education programs for the sexual awareness of the disabled and to promote a sexual education policy that safeguards the rights of the disabled.

(Source: Dimou, 2008)



Spain

In Spain, there is little research on vulnerability factors and, by extension, protection factors, for people with disabilities, much less if we talk about intellectual disability. Most of the references are revisions of investigations from other countries or revisions of documentation that analyses the situation of persons with disabilities who suffer violence.

1. Sexual abuse of persons with intellectual disabilities.

Verdugo, M. A., Alcedo, M. A., Bermejo, B., & Aguado, A. L. (2002). Sexual abuse in people with intellectual disabilities. *Psicothema*, 14, 124-129. Retrieved from <http://www.psicothema.com/pdf/3482.pdf>

This is a review of the sexual abuse of persons with intellectual disabilities. It explores the vulnerability of persons with disabilities to this type of abuse, as well as a series of myths and beliefs internalized by society about the sexuality of persons with intellectual disabilities. These negative attitudes about the sexuality of persons with intellectual disabilities lead to a lack of knowledge and a poorly adjusted view of persons with intellectual disabilities about their own sexuality, which in turn exposes them to situations of risk of sexual exploitation or abuse. According to the article itself, this leads to a lack of planning for sexual education programmes and strategies implemented with persons with intellectual disabilities, which increases the vulnerability of these persons to exposure or abuse. Furthermore, this article also talks about the consequences of suffering this type of abuse and proposes an intervention line with persons with intellectual disabilities to avoid these abusive situations.

2. Children and disability.

Society of Social Pediatrics, Díaz, J. A., Ruiz, M. A., Ruiz, V., & Ministry of Labour and Social Affairs. (2007). *Childhood and Disability*. Retrieved from <https://canal.uned.es/uploads/materials/resources/pdf/7/4/1255977805247.pdf>

This publication discusses the risk and protection factors for children with disabilities in situations of abuse (66-69). It should be noted that it does not specifically address intellectual disability, but it is integrated. Regarding risk and protection factors, it not only talks about individual factors of children with disabilities, but also about family, social and cultural factors.

3. Abuse of persons with intellectual disabilities.

Muñoz, A., & De La Rosa, P. (2015). *Abuse of People with Intellectual Disabilities*. End of degree work. Faculty of Education and Social Work, University of Valladolid. Retrieved from <https://uvadoc.uva.es/bitstream/handle/10324/14287/TFG-G1211.pdf?sequence=1&isAllowed=y>

This paper describes the risk factors of people with intellectual disabilities to suffer abuse (32-34). It talks about risk factors associated with the individual, family factors, socio-environmental factors and institutional factors. Regarding the institutional factors, which refer to factors related to professionals who work with persons with intellectual disabilities, it could be extrapolated to informal caregivers (family members and partners) as risk factors when suffering domestic or gender violence. Besides this, the work also explores the types, indicators, data and concept of abuse, the rights of people with disabilities, myths about disability and abuse, abuse in institutions, social work and abuse and preventive actions.

4. Vulnerability of women with intellectual disabilities

González Muñoz, I., & Rubio Guzmán, E. (2012). *Vulnerability of Women with Intellectual Disabilities*. End of Degree Project. Universidad Pontificia Comillas Madrid. Retrieved from <https://repositorio.comillas.edu/xmlui/bitstream/handle/11531/192/TFG000231.pdf?seq>

This paper reviews the scientific literature on the vulnerability of women with intellectual disabilities in section 6.3 (26-32). It explains that women with intellectual disabilities are one of the most vulnerable groups due to the lack of knowledge on the part of these people that situations of violence are reportable as well as the lack of information regarding resources and ways to do so. It also shows that there is a greater vulnerability in women with intellectual disabilities for three reasons: because they are women, because they have a disability and because their disability is intellectual. This is supported by a study referred to by the Vaso Government that was carried out in 2012 where, according to the work, women with disabilities suffer two to five times more of male violence than other women and the number increases from four to ten times more when it comes to women with intellectual disabilities, however, I have not been able to find the study, since the reference of the work redirects to an interview of a national newspaper, in which there is no reference to the statistical data. It also talks about the situation of dependence that women with intellectual disabilities live, which makes them more vulnerable to abusive situations. Finally, it mentions the vulnerability translated into the lack of social and personal resources to be able to denounce this form of violence.

5. Women with disabilities and sexual violence: A guide for professionals.

Millán Madera, S., Sepúlveda García de la Torre, A., Sepúlveda García de la Torre, P., & González Mori, B. (2008). *Women with Disabilities and Sexual Violence: A Guide for*

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This guide for professionals of the Junta de Andalucía, explains, in its section 2. Dimension of the problem (13-15) several explanations to the increase of vulnerability in women and girls with disabilities. It talks about disability in general, including intellectual disability.

6. Report on Gender-based Violence against Women with Disabilities.

Spanish Committee of Representatives of People with Disabilities, CERMI Women Foundation, Government of Spain. Ministry of Health, Social Services and Equality, Peláez Narváez, A., Villarino Villarino, P., Castellanos Torres, E., Fernández Sáez, J. (2016). Report on Gender Violence against Women with Disabilities from the Macro Survey 2015. Retrieved from http://www.fundacioncermimujeres.es/sites/default/files/informe_sobre_violencia_de_genero_2.pdf

This report analyses a macro survey conducted on gender-based violence against women with disabilities over the age of 16. Taking into account the aspect of the vulnerability of people with disabilities, this report explains that, as stated in the Written Contribution of the Spanish Committee of Representatives of People with Disabilities (CERMI) to the Committee on the Rights of People with Disabilities on April 17, 2013 public programmes and policies for the prevention of gender-based violence do not take into account the specific characteristics of girls and women with disabilities (...), since, for example, there is legislation authorizing the guardianship of adults or confinement in institutions, increasing their vulnerability to violence, particularly in women with psychosocial or intellectual disabilities and older women (28-29).

It also refers to the "Common Protocol for Health Action against Gender Violence" (2012). In which he explains different reasons why people with disabilities show a greater vulnerability to suffer situations of gender violence (34-35).

This report also mentions autonomy from an economic point of view as a vulnerability factor. Autonomy from an economic point of view is fundamental in the configuration of gender violence and disability, as is stated in multiple publications and explanatory models such as the ecological model developed by Mary Ann Curry et al. (2001), and by the "paths of abuse" by Dane Hassouneh-Phillips (2005). Both address the need to take into account the risk factors associated with disability, which increase women's situations of vulnerability, such as difficulties in finding employment, economic dependence, physical dependence, reduced mobility and habitual dependence on those who care for them (Eva del Río, 2011:68) (74). In this sense, in the case of women with disabilities, the greater vulnerability associated with suffering gender violence is linked to greater inequality from the very fact of disability. M.^a Ángeles Cózar et al. (2011: 128) reflect it in the high economic dependence, the lack of employment, more probability of having impoverished social networks or depending on third party care (76).

It is also highlighted that the exclusion and isolation of women with disabilities from society in separate schools, residential institutions, hospitals and rehabilitation centres, and the lack of communication and mobility aids, increase their degree of vulnerability to violence and sexual abuse, contributing to impunity for acts of violence (Institution of the Attorney General of the Principality of Asturias; CERMI, 2011: 67). In this sense, the United Nations (2006) indicates that women with disabilities suffer from particular acts of gender violence, committed both in their homes and in institutions, by family members, caregivers or strangers.

7. Abuse and Disability: Guidelines for Prevention and Action

Recio, M., Galindo, L., Cendra, J., Alemany, A., FEAPS Madrid, Villaró, G., Martorell, A. (2012). *Abuse and Disability: Guidelines for Prevention and Action*. Fundación Carmen Pardo-Valcarce. Retrieved from <http://www.nomasabusos.com/wp-content/uploads/2012/05/Guía.pdf>

The coordinator of this guide (M., Recio) and the authors of the Carmen Pardo-Valcarce Foundation, are members of the first Attention Unit for Victims with Intellectual Disabilities (UAVDI) created in Spain. The priority of the UAVDI is the protection and attention adapted to the characteristics of each victim with intellectual disability.

This guide refers to vulnerability factors in its section 2. The vulnerability of people with intellectual disabilities to abuse (21-22). But in addition to this, it also touches on factors of protection for persons with intellectual disabilities from possible abuse. It emphasizes the prevention of abuse by organizations (23-27), the effective detection of abuse (29-35) and the intervention of the professional in case of abuse, always protecting the victim with an intellectual disability (37-49)

11. Articles about social policies/responses to victims/survivors of DV/GV with ID



_Portugal

The Roadmap for the Prevention of Mistreatment of Persons with Intellectual Disabilities and / or Multi Deficiency - Situations of physical abuse towards people with intellectual disability was coordinated by FENACERCI (2011) and the result of this work ought to contribute for the training and awareness of the organizations and their professionals consequently seeking to prevent situations of violence towards people with disabilities, to minimize the social phenomena of violence, to fortify partnership networks between people with disabilities, family and community, and to contribute (via research and development) to the promotion of fundamental rights and ensuring equal opportunities to this population. This work is fundamentally oriented towards professionals who deal directly with victims/survivors of DV/GV with ID and seeks to set the foundation for a better approach towards these social phenomena.



_Greece

Dissemination projects and initiatives have been implemented as a part of the broader protection frame against gender and domestic/ intimate violence but the review does not identify specific specialization to victims/ survivors with ID. The projects are mainly operated from the General Secretariat for Family Policy and Gender Equality (GSFPGE), NGOs and civil rights associations. The projects are implemented with national and European funding as for example of the NSRF 2014-2020 program, as also within the corporate social responsibility framework (see "Don't Skip program), and are primarily composed of tv/ radio spots, public events (workshops, lectures, exhibitions etc) and, online and printed materials.

(Source: General Secretariat for Family Policy and Gender Equality, 2019)



In Spain, the Women's Institute at the state level has promoted and financed different studies on equality, women and gender. The Institute has extensive knowledge of the state and evolution of society from a gender perspective. The Institute favours the training of new generations and the support to the current society. The financing of these researches and studies is done through public calls and through Study Plans that are approved year after year. Different studies are also carried out by the Observatory for Equal Opportunities for Men and Women, created by Royal Decree 1686/2000.

In general, the studies carried out explore varied themes within the area of gender violence, but no specialisation in women with intellectual disabilities has been found. For the general studies, which include all women, different approaches (theoretical, empirical or applicability), methodologies (quantitative, qualitative and mixed) and contents (history, legal system, demography, family, social protection, education, culture, employment and labour relations, health, equality indicators, uses of time, diversity and social inclusion, citizenship, etc.) have been used.

In 2011, from the mentioned organism, the investigation on "Gender violence towards women with disabilities: an approach from diverse professional perspectives" was published as a response to the growing awareness of the Public Administration to provide greater knowledge of gender violence in women with disabilities. This study explores disability in all its forms, dedicating part of it to intellectual disability. The objective, to approach the existing conflicts in the special circumstances that affect the security of the women with disability and thus, to be able to articulate measures directed to improve their integration in a full and safe way. For this purpose, a mixed methodology was used and it was divided into three phases: bibliographic compilation on the safety of people with disabilities, personal interviews with victims of gender violence with disabilities and interviews with professionals who work with people with disabilities. The results of this study highlight the need for disability training in the direct care services provided to victims of gender-based violence. The Government Delegation for Gender Violence acts under the premise that "One injustice should never hide another injustice", carrying out different actions to deepen the knowledge of the problem through the promotion of research.

On the other hand, the Carmen-Pardo Valcarce Foundation, with the collaboration of the Mapfre Foundation, the Guardia Civil and the Secretary of Social Services, has elaborated different studies and researches on victimology with intellectual disability in general and aimed at all types of abuse.

From FEAPS Madrid (Federation of Organizations in favour of People with Intellectual Disabilities in Madrid), a model of integral intervention is proposed, which responds to three areas: The fight against abuse and violence, the support to women with intellectual disabilities who are mothers and the promotion of employment as an empowerment tool. Its study, published in 2012, obtained very positive and encouraging results in specialized care for this type of victim. It was achieved that 311 women with intellectual disabilities had the tools and actions to identify and respond to situations of gender violence, awareness was raised among the environment closest to these women, orienting them towards the protection of these women in order to avoid hostile and exploitative environments. Tools were also provided to support professionals who care for people with ID, to increase detection and support for these women, and thus increase social awareness of these victims.

In short, there are different resources and social policies aimed at victims of gender-based violence in our country, which include all victims. For the moment, no research articles on social policies on victims of gender violence exclusively for women with intellectual disabilities have been found.

12. Articles about social representations about victims/survivors of DV/GV with ID



_Portugal

According to the 2001 Census, there are 636,059 people with disabilities in Portugal (6.1% of the population). Despite transformative laws and policies, the lives of people with disabilities are marked by exclusion, poverty and prejudice. Disabled women occupy a particularly vulnerable position, accumulating inequalities based on sexism and disability.

These numbers are clear evidence on the importance of deepening the research. Nevertheless, there are articles on social representations about people with ID and on social representations about victims/survivors of DV/GV, in separate. But, so far, investigation has failed to present articles on social representations on this specific group, i.e., VD or VG-B victims with ID in Portugal. Therefore making our project's outcomes a great addition in this field.



_Greece

There is again a lack of this information, but the review found a campaign related to the social representation of women as victims of domestic/ intimate violence.

“Don’t Skip”

The article to be presented is by the Diotima Women's Studies and Research Center and is signed by Natasa Kefallinou, communications officer. The article constitutes part of the campaign “Don’t Skip” (<http://diotima.org.gr/dontskip/>) which fights the stigma against women that are victims of domestic violence.

"Any woman who allows it is worthy of her fate, and she doesn't respect nor loves herself." These comments, according to Kefallinou, most probably leads to the blaming of the victims of domestic violence rather than the perpetrators, who are distinguished for their absence of empathy, and even more surprisingly, these comments are usually written by women.

The article guides the reader not to hurry to consider these comments as extreme and individual. They reflect one of the key myths that preserve and conceal domestic violence: that women do not leave and do not report violence by personal choice and / or weakness - and are therefore responsible.

This convenient myth, Kefallinou points out, overlooks the psychological consequences of chronic abuse. It conceals and ignores the economic, cultural, social factors that act as a deterrent to any escape plan. It ultimately offers an alibi to the perpetrators and blames the victims for not having enough power to escape the lockup of abuse. But how does a woman being abused gradually give up her autonomy? The article tries to offer a perspective of the above questions.

(Source: Vice, 2019)



In Spain, there are great deficiencies in terms of visibility of the problem of gender and domestic violence against people with intellectual disabilities. The only relevant study published to date on this matter is the Report on gender violence against women with disabilities based on the 2015 Macro survey, published in 2017 by the CERMI Women Foundation.

The study aims to promote the awareness of the population as a whole about the situation of gender-based violence against women with disabilities, based on a critical reading of the results of the 2015 Macro-survey on violence against women carried out by the Government Delegation for Gender Violence, carried out in collaboration with the Center for Sociological Research (CIS) and aimed at women residing in Spain aged 16 and over.

More specifically, the study aims, on the one hand, to bring citizens in general closer to the international and national legislative framework on gender violence in the segment of women with disabilities, and on the other hand, to publicize the percentage of women residents in Spain who have suffered or are currently suffering some type of violence due to being women, comparing those with an accredited disability of 33% or more with other women.

Likewise, the report analyzes and describes the results of the 2015 Macro-survey to give visibility to the situation of women with accredited disabilities of 33% or higher.

As a closing of the work, international experiences on studies focused on the topic of gender violence against women with disabilities have been included, both at the governmental and non-governmental levels, and guidelines are proposed for carrying out a specific study on the reality of women with disabilities, not as a homogeneous group, but taking into consideration their diversity.

With the realization and publication of this report promoted by the CERMI Women Foundation, the recommendations made by the Committee on the Rights of Persons with Disabilities to the Spanish state in 2011 and by the United Nations Human Rights Council, in its resolution, are given coherence. March 2013 on its “Thematic study on the issue of violence against women and girls and disability”, specifically 53.a): “Guarantee, under article 31 of the Convention on the Rights of Persons with Disabilities, the collection of adequate information, including statistical and research data, on all forms of violence suffered by women and girls with disabilities, disaggregated by sex, age and type of disability. ”

13. Articles about approaches and methodologies of intervening/supporting victims/survivors of DV/GV with ID



_Portugal

The FENACERCI project (2011) does include methodologies of intervening/supporting victims/survivors of DV/GV with ID. They explore and detail them: Interview; Form for the mistreatment history; Form for the classification and description of mistreatment.

Most of the approaches towards this population settles in the interview and, afterwards, a narrative/cognitive/behavioral approach which seeks to understand the story of the victim and, consequently, explore/undo limiting beliefs. But not much research is available in this area in Portugal.

Nevertheless, as mentioned in previous points, these methodologies and approaches are also used for victims/survivors of DV/GV and for people with ID separately. In other words, these methodologies and approaches weren't specifically developed for victims/survivors of DV/GV with ID. Again, this comes as both a lack of instruments and a lack of research for professionals in this field of action.



_Greece

The literature review has not returned back any information regarding specific approaches and methodologies of intervening/supporting victims/survivors of DV/GV with ID. The existing approaches service broadly the victims of DV/GV having the provision that the counseling relationship between consultant/advisor and the victim should be governed by a spirit of empathy and a fully developed, professional awareness of diversity and in particular,

religious beliefs, nationality, gender, sexual orientation, marital status, age, disability, political or social origin, etc. (General Secretariat for Equality, 2016)

In the light of this process, and under the pressure of the recent humanitarian crisis of the immigration's flows a counseling guide for women asylum seekers and refugees, victims of gender-based violence published in 2019 by the Greek Council of Refugees, proves that specialized effort can be provided towards different groupings, as the victims with ID.



Spain

The figure of the facilitator in the police and judicial investigation with victims with intellectual disabilities: this paper analyzes some factors that affect the special vulnerability of people with intellectual disabilities (ID) to be victims of ill-treatment and to suffer re-victimization after the same.

Of these, the poor adequacy of the police and judicial interviews to their characteristics, and the biases in the credibility judgments of the testimonies of people with ID stand out. In front of these, the Unit of Attention to Victims with Intellectual Disability (UAVDI) proposes the introduction of the figure of the facilitator in the entire police and judicial process with victims with ID. Research carried out at the UAVDI that supports the establishment of adaptations in the recognition wheels and the interviews to obtain the testimony of people with ID is presented. Their introduction is one of the objectives of the facilitator, whose work is illustrated in the analysis of a case of a victim of sexual abuse with ID.

Intellectual disability and gender violence: comprehensive intervention program: the Federation of Organizations for People with Intellectual Disabilities (FEAPS Madrid), taking into account women with intellectual disabilities, analyzes from various manifestos, plans and regulations, the special situation of social exclusion of women with disabilities compared to men with intellectual disabilities. Based on this, it proposes an intervention model that aims to respond to three specific needs: the fight against abuse and violence, support for women with intellectual disabilities who are mothers, and the promotion of employment as a tool for empowerment.

Attention to victims with intellectual disabilities: this book is intended to serve as the first approach to actions with victims of intellectual disabilities in the legal-forensic context. Thus, it would be of interest to all those professionals (jurists, lawyers, psychologists, forensic doctors, pedagogues, teachers, specialists in the care of people with disabilities, social workers ...) who approach the problem of victims with intellectual disabilities, traditionally little considered in this context.

Abuse and intellectual disability. Guidelines for prevention and action, and Protocol of action against sexual abuse and domestic and gender violence to people with intellectual disabilities: this guide is a very useful tool for professionals and families alike, always attentive to any circumstance that may pose a threat to people with intellectual disabilities.

In this document, professionals will find a practical classification that helps to differentiate between the different types of abuse that may occur, and they also have at their disposal an interesting questionnaire, aimed at companies and institutions, which serves to

reflect on the degree of protection. that exists about the possible victims and that is that the lack of information, sometimes, overlaps with the same aggression, intensifying the damage.

This guide also includes a protocol for action against sexual abuse and gender violence, with adequate answers to the questions that may arise in the event of abuse. It identifies suspicions, indications or evidence that can be useful to detect this type of cases and guides all the agents involved in the judicial process that must be followed.

Women in situations of greater vulnerability: intellectual disability (Practical guide on the usual legal casuistry of women victims of gender violence): this article offers a guide for lawyers who have to provide legal advice and legal assistance to women with intellectual disabilities victims of gender violence.

Abuse and intellectual disability: the need for networking: this work aims to expose the evolution of the work of the Care Unit for Victims with Intellectual Disability of the Carmen Pardo-Valcarce Foundation since its launch in 2010 until today, especially concerning coordination with third-party services, organizations and institutions to offer a global, efficient and quality intervention with victims with intellectual disabilities.

Integrative Therapy Focused on Trauma for People with Intellectual Disability (TIT-ID): A Therapeutic Answer to Abuse and Intellectual Disability Experience in the Individual and the Family: Persons with Intellectual Disabilities (ID) have ten times more risk of suffering abuse than persons without ID.

When somebody is born with ID, his / her story is printed by the trauma of ID (primary trauma). If we add the trauma from disability to the trauma from abuse (secondary trauma), we find a very vulnerable population with a high probability of being re-victimized. Victim Support Unit for Persons with Intellectual Disability (UAVDI) proposes an Integrative Therapy focused on Trauma for people with ID (TIT-ID).

This therapy is focused on trauma, including the victim and their families and professionals, through different approaches. It intervenes from individual pathoplastic, taking into account side effects caused by abuse. It also works from a systemic perspective of the primary trauma due to ID and primary grief in the individual and his family. It includes a person-centre intervention with attachment theory and organized through phases from the theory of structural dissociation. It is very important to do a rigorous analysis of variables involved in the impact of grief (primary trauma) and later in the impact of abuse experience (secondary trauma). The goals of therapy will be planned according to the individual diagnosis. The cross-cutting objectives are the establishment of consistent links to enable the person to restore their feelings of security and sense of self-worth, and also the development of a resilient personality.

Police intervention guide with people with intellectual disabilities: this guide offers a complete catalogue of guidelines and intervention tools for all those agents of the State Security Forces and Corps who have to intervene with victims of intellectual disabilities.



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