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ATHENA BEGIN

eBook

**ATHENA BEGIN: 856613 - EUROPEAN CORPORATIONS AGAINST DOMESTIC
VIOLENCE TOWARDS PEOPLE WITH INTELLECTUAL DISABILITIES**

WP5: DISSEMINATION & AWARENESS

ATHENA BEGIN AWARENESS-RAISING MATERIAL

Gender-based violence against women (GBV) is an umbrella term that includes various forms of abuse that disproportionately affect women and girls such as physical assault, psychological assault, sexual assault, sexual exploitation, genital mutilation and domestic violence (DV). GBV is a widespread form of human rights violation that affects one in three women worldwide (WHO, 2013). The everyday risk is especially experienced by women with disabilities, as evidence shows that abuse is more prevalent against this vulnerable group (FRA, 2014; Dunkle, Van Der Heijden, Stern, & Chirwa, 2018).

As a form of GBV, DV is one of the most prevalent forms of violence against women globally (Garcia-Moreno, Jansen, Ellsberg, Heise, & Watts, 2005; Alhabib, Nur, & Jones, 2010). Its roots are deeply related to gender inequality and male dominance over women (Dobash and Dobash, 1979; Yodanis, 2004). While domestic violence is not limited to violence perpetrated behind closed doors, men have historically abused women within their homes due to myths that still persist, such as "ideal families" and the "intimate and safe private world" (according to Saraga, 2001). Some authors qualify the systematic abuse suffered by women as a form of terrorism (Pain, 2014) or as patriarchal terrorism (Johnson, 1995; Bosch, Ferrer & Alzamora, 2006). DV can be defined as: "(...) the threat or exercise of physical, psychological and/or emotional violence; that is, any kind of force directed against another person with the intention of inflicting harm or exercising power and control over that person. The perpetrator belongs to the victim's 'domestic environment': intimate partner, spouse, ex-partner, family member, friend or acquaintance". (Flury & Nyberg, 2010, p. 02).

People with intellectual disabilities are not alien to this reality, in fact, women with intellectual disabilities are in a situation of greater vulnerability, due to the fact of being women and having an intellectual disability, which places them in a scenario of greater risk.

VULNERABILITY FACTORS SPECIFIC TO INTELLECTUAL DISABILITY:

- Non-disclosure as the norm (Fleming, 1997).
- Only 3% of abuses committed against people with intellectual disabilities are disclosed (Valenti-Hein & Schwartz, 1995).
- Ignorance of the crime and normalisation of certain violent behaviours.
- Code of silence and fear of the aggressor.
- Fear of the consequences due to the lack of knowledge of the process.
- Lack of regularisation of the figure of the facilitating psychologist and of resources specialised in intellectual disabilities.
- Difficulties for the professionals when detecting these situations of violence.

THREE LEVELS OF DIFFICULTY SPECIFIC TO INTELLECTUAL DISABILITIES WHEN IT COMES TO VERBALISING AN ABUSE OF ANY KIND:

1. RELATED TO THE PERSON:

- Possible learned helplessness, belief of not being able to do anything against the violent situation. and the aggressor.
- Desire to please others, avoid generating conflict.
- Communication and understanding limitations linked to cognitive deficiencies.
- Low self-esteem, feeling of not being believed.

2. SOCIAL/CONTEXTUAL:

- Unstimulating or repressive and authoritarian environments.
- Lack of information in the field of emotional education and people's rights.

3. LEGAL-ADMINISTRATIVE:

- Ignorance of the special needs of intellectual disability.

- Lack of specialisation of technicians when dealing with processes with people with intellectual disabilities.
- Lack of resources and technical adaptation of tools and processes to the capacities of people with intellectual disabilities.
- Absence of specific regularised protocols for these special needs.
- Taking into account all this, both people with intellectual disabilities, their relatives and the different professional contexts that work with these people detect a series of needs to counteract the multi-vulnerability of people with ID to suffer this kind of violence.

NEEDS:

- Standardisation in the lines of intervention and policies on GBV and DV.
- Design adapted tools and resources to prevent this type of violence and intervene with victims of GBV and DV with intellectual disabilities.
- Drafting of accessible and easy to understand procedures for people with intellectual disabilities, with the aim that they can assert their rights with the greatest possible autonomy.
- Regularisation of the figure of the psychologist and psychologist facilitator, which guarantees access to justice for people with intellectual disabilities in equal conditions as the population without intellectual disabilities.
- To establish good practices among the countries participating in the project, which can be transposable to the EU member states.
- Specialised intellectual disability co-ordination of the follow-up of cases and the prosecution of recidivism, with an emphasis on the prevention of GBV and DV.
- To meet these needs it was considered appropriate to create a group of qualified experts from different countries, belonging to organisations with experience in intellectual disability, GBV and DV. The aim is to generate synergies for a specific improvement in the prevention, detection and care of people with intellectual disabilities who have experienced GBV and DV.

This is how the ATHENA BEGIN project was born, formed by professionals from organisations in Spain, Portugal and Greece. The following is the list of entities per country, as well as a specific analysis for each country of their situation in relation to intellectual disability, GBV, DV and how the period of the COVID-19 pandemic affected these variables:

SPAIN:

Project partners:

- **ATADES.** Project coordinator. (Zaragoza). <https://www.atades.com>
- **A LA PAR** Foundation. (Madrid). <https://alapar.org>

Intellectual disability in Spain:

According to the updated database of the IMSERSO, as of 31 December 2017, attending to the people registered with 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 number of people with intellectual disability in our nation.

It is foreseeable that the data nowadays have changed, in the same way, we must take into account that the data collected by the public administrations are not accurate, as they only include those people who have a disability certificate. Experience tells us that there is an unknown percentage of people who have not been assessed.

Gender violence and domestic violence in Spain:

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

According to its latest reports, we can observe that:

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

- In 2019, 161,378 women were victims of GBV, of which 108,619 (67.31%) were of Spanish nationality, and 52,759 (32.69%) were of other nationalities, (OVDG, 2019).
- The year-on-year average of femicides between 2011 and 2018 stood at 54.3 murdered women per year (OVDG, 2019b).

- The average age of GBV victims between 2016 and 2018 was 43.5 years (OVDG, 2019b).
- A total of 102 children were orphaned by the murder of their mothers in GBV 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).
- Regarding DV data in Spain, we can see that:
 - In 2018 the number of DV victims grew by 6.9% compared to the previous year. The number of victims in 2018 was 7,388. 37.79% of DV victims were male and 62.21% were female (INE, 2019).
 - Unlike GBV, DV affected all ages more evenly, with the incidence in the under-18 age group standing out, with one in four victims (24.3% of the total), (INE, 2019).
 - The report on "Child abuse in the family in Spain" (MSPSI, 2011), found that children with a disability suffer higher rates of abuse (23.08%) compared to those with no disability (3.87%), concluding that disability is a factor that increases the risk of abuse.

SITUATION DURING THE COVID-19 PANDEMIC PERIOD

At the social level, the consequences of the alarm period are very relevant in Spain. The situation of confinement that the population has had to go through has led to an increase in tensions in families, especially in those where the situation was already complicated before the start of the health crisis.

The delegate of the Spanish Government against Gender Violence, Victoria Rosell, reported on 4 June 2020 that the number of calls to the gender violence assistance number (016) increased by 41.4% during the period of the state of alarm compared to 2019, from 14,662 to 20,732, 6,070 more calls. To these types of cases we must add the consequences in terms of mental health, which have yet to be analysed. It can certainly be said that the situation resulting from the global pandemic has only increased the already existing

problems related to GBV and DV, something that has not been alien to people with intellectual disabilities.

PORTUGAL:

Project partners:

- UMAR. (Lisbon). <http://www.umarfeminismos.org/>
- U. PORTO. Porto University. (Porto). <https://www.up.pt/>

Intellectual disability in Portugal:

The National Institute of Rehabilitation, in collaboration with the National Institute of Statistics, shows that the total prevalence of people with Intellectual Disability (ID) is 1.8% in Portugal (INE, 2011). Analysing the results in each age group, we find that the prevalence of disability is 5% in a resident population aged 5-14 years; 4% aged 15-24 years; 11% aged 25-64 years and 42% aged 65 years and over. Data related to children with disabilities under the age of 5 are non-existent.

Gender-based and domestic violence in Portugal:

Although Portugal is considered a peaceful country, GBV is a growing public concern. According to the 2019 Annual Report on Internal Security, DV is one of the most prevalent crimes in the country (RASI, 2019). Public authorities registered 29,498 complaints related to domestic violence, which is an 11% increase compared to the previous year of approximately.

Figure 1 summarises these figures, as well as providing the geographical distribution (by District) of complaints registered in both 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 DV complaints registered in Portugal (2018 - 2019) - Retrieved from RASI, 2019.

It is important to mention that, in terms of victimisation, women were victims in 76% of the reported cases, while men were the perpetrators in 82%. The majority of cases (84%) are related to violence perpetrated between intimate partners, with violence against direct ascendants also being significant (16.2%). According to the same report, in 2019, rapes have increased by around 2.4% compared to the previous year, and like DV, women are disproportionately affected (91.9%). In terms of child sexual abuse, 77.7% of victims are female, while 22.3% are male, with predominant ages between 8 and 13 years old. In almost all cases (95.2%) the perpetrators are adult men, especially in the age group 41-50 years; the crime was mainly perpetrated by family members (44.6%).

Data provided by the Asociación de Mujeres Alternativa y Responde (UMAR), through its Observatorio de Mujeres Asesinadas (OMA, 2019) indicate that between 2004 and November 2019, there were a total of 531 victims of femicide in intimate and family relationships and 618 attempted femicides in these same relationships. Again, we continue to see that 53% of the murdered women were in an intimate relationship with the perpetrator, while 21% had already attempted to break this relationship.

SITUATION DURING THE COVID-19 PANDEMIC PERIOD

As Phumzile Mlambo-Ngcuka, executive director of the UN Women's department, said, the situation of physical and social isolation that many states have experienced has been "a perfect storm for violent and controlling behaviour behind closed doors". (UN, 2020).

In Portugal, as in other countries the Covid-19 pandemic and the national state of emergency, the safety of many women was compromised, due to isolation and mandatory confinement with their aggressors, making them more vulnerable and unprotected from GBV and DV. The declaration of quarantine had a negative impact on women's safety. Confinement can increase abusive controlling behaviours, including social isolation practices. Limitations on physical mobility can increase the vulnerability of women experiencing GBV.

According to the Republican National Guard, reports of GBV and DV decreased by 26% during the month of March compared to the same period last year (GNR, 2020). This figure, examined in relation to the number of complaints, gives an idea of the difficulties women may encounter in reporting due to confinement and living directly with the abuser.

Requests for help grew by 180% between 19 March and 15 June compared to the first quarter of 2019. Aware of this, the Commission for Citizenship and Gender Equality (CIG) created the SOS 3060 Line and a neighbourhood reporting line (800 202 148) to help facilitate support for victims in isolation. In this sense, and recognising 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 crime is reported by the police".

During the Pandemic, Covid-19, the Portuguese Government, through the Commission for Citizenship and Gender Equality, developed additional protection measures to support women and their children, victims of GBV and DV. The main measures adopted by the Government in relation to GBV and DV were:

- Two temporary emergency shelter facilities, with places for 100 people, were set up to support victims of GBV and DV. The two reception facilities join the 65 existing structures that are fully operational.
- The current situation of imposed social isolation was responded to, having launched in early March a coordinated contingency plan on prevention and fight against DV in conjunction with the National Network of Support for Victims of Domestic Violence (CIG, 2020).

- It included the creation and reinforcement of telecare resources, the reinforcement of telephone assistance, the monitoring of situations that are subject to more regular monitoring, the designation of a team for urgent situations and requests, face-to-face assistance in urgent situations and the articulation with municipalities if there is a need for immediate shelter (CIG, 2020).
- The creation of residential structures for older women due to the increase in the number of DV situations among older women during the confinement caused by the Covid-19 pandemic. According to the data, between 13 April and 7 June, there were 1171 care services for women over 65 years of age (Monteiro, 2020).

According to the infographic below, we can see data related to face-to-face and non-personal assistance and references to shelters for women victims of DV and GBV in the situation of calamity and state of emergency. This information collected in relation to monitoring structures - Rede Nacional de Apoio às Vítimas de Violência Doméstica (RNAVVD) - National Network of Support to Victims of Domestic Violence.

According to the infographic:

- During the State of Emergency (from 30 March to 10 May), online assistance was provided to 6753 women; 308 face-to-face supports were carried out; 150 women were sent to shelters and 162 left those same structures.
- During the Calamity Situation (from 11 May to 7 June), online assistance was provided to 6343 women; 805 face-to-face supports were carried out; 119 women were sent to shelters and 208 women left the shelters.
- The national support network made almost 16,000 requests for assistance during the closure period.
- Data on shelters indicate that 564 people were taken in, including 329 women and 220 children. However, there were also exits from these support structures, with 370 women completing the autonomisation process at this stage (Monteiro, 2020).

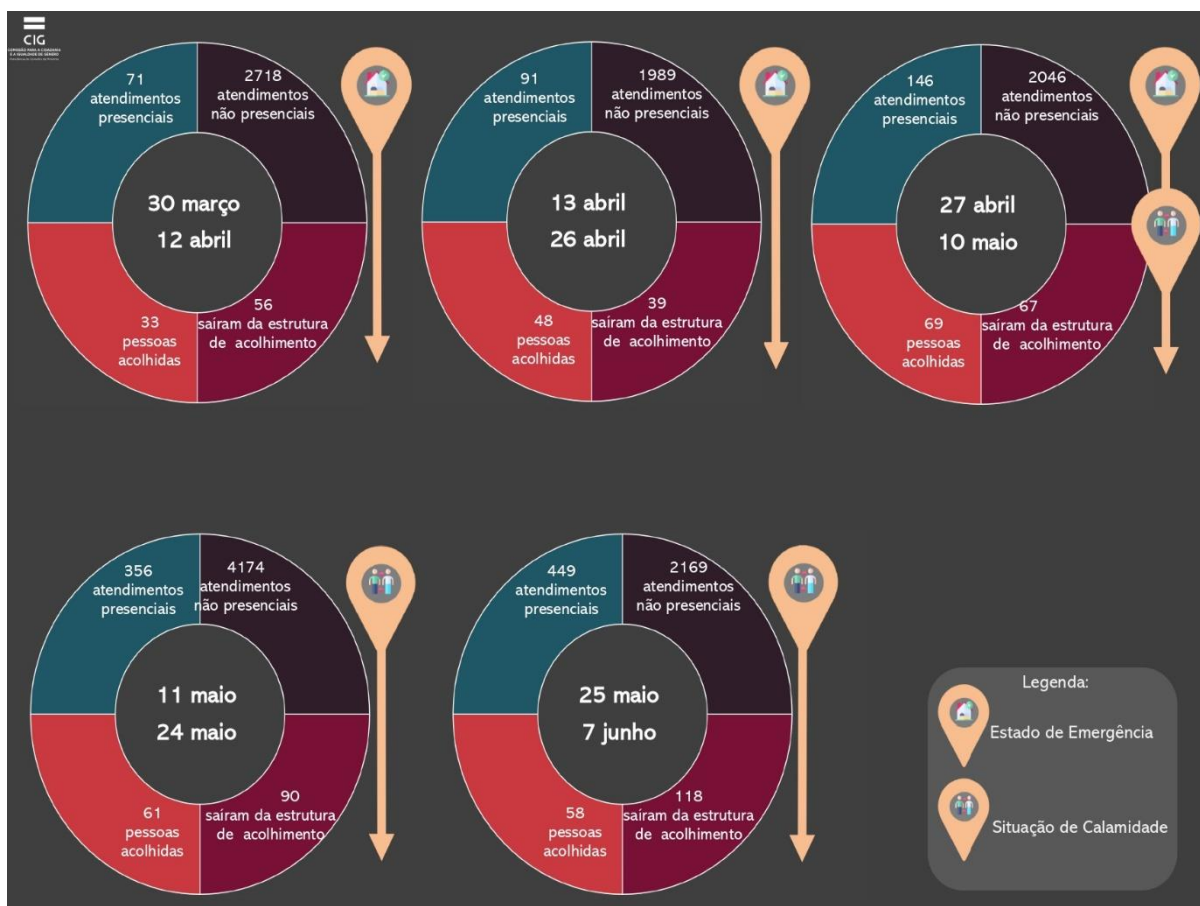


Figura 2: CIG – Infografia Portugal (datos entre abril y junio /20)

GREECE:

- **EDRA.** (Athens). <https://www.edra-coop.gr/>

Intellectual disability in Greece:

In general, there is very little statistical information on persons with intellectual disabilities or the services available for this population in Greece. Greek census data significantly underestimates the total number of people with intellectual disabilities by around 150,000. The lack of data severely limits the possibilities for informed and appropriate policy making for people with intellectual disabilities, and the Greek government should prioritise regular data collection.

Gender-based violence and domestic violence:

The latest statistical data regarding GBV and DV in Greece is provided by the issue 23 of the Gender Equality Observatory which has been published on the website of the General Secretariat for Family Policy and Gender Equality. Within this issue, the statistics of the 13

indicators proposed by the European Institute for Gender Equality for monitoring the phenomenon of intimate violence were presented (General Secretariat for Family Policy and Gender Equality, 2019).

The most important national statistics, from the General Secretariat for Family Policy and Gender Equality 2019, presented were as follows:

- The number of women who have reported to the police for DV in the period 2012-2017 has increased by 49%.
- Of the 2,833 DV perpetrators in 2017, who have declared gender reporting, 84.5% were men and 15.5% were women.
- The total number of rapes reported annually to the Greek Police in the years 2010-2017 ranged from 163 to 264.
- In 2017, seven women were murdered in Greece by a family member - in 2016 and 2018 the murders of women by family members amounted to 13 in each year respectively.
- Of the total number of perpetrators prosecuted for DV 86.2% in 2016 were men, 84% in 2017 and 85.4% in 2018.
- Prosecutor indictments for DV in 2016 were 92.8% for males, 93.4% for 2017 and 92.2% for 2018.
- From Monday 2 April 2012 to Thursday 15 November 2018, 25,079 women were seen in the 41 Advice Centres across the territory, face-to-face and through third parties, 22,183 cases of violence.
- Of the 3,325 women who attended the GGOPIF's SOS 15900 hotline in 2018, 88.8% of the cases were cases of DV.

The most recent gender equality score in the EU is 66.2 out of 100, according to the third edition of the Gender Equality Index 2017. Over the last 10 years the score has increased by only 4 points. The highest scoring country in the EU is Sweden (82.6), while Greece has the lowest score (50). The most improved country is Italy, which has risen 12.9 points over the last 10 years to reach 14th position. All countries have room for improvement according to the European Commission's 2018 report (Equality Report 2018).

SITUATION DURING THE COVID-19 PANDEMIC PERIOD

During the COVID -19 quarantine in Greece, it has been recorded, as has also been noted worldwide, that victims suffering from DV are at great risk of being trapped in their homes with their abusers (Godin: 2020). The telephone calls received in Greece by the SOS 15900 hotline, managed by the General Secretariat for Family Policy and Gender Equality (GSFPGE), have increased considerably, especially since the information campaign "We stay at home, but we do not keep quiet" was launched at the beginning of April 2020 (GSFPGE: 2020).

The increase in the number of calls is mostly related to GBV and DV, such as sexual harassment at work or attempted rape, which, according to the Secretary General, should be reported to the police. The first female President of the Hellenic Republic (current President), Katerina Sakellaropoulou, in a Twitter post, also quoted the Prime Minister's corresponding post on the fight against DV, offering her own personal and symbolic contribution (President GR: 2020).

Amnesty International's Greek department, during the same period, also published a 10-point guide to tackling the pandemic in Greece noting, among other things, that "DV in conditions of stay-at-home restriction is likely to increase significantly as women who are victims of it no longer have an outlet, but also as a result of the restriction itself. The state needs to ensure that relevant services, such as care for women experiencing GBV, continue to function and that their protection is ensured at a time of particular danger, such as home restriction. "(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 domestic violence incidents in April, with 648 calls. Calls for DV 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 seven out of ten cases of violence were reported by victims, and three out of ten were reported by third parties, such as parents, children, siblings, neighbours and friends. "It is clear that the campaign to support women victims of violence has mobilised beneficiaries, as well as third parties, to contact the SOS line and report incidents of violence," said the Secretary General, stressing that it is especially important that nine out of ten callers to 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 at home, but we do not keep quiet". (Naftemporiki: 2020).

ATHENA BEGIN is a research and cooperation project funded by the European Union and developed by five social entities from three different countries, Spain, Portugal and Greece, as described above.

The main idea and soul of the project is the fight against GBV and DV towards people with intellectual disabilities.

To this end, the following objectives were set for ATHENA BEGIN:

- To offer effective resources and tools for professionals who assist people with ID victims of GBV and DV, so that they can use them in their field of work adapted to the capacities of people with intellectual disabilities.
- To generate tools for the prevention and detection of gender and domestic violence, adapted to the different cognitive capacities of people with intellectual disabilities, as well as for the people in charge of their care, either professionals or family members, with the intention of improving the quality of life of people with intellectual disabilities by developing their skills, resources and promoting their self-protection and safety.
- Another of the main objectives of ATHENA BEGIN is to raise awareness of this problem among the general population.

Achievement of objectives in the order set out above:

- To achieve objective number one, the ATHENA BEGIN team developed specific training materials on GBV, DV and ID. After this, the technical staff of the project tested these materials by training more than 600 professionals in psychology, social work, education, the judiciary, law enforcement, direct care professionals, health professionals, etc. in the 3 countries participating in ATHENA BEGIN.
- To achieve objective number two, the ATHENA BEGIN team generated material adapted to the abilities of people with ID, creating easy-to-understand content, explaining concepts with pictograms and images, setting a script that respects the rest times linked to the levels of care of people with ID and attending to the special needs that people with different abilities may require. After this, all this material was tested through the delivery of workshops using this material, reaching more than 80

training workshops in Spain, Portugal and Greece and reaching more than 800 people with ID, professionals in charge of their care and family members.

- To achieve objective number three, we will try to reach more than 7,000 people with and without ID in the three participating countries, through the creation of different congresses, contents and dissemination materials that will make this reality visible and thus advance in its eradication.

Summarising the three countries' assessments of the usefulness of GBV and DV prevention and detection materials adapted to the capacities of people with ID, we can say that:

- The professionals in charge of delivering the workshops adapted to people with ID found that the materials were easily cognitively accessible for mild and moderate disabilities, but not for severe and profound disabilities. This is why it is necessary not only to work on prevention and detection of these types of violence with people with ID but also with their families and carers, since it will be these who can ultimately prevent and detect cases affecting people with more severe and profound intellectual disabilities.
- Continuous work on prevention. The professionals in charge of giving the workshops detected that many of the people with ID had already received at some point information about GBV and DV, however, they did not remember with precision the basic concepts that define this type of violence, so it is necessary a sustained training over time, periodically recalling basic aspects for self-protection and detection of situations of violence in relation to gender and DV, with the aim of compensating for possible memory problems linked to the ID itself.
- As a proposal for improvement, recommendations are also made to take into account the attentional capacity of people with ID, given that this is a difficulty that greatly limits the acquisition of knowledge. It is therefore recommended that the workshop be divided into shorter workshops in terms of content and time.
- The workshops raised awareness of these types of violence, which are often normalised by people with ID, especially DV. This is important because it helps to break the law of silence, by recognising oneself as a victim of situations that are not normal and are harmful to the person who suffers them. It also helps a lot to know all the resources available for people with ID, which little by little and thanks to projects such as ATHENA BEGIN are being expanded and provided with budget and dissemination, something fundamental to facilitate the reporting of situations of violence and the subsequent coverage at the level of health care specialised in intellectual disabilities.

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