

From commitments to actions: responding to migrant women's experiences of DSGBV



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INTRODUCTION AND ACKNOWLEDGEMENTS

Recent years have seen a wave of new policy initiatives, laws and constitutional amendments that have strengthened gender equality and women's rights in Ireland, from the marriage equality and repeal referendums in 2015 and 2018 to the Domestic Violence Act 2018, which introduced a new DSGBV crime of "coercive control." The Victims of Crime Act 2017, which puts into national law the EU Victims Directive, while less comprehensive in addressing DSGBV than its parent directive, is an important expression of commitment to the rights of victims of DSGBV. Ireland's ratification in 2019 of the Istanbul Convention on preventing and combating violence against women and domestic violence significantly bolsters accountability of the Government for its performance in relation to DSGBV. The report of the Citizens' Assembly on Gender Equality (2021) and the implementing strategy drafted by the Oireachtas Joint Committee on Gender Equality (*Unfinished Democracy*, 2022), are recent milestones in a long journey to make Ireland a more gender equal country. Yet, to date, insufficient attention has been paid in all relevant national strategies to addressing migrant women's experiences of DSGBV.

At the same time, despite legal and policy advances to counter DSGBV, it remains a pervasive problem. In Ireland, in 2022, Women's Aid recorded almost 40,000 disclosures of domestic abuse against women and against children and the CSO sexual violence survey revealed that 52 per cent of women and 28 per cent of men reported experiencing sexual violence in their lifetime. Safe Ireland reports that in 2018, 10,782 women and 2,572 children were accommodated or otherwise supported by a domestic violence service, while on 3,256 occasions women were declined accommodation due to a lack of available places (Safe Ireland 2019). There is little data available on the share of migrant women using services, but there is some evidence that it is in the region of 20 per cent in the Dublin area (Women's Aid 2019). AkiDwA has also worked on documenting less visible forms of DSGBV that primarily affect women from migrant communities, including FGM, estimating that about 6,000 women in Ireland have undergone FGM (Munyi et al. 2021), as well as early and forced marriages, for which there is growing anecdotal evidence (AkiDwA 2022). Regarding human trafficking, Ireland has recorded approximately 40 victims each year since 2019, widely viewed as a severe underestimation, as Ireland continues to be categorised by the US State Department as a "Tier 2" country in terms of its efforts to combat trafficking.

An immediate source of concern is the increased risk of DSGBV, including sexual exploitation and trafficking, in and around emergency accommodation centres. Despite the Government's stated commitment in 2021 to replace the direct provision system with a community-based, integrated accommodation model for international protection applicants, there has been little progress in implementing the necessary changes. The number of new applicants coming to Ireland increased fourfold between 2021 and 2022, from under 3,000 to about almost 12,000 (Nasc 2022). Combined with the arrival of 75,000 Ukrainian refugees and an ongoing housing/accommodation crisis, the already inadequate direct provision system is under unprecedented pressure. As a result, there is a growing reliance on hotel-based emergency accommodation and associated increased risks of DSGBV in such centres, especially for migrant women and minors (as evidenced by the testimonies presented in this report).

The Third National Strategy on Domestic, Sexual and Gender-Based Violence, 2022-2026 (the National Strategy) and its Implementation Plan have the potential to be a significant turning point in relation to responding inclusively and effectively to migrant women's experiences of DSGBV. The Department of Justice's audit of the two previous strategies (2021) found that both had failed to adequately and appropriately address the needs of migrant women,

among other marginalised groups. The fact that both the Istanbul Convention and the Victims Directive require the Government to protect the rights and meet the needs of victims of DSGBV, without discrimination on the basis of immigration status, adds additional pressure to ensure that Ireland’s policy response to migrant women’s experience of DSGBV is what it should be and in compliance with its international obligations. This offers a valuable opportunity to focus current policy discussion on the intersection of DSGBV and migration and what must happen to create inclusive DSGBV policy responses.

This report, *From Commitments to Actions: Responding to Migrant Women’s Experiences of DSGBV*, reflects a collaboration between AkiDwA, the national migrant women network, and GBV-MIG, an international Gender Net Plus research project at the University of Galway (see the Appendix for details). Drawing on more than a decade of AkiDwA’s advocacy and research on this topic, and the GBV-MIG research carried out during 2020-2022, *From Commitments to Actions* places the rights and needs of migrant women who are victims/survivors of DSGBV at the centre of consideration in relation to implementation of the National Strategy.

The report is divided into two parts. Part 1 contains five sections. The first four sections each deal with a substantive policy priority area, which is the subject of key goals or actions in both the National Strategy and the Joint Committee on Gender Equality report, *Unfinished Democracy*, and is directly relevant to addressing migrant women’s experiences of DSGBV. The four areas relate to: targeted awareness-raising campaigns; issues of access to safe accommodation for victims of DSGBV, or those at risk of DSGBV; advancing justice and inclusion for migrant victims of DSGBV; and developing culturally-sensitive understanding of DSGBV and responses to it. Each section provides: (1) an overview of the issue as it affects migrant women; (2) a summary table of the relevant Government obligations in the Istanbul Convention and stated commitments to migrant women in the National Strategy and *Unfinished Democracy*; (3) a discussion of what is required to achieve improved and inclusive policy responses; and (4) a set of priority actions to ensure that the needs and rights of migrant women victims/survivors of DSGBV will be central and not marginal to the implementation of key actions. The fifth section focuses on Pillar 4 of the National Strategy Implementation Plan and presents recommended priority actions with respect to the implementation and monitoring processes.

Part 2 contains a selection of stories and mini-testimonies of migrant women. “Hana,” “Joya” and “Uzma” participated in GBV-MIG interviews during 2021-2022. Their accounts illustrate the lived realities of encountering the issues discussed in the different priority policy areas presented in Part 1. The mini-testimonies of “Bukola,” “Portia,” “Samantha” and “Beatrice” were documented in focus group discussions facilitated by AkiDwA in December 2022 in emergency accommodation centres. They provide insights into an unfolding crisis in such centres and underline the urgency of prompt enforcement of existing standards and safeguards against DSGBV in accommodation centres under the oversight of IPAS.

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PRIORITY AREA 1: AWARENESS RAISING AND INFORMATION CAMPAIGNS ON DSGBV AND SUPPORTS AVAILABLE TO MIGRANT VICTIMS/SURVIVORS

Overview

Migrant women's access to information about their rights and how to exercise them is a precondition of the positive integration of migrant women in society. This is especially urgent for migrant victims or survivors of DSGBV. One migrant organisation listed the additional barriers faced by women in this situation, including "language difficulties, social isolation, racism and/or discrimination, limited access to income or independence, uncertain immigration status and lack of knowledge regarding available supports and remedies" (Nasc 2015, p. 2). Safe Ireland (2013) found that a "lack of English [and] ... familiarity with immigration and social welfare systems in Ireland ... [was] leveraged by abusers to further marginalise their victims" (p. 4). AkiDwA also has highlighted barriers of "cultural norms and stigma" and a "lack of staff training" of service providers who engage with migrant women (2020, p. 2). Moreover, awareness-raising campaigns should include all forms of DSGBV, including FGM, early and forced marriages, and trafficking (ibid.).

The critical importance of addressing gaps in information and awareness-raising was emphasised by all representatives of advocacy and front line organisations interviewed or consulted as part of the GBV-MIG project. The most pressing needs identified were to:

- Proactively provide information and interpretation in all relevant languages
- Widely disseminate up-to-date information about rights, entitlements and relevant services in relation to DSGBV and immigration and how to access them in accessible modes and formats
- Provide targeted awareness-raising with migrant and minority women about what constitutes DSGBV and supports and services available, promoting integration of and not stigmatizing target groups
- Implement human rights-based, anti-racism and cultural awareness training with service providers
- Undertake public awareness raising and information campaigns on all forms of DSGBV, reflecting the lived experience of migrant women
- Maintain open lines of communication to enable organisations that support migrant women to update and inform public representatives, policymakers and policy implementers regarding evolving issues and needs

Importantly, AkiDwA reports that women migrants who are victims of DSGBV often "hesitate to report domestic violence out of fear that involving the authorities would make them be seen as a trouble maker and that it would negatively affect their application for international protection or citizenship" (2022, p. 8). In response, it calls for a "positive initiative ... to educate migrant and refugee women on their rights in targeted information campaigns on: a. recognising the signs of domestic violence; and b. assurances that protection from domestic violence is available to all and will not affect immigration status."

Table 1. Targeted DSGBV awareness raising: Government obligations and commitments

Istanbul Convention	Zero Tolerance: Third National Strategy on DSGBV	Citizen's Assembly/Joint Committee on Gender Equality (JCGE)
<p>Article 13 – Awareness-raising</p> <p>1 Parties shall promote ... awareness-raising campaigns ... including in co-operation with ... [national human rights, equality, civil society and women's organisations] to increase awareness and understanding among the general public of the different manifestations of all forms of violence ... [and] the need to prevent [it] ...</p> <p>Article 19 – Information</p> <p>Parties shall ... ensure that victims receive adequate and timely information on available support services and legal measures in a language they understand.</p>	<p>1.1.2 Deliver a creative public awareness raising campaign of pathways to safety and supports available to victims of DSGBV, including:</p> <p>Material specifically designed to reach migrant communities and to reassure migrant victims, including ... undocumented, that they will be fully protected and provided with necessary support services in cases of DSGBV</p> <p>2.1.2 Raise awareness of the legislation on DSGBV and ... on victims' rights ... ensuring a victim's right, under the Victims of Crime Act 2017, to access information in clear and concise language, [is] met and that information is made accessible to migrant ... communities.</p> <p>2.2.4 Build the capacity and resource the specialist and community-based support organisations to ...</p> <p>c. [Ensure] the availability of trained cultural mediators</p> <p>d. Work to ensure the availability of language interpreters (including ISL)</p> <p>4.1.3 Establish a specialised group ... to proof and advise all interventions in terms of intersectionality and inclusivity for socially excluded groups including ... migrant women ... etc.</p>	<p>Citizen's Assembly</p> <p>Recommendation 38:</p> <p>Eliminate tolerance in our society of DSGBV by developing and implementing awareness, prevention and education campaigns ... on:</p> <p>(a) The impact and harm caused by DSGBV</p> <p>(b) Supports available to victims/survivors</p> <p>JCGE Recommended Action 38:</p> <p>Ensure implementation of [National Strategy] Action 1.1.2 ... [to include] targeted information campaigns to provide migrant and refugee women with information about their rights and with assurances that protection for victims/survivors of domestic violence is available and will not affect immigration status</p>

Toward an improved and inclusive policy response

Implementation of the Government's obligations and commitments outlined in Table 1 requires a proactive intersectional approach to awareness raising and information dissemination. The design and implementation of the required targeted campaigns will require input of migrant women and the organisations that support them at each stage of the process. It is imperative that the planned "specialised group" to ensure the application of "intersectionality and inclusivity" principles (Strategy action 4.1.3) will be centrally involved in shaping the content

and modes of awareness raising deployed. In addition to availability of information in culturally-aware formats and in multiple relevant languages, this means providing essential DSGBV information in combination with immigration information in order to signpost specific “pathways to safety and supports available” for migrant victims/survivors of DSGBV.

Further as the provisions of the Istanbul Convention must be implemented without discrimination on any ground including migrant or refugee status (Art. 4), migrant women who are victims/survivors of DSGBV must have access to the same forms of protection and supports that are available to citizens and this should be evident in the content of awareness-raising campaigns tailored to migrant communities.

The Criminal Justice (Victims of Crime) Act 2017 puts into national law the EU Victims Directive (2012/29/EU). The directive contains a strong statement of commitments to the rights of victims of DSGBV and lists “residence status” as one of the personal characteristics of victims to be taken into account when authorities assess victims’ “specific protection needs.” It encompasses all forms of DSGBV and defines a minimum standard of “support services” to include provision of “shelters or other appropriate interim accommodation for victims in need of a safe place,” as well as “targeted and integrated support” for victims DSGBV, including trauma support and counselling (Art. 9). Notably, Ireland’s Victims of Crime Act omits “residence status” in the list of personal characteristics that should be taken into account (to the victim’s benefit) in the assessment of victims (para. 15). This is a weakness that should be corrected. Nonetheless, the Victim’s Directive is an important statement of the rights of victims of DSGBV that Ireland has accepted, even if it has not yet given these full expression in the implementing legislation.

Priority actions

Action 1.1 – Ensure that all awareness-raising interventions are designed and implemented in coordination with the proposed intersectionality and inclusivity specialised group, migrant women and organisations supporting them.

Action 1.2 – Prioritise National Strategy actions and allocation of resources to increase the availability of appropriately trained interpreters (and translators) and cultural mediators (2.2.4) in order to: underpin achievement of inclusive awareness-raising campaigns (1.1.2/2.1.2); and ensure that victims receive information in a language they understand (Istanbul Convention, Art. 19).

Action 1.3 – Include FGM, early and forced marriages, and trafficking, in public and targeted awareness raising campaigns to reflect diversity and lived experiences of women in Ireland today.

Action 1.4 – Revise the Victims of Crime Act to include “residence status” as one of the personal characteristics to be taken into account in assessment of “specific protection needs,” to ensure that all victims of DSGBV benefit from the protections of the Act, regardless of immigration status, in line with the EU Victims Directive.

PRIORITY AREA 2: ACCOMMODATION OF MIGRANTS WHO HAVE EXPERIENCED, OR ARE AT RISK OF, DSGBV

Overview

It is well-documented that access to safe accommodation and independent funds are determining factors in a woman's decision to escape DSGBV. The difficulties of fleeing DSGBV are compounded for migrant women by immigration status-related barriers. In particular, international protection applicants are not eligible to receive public funds and services normally used in providing support to victims of DSGBV, including access to: Refuge accommodation or medium- to long-term safe accommodation; Social welfare payments (e.g., One Parent Family Payment, Child Benefit); or Housing supports (e.g., Housing Assistance Payment, Rent Allowance, Rent Supplement). An international protection applicant who is a victim of DSGBV can be allocated a space in a refuge on a short-term/emergency basis but, mostly, this does not happen given the high demand for limited places from women with entitlement to public support. Generally, satisfying the different criteria of the right to reside (Habitual Residence Condition) poses a major barrier to accessing publicly-funded services and payments for victims of DSGBV without the required immigration status or who are undocumented. For example, a woman may not be able to meet the right to reside criteria if her status is dependent on an abusive husband who is the main visa holder and he withholds her visa documentation (Safe Ireland 2013, pp. 3-4). A majority of women in such situations are unlikely to leave a violent spouse or partner for fear they will "find themselves and their children destitute" (AkiDwA 2022, p. 7) or, if they do leave, usually return to the perpetrator (Safe Ireland 2013, p. 5).

Most protection applicants live in the direct provision system, which has been much criticised in the two decades of its operation. Residents reported that the "stress, poor living conditions and poverty" of living in direct provision was a contributing factor in domestic violence (AkiDwA 2010, p. 11). In addition, women have experienced sexual harassment and a hostile environment in and around some centres (AkiDwA 2012, p. 15). Despite the Government's *White Paper to End Direct Provision and to Establish a New International Protection Support Service* (2021), the situation for new international protection applicants is deteriorating with the extensive use of emergency accommodation centres. The number of new applicants arriving in Ireland increased from 2,649 in 2021 to 11,500 in 2022 (Nasc 2022), along with tens of thousands of Ukrainian refugees. This raises new, urgent concerns about increased risks of DSGBV, sexual exploitation and trafficking, especially for women and minor in emergency accommodation centres. It is imperative to ensure that existing safeguards relating to all forms of DSGBV in accommodation centres are implemented proactively, including the *National Standards for Accommodation Offered to People in the Protection Process* (DOJ 2019) (National Standards) via the International Protection Accommodation Service and the *RIA [IPAS] Policy Document on Sexual & Gender-based Violence* (2014).

Finally, to comply with the EU Reception Conditions Directive (RCD), in 2022, the Government introduced a questionnaire-based vulnerability assessment (VA) mechanism, to identify vulnerable persons and any associated "special reception needs" (IPAS 2022, p. 5). Under the RCD, "vulnerable" persons includes victims of trafficking or anyone who has been "subjected to torture, rape or other form of serious psychological, physical or sexual

violence” (RCD, Art. 21). If the IPAS welfare team deems a person to have “high vulnerability” a social worker is assigned to “determine a specific care plan” (IPAS 2022, p. 5). Otherwise, protection applicants’ access to services is “mainstreamed” through “the same referral pathways as Irish citizens” (ibid.). The minimal nature of this approach raises questions about the adequacy of the VA mechanism to fulfil the Government’s obligations with respect to migrants who have experienced, or who are at heightened risk of, different forms of DSGBV, particularly under strained conditions in emergency accommodation.

Table 2. Accommodation: Government obligations and commitments

Istanbul Convention	Zero Tolerance: Third National Strategy on DSGBV	Citizen’s Assembly/Joint Committee on Gender Equality (JCGE)
<p>Article 4 – Fundamental rights, equality and non-discrimination</p> <p>... (3) The implementation of ... this Convention ... in particular measures to protect the rights of victims, shall be secured without discrimination on any ground such as sex, gender, race, ... migrant or refugee status, or other status.</p> <p>Article 23 – Shelters</p> <p>Parties shall ... provide for the setting-up of appropriate, easily accessible shelters in sufficient numbers to provide safe accommodation for and to reach out pro-actively to victims ...</p>	<p>2.3 Enable victims/survivors of DSGBV to rapidly access and live in safe, accessible short and long term accommodation as a priority.</p> <p>2.6.2 Provide specialist accommodation for victims of trafficking with special regard to victims of trafficking for sexual exploitation.</p> <p>4.1.3 Establish a specialised group ... to proof and advise [on] all interventions in terms of intersectionality and inclusivity for socially excluded groups including ... migrant women</p> <p>4.6 Ensure there is a priority focus on DSGBV services being inclusive, and improve outcomes for socially excluded groups.</p> <p>1.6.4 Review <i>Policy and Procedural Guidance for Housing Authorities in Relation to Assisting Victims of Domestic Violence with Emergency and Long-term Accommodation Needs</i> (2017) to ensure continuing effectiveness and consistency in responses to assist victims of domestic violence.</p>	<p>Citizen’s Assembly Recommendation 40:</p> <p>Ensure sufficient publicly funded provision of beds, shelters and accommodation for victims/survivors of [DSGBV] across the country ... in line with the Istanbul Convention.</p> <p>JCGE Recommended Action 40:</p> <p>Ensure compliance with Article 23 of the Istanbul Convention and with the timelines for delivery of refuge provision in the ... [National Strategy].</p> <p>Ensure ... the national Housing for All plan includes provision for medium to long-term accommodation specifically for victims/survivors of domestic violence and abuse.</p> <p>Introduce an exceptional needs payment to complement the domestic violence rent supplement ... to assist those experiencing domestic violence with other practical emergency outlays</p>

Toward an improved and inclusive policy response

As a state party to the Istanbul Convention, Ireland is subject to regular review by GREVIO (the Group of Experts on Action against Violence against Women and Domestic Violence). In GREVIO reviews of other countries to date, it has emphasised “the importance of emergency accommodation being accessible to all, including migrant women” and other marginalised groups and that numerical adequacy of spaces alone is not considered sufficient to

meet Istanbul Convention obligations in this area (Tusla 2022, p. 15). This demonstrates GREVIO's expectation that each article in the Convention, including Articles 22 and 23, should must be interpreted in along with Article 4, which prohibits discrimination in the implementation of the convention on the ground of "migrant or refugee status, or other status."

The Third National Strategy (DOJ 2022a) contains a number of potentially transformative commitments relating to meeting the needs of migrant women victims/survivors of DSGBV. Regarding the review of the 2017 *Guidance for Housing Authorities* in relation to assisting victims of DSGBV, this must also entail review of the implementing Housing Circular 41/2012. Both documents retain immigration status related barriers, including the HRC, which in situations where DSGBV is an issue, directly contradicts the strategy's commitments to "enable victims/survivors of DSGBV to rapidly access and live in safe, accessible short and long term accommodation as a priority" (2.3) and to prioritise a "focus on DSGBV services being inclusive, and [improving] outcomes for socially excluded groups" (4.6). Finally, to ensure that the recommended actions of the Joint Committee on Gender Equality listed in the above table will be in line with Istanbul Convention, any provisions to address the needs of victims/survivors of DSGBV in the *Housing for All Plan for Ireland* (2021) or through the introduction of a new social welfare payment, must be available to all victims/survivors regardless of migration or refugee status.

Priority actions

2.1 – Set aside the Habitual Residence Condition (HRC) and other immigration status-related barriers to migrant women escaping DSGBV, to ensure inclusive access to refuges, and to medium- to long-term safe housing options and relevant public/welfare payments, regardless of immigration status.

2.2 – Expedite implementation of the *White Paper to End Direct Provision*, in particular, Phase One and Phase Two housing, as integral to fulfilling the National Strategy commitment to "enable victims/survivors of DSGBV to rapidly access and live in safe, accessible short and long term accommodation as a priority" (Action 2.3).

2.3 – Ensure that the DSGBV-related requirements of the *National Standards for Accommodation Offered to People in the Protection Process* and the *RIA [IPAS] Policy Document on Sexual & Gender-based Violence* are communicated to all residents and implemented in accommodation centres engaged by IPAS, including emergency accommodation.

2.4 – Ensure that all members of the IPAS Resident Welfare Team (reviewers of vulnerability assessment questionnaires and referrals), receive mandatory gender-sensitivity and cultural-sensitivity training to inform decision making.

2.5 – Require that all questionnaires or referrals that disclose experience of: "violence or trauma, such as female genital mutilation (FGM), rape ... [or] domestic violence" will be categorised as requiring follow-up by the Assessment Officer and/or IPAS Social Worker to ensure appropriate accommodation and a specific care plan.

2.6 – Require that all questionnaires or referrals that disclose being "forced or tricked to come to Ireland against [their] will, for example for unpaid labour or sex work" will be categorised as requiring follow-up by the Assessment Officer and IPAS Social Worker to ensure appropriate accommodation and a specific care plan.

2.7 – Engage organisations supporting migrant women in the proposed review/s to "upgrade and strengthen" the 2017 *Guidance for Housing Authorities* in relation to assisting victims of domestic violence, including review and revision of the related Housing Circular 41/2012.

PRIORITY AREA 3: JUSTICE AND INCLUSION FOR MIGRANT VICTIMS AND SURVIVORS OF DSGBV

Overview

To enhance justice and inclusion for migrant victims and survivors of DSGBV a number of key issues require prompt remedial action. First, dependent migrant status continues to be a major obstacle to victims of DSGBV in accessing protection and assistance. Second, fear of reporting DSGBV is common among migrant women, in case it will adversely affect their immigration status or cause them to be deported or to lose their children. Finally, there are concerns that more needs to be done to ensure recognition of all forms of DSGBV in gender-based asylum claims, including FGM, and to ensure identification of victims of trafficking, particularly for the purposes of sexual exploitation.

The Victims of Domestic Violence Immigration Guidelines (INIS 2012) allows non-EEA persons, whose status depends on someone who is abusing them, to apply for permission to stay in Ireland in their own right, at the discretion of the minister for justice. While welcome, many inadequacies of the Guidelines have been highlighted including that the application process is unduly complicated, involves lengthy delays and it does not cover “undocumented women” (Nasc 2015). Also when independent status is granted under the Guidelines it is normally at a level that does not permit economic independence (e.g., Stamp 3) and entails payment of a substantial registration fee that is unaffordable for many (AkiDwA 2022).

The fear of reporting DSGBV to the authorities was described in several interviews with migrant women for the GBV-MIG project, including Stamp 4 visa holders. “Vanessa” who came to Ireland from North Africa, married to a man from her country who was also an Irish citizen, described her first months in Ireland:

When I came here I was struggling to understand what people were saying [in English].... I [lived with] an abusive husband.... I didn't know that I have the right to study, to work. The only idea he gave me [was] that ... they will deport me.... The deportation idea for me is a nightmare itself.... Even to search in Google.... I was scared about it.... [He hit me] a lot ... and even he used to kick me out of the house ... and I stayed out at night ... with raining weather.

In addition to underlining the imperative of ensuring effective DSGBV information and awareness-raising in relevant languages, at each step of the migration journey, and for all immigration statuses, Vanessa's account shows the importance of the Gardaí gaining the trust of migrant victims of DSGBV and ensuring that victims know they can report DSGBV in confidence and access support without adverse consequences for their immigration status.

The challenges of identifying and supporting victims of trafficking are immense. One representative of a migrant support organisation in the Midwest, interviewed for the GBV-MIG project, noted:

The scale of violence and exploitation that people experience is almost unbelievable.... [Clients have experienced] forced migration,... smuggling, often layers of exploitation in different countries on their way

to Ireland. And they are being held somewhere for purposes of sexual exploitation while they are here.... It must be 30 percent of the women that we worked with [who] have had pregnancy and childbirth as a result of exploitation as well.

This situation is made worse by the lack of specialised accommodation and supports, even for those formally recognised as victims of trafficking who are placed in direct provision.

Table 3. Justice and inclusion for migrant victims/survivors: Government obligations and commitments

Istanbul Convention	Zero Tolerance: Third National Strategy on DSGBV/ Implementation Plan (IP)	Citizen’s Assembly/Joint Committee on Gender Equality (JCGE)
<p>Article 59 – Residence status</p> <p>1 Parties shall ... ensure that victims whose residence status depends on that of the spouse or partner ... in the event of the dissolution of the marriage or the relationship, are granted in the event of particularly difficult circumstances ... an autonomous residence permit irrespective of the duration of the marriage or the relationship....</p> <p>Article 60 – Gender-based asylum claims</p> <p>1 Parties shall ... ensure that GBV against women may be recognised as a form of persecution within the meaning of ... [the Refugee Convention] ... and as a form of serious harm giving rise to complementary/subsidiary protection.</p> <p>2 Parties shall ensure that a gender-sensitive interpretation is given to each of the Convention grounds....</p>	<p>4.6.2 Targeted community engagement [by An Garda Síochána] with groups ... underrepresented in services [to improve] the confidence of all communities and victims of DSGBV to ... report all crimes regardless of immigration status.</p> <p>3.4.1 Establish clear links and support greater engagement between this [DSGBV] Strategy and the new Human Trafficking Action Plan</p> <p>2.1.8 Apply gender-specific guidelines and ... interpretation of the International Protection Act 2015 as per Article 60 and 61 of the Istanbul Convention.... Develop a strategy to fill identified gaps in services that recognises the short, medium, and long-term support needs of victims/survivors ... [including] a review of current funding levels for court accompaniment.</p>	<p>JCGE, Recommended Action 39:</p> <p>[1] Where a victim/survivor’s status is linked to that of an abusive partner, put measures in place to enable them to receive independent immigration status.</p> <p>[2] Ensure that accessing of supports by victims/survivors does not increase their vulnerabilities and that appropriate safeguards are put in place regarding sharing of information with the Garda National Immigration Bureau or other bodies.</p> <p>JCGE, Recommended Action 41:</p> <p>Introduce training programmes to provide migrant women with information on their rights in seeking asylum and include targeted information on recognising the signs of DSGBV with assurances that protection from DSGBV is available and will not affect immigration status.</p> <p>Review and strengthen DSGBV and FGM specific training in line with international best practice for all in the Refugee Appeals Tribunal.</p>

Toward an improved and inclusive policy response

The National Strategy (DOJ 2022) clearly recognises that those in need of “additional inclusion measures to address DSGBV” include migrants, refugees and international protection applicants, undocumented migrants, victims of trafficking and others “whose immigration status may prevent them from accessing a range of public services and supports” (p. 20). It also contains strong commitments (2.1.8) regarding the application of gender-specific guidelines

in decisions on international and subsidiary protection (Istanbul Convention, Art. 60) and to “fill identified gaps in services” to victims/survivors of DSGBV (Art. 22).

Regarding pathways to independent immigration status for victims of DSGBV, the Victims of Domestic Violence Immigration Guidelines (INIS 2012) must be put on a statutory footing and adequately resourced to ensure prompt decisions. In addition, legal measures are needed to implement Article 59 of the Istanbul Convention, which requires victims of DSGBV whose status depends on their abuser to be given independent status regardless of the duration of the relationship (IHREC 2019, p. 5). Further, Ireland must opt-in to the EU Directive on Family Reunification, which strengthens dependent migrants’ entitlement to independent status within five years (IHREC 2017, p. 11).

The commitment to establish links between the National Strategy and the Human Trafficking Action Plan (DOJ 2016) is key to strengthening the policy response to victims of human trafficking with regard to its gender-specific aspects. Two Government promises, not yet implemented, are essential for progress in this area: first, the commitment to put the National Referral Mechanism (NRM) for victims of trafficking on a statutory footing and to expand the bodies competent to identify victims of trafficking, including ‘trusted partner’ NGOs; and, second, contained in the *White Paper to End Direct Provision*, to provide specialised accommodation facilities for victims of trafficking (Cunniffe & Ayodele 2022, p. xi).

Priority actions

Action 3.1 – Ensure that migrant victims/survivors reporting of DSGBV to the Gardaí or other authorities, and/or accessing related services, will not adversely affect their immigration status.

Action 3.2 – Update and put on a statutory footing the Domestic Violence Immigration Guidelines, including to: ensure that DSGBV-related independent status will afford access to employment, education, social protection and healthcare to enable independence (e.g., Stamp 4); remove the barrier of the initial registration fee; update to include coercive control; and include a pathway to regularised status for undocumented migrant victims/survivors of DSGBV.

Action 3.3 – Update and put on a statutory footing the Policy Document on Non-EEA Family Reunification (2016), including to: opt in to the EU Family Reunification Directive; and remove duration of marriage/relationship requirements where independent status is sought due to breakdown of a relationship with a sponsoring spouse/partner (per Istanbul Convention, Art. 59).

Action 3.4 – Resource the development and delivery of gender and cultural sensitivity training of Immigration Officers and Refugee Appeals Tribunal personnel, in cooperation with specialist and community-based support organisations, to ensure appropriate and systematic application of gender-specific guidelines, encompassing consideration of all forms of DSGBV, including FGM, in international protection interviews and processes at all stages.

Action 3.5 – Resource the development and delivery of timely training for migrant women, in cooperation with specialist and community-based support organisations, on their rights in seeking international protection, recognising the signs of DSGBV, and the grounds for gender-based asylum claims, encompassing different forms of DSGBV, including FGM.

Action 3.6 – Prioritise implementation of commitments to reform the NRM and provide specialised accommodation for victims of trafficking as part of links between the National Strategy and anti-trafficking plan.

PRIORITY AREA 4: CULTURALLY-SENSITIVE UNDERSTANDING OF DSGBV AND SPECIALISED SERVICES

Overview

The Istanbul Convention (Art. 22) requires Ireland to ensure adequate provision of specialist support services to all women victims/survivors of DSGBV and to meet short-, medium- and long-term needs, across the country. Here “all women” implies an obligation to ensure that women migrants, refugees, international protection applicants and those who are undocumented, and not only citizens, benefit from the Convention’s provisions without discrimination (Art. 4). Also, the Convention repeatedly states its purpose is to “protect women against all forms of violence” (Art. 1), which necessarily, in Ireland, includes forms that mainly affect particular groups of migrant women, such as FGM or early and forced marriages, which required culturally sensitive responses. Further, regardless of immigration status, all women are entitled to access “mainstream” specialist DSGBV services, on par with citizens, in relation to all other forms of violence against women, whether coercive control, domestic abuse or sexual exploitation.

UNICEF estimates that some four million girls are at risk of FGM annually, mostly within countries in Africa, the Middle East and Central Asia, depending on regional and cultural traditions (Munyi et al. 2021, p. 11). In an increasingly globalised world, more women who have undergone FGM, and girls who are at risk of FGM, are living in global North/West countries, including Ireland. In 2016, AkiDwA estimated that approximately 5,795 migrant women from FGM-practicing countries living in Ireland had undergone FGM (ibid., p. 13).

One representative of a Dublin-based immigrant advocacy group interviewed for the GBV-MIG project, noted that while trafficking is referenced in the Istanbul Convention and named as a form of gender-based violence in the EU Victims Directive, “we are still in our infancy in recognising human trafficking as a form of GBV.” In addition to trafficking for the purposes of sexual exploitation, which “almost exclusively affects migrant women,” she warns, trafficking for purposes of exploitive marriage, or for reproductive-related forms of exploitation in relation to transnational surrogacy and adoptions, are also emerging as significant forms of trafficking that target migrant women.

More generally, the demand for access to “mainstream” DSGBV services is high among migrant, refugee and international protection applicants. According to Women’s Aid, approximately one fifth of the women it assisted in 2018 in its Dublin-based outreach support services were “migrant women” (Women’s Aid 2019, p. 9). Previously, a Women’s Health Council study found minority ethnic women to be “over represented among service users of GBV organisations” (WHC 2009, p. 86). For migrants who are victims of DSGBV and living in remote parts of the country, there are deep concerns that they are not being reached by service providers. One representative of a migrant support organisation in the Southwest, which works closely with domestic violence services, explained in a GBV-MIG interview: “We are limited when we can’t see the woman... [We] do not see a lot of migrant women (or men) from ... the very west [of the county]. It can take three and half to four hours to get here and that is not feasible for someone who is in a very controlling relationship.”

Expressing further concern about gaps in DSGBV supports to international protection applicants, the same interviewee commented, “[It] is really worrying to us that we don’t see more [domestic violence work] in direct provision centres.” Finally, regarding undocumented women DSGBV victims, a representative of a Midwest migrant support organisation recounted, “In our experience ... if you don’t have an IRP [Irish Residence Permit] card, you are generally not entitled to anything.”

Table 4. Culturally-sensitive understanding of DSGBV and specialised services: Government obligations and commitments

Istanbul Convention	Zero Tolerance: Third National Strategy on DSGBV/ Implementation Plan (IP)	Citizen’s Assembly/Joint Committee on Gender Equality (JCGE)
<p>Article 22 – Specialist support services</p> <p>1 Parties shall take the necessary ... measures to provide ... in an adequate geographical distribution, immediate, short- and long-term specialist support services to any victim [of DSGBV within] ... the scope of this Convention.</p> <p>2 Parties shall provide or arrange for specialist women’s support services to all women victims of violence....</p>	<p>2.4.11/12 Put in place special support services required by victims/survivors of FGM</p> <p>2.6.1 Enable marginalised women to connect to specialist health services where they feel listened to, supported and safe.</p> <p>1.1.2 Deliver a creative public awareness raising campaign of pathways to safety and supports available to victims of DSGBV, including material specifically designed to reach migrant communities....</p> <p>1.4.4 Resource and co-design work with the specialist services to lead and deliver education/CPD programmes on all forms of DSGBV, with a focus on how DSGBV affects ... different groups</p>	<p>Citizen’s Assembly on Gender Equality, Recommendation 39: Support justice for victims/survivors by ... d) Providing specialised confidential health care and other support services for victims/survivors including legal representation.</p> <p>Joint Committee on Gender Equality, Recommended Action 41:</p> <p>Recognise [FGM] as a ground for seeking asylum and provide culturally sensitive specialised services for victims/survivors.</p> <p>Establish an intergovernmental working group on FGM [...]; develop a National Action Plan on FGM to coordinate the response of Government agencies, with funding to support anti-FGM programmes and key targets to measure progress on elimination; and provide funding for a network of community health ambassadors to work with affected communities to change attitudes to FGM at a grassroots level.</p>

Toward an improved and inclusive policy response

The *Domestic, Sexual and Gender Based Violence: An Audit of Structures* (DOJ 2021) found that the first two National Strategies on DSGBV had “not provided for ... interventions for victims who are migrants; sex workers, victims of trafficking, forced marriages, FGM ... [and that specific] difficulties [related] to culturally insensitive communications and inadequate or inappropriate service provision ... which are compounded where a victim is undocumented, or immigrant status is dependent on a partner who is also a perpetrator” (p. 23). In comparison to earlier strategies, the Third National Strategy contains several stronger action commitments that can be used to advocate for meaningful change, to begin to remedy the omissions and deficiencies of previous strategies.

Regarding FGM, a comprehensive range of targeted, gender-sensitive and culturally-sensitive interventions are needed on an ongoing basis to ascertain the prevalence, address the risks to girls, take action to prevent FGM, and inform and support women affected by FGM. The National Strategy does not explicitly commit to a National Action Plan, as called for by the National Steering Committee on FGM and endorsed by the Joint Committee on Gender Equality. In response to a parliamentary question about this, Minister for Justice Simon Harris pointed to the intersectional approach of the Strategy and a primary commitment to “put in place special health support

services required by victims/survivors of FGM” (2.4.11/2.4.12) (Dáil Éireann Debate 2023). This will be preceded by a “mapping exercise of current service provision ... [to identify] gaps in ... provision to victims/survivors of FGM ... [in] consultation with relevant community support organisations and [including] needs assessment of staff” (ibid.). The National Strategy Implementation Plan (DOJ 2022b) also notes that the “new DSGBV agency will ... liaise with the NGO-led National Steering Committee on FGM” in implementing action 2.4.11/2.4.12 (p. 27). These commitments offer opportunities for close engagement with the National Strategy to advance the FGM actions recommended by the JCGE outlined in Table 4.

A second relevant commitment, also health-focused, pledges to “enable marginalised women to connect to specialist health services where they feel listened to, supported and safe” (2.6.1), echoing the Women’s Health Action plan (WHAP) action 5c on rethinking how to support marginalised women in particular to access health supports. The text of the National Strategy Implementation Plan limits this commitment to focusing on supporting women in prostitution (DOJ 2022b, p. 30). In light of the findings of the audit highlighted above, there is an urgent requirement to expand the envisaged scope of this commitment to address the needs of different groups of marginalised migrant women, including undocumented migrants.

Finally, effective implementation of the National Strategy’s protection actions regarding special FGM support services (2.4.11) and connecting marginalised women health services (2.6.1) must be pursued in tandem with prevention action 1.1.2, to deliver public awareness raising campaigns on “pathways to safety and supports available to victims of DSGBV, including material specifically designed to reach migrant communities,” as well as action 2.1.2, to “ensure a victim’s right ... to access information in clear and concise language [is] made accessible for migrant ... communities” and in a language they understand (Istanbul Convention, Art. 19).

Priority actions

4.1 – Implement all elements of Recommended Action 41 of the Joint Committee on Gender Equality, in relation to the provision of culturally-sensitive specialised services for victims/survivors of FGM, in tandem with implementation of DSGBV Strategy action 2.4.11, regarding special FGM support services.

4.2 – Ensure the necessary interdepartmental coordination so that actions regarding special FGM support services (2.4.11/2.4.12) and connecting marginalised women to health services (2.6.1) will be implemented in coordination with inclusive public awareness raising actions with respect to DSGBV (1.1.2) and victims’ rights (2.1.1).

4.3 – Noting the audit findings of “culturally insensitive communications and inadequate or inappropriate service provision” with respect to different groups of migrant women, prioritise the resourcing and implementation of action 1.4.4, to co-create and deliver education/CPD programmes on all forms of DSGBV, with a focus on how it affects different groups of migrant women. These programmes should be a mandatory part of EDI training for all service providers whose role requires engagement with migrant women.

PRIORITY AREA 5: IMPLEMENTATION AND MONITORING: APPLYING AN INTERSECTIONAL APPROACH TO ENSURE INCLUSIVE POLICY RESPONSES TO MIGRANT WOMEN'S EXPERIENCES OF DSGBV

Pillar 4 of the National Strategy contains welcome, ambitious commitments to underpin its implementation, including establishment of a new statutory DSGBV agency with the Minister for Justice having lead responsibility for DSGBV and the DSGBV National Strategy (action 4.1.1). There are also pledges that “implementation will be ensured by strong oversight and coordination at central Government level” and overall oversight will be provided by a Cabinet Committee, chaired by An Taoiseach (4.1.2). Table 5 below highlights priority actions to be taken to ensure that migrant women’s rights and concerns will be at the centre of the implementation of the National Strategy.

Table 5. Implementation of National Strategy commitments to migrant women

Policy Coordination Commitment (National Strategy Pillar 4)	Priority Actions for inclusive responses to migrant women’s experience of DSGBV
4.1.3 Establish a specialised group ... to proof and advise all interventions in terms of intersectionality and inclusivity for socially excluded groups including ... migrant women	5.1 In consultation with organisations supporting migrant women, formulate terms of reference of and establish the “specialist group,” ensuring representation of migrant women in the group established.
4.1.4 Resource the participation of civil society and the specialist and community-based support organisations in support of the ongoing implementation of the National Strategy.	5.2 Resource and support the formation of a Migrant Women DSGBV Working Group to monitor and advise on implementation of National Strategy commitments to migrant women and feed into Action 4.2.1 (see below).
4.1.5 Establishment and resourcing of ... [an Inclusion Committee to ensure compliance with all relevant UN conventions and an Expert Group on new and emerging forms of DSGBV] to support strategy implementation.	5.3 Ensure inclusion of migrant women and organisations supporting them on the Inclusion Committee and Expert Group and that both bodies work in consultation with the Specialised Group on intersectionality and inclusivity. 5.4 Include early and forced marriage and emerging forms of gender-based exploitation in contexts of trafficking in the work of the Expert Group
4.1.7 Establish a working group comprising relevant Departments and agencies who, along with the Advisory Group [overseeing awareness-raising campaigns], will report to the Minister for Justice ... to ensure consistency and coherence in messaging and a planned and targeted rollout of the campaigns.	5.4 Ensure representation of and consultation with the Specialised Group on intersectionality and inclusivity in the activities of the planned Working Group and Advisory Group .
4.2.1 Devise monitoring and implementation framework for the DSGBV National Strategy for all victims/survivors	5.5 Include migrant women and organisations supporting them in the process to devise and monitor implementation of the DSGBV National Strategy commitments to migrant women, including regarding FGM

<p>4.3.1 Establish a data standards liaison group with responsibility for identifying the key quantitative and qualitative data gaps....</p>	<p>5.6 Include migrant women and organisations supporting them in all aspects of this action; and consider the addition of an immigration status identifier in DSGBV data collection</p>
<p>4.4 Ensure issues of policy intersectionality are highlighted and prioritised....</p> <p>4.5 Make clear connections and agree targets with other equality and inclusion strategies and related legislation (that focus on socially excluded groups)</p>	<p>5.7.1 Consider resourcing one or more postdoctoral research fellowships in partnership with relevant HEIs to undertake enabling research to facilitate formulation and agreement of targets across other relevant strategies (4.4) and with respect to equality and inclusion targets in particular (4.5)</p> <p>5.7.2 Include migrant women and organisations supporting them in identifying critical overlapping areas across strategies and formulating equality and inclusion targets.</p>
<p>4.6 Ensure there is a priority focus on DSGBV services being inclusive, and improve outcomes for socially excluded groups</p> <p>4.6.1. We will put funding in place to facilitate ... the involvement of support services and marginalised groups in the design and implementation of actions ... that support ... enhanced access for all and ... piloting or testing of new models of work/ approaches.</p>	<p>5.8 Support and resource the piloting and development of a coordinated, cohesive and integrated approach to awareness-raising, information dissemination in relevant languages, and facilitation of access to the full range of available specialised DSGBV supports and services to different migrant women, such as international protection applicants, refugees and those who are undocumented, including the resourcing of a single designated coordinating organisation and designated focal points in each participating support organisation.</p>
<p>4.6.2 Targeted community engagement with groups currently underrepresented in services</p> <p>[An Garda Síochána specific; including improving the confidence victims of DSGBV to report regardless of immigration status; and awareness raising with “hard to reach communities”]</p>	<p>5.9.1 Engage proactively with migrant women and organisations supporting them as part of AGS’s commitment to work in partnership with NGOs to implement the DSGBV National Strategy and provide a collaborative and effective policing service to all of society.</p> <p>5.9.2 Ensure that this action is implemented in tandem with action 2.2.4, to resource and build capacity to support, in particular:</p> <ul style="list-style-type: none"> • cultural competency capacity building across organisations • availability of trained intercultural mediators • availability of language interpreters • a more diverse staff to better reflect the diverse nature of service users • ongoing CPD on complex issues including racism and discrimination • access to services in rural locations

A MIGRANT WOMAN'S STORY: HANA

Hana is from Southern Africa. She came to Ireland as an international protection applicant about seven years ago. She has one child and is single.

Migration experience

I came to Ireland through the international protection process. It was very difficult. I was placed in direct provision, so I was isolated. Difficulties I have experienced personally as a woman, and a mother as well, are access to healthcare and to mental health practitioners. Also, trying to integrate has been difficult. How do you integrate into society when you have lived so long in direct provision? I am still trying to figure that one out.

[When I arrived I looked for help with my mental health.] I was told that I needed to see a General Practitioner (GP) who recommends services. It shocked me that a GP had to recommend and that there was only one option available and it did not include a mental health practitioner who could support my trauma. There were different mental health practitioners who wanted to help but the access is so limited when you live in direct provision. Basically I advocated for myself. After three years, I was able to find a psychologist who provided the therapy I needed.

Direct provision is very inhumane. Coming here with my daughter, I was limited in all my family life in one room. I saw other families too and their family life was all in this one room. And also simple things that you could buy for yourself, you must rely on others to give you. You need to go to ask for toilet paper and they are counting how many times you are taking it a week. So even going down and asking for it, it is very hard.

And the restrictions of visitors mean you can't have your visitors in your own room. You have to meet with them where there are cameras in an open space. There are cameras practically everywhere, except in your room. They are in the kitchen and in the social room, so for me, it is not a good or comfortable space. Also [accommodation managers] can come in to check the rooms where they don't tell anybody, they just come in. Sometimes you are tired or just sleeping and maybe you are dressed the way that you feel comfortable, and someone just comes in out of the blue. I had to fight to have some privacy. Post-COVID-19, sometimes I would go and live in the houses of friends while they travel and get a chance to cook and have that privacy.

DSGBV experience and access to supports

My husband continued to be abusive when I came here to Ireland and I took it for a few months because I had that fear as well that maybe I will not be granted protection. Already coming through the [international protection] system alone was abusive. Now living with an abusive partner, that is double abuse and I did reach out to my GP and I started looking for other options. [My ex-husband] openly abused me so he was hitting me and the security guards came to where we were staying and I was separated from him. I had to find help from strangers so I am very resourceful. That's when I found Women's Aid. They told me they could not take me in the women's refuge and I needed to be accommodated in another direct provision centre. Having the language and being comfortable using email was an advantage to me. I wrote a letter to the Reception and Integration Agency and I told them that I cannot be living in the same place with my abuser. He will either kill me or further abuse me, which he was doing. I informed

them that I could not be moved to the women's refuge because I am a refugee and requested to be moved. So, then I was moved and I got an accommodation centre with my daughter.

After that, he still followed me. Women's Aid said I could apply for a safety order. They told me how to get legal aid and sent someone to be with me in court. So I had someone coming to every court hearing until I was granted a five-year safety order. Then my ex-husband went to apply for access to my daughter. And I said to him: "Even though you have access, I have this five-year safety order. I am going to go to the police if you ever cross the line whether it is me or my daughter." I told my daughter: "If you are at his place and he abuses you, you must tell me." So that five-year safety order gave me that confidence to stay out of the abusive relationship. I know it is not an easy decision for most women to make but it was the best decision I made after years of abuse.

One thing that needs to be done is to educate [protection applicants] about the services and the access and another thing is make access available to women's refuges for women who come through the refugee process.

Interactions with the authorities

I have had two experiences with the police. The first one was when I arrived in this country. I didn't know where the Department of Justice was but I believed the police (the Garda) would help me, so I went there. It was a Sunday evening and I told them I had just come into the country from the airport and I came to seek asylum. They said, "No, we can't help you." I had to stop someone in the street. It was during the month of Ramadan, so I was able to sleep in the mosque. The positive one that I had was when I was being abused, they came to my rescue. They came and warned my ex-husband that he cannot do this. The Garda just told me, "Anytime, wherever you are, you can call us. We will come."

I didn't have a very good experience with immigration officers. They were intimidating and interrogating you. The way they speak to you – they make you feel bad. I was interviewed twice. One was with a woman and one with a man. I left there feeling very low, very, very, very low. They are not rough in that they would beat you but they are rough in their words. They are rough in the way they deal with you and the way they question you.

Integration in Irish society

Some Irish people are warm and welcoming and some are racists and bullies. There are some who like you and some who don't like you because of your accent and your skin colour. A good number of them are friendly, but their friendliness is limited. Volunteering for different organisations helped my situation and also finding out information. My mental health was going to deteriorate if I was not doing anything. So I found my first volunteering job.

For me personally getting the right to work [in 2018] changed my economic situation. So I started cleaning for a small business and then I worked for a non-governmental organisation. I think if you become part of a network where you meet maybe once a week, twice a week, that's the only way you are able to integrate. People slowly warm up to you. So that's my own strategy of integrating into the community. I think it's one of the hardest things that I am currently doing.

A MIGRANT WOMAN'S STORY: JOYA

Joya is from South Asia. She came to Ireland on a Stamp 3 eleven years ago. She has one child and is married.

Migration experience

I relocated to Ireland in 2012 with my little kid. I joined my husband who came to Ireland in April 2012 on an employment visa with a technology company. I had a particularly respectable job and had worked for about 7/8 years but when I came to Ireland, I had no work permit and was fully dependent on my husband. I found it hard to be without a job. It was difficult leaving my family, circle of friends, career and moving to an unfamiliar ground with no friends and finance. I was alienated from my family. I could not understand people here and their way of life, so it was difficult for me to make friends but after a while I became friends with families of my husband's colleagues, and this helped. My first two months in Ireland was a mixture of loneliness, financial and culture shock, especially with the weather. I and my daughter lived alone because my husband's job took him out Ireland, sometimes for as long as 6 months. I found it difficult living alone with my child. After a year, my daughter started school, and this gave me the opportunity to leave the house and explore my environment. I enrolled at the gym, met some local people, and made new friends. I started talking to people, going out to places to get out of depression. This was how I changed my situation.

DSGBV experience and access to supports

Between 2012 to 2020, almost 8 years, I experienced domestic abuse from my husband. It was more of physical and emotional abuse. He would sometimes beat me up. My husband wanted me to stay at home, be a stay-at-home parent and take care of the home. The Stamp 3 made it worse and gave him the opportunity to exercise this control further because it took away my right to work. The community I belong to also contributed to empowering him in the abuse and control. They were not supportive or helpful because they believe, since I am a woman, I must stay at home and take care of the kids. We can recognise physical abuse very easily, but it is exceedingly difficult to identify mental abuse. I can say that from my own experience. I did not know I was abused and only realised when I started browsing the internet for information. The friends I made from the gym also helped me with information. There are lots of information on the internet, and they clearly define and distinguish the differences between mental, physical, or sexual abuse. This opened my eyes and the knowledge that I was experiencing not just physical abuse but also mental abuse.

During the lockdown the abuse got so bad, I started searching online for supports. I found Women's Aid – I called them and got some support from them. I knew from then on that I was not “completely alone” and there was help available. They assessed my situation and asked whether I wanted to leave the house at that moment or not. I said yes, if it is possible. Then they told me how to prepare, things and important documents to take. Then they gave me a number to call. I have been told that because of the lockdown, and since I was not in a risky or life-threatening situation, to go to the Garda or hospital, I would only be sheltered for a few days. I was advised on how to be strategic, prepare for future abuse and focus on my study. They also offered me immediate rescue to the nearest refuge, should it be needed. So, knowing that was a huge support for me. In those moments of domestic abuse, you need someone to listen to you. If you cannot tell anyone, the situation gets worse.

The biggest issue for migrant women in abusive relationships is that they feel alone, helpless, and hopeless. Due to their isolation and inability to socialise, they often have no clue about where to get help. It is a big obstacle for migrant women that since they come to another society through their husbands, the information they usually get is also through their husbands. Beyond that, they usually do not easily get any information about services or supports. We are indeed vulnerable. We cannot get the courage to leave the relationships. We keep thinking that the situation will be fine. One day things will change. We can't figure out when enough is enough, when we are at the "point of no return." Every woman needs to understand that limit.

Interactions with the authorities

I did not have many interactions with the authorities. I was scared to go for legal action and felt the situation was not that serious at that time. I never had interactions with the Garda regarding the abuse. Things did not go that far. But while studying for my degree, I needed to contact the Garda regularly for signing some ethics documents. I also had interactions with the immigration services through the renewal of my visa. My experience with the Immigration service and Garda was friendly and professional.

Integration in Irish society

My experience with Irish people is not bad. It is good. I do not know what is in their mind, but their behaviour is always nice. But one thing is, although they behave genuinely nice, they do not accept me as their own, but treat me as an "outsider." So overall Irish people are good. But to be honest, a bit racist too. They would listen, know you, but they would not invite you to their home and make a close friendship with you. It will not happen. There is always a gap that exists. I feel that sometimes.

I have made friends in Dublin with Irish, Africans and other migrants. I also had good relationship with my neighbours. It is different in this new neighbourhood we live in now. There is not much interaction apart from the occasional greetings whenever we meet in the area. People are not friendly in this area. We moved in shortly before the lockdown, so that did not help as well and did not give me the opportunity to develop relationships.

I also made friends and expanded my social network while studying at the university. I found the university environment supportive and friendly. They saw the potential in me and treated me as a "struggler, a fighter," which boosts my confidence a lot. They were always willing to help me, and this made it so easy for me to learn and integrate in the society. Overall, I find the Irish people in the university and workplace broad minded, helpful, and supportive. They are more open-minded than my community.

My volunteering role influenced my life a great deal. It not only gave me the opportunity to learn, practice and upskill myself, but it opened me up to a lot of information. I am deeply knowledgeable about the level of domestic violence, information for women experiencing abuse, mental issues and supports available for different issues. I know now that there is help for everything and different strategies to break free from a tough situation. This volunteering and getting out from home made me confident and courageous.

It would be extremely helpful to set up a helpline that offers both verbal and physical support for migrant women experiencing domestic violence. Women in inconvenient situations need immediate practical support and not a listening service only. If the woman is victimized at that moment, or her life is at risk, she will not have that much chance to call and wait for another call.

A MIGRANT WOMAN'S STORY: UZMA

Uzma is from North Africa. She came to Ireland on a Stamp 3 visa eight years ago. She has one child and is married.

Migration experience

I came to Ireland with my husband on a stamp three visa. Before I relocated to Ireland, I had a respectable job and was financially independent. But things changed when we moved due to the Stamp 3 visa, and I found myself 100% dependent on my husband who had a respectable job as an Engineer. Being on a Stamp 3 visa took away my independence – I had to ask him for everything, and this was the first struggle for me as a migrant woman. The first two years in Ireland was difficult. I was isolated, lonely, and barred from socializing by my husband. I could not meet up with friends or even attend programmes at the community centre close to the house, which offered various classes for migrants. I was in a psychologically and physically abusive relationship with my partner. He controlled and monitored everything I did, and even spied on me by installing a spy kit that monitored my phone. After having my first baby, the control continued. We were not allowed to leave the house or socialize. He controlled me and I followed his instructions.

DSGBV experience and access to supports

In 2018, I sought refuge with my daughter who was one year and a few months old at the Sonas refuge home for two weeks. It was not comfortable living in the refuge, and I did not like it there, but it removed my daughter and me far from the toxic environment. It was the first step to freedom. While at the refuge, I got the opportunity and courage to start applying to change my visa status to one that will give me the right to work. However, after two weeks in the refuge, I lost hope because all efforts to change my visa status were not successful and I was told to leave. It was the “last nail in the coffin” and I went back home to my abuser. How can a government say to you that because you have a certain type of visa stamp, they will not help you? If I were single, I could struggle. I would even sleep on the road, I would not mind. But being rejected with my baby because of my Stamp 3 visa despite the unmistakable evidence that we were being abused was the biggest worry for me.

Sonas said, “You have the protection order. He will not be aggressive with you anymore, because you have the protection order. And the Garda will come, if you call them. It will be a trouble for him.” One of them told me that I can go back to my country, and the problem will be solved. But that was not what I needed at that stage. I needed a new life. I needed support and protection from the government. I really appreciate the help from Sonas. They accepted us and kept us safe for two weeks. But they could not do more for us because they were funded by the government. I was disappointed and rejected when I was most vulnerable with my child.

I got assistance from Crosscare at the Ferry Hill community centre. They helped me with drafting my letter and application to the Minister of Justice to change my visa from a Stamp 3 to a Stamp 1, which would give me the right to work. I needed to get a job and my independence back. Through their assistance I got my Stamp 1 visa in 2018. The controlling and mental torture from my husband continued after I got my visa changed to a Stamp 1. My husband refused to assist with childcare or even share the cost of creche fees because he said it was my role to stay at home and take care of the child.

The government should be able to treat every woman experiencing abuse equally. They should be protected and not forced to go back to their abuser. Also, the Stamp 1 has limitations for victims of abuse. Firstly, it does not give migrants the full right to work. They still need a permit from the minister before they can be offered jobs. Secondly, migrants with a Stamp 1 are not entitled to social welfare and social services support, so this makes it hard for them to survive. If they cannot find a job, they will not get support from the state and even when they do find a job, they find it hard to supplement their meagre income to pay for rent, feeding and childcare. You know that childcare is expensive in Ireland, and it is a barrier for a lot of women like me who want to work but cannot because we cannot afford it. The government visa policy is discriminatory, unfair and an injustice to women and their children in abusive relationships.

Interactions with the authorities

I went to Legal Aid for assistance and support during my application for separation from my husband. They analyzed my financial situation, advised me, and supported me with legal representation. This was a huge relief and great support from the government.

My first experience with the police happened before I went to the Sonas refuge. I invited them to my friend's house where we ran to after we left home. We left the house while my husband was sleeping, and I did not want him to accuse me of running away with our child. I reported the abuse and notified them to inform him that we were at the refuge. The Garda were extremely helpful and supportive; they arrived on time and were very professional.

My experience with the immigration services and the Department of Justice was a little bit different. In general, they were not nice. I found them to be very rude, disorganized, and uninformed about their services. So, I will say, they are 50% good and 50% bad. They interrogated me unnecessarily with irrelevant and unhelpful questions. For example, when I went to change my visa stamp, I was quizzed unnecessarily and given erroneous information. I had to educate them and direct them to their website.

Integration in Irish society

I have done some volunteering, and this has helped me integrate in my community and expand my social networks. After six years I got my Stamp 4 and I applied for a job. I initially worked part time in an after-school, and after that I worked full time at a creche. I finally attained my main goal as an independent professional.

I have made a few friends, and this includes three of my Irish neighbors. They are supportive. We meet up at the park when they are free, and sometimes we go to the restaurant for a meal. We enjoy talking together and sharing our experiences but not really enjoying at 100% because we have our children with us. These families have been genuinely nice, and they see me like themselves. In general, I find Ireland a good country, I am happy in Ireland, only if the childcare was affordable.

[Before], I went to the mosque occasionally, especially during Eid. There are loads of activities such as English, cooking, and religious classes. But because my partner was not helpful with childcare, I did not attend the classes. However, my daughter attends the mosque and an Arabic school, where they are taught the language and the Quran. This helps my daughter connect with other children and identify with our culture and religion.

TESTIMONIES OF CONDITIONS IN THE EMERGENCY ACCOMMODATION CENTRES

Intimate Partner Violence (LGBT+)

Bukola's story: *"I arrived in Ireland with my ex-girlfriend and, unfortunately, once we arrived, we had a big fight. She got violent and she tried to hit me. I tried to talk to security and said, you know, I can't face this, and asked what I can do because I have to live here, but I cannot be in the same place as her because I feel unsafe, and she was acting very aggressively. **The security told me that as this was a domestic issue, they couldn't get involved. I asked them if there was a way that I could leave a complaint or a record of what happened to me and they told me that they could, and when I followed up two days after, they didn't do anything, and there was no manager that came to me and asked me about the situation, nothing at all.** So, I went to IPAS and asked them if I could be moved because of my violent situation, and they actually moved me to [a current EAC place of residence]."*

Sexual Harassment in a Mixed Accommodation Settings:

Bukola's story: *"As a woman that is travelling alone, I have no family here, I have no one. I feel very insecure to be alone in a place surrounded by men. The showers at [EAC] are mixed, so men and women are showering in the same place. Once when I was coming out of the showers, there was a man from a different nationality that just started looking at me, and every time that I walked by he would say, 'beautiful' and stuff like that. I couldn't be by myself in there. And I had that violent ex-girlfriend in there too, so I was feeling very stressed. I asked to be moved but when I was moved to [current EAC place of residence], I realised that the situation was pretty much the same." (That is, the showers and washing machines are located in the basement. There is no strong security presence or working security cameras to monitor the situation.)*

Portia's Story: *"There was one time that I was on the elevator alone, and I was going downstairs, and the elevator stopped. There was a group of men trying to get into the elevator, and they were going up and I said, the elevator is going down. They started mocking me, dancing and saying, 'It's going down,' and making obscene movements. I had to get out of the elevator and now if I see them on the elevator, I need to wait for the next one. Because I cannot be in the same space that they are. **And if I try to complain about it, the security and the managers' answer will be 'leave them alone, go away,' and that's not fair.** I cannot leave the facilities [EAC] and be comfortable as I am going to encounter them on the streets. Things like that, you know, it's very uncomfortable because I ran from my country because of discrimination, and I came here but I am still facing issues with men. That's personally what triggers me the most about the place [the EAC of residence]. **It will be different at least if we are moved to a place where we can be together as a family [group of friends] or where we can be together as women**, because we know how to respect others."*

Physical Violence at EACs:

Samantha's Story: *"In one month, I have witnessed at least three fights [in EAC, place of residence] and all of them have been caused by single men. They are the only ones who are causing trouble. They don't care. They don't respect anyone. And they absolutely don't respect women. It's very difficult for us to be in a place surrounded by so many single*

guys. I am alone on my floor, so I need to ask my friends whenever they are having food, whenever they are going to take a shower, because I cannot go alone, I need to wait for them so we can go as a group together.”

Figure 1: A fight broke out between a mother who was washing two cycles worth of clothes, and a man behind her in the queue who said it was his turn after one of her cycles.

“And he started yelling to her in a very aggressive way and there was no security in the basement at all. There was one security guy that was near the showers and we called him to please come outside. And he asked, ‘What happened?’ The guy started yelling at the security guard, like, ‘She cannot wash’ and he [the security guard] said, ‘You know, this is not my problem. I was not hired for this. This is not my job.’ **He saw the man getting aggressive and violent against a woman and he decided that it was not his job, that it was not his responsibility.**”

Figure 2: After waiting for the mother to finish her wash cycle, Samantha and her two female friends remained waiting for their turn to wash their clothes after the group of men had left.

“We were about to put our clothes inside the machine and then all the men arrived to the basement. They tried to disconnect the machines again. They were trying to pass us, then they just started yelling, and they were like this close to us. We were very scared. When I remember it, I start trembling. We were surrounded by six men, and there was only three of us women. So, I started recording the situation with my phone. When they realised that I was recording, they tried to grab my phone. And then they started fighting me directly. There is no manager at night ... and all the security guys were mainly young people. The security guards placed themselves between the men and us, ... but they [the men] would just go around them and get to us again, you know. They didn’t care. I was very upset because it’s about respecting others, about following the rules. And then **the security guard’s response was like, ‘You’re a woman. You should have left. If they are men, you cannot fight them. Why will you say something against them?’** How is that a fair answer? I was waiting for two to three hours, but they are men, you cannot fight them. You know, as a woman, you don’t feel secure. You don’t feel supported by the people that are supposed to give you security. **So I think that is one of the biggest issues that we face as women, you know, the lack of security, the lack of support.** The children are not being taken care of properly and they are supposed to be.”

Intimidation and Misconduct by Staff at EACs/Threatening to Call the IPAS:

Beatrice’s Story: “They [centre management] say they will call IPAS, and they do that, a lot of times. One time a staff [person] in the hotel came to my room and was yelling in my face. I said, ‘Can you please talk to me with respect? I can hear you, and I can do whatever you want, just tell me what’s wrong and I can fix it.’ She said, ‘I won’t talk to you,’ and she went to a social worker. She said [to the social worker], ‘There is problem with her. I won’t talk to her. Call IPAS or something.’ And at the end of the day, it was nothing. I just put out the buggy for my baby because I was going to pick her up. She said it’s not a good place to put the buggy there, but I didn’t know that. She should tell me, and I would definitely take the buggy to another place. But she was just yelling and humiliating me, and she’s saying, like, ‘You are not thinking. You don’t think about the other residents, and you don’t think.’”

Based on Focus Group Discussion facilitated by AkiDwA in December 2022.

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ABOUT THE GBV-MIG PROJECT, 2019-2023

GBV-MIG Ireland was part of a multi-country study, funded by EU Gender Net Plus and the Irish Research Council that commenced in 2019 and concludes in 2023 (including a 12 month extension due to Covid-19). It has involved research partners in France, Austria, Canada, Israel, and Norway. The main focus of the project was to investigate the experiences of gender-based violence in migration contexts. It aimed to understand what factors increase risk of or vulnerability to gender-based violence and what resources are available to women and other migrants affected by GBV to protect themselves and access their rights and the supports they need. The project has sought to understand how policies and relevant practitioners can reduce women's risk of, or vulnerability to, gender-based violence in their different migration trajectories and experience.

The international coordinator of the project was Prof Jane Freedman, Université Paris 8. The principal investigator (GBV-MIG Ireland) was Prof Niamh Reilly, University of Galway. Contributors to the GBV-MIG Ireland research project included Dr Vesna Malesevic (2019-2023), Dr Salome Mbugua (2022-2023), Dr Nasrin Khandoker (2021-2022), Dr Nina Sahraoui (2019-2020), Dr Orla McGarry (2020-2021), Dr Anne Egan (Summer 2021), and volunteer Gowri Chandrasekhar (Autumn 2020).

Mixed methods research:

- Comprehensive review of national policy literature relating to migration and GBV
- Interviews/consultations with representatives from nine key NGOs including: AkiDwA; Doras Luimni; Immigrant Council of Ireland; Mayo Rape Crisis Centre; Migrants Rights Centre Ireland; Nasc Migrant and Refugee Rights; National Women's Council of Ireland; Safe Ireland; Women's Aid
- Twenty-two semi-structured interviews with migrant women, reflecting different immigration statuses and countries of origin, conducted in 2021-2022.

Research outputs to date:

N. Reilly, M. Bjørnholt & E. Tastsoglou, "Vulnerability, Precarity and Intersectionality: A Critical Review of Three Key Concepts for Understanding Gender-Based Violence in Migration Contexts." In J. Freedman, N. Sahraoui, & E. Tastsoglou, eds., *Gender-Based Violence in Migration*. Cham: Palgrave Macmillan, 2022.

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N. Reilly, N. Sahraoui & O. McGarry, "Exclusion, Minimization, Inaction: A Critical Review of Ireland's Policy Response to Gender-Based Violence as It Affects Migrant Women," *Frontiers in Human Dynamics*, 17 June 2021.

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