

Exchange of good practices on gender equality

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The use of ICT in the fight against genderbased violence in Spain

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In the present paper, four services operative in Spain will be discussed as examples of good practices in the field of policies against gender-based violence (GV). The four services are:

- Web resource for support and prevention in cases of gender-based violence
- 24-hour Helpline 016 in case of gender-based violence
- Telephone service for care and protection of victims of gender-based violence (ATENPRO)
- Telematic tracking system to monitor restraining orders in the field of genderbased violence

1. Web resource for support and prevention in cases of gender-based violence

1.1. Description of the main elements of the good practice

The Web resource is framed in the context of the Organic Law 1/2004 to fight GV and is related to the right to have access to full information stated in article 18.

The rationale behind is to provide updated information on available resources and actors involved in fighting GV at a local level, facilitating their visual placement on Google Maps, physical address, contact information, and URL, when available. In particular, the information that can be found is: (1) all state, regional, or local government units or centres that facilitate information and advice; (2) all registered women associations that are somehow involved in prevention; (3) all police and civil guard stations, as well as the special "units for families" created in 2007 for cases of GV and child maltreatment; (4) all courts that deal with GV; (5) many public or private actors who offer legal advice or advocates, either paid or free; (6) NGOs and other associations that facilitate some kind of support for victims or are involved in prevention.

There is also an application to propose the registration of new resources, once evaluated by the Government Delegation to fight GV. This application is related to the wish of keeping information as updated as possible.

The information can be searched either by the name of the region and the province of interest, or by entering a specific address, so that the Web page finds the resources closest to it. Target groups of this resource are the general public as well as victims of GV, but unlike helpline 016 presented further below, it is accessible only in Spanish. Furthermore, it is not easily accessible for people who are unaware of the availability of this resource, as will be argued below. Both circumstances imply that de facto, it is mostly a resource for other information and advice actors. In particular, the database of the helpline 016 is nourished by this Web site, beside other information resources of their own.

The Web site is hosted in the URL of the Government Delegation to fight genderbased violence, which is included in the site of the Ministry for Health, Social Services and Equality: http://wrap.seigualdad.gob.es/recursos/search/SearchForm. action. The cost of the service in 2012 was about 16,000 Euros.

1.2. Results and impact

There is no published statistical information about the number of visits, so it is difficult to evaluate the impact of this resource. In particular, there is no reference at all of this new resource, operative since 12 April 2010, in the rich statistical report of the State Observatory on Gender-based Violence, which has been published yearly since 2007 and has more than 600 pages. Irrespective of the number of visits of the Web page, as it unifies and systematises information that was quite scattered and as there are many actors involved in fighting GV, it is a useful resource for facilitating specialised and most recent information.

The Web resource is not easily accessible. Entering terms such as "gender based violence" (violencia de género), "help maltreatment" (ayuda maltrato) or similar terms that could be imagined by a victim into an Internet search engine, does not result in any reference to the site on the first page of Google or Yahoo. In fact, to get to the Web resource, it is rather necessary to know of its existence and who is responsible for it, which implies that de facto it is mostly a resource for providers of information on GV, not for the general population, although it was not conceived as such.

1.3. Assessment of strengths and weaknesses

As has been argued before, the main strength of Web resource in fighting genderbased violence is that it gathers scattered information of different sources available to help victims, without being particularly costly. Additionally, there is an agreement with regional governments to periodically update the available information and to report if there were any changes.

Among the weaknesses: the limitations of accessibility for the general public and for victims as stated previously ought to be mentioned. But as there are other Internet sites that offer general information on available resources, on what can be done in the case of being victim of GV and refer for information or advice to helpline 016, this weakness is not as relevant as it appears to be at first glance. However, similar arguments with relevant actors to those made in the case of helpline 016 (see below) could be made in this case, so that a specific link to the Web site of resources could be available on other relevant actors' Web sites (municipalities, women's centres in the different regions or towns, etc.).

Another shortcoming of the Web resource is that it does not include specific information about specific social services offered to victims (for example, women's crisis centres, etc.). However in the case of crisis centres, the specific address of these centres is confidential information. One of the strengths and key elements of such centres is their invisibility for the public in general and particularly for the aggressor. Thus it does not make sense to reveal this information by including it in the Web resource.

2. 24-hour Helpline 016 in case of genderbased violence

2.1. Description of the main elements of the good practice

This hotline is specialised in the provision of information related to gender-based violence (GV), including resources for its victims, on a national and unified basis. That means, unlike other helplines, it provides only information on GV. It was introduced in September 2007, and it is framed in the context of the Organic Law 1/2004 to fight GV from a comprehensive point of view. The creation of helpline 016 implies the materialisation of the universal right of victims of GV to have access to complete information and adequate advice stated in article 18 of the Law.

Prior to the introduction of this helpline, there were different information lines on women's rights (usually called "women's lines") provided by most, but not all, regional governments and some women NGOs. These lines could not always provide accurate or complete information on specific topics relevant for particular case of GV; this mainly concerned legal advice or how to behave with victims of GV. These earlier lines also had other accessibility limitations, which the helpline 016 had to overcome. These were then the main reasons to introduce this helpline 016. One of the challenges of the project was related to the fact that other actors were suspicious about the possibility that the central government could invade policy domains of the regions.

The aim of helpline 016 is to provide complete information by specialised female professionals on available resources ranging from employment support, social services, and financial support to legal advice. Accessibility is granted by offering the service 24 hours, seven days a week, as well as through a special platform for persons with hearing or speaking disabilities, and being accessible through mobile phones, PDA, or text phones.

The target group are women victims of GV or any other person, either relatives, friends, or any other individual (advocates, police officers, etc.) who need information in relation to GV, irrespective of the place they live in Spain or their mother tongue. Besides Spanish and the other official languages (Basque, Catalan, and Gallego), the service is provided in 47 different foreign languages. The attention to the victim or the informant in foreign languages, when it is in English, French, or Portuguese, is done by the professionals who operate the service; when in other languages, it is done with help of a professional translator and operates from 8 a.m. till 6 p.m. The possibility for the victims to express themselves in their own mother

tongue is seen as crucial issue for those migrants who have not mastered Spanish or any of the other official languages, a circumstance which is quite common.

In case a phone call is made by minors, they are transferred to a specialised helpline for minors run by an NGO (Fundación ANAR), which has been operative since 1994, also on a 24-hour basis, seven days a week. The emergency phone calls are transferred to the general emergency helpline 112, which facilitates health services as well as police support or any other emergency resource.

The service is provided by the private Enterprise Qualytel, but is fully funded by the State. Users do not even have to pay for the phone call. In 2012, the service was funded with 1.1 million Euros.

2.2. Results and impact

According to EIGE (2012), this service is one of the 17 helplines available in the 27 countries belonging to the EU plus Croatia, one of the 8 that provide information 24 hours, all days of the week, and one of the 12 that is completely free of cost.

The number of calls received concerning GV from 3 September 2007 to 31 December 2012 stands at 353,392, what means on average 182 calls a day and 8 calls per hour, though unevenly distributed across time. More calls take place in summer, on Mondays, and usually between 10:00 to 13:00. The average duration of the calls is 4 minutes, with most of them ranging from 3 to 6 minutes. Most calls are made by women suffering GV themselves (75% for the whole period) but the proportion of relatives, friends, and other people who seek information is growing from 18% in 2007 to 30% in 2012. Most close people who call to get information are women, but the proportion of men is also growing.

Most calls came from Spanish women but foreign women victims of GV are overrepresented compared to their proportion in the whole population. While 2,907 women per one million aged 15 or older in 2010 were Spanish, the number of non-Spaniards was 6,482. In other words, 77% of people who called were Spaniards, while 23% were foreign-born. Most foreign women came from South American countries, Romania, or Morocco, the countries from which most migrants come from; yet, while the former ones are overrepresented in relation to their weight in the whole population, women from Romania or Morocco are underrepresented. This circumstance must not be read as an indicator that GV is less prevalent among people coming from these two countries. Other GV indicators suggest that women coming from these countries are overrepresented in the whole group suffering from GV.

Based on the self-declaration of women suffering GV and referring also to calls made from 2007 until 2010, most of callers said they were suffering psychological maltreatment (54.1%), while 40.2% stated they were victims of psychological as well as physical violence. 5.6% reported to be victims only of physical violence, yet it is hardly sustainable that women who suffer physical violence are not being psychologically maltreated at the same time.

Contrary to expectations, the number of calls decreased yearly from a maximum of 74,951 in 2008 to 55,810 in 2012. In relative terms, this means a decrease from 3,773 to 2,722 calls per million women aged 15 or older over the period. This trend cannot be interpreted as a decrease in the incidence of GV, as the number of calls

is substantially lower than the number of complaints of GV received by courts, representing around 50% of them. As the 016 helpline is not the only available source of information and legal advice, this trend can neither be interpreted as a decreasing efficacy or usefulness of the service, nor as an indicator of a lack of accessibility. The helpline is widely publicised and easily available through all services that deal with women's affairs or women's associations and through the Web. There is even an agreement with TV broadcasters to inform viewers about the availability of the helpline whenever they encounter cases of GV. Therefore, the decrease in the number of phone calls is probably related to the increase in the use of the Internet as an alternative way to get information, particularly among the younger generations.

2.3. Assessment of strengths and weaknesses

This helpline is a powerful instrument to help victims, as it:

- is run by specialised operators;
- is interconnected with other emergency services and/or helplines that can activate resources;
- is very easy to remember, and
- operates at any hour, so that victims can easily access information or advice when the perpetrator is not present or receive emergency support.

The anonymity is granted and there is also an agreement with the most important operators in order to eliminate any trace in the telephone bill which is also a key element in removing barriers to gain access to the service. Accessibility is broadly guaranteed by making the service available to the high proportion of migrant women living in Spain, thanks to the availability of the service in many languages.

Professional help and comprehensive information, full accessibility, and anonymity are then the key elements of the strengths of this resource to fight GV.

Among weaknesses of the service, there is not very much to report. One aspect that could be mentioned is the fear of some victims to call to get information on how to get out of a violent relationship, but this fear cannot be removed by any changes to the service. A further challenge of accessibility to the service is the improvement of the ways of communication with persons with hearing or speaking disabilities as well as people with intellectual disabilities. These people have problems to express themselves in a way that can be understood by the operators of the service. The technology used in the case of hearing or speaking disabilities is the common chat system, which requires writing in a clear and differentiated manner their situation, needs, or questions. This requirement cannot be assumed to be possible for everybody in this situation, as their writing abilities are generally lacking, so some people with this kind of disability prefer to use signal language.

3. Mobile telephone service for care and protection of victims of gender-based violence (ATENPRO)

3.1. Description of the main elements of the good practice

This mobile telephone service is designed to guarantee protection and care for those victims of GV who are involved in a recovery programme. It is based on the use of mobile telephone communication and tele-location technology (GPS). It consists of the delivery of a handset to the victim, or a software application for her mobile phone (if it meets predefined technical requirements), which allows her to contact the specialised care centre that runs the service by simply pressing a button. Once contact is established, the technological infrastructure pulls up all relevant information of the victim as well as her geographical location to the professional of the care centre on the screen of service computer in order to provide the appropriate support for the GV victim. The technology used is also adaptable to cases of hearing or speaking disabilities or deafness, similar to the helpline 016.

Calls from the victims can be of three different types: (i) calls demanding psychosocial attention, (ii) calls where the victim alerts about the proximity of the aggressor or the existence of a potentially dangerous situation, and (iii) calls in cases of aggression, where the woman is the victim of aggression or anticipates it happening immediately. All type of calls are attended according to pre-established protocols and adapted to the specific situation. Calls can receive three levels of response.

- The first level (verbal response) implies that once the communication is established and the system has identified the person who calls, showing on the service screen all relevant information of the victim, and her geographical location, the professional must gather in a comprehensive way the information of the present situation that has caused the call and evaluate the danger of the situation and the type of care to provide. In cases of demanding psychological support the attention to the victim is solved through advice and/or comfort. If the incidence requires the use of other resources, it is necessary to move on to the next level of intervention.
- The second level of intervention implies the activation of resources according to the circumstances (police intervention, healthcare, social services, etc.), eventually contacting the emergency helpline 112 and providing them with information of the situation as well as the geographical placement of the victim in order to intervene adequately on location. In case that police intervention is required, all relevant data of the victim are also available in the police database of GV victims, as all ATENPRO users are systematically included in this database, so that the intervention can be done more accurately. Other reference persons can be also informed.
- The third level of intervention implies the transfer of the user of the service to a specialised centre or to her home, according to the circumstances. In the days after, the service must make follow-up calls until the situation has normalised. All

incidents and the applied solutions, as well as the follow-up calls, must be recorded.

Initially conceived mainly as an emergency service when it was introduced in December 2005, it has evolved since the beginning of 2010 more to an "accompaniment service", putting the accent on offering psychosocial support, without losing its function as an alert mechanism.

The objectives of the service include therefore the following: (i) to provide security and tranquillity to the victims and their relatives or people close to them, offering not only police protection in case of a potential aggression, but also broader psychosocial support, information, and advice around the clock; (ii) to enhance their self-esteem and quality of life, helping them to create a social support network and encouraging them to maintain safe contact with their family and social environment; (iii) to provide immediate and appropriate support in case of emergency through qualified professionals who provide security and resources according to the kind of emergency; (iv) to prevent emergency situations through periodic control of the situation of the service users.

Not only victims can call the care centre in case of need, but the care centre itself makes also periodic calls in order, on one hand, to check if the mobile terminal is functioning properly and is operative in case of need, and on the other hand, to see how the recovery process advances.

The target group of this service was initially limited to victims of GV, with a judicial protection order and/or a restraining order issued by court. Since 2010, this condition has been removed, but the victims must not live in the same household as the aggressor, they must participate in programmes of specialised treatment designed for victims of GV, and they must be cooperative with the programme and services. Victims should also have filed a complaint with the police, but this requirement is evaluated in a flexible manner by officers of the social services who are responsible for the assignment of the service.

Victims of GV stay in the service for one year, in principle, but it can be extended further. Initially, the convenience of the service was evaluated every six months, but this time frame proved to be too short.

The service is managed by the Spanish Federation of Municipalities and Provinces on behalf of the Government Delegation to combat gender-based violence, but it is provided by the Red Cross. The service is publicly funded and its cost in 2012 was estimated at 4.1 million Euros.

3.2. Results and impact

The number of users has grown from 2,374 victims of GV at the end of 2005, when it was first introduced, to 9,405 at the end of December 2012, reaching a maximum of 13,696 at the end of 2009. The reason for the decrease since 2009 is related to the change in the philosophy that inspires the service. By 2009, many women victims of GV obtained the mobile phone without being really involved with the service. They did not answer the calls from the care centre, nor did they establish any contact with it. Some became users of the service without really wanting it, or because they wanted to have the mobile phone to feel more secure but did not want

to be actively involved with the service. Since 2010, women who did not cooperate were left out of the service. Until 2010, the average duration of the service provided to the victim was around 558 days, though 40% of users stayed in the programme for more than 600 days.

After the first five years of the service in place one can observe that the average age of women recipients of the service was 40 years, while that of aggressors was 42 years. 80% of the victims and 79% of the aggressors were Spaniards, which means that foreign victims and perpetrators of GV are overrepresented, compared to their weight in the whole population, as is also the case in the statistics of the use of the helpline 016 described earlier as well as in other indicators of GV. Most foreign victims who use the service come from Latin American countries, though there is also a significant proportion of victims from Morocco and Romania. For those women who do not speak Spanish well, there is the possibility to hold the conversation with the help of a translator.

3.3. Assessment of strengths and weaknesses

This mobile telephone service represents an important improvement in prevention and care of victims of GV, as it covers two needs. On one hand, it serves to provide support during the process of recovery in addition to the programme defined by social service officers, facilitating communication and advice by a professional when they feel troubled or insecure and have no access to the psychologist of the social services. Not every victim has access to a person with whom they can share their deepest feelings and uncertainties, ambivalences and despair, and it is even less probable that they have someone who can give the appropriate support. Thus, the ATENPRO service provides this kind of professional support. On the other hand, it helps to prevent aggressions as it facilitates the possibility to press an alarm button that establishes automatic contact with the care centre, which evaluates the situation and activates the needed resources. It is potentially ineffective as a telematic tracking system to monitor restraining orders (which will be presented below), as it is the victim who must alert the centre once she is aware of the presence of the aggressor. However it is a useful instrument in cases where the risk of aggression is not extreme or very high. In any case, victims note that the mobile telephone service provides them a feeling of security, which is important in establishing their new life.

Among the shortcomings of ATENPRO, it can be mentioned that it depends on the willingness of the victim to maintain contact and seek advice in the process of recovering. This problem became evident during the first years of the system's functioning, as a significant number of victims did not contact the care centre and did not answer the follow-up calls of the centre. The reorientation of the service after 2010, strengthening the commitment of victims to the service, should have solved this problem. In any case, as the system only provides supplementary help, it cannot be a substitute for a more personal and close follow-up by social service professionals.

However, there is also the risk of the development of paternalistic attitudes towards the victims by social service officers and their overprotection, which could hamper their recovery. But it is better to assume the risk of overprotection than the risk of no protection and, as argued before, most victims will not count on adequate professionals who could support them in their process of recovery. Finally, the same caveats made in cases of hearing or speaking disabilities when discussing 016 helpline can also be made in this context.

4. Telematic tracking system to monitor restraining orders in the field of genderbased violence ("electronic bracelet")

4.1. Description of the main elements of the good practice

The Organic Law 1/2004 to fight gender-based violence introduced the possibility of using telematic devices to control the compliance of restraining court orders in cases of GV. This possibility was introduced not only in cases of firm conviction when it did not include imprisonment of the aggressor, but also as a preventive measure to impinge the approach of the aggressor to the victim either after imprisonment or during the judicial process. This means that only a judge can impose the restraining order and the use of the telematic device to control its compliance, which implies that it is compulsory for the aggressor to wear the dispositive. Judges, not police officers, are consequently those who have the decision power to impose the device. The telematic tracking system can also be seen as an alternative to imprisonment, either because it is not possible to put the aggressor in prison, or because the judge considers it more appropriate to impose a restraining order than the imprisonment. However, this telematic system is only considered appropriate in cases where the judge concludes that there is a very high or extreme risk for the security of the victim but there is not enough evidence to impose imprisonment.

The telematic tracking system consists of two GPS devices. One device is an electronic bracelet that the aggressor has to wear either on the arm or usually (as it is less visible) around the knee. The other one consists of a mobile device similar to a mobile telephone, which the victim has. The bracelet as well as the device of the victim broadcast continuously their position to a control centre, where there is a system that monitors if the distance between both devices is lower than the one established in the restraining order. If the aggressor passes the security distance (wider than the established in the restraining order), an alarm is activated in the monitoring centre, which automatically alerts the aggressor that he is in the security zone and that he has to leave it. If he does not leave the safety zone immediately and enters the area established in the restraining order, the monitoring centre calls the police and if necessary also calls the victim to inform her that the aggressor is nearby and comforts and advises her how to behave.

The police station must evaluate the risk of the situation and decide the means to be used in each case (send a patrol, etc.). The monitoring centre must also report to the court about the alarm, irrespective of the duration of the restraining order violation. It must also make follow-up calls to the victim in order to keep control of the incident until it is resolved. Usually aggressors leave the safety zone once they have been warned that they are close to break the restraining order. The system also sounds when the aggressor does not wear the bracelet, when he does not charge the battery of the device, or when he is further than 10 meters away from the devise that broadcasts the localisation signal. Once the person with a restraining order gets the device, he is informed how it functions and what he has to do. The The control centre operates 24 hours a day, every day of the week, and for those cases where victims or aggressors do not speak Spanish, the system operates through a translator available in 37 languages.

The objective of the telematic tracking system is threefold. The first goal is to guarantee the safe life of the victim. It also fosters the feeling of the victim of being protected and safe, thus facilitating her recovery. The second goal is to document if the restraining order has been observed or violated. Finally, it deters the aggressor to approach the victim, reducing the probability of an aggression.

The cost of each device is around 3,000 Euros and the budget for 2012 was 3.2 million Euros. The service is run by the private enterprise Telefonica Soluciones.

4.2. Results and impact

The telematic tracking system to monitor restraining orders in the field of GV has been operative at national level since the end of July 2009, though it was introduced previously as a pilot project in some regions during 2006. There are around 3,000 devices available, but their use has been restrictive. One and a half years after its introduction at national level - that is, by the end of 2010 - there were only 528 operative units and the whole number of devices used during the period reached 710. Since then, the number of users has increased to almost 1,800 devices, an amount that is still far from the number of available devices.

The average age of aggressors wearing the telematic bracelet is about 39 years, with a very low proportion aged 50 or more. This implies that most of them have experience dealing with mobile phones and should not have any operative problems in using the device. Victims are also young, as their mean age is 37 years. Most aggressors and victims wearing the devices are Spaniards (68.5%), though foreign-born individuals are overrepresented among both the aggressors and the victims, as they represent more than their share in the whole population. The satisfaction with the service is high among victims, mostly because they feel less afraid and more secure, and can pursue their recovery. According to representatives of the enterprise that runs the service, even aggressors are satisfied with the functioning of the service, as it serves to avoid imprisonment or helps social reintegration of aggressors who left prison.

4.3. Assessment of strengths and weaknesses

The telematic tracking system introduced to fight GV and prevent new aggressions to the victims is usually seen by the different actors as an effective tool. As not all aggressors can be put in prison or kept in over time, the telematic tracking system ensures that the aggressor does not approach the victim and intervenes in cases of necessity, allowing the victim to live and recover in a relatively safe environment, confident that she is protected. In three years during which the system has been operative, no victim wearing a device has been killed.

Yet the small number of units that are operative has triggered a polemic about its usefulness. This polemic is held not only among professionals, but is also present in the press. The discussion has focused on some operative limitations of the service and on the ignorance or lack of willingness of judges to use this resource.

It has been argued that its effectiveness is limited to rather big cities, because the system is recommended to operate within a restraining distance of at least 500 meters, which, in fact, implies that aggressors cannot live in the same municipality as the victim when she lives in a small city or a village. To impose the use of this system to control restraining orders in small cities would imply the exile of the aggressors, which is difficult to accomplish because many aggressors lack enough resources to live on their own and pay alimony for their children far from their social networks. However, it is technically possible to fix any restraining distance but in practice, it is difficult for the system to function efficiently when small distances are fixed, because in the time it takes the police to be alerted and to arrive on location, the aggression has taken place.

In relation to the lack of willingness of judges to use this resource, it has been argued that it implies a serious limitation to individual rights, so that it is considered to be used only in cases of very high or extremely high risk of aggression, a circumstance that is difficult to evaluate for the judge. Notwithstanding, since 2007, the police reports must include an evaluation of the risk of aggression. This evaluation, however, is based mostly on the victim's own evaluation, which can easily underestimate the risk due to the emotional link with the aggressor.

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