



GBV against Female Migrants in Time of COVID-19: Assessing Italian Negligence during the Pandemic

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Abstract.

Since the beginning of the coronavirus pandemic, female refugees, asylum seekers, victims of trafficking and migrants have been increasingly exposed to different forms of gender-based violence (GBV). Focusing in particular on Italy, it is possible to affirm that the already limited rights granted to displaced women before the pandemic risk being further overlooked and deteriorated due to COVID-19 restrictions and other national priorities set to counter the virus. In order to address female migrants' specific needs, some recommendations have been issued by competent treaty bodies and special rapporteurs that aim at committing States parties to counter violence against women by protecting, promoting, respecting, and fulfilling victims' rights in a targeted manner. Therefore, this article intends to highlight if and to what extent Italy has been addressing the negative effects of COVID-19 on migrant women suffering from GBV in light of the most relevant regional and international guidelines and statements. By outlining a brief overview of female migrants' condition in Italy before and during the pandemic and assessing the far too generic scope of the recommendations under scrutiny, the paper shows Italy's insufficient efforts in tackling displaced women's demands and points out possible paths for future improvements.

Keywords: Coronavirus; international recommendations; Italy; migrant women's rights; violence against women.

1. Introduction

The current coronavirus pandemic has severely impacted the worldwide population, exacerbating pre-existing fragilities that have further affected people's private and public life. Among the several negative consequences brought on a global scale, the COVID-19 pandemic has led to a dramatic increase in the reported episodes of GBV, targeting especially the most vulnerable categories of women. The spread of coronavirus appears, indeed, to have affected the life of female refugees, asylum seekers, migrants, and victims of trafficking in a disproportionate manner.¹ Due to both their gender and their condition of vulnerability, this group of women has experienced a further deterioration of their already limited guarantees by being exposed to domestic, sexual, economic, psychological, and other forms of violence and ill-treatment. Their enhanced exposure to GBV has already been recognised by several international and regional legal instruments that owe State parties to effectively counter

¹ In the article the author usually refers to female refugees, asylum seekers, victims of trafficking, and migrants just as "female migrants", "migrant women" or "displaced women", using these labels as umbrella terms with a comprehensive meaning.



violence against women, by protecting, promoting, respecting, and fulfilling victims' rights in a targeted manner. Despite the widespread formal commitment in addressing displaced women's specific condition, not all the signatory States have properly undertaken their obligations: for instance, Italy has repeatedly shown its inadequate efforts and disregarded the needs and demands not only of female migrants but also of women in general (GREVIO, 2020). Considering this negligence claim made to the Italian government even before the pandemic, the present article aims at investigating if and to what extent Italy has been addressing the negative effects of COVID-19 on female refugees, asylum seekers, victims of trafficking, and migrants who are victims of GBV in light of the recommendations issued by the competent international and regional bodies. In order to do so, the analysis will adopt a multifaceted concept of GBV, mirroring the broad definitions provided by the Council of Europe Convention on Preventing and Combating Violence Against Women and Domestic Violence and the General Recommendation No. 19 of the UN Committee on the Elimination of Discrimination against Women.² Therefore, the research will take into account "acts [...] that result in, or are likely to result in, physical, sexual, psychological or economic harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in private life" (CoE, 2011), "impai[ring] or nullif[ing] the enjoyment by women of human rights and fundamental freedoms under general international law or under human rights conventions" (CEDAW Committee, 1992).

From a methodological point of view, Italy's compliance with regional and international recommendations will be assessed through a text-based analysis of statements, documents and reports published by international and regional bodies, national agencies, governmental departments, and NGOs. After an introductory overview of the major challenges experienced by displaced women in Italy both before and during the pandemic, the investigation will focus on international and regional guidelines addressing female migrants' exposure to GBV in time of COVID-19, evaluating the adequacy of these statements in relation to victims' actual demands. In conclusion, the last paragraph will verify the domestic transposition of such recommendations by Italy, examining if and how the Italian agenda has adapted to them and highlighting major shortcomings as well as possible paths for future improvements.

2. GBV against female migrants in Italy: victims' condition before and after the coronavirus outbreak

2.1 Violence against displaced women: common challenges in the pre-pandemic context

GBV has always represented a serious issue widely experienced by female migrants, refugees, asylum seekers and victims of trafficking. Although sexual violence appears to be the most common form of GBV inflicted during the journey and the reception process, this multifaceted kind of violence encompasses other harmful practices – or threats of such acts – that mainly affect victims on a physical, psychological, and economic ground during the migration route, in the reception centres and within their family contexts. Due to the precarious condition of the group at stake, GBV frequently results, indeed, in strongly compromising migrant women's private and social life and impairing the full enjoyment of their rights and freedoms.

In light of such high and systematic exposure to violence, the peculiar condition of this vulnerable group has been addressed by several international and regional legal instruments,

² Hereinafter referred respectively as Istanbul Convention and CEDAW Committee.



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such as the Convention on the elimination of discrimination against women (CEDAW) and the Istanbul Convention. Italy stands among the States parties to such treaties, undertaking the obligation not only to prevent GBV against migrant women but also to protect, promote, respect, and fulfil their rights. In line with such commitment, complying measures have gradually been adopted at the domestic level. For instance, the Italian government has recognised the issue of intersecting discrimination against female migrants and asylum-seekers in the National Strategic Plan on Male Violence Against Women covering 2017-2020. The document presents, indeed, a non-exhaustive to-do list of actions, pledging to provide specific training on violence to operators and cultural mediators, promote advocacy and information campaigns in favour of migrant women and grant them access to targeted protection and support services (Italian Department for Equal Opportunities, 2018). Another relevant document is the National Plan on Integration of Beneficiaries of International Protection issued by the Italian Ministry of Interior in 2017. The plan draws specific attention to the assistance provided to female migrants and victims of trafficking affected by GBV, committing to create specific monitoring and reporting mechanisms, conceive standard procedures to prevent and respond to GBV in reception facilities, train operators properly, map existing hosting structures, guarantee separate accommodations and toilets for targeted women, and increase the presence of female legal and medical personnel as a reference point for the victims (Italian Ministry of Interior, 2017). The gender-dimension element has also been affirmed in the 2016-2018 National Action Plan against trafficking and severe exploitation. Among the scheduled activities, great emphasis has been put on information campaigns on trafficking and its link with gender discrimination, training modules on sexual trafficking and exploitation, educational programs for victims, and specific plans to support social and employment services committed to reintegrating trafficked women (Italian Department for Equal Opportunities, 2016).

However, despite the formal recognition of their enhanced vulnerability, the Italian commitment in favour of such category of women has failed to fully address their specific needs throughout the years. Indeed, the approach adopted at the legal and political level has turned out to be inadequate. In particular, with regard to the 2017-2020 National Strategic Plan, the condition of female migrants, asylum-seekers and refugees has been tackled in a fragmented and generic manner, constituting just the topic of a conclusive paragraph attached to the document. Moreover, the interventions proposed have been criticised as not involving concrete operational targets and specific commitments in all the areas of prevention, protection, punishment, and co-ordinated policies (GREVIO, 2020). Similarly, both the National Plan on Integration of Beneficiaries of International Protection and the National Action Plan against trafficking and severe exploitation appear to have a limited scope in terms of actions outlined and time covered, since they have not been renewed for the following years. Concerning the attribution of international protection, gender-related harm is not usually recognised as a motivation to grant refugee status in Italy. Indeed, evidence suggests a tendency in granting victims of GBV with humanitarian protection rather than a higher level of protection. Due to the narrow scope of this status in terms of duration and rights, migrant women who are beneficiaries of humanitarian protection turn out to enjoy limited legal safeguards for just one-year term (CEDAW: Work in progress, 2017).

At the operational level, major shortcomings have concerned the special assistance offered to female migrants who suffered from GBV. While victims should be surrounded by competent social workers, medical doctors, nurses, and well-trained personnel able to deal with gender-related harm and intersecting vulnerabilities within a safe environment, the reality is usually



rather different. Before undertaking the identification process, migrants are often detained in reception accommodations called hotspots. These centres are usually overcrowded lodging structures with no bedroom and bathroom facility dedicated to women and girls, placing female migrants at risk of repeated violence. Even though hotspots are required to carry out a prompt screening process to detect vulnerable subjects among the arrivals, this mechanism does not appear to be applied on a regular basis. With regard to the personnel involved, competent NGOs have limited access to such accommodations and cannot fully compensate the non-specialised assistance and the lack of qualified expertise that often characterise reception centre staff (GREVIO, 2020).

One of the most common challenges to providing effective support to migrant women who suffered from GBV concerns access to information. The number of cultural mediators and interpreters working in the sector is often insufficient, especially in first-line facilities. Indeed, due to the linguistic barrier, female migrants and asylum seekers do not always fully understand their special legal guarantees as victims of GBV (GREVIO, 2021). The frequent scepticism and reluctance to report harmful experiences during the auditions tend to have a negative impact on the outcome of their asylum applications. The insufficient knowledge of Italian language also limits the communication between victims of GBV and appointed operators, contributing to increase unwillingness to denounce ill-treatment. In this regard, migrant women are often accompanied by their partners, who silence their complaints by acting as translators and spokespersons (SOLDOWI, 2019). Shortcomings do characterise the provision of long-term assistance, as well. For instance, in case of an unsafe domestic context, victims may find it difficult to escape harassment, find new accommodation and reintegrate into society. Since the residence permit for family reunification can be converted into an independent one only after five years, migrant women tend to stay with their violent partners to maintain their legal status (CEDAW: Work in progress, 2017). Moreover, due to their residency obligations migrant women need to be authorised by the competent authorities to move to another housing facility (SOLDOWI, 2019). In order to enjoy adequate protection, female migrants at risk should be able to access specialised shelters and anti-violence centres. However, the exact number of support and housing facilities accessible for GBV victims in Italy is still uncertain. The mapping program carried out by several NGOs suggests that the actual number of anti-violence centres is far lower than the one assessed by the Italian Department for Equal Opportunities, while shelters appear to be even less (D.i.Re., 2018).

As a result of the deterioration of their right to receive proper support, female migrants affected by GBV have often been prevented from fully or partially enjoying their right to health. Among the most experienced obstacles, cultural and linguistic barriers tend to undermine the medical personnel's attempt of gaining the trust of migrant women. Indeed, the low number of cultural mediators working in medical facilities is not always sufficient to promptly detect and address the needs of such patients. Despite some health facilities are provided with competent and well-trained personnel, evidence still suggests national discrepancies in ensuring migrant women's fair access to adequate medical treatment (D.i.Re., 2017). GBV often constitutes a common trigger for trauma and other psychological disorders, as well. Nevertheless, due to progressive cuts in funding for reception facilities, female migrants and asylum seekers have frequently encountered several obstacles in their attempt to access mental health care and psychological support (GREVIO, 2021). Such constraints emerge especially in most of the first-line reception facilities since these structures are no longer obliged to offer psychological counselling (GREVIO, 2020).



2.2 A “shadow pandemic” of GBV: dramatic consequences of COVID-19 on vulnerable female migrants’ rights and condition

By marking an undoubted turning point in history, the worldwide outbreak of COVID-19 has led to dramatic repercussions throughout the global society, targeting especially the most vulnerable categories of individuals and exacerbating female exposure to violence. Among women, migrants have been experiencing an even more dramatic deterioration of their already precarious condition. In particular, evidence has suggested a widespread increase in GBV against displaced women since the beginning of the pandemic (UNHCR, 2021, A).

Focusing on the Italian context, the living conditions of migrant women during the COVID-19 outbreak appear to have been distressing (UNICEF, 2021, A). Given the extremely high rate of coronavirus infections and deaths assessed in the country from March to May 2020, the national management of the pandemic has set priorities, conceiving a few general and rigid containment measures to address several different issues at once and tackle the virus on a massive scale. Migrant population has once again been left out from the Italian hierarchy of priorities, suffering the effects of unspecific emergency policies. This can be deduced from the significant lack of official data concerning the impact of coronavirus on migrants. Indeed, the Italian National Institute of Health has released the first bulletin on contagion amongst foreigners two months after the beginning of the lockdown, while the final results of the first – and latest completed one – national survey on coronavirus infection within migrant reception facilities have been published only in August 2020, showing consistency with the pre-pandemic inadequate efforts in collecting and analysing migration-related data (Lombardi, 2020; Italian National Institute of Health, 2020; INMP, 2020, A). Even though the spread of COVID-19 among foreign residents turned out to be generally lower than among nationals, it has been detected a higher infection rate among migrant women rather than among men (Lombardi, 2020). Such enhanced exposure to the virus may be linked to the female migrants’ tendency to work as care personnel for elderly people and other vulnerable individuals who are usually more susceptible to serious or deadly COVID-19 infections (Lombardi, 2020; Sanfelici, 2021).

The dramatic impact of COVID-19 on migrant women also embraces the employment sphere. The management of the coronavirus emergency has overlooked the already strained working conditions of migrant women, who have often been affected by excessively long shifts, no paid leave, insufficient social protection, gender-related workplace violence, limited freedom of movement, and other violations of fundamental rights (Crippa, 2020). Moreover, the unemployment rate for female migrants has risen way more than those of male foreigners and Italian women, accounting for 10% of the overall decline in jobs during the pandemic. Such condition of precarity is inherently linked to the unregistered and poorly protected jobs in which migrant women are usually involved throughout their stay in Italy (ANSA, 2021).

The situation of displaced women in Italy has been further affected by the adoption of restrictive migration policies aimed at limiting the spread of COVID-19 and protect public health. Despite the drastic decrease in the number of arrivals linked to the national lockdown, Italian reception system still appears to be overloaded, failing not only to satisfy regular standards but also to comply with anti-coronavirus regulations (AIDOS, 2020). In light of the challenging management of first-line reception facilities and key entry and transit points such as Lampedusa and Ventimiglia, assistance services aimed at protecting migrant women from GBV and preventing such harmful experiences still remain inadequate. Female migrants hosted within reception centres during the pandemic have not only been distressed by the absence of safe spaces dedicated to women, but also by the overcrowded accommodations that do not



comply with social distancing and emergency legislation (UNICEF, 2020, A; ASGI, 2020). The high level of economic insecurity, the progressive tightening of border closures and travel restrictions, and the partial suspension of support services risk facilitating female migrants' entry into vicious circles of trafficking and exploitation. As a result of the current state of emergency and its consequent shortcomings, competent authorities have significantly disregarded the specific needs of the most marginalised and endangered categories of migrants, leaving smugglers with more room for manoeuvre than usual in a growing climate of impunity (Erskine, 2020). Moreover, since the beginning of the national lockdown, the identification process of victims of violence and trafficking has been weakened by serious constraints experienced by displaced women in contacting help-lines and accessing safe spaces to receive adequate assistance (Ottavi, 2020). Indeed, challenges in receiving support have been further exacerbated by the pandemic, involving insufficient linguistic and cultural mediators, limited multi-cultural expertise among the personnel involved and growing female migrants' distrust towards public services (UNICEF, 2021, A).

3. International and regional bodies and their call on a generic States' response

Among the various consequences of coronavirus, the gendered dimension of COVID-19 and the dramatic impact of the pandemic on migrants, refugees, victims of trafficking and asylum seekers have been serious issues of concern not only for the international community but also for the regional and international competent organisms. Indeed, since the pandemic started affirming itself as a global phenomenon, a variety of relevant treaty bodies, committees and special rapporteurs have called upon States to tackle these alarming trends. The documents under scrutiny have been issued by the CEDAW Committee, the Special Rapporteur on violence against women, its causes and consequences, the Special Rapporteur on trafficking in persons and the Committee of the States parties to the Istanbul Convention.³

From an overall analysis of the aforementioned statements (*Appendix 1*), it turns out that, despite the great variety of recommendations concerning women's rights in general, the specific condition of displaced women who have suffered from GBV during the pandemic has hardly been addressed in a targeted manner. Indeed, female migrants, refugees and asylum seekers have been often mentioned *en passant* in brief and vague references to marginalised groups which States should be particularly concerned about in time of COVID-19. Evidence is provided, for instance, by the CEDAW Guidance Note, where State recommendations to address migrant and refugee women's needs have been integrated in a broader appeal to adopt tailored measures for disadvantaged groups of women, including also elderly people, indigenous female communities, IDPs, women with disabilities and members of the LGBTIQ+ community (CEDAW Committee, 2020, A). Although the Committee has tackled the condition of trafficking victims in its new General recommendation, the COVID-19 factor has been pointed out only to describe the rise of new digital means to perpetrate sexual exploitation. Indeed, the call to State parties has been drafted in a generic manner without referring to any specific timeframe or circumstances (CEDAW Committee, 2020, B). By focusing on a more general plethora, relevant committees and competent figures have therefore failed to conceive specific State recommendations and propose targeted measures to address displaced women's

³ As a State party to the Council of Europe (CoE), the Istanbul Convention is the only regional treaty that Italy has ratified on the issue under consideration.



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needs. Even though the regional and international call intended to address women's most common challenges, the growing marginalisation and structural inequality that characterise female migrants should have been managed in a specific manner by drafting more detailed and tailored suggestions. Furthermore, such general statements, dated 2020, have been neither renewed nor re-modulated embedding targeted proposals despite the cyclical worsening of the pandemic and the still largely untackled consequences of COVID-19 on displaced women in 2021.

Contrary to the lack of specific attention shown by the bodies under consideration, some UN agencies have conceived more customised recommendations concerning female migrants' condition during the coronavirus outbreak. For instance, UNHCR has put great emphasis on the enhanced impact of COVID-19 on displaced women that are victims of GBV, showing compliance with its thematic mandate. In order to alleviate the gendered impact of the pandemic and eradicate GBV against female migrants, UNHCR has urged States to ensure forcibly displaced women's participation in pandemic response and recovery programs, guarantee their access to sexual and reproductive health services, social protection systems and legal support and include GBV-related assistance (i.e. safe shelters, specialised health services, social assistance and psychological counselling) among the essential services carried out despite COVID-19 lockdown restrictions (UNHCR, 2021, B). By recognising the importance of data collection, States have also been encouraged to gather and analyse sex, age and disability disaggregated data to monitor and address the specific repercussions of coronavirus on female refugees. Among the other operational recommendations issued, UNHCR has called for addressing barriers that prevent displaced women from accessing services, such as mobility constraints, lack of female staff, safety concerns, childcare responsibilities and social distancing restrictions. States have also been exhorted to take into account the function of caregiver often carried out by women, projecting, for instance, special protection programs to support single mothers and women whose wage represents the main source of family income. In addition, UNHCR has suggested that States consult female migrants while drafting plans to counter GBV and adapt modalities of intervention against gender-related ill-treatment to the pandemic circumstances (i.e. reinforcing hotlines staff and including GBV risk-mitigation measures in quarantine facilities). On an operational level, emphasis has been put on the proposal of developing prevention messages that are easily accessible for displaced women and stress on intimate partner violence, sexual exploitation and other GBV risks (UNHCR, 2020). In line with the UNHCR agenda, UN Women has also elaborated several proposals in order to tackle the multifaced disadvantages experienced by migrant women during the pandemic, such as the high risk of suffering from GBV and the socio-economic drawbacks. The UN agency has, indeed, urged States to ratify and implement international and regional instruments tackling violence against female migrant migrants as well as to modify and synchronise existing policies on migration, labour, GBV and trafficking to properly address displaced women's vulnerabilities. Moreover, States have been invited to facilitate the reception process of female victims and survivors of GBV, granting autonomous resident permits to allow them to leave their abusive partner without losing legal protection and children custody. UN Women has also pointed out the necessity to strengthen the provision of essential services, disseminating reliable information within migrant communities and offering gender-responsive trainings to health, justice and social service operators to expand their knowledge of displaced women's needs (UN Women, 2021). By reaffirming the enhanced exposure to violence characterising female migrant workers at all stages of migration and within their own household, UN Women has renewed the call to create an accurate picture of the gender



dimension of COVID-19 by collecting disaggregated data on migrant women's sex and age and drafting statistics on their experience of GBV (UN Women, 2020, A). In light of the high unemployment rate affecting this category, States have been urged to guarantee a basic income and other social protection measures to migrant women who have lost their job. UN Women has also referred to the specific situation of female victims of trafficking in time of COVID-19. Among the various recommendations issued on this topic, States have been called upon to: recognise the specific vulnerabilities and needs of trafficked women during and after the pandemic; address frontline stakeholders' implicit and explicit biases with targeted training activities; intensify efforts to eliminate trafficking in persons; prioritise the prosecution of sexual exploitation; ensure identification and assistance for victims of gender-based persecution; and develop a gender-sensitive monitoring system to contain the long-term consequences of COVID-19 outbreak (UN Women, 2020, B).

4. Italian response to GBV against female migrants in times of emergency: current shortcomings and paths for future improvements

Although most of the proposals issued at the regional and international level have been considered vague and generic, the Italian response to the COVID-19 impact on female migrants suffering from GBV has met these recommendations only partially. As already pointed out in *Paragraph 2.3* of this article, the competent Italian authorities have given little attention to the migrant women's demands and needs during the pandemic, showing insufficient efforts to provide them with the necessary assistance and address the daunting challenges they had to face. However, further evidence of this inadequate commitment can be detected from an analysis of Italy's compliance with the most specific guidelines issued on this topic in time of COVID-19.

4.1. Legislative measures and policies adopted

With regard to the enhancement of the legislative and political framework in light of the pandemic impact on female migrants, little progress has been made. As the main Italian program conceived to address the pandemic-related shortcomings on a country level, the National Recovery and Resilience Plan has neither funded nor envisaged any measure to tackle the specific disadvantages affecting not only displaced women but also the migrant community in general (UN Women, 2020, B; Italian Council of Ministers, 2021). Although migrants have not been included either in the fields of action set by the Italian recovery process or in the round table discussions, Italy has adopted some legal measure in their favour as well. For instance, the Law Decree n. 34 issued in May 2020 conceived two different procedures for regularising immigrant agricultural and domestic workers as well as foreign care personnel. Nevertheless, the limited scope of this legal action has represented one of its major shortcomings. Since the regularisation process has only targeted the few sectors that the government considered being strategic during the pandemic, a large number of migrant workers employed in the construction industry, the logistic field, the tourism sector, and the restaurant business has been left aside (HRW, 2020). Moreover, besides the unintended gender-related positive effect of this measure in favour of many foreign women employed as care operators, no targeted policy has been specifically elaborated to respond to female migrant workers' needs, leaving their specific vulnerabilities unaddressed.



4.2. Data collection, GBV assistance and health issues

Despite the recommendation to collect data and develop specific statistics on female migrants' pandemic-related difficulties and exposure to GBV, records are still limited and difficult to access as information is mostly reported in a fragmented manner. Indeed, there is no comprehensive database concerning the condition of displaced women in Italy since the beginning of the COVID-19 outbreak. However, it is possible to find some useful insights among the information gathered by national authorities and NGOs for different and more generic purposes. While assessing the general use of the 1522 anti-violence help-line during the pandemic, the Italian National Institute of Statistics has, for instance, reported that 1,683 foreign women have turned to this service between the second trimester of 2020 and the first trimester of 2021, marking the highest number of requests of assistance (588) from April to June 2020 (ISTAT, 2021). By examining the anti-violence system in Italy, ActionAid has furthermore highlighted the drastic decrease (-90%) in female migrants' requests to access anti-violence centres in 2020, suggesting the rise of serious constraints against displaced women's freedom of action due to their confinement in oppressive domestic contexts (ActionAid, 2020; Demurtas et al., 2020). Another recent attempt of data collection focusing on migrant communities has concerned the spread of COVID-19 within the national reception system. Indeed, as stated in a joint agreement signed by the Italian Ministry of Interior and the National Institute for Health, Migration and Poverty in January 2021, it has been decided to keep conducting the national survey on coronavirus contagion among migrants – already carried out from May to June 2020 –, create a computerised procedure to promptly report new infections, and monitor the reception centres' effective compliance with the new *ad interim* Guidelines on the management of facilities dedicated to fragile and marginalised persons during the COVID-19 pandemic (INMP, 2021; Italian Ministry of Interior, 2021). Even though the results of such survey have not been published yet, some preliminary considerations can be raised. Indeed, the temporary guidelines that should be adopted by reception facilities do not specifically address migrant women's vulnerability: gender has just been mentioned as one of the factors to consider while transferring an infected person who cannot be isolated within his/her own accommodation, showing the approximate nature of this framework (INMP, 2020, B). Moreover, since this investigation has been conceived as the one conducted in Spring 2020, the collection of information is intended to be carried out with a general focus on the whole migrant community. Therefore, besides disaggregating contagion data by gender, it may not give any further specific insight on female migrants' exposure to COVID-19 and other health and social issues arising from the infection. Furthermore, focusing on the national vaccination plan, it is not possible to assess how many female migrants have been vaccinated so far (PICUM, 2021). Indeed, the lack of both systematised data and disaggregated information on this topic does not allow to assess displaced women's actual chance of being vaccinated and possible difficulties encountered in accessing the vaccination campaign.

4.3. Financial resources allocated

With regard to financial resources, female migrants have been included among the beneficiaries of the funds allocated by the Department for Equal Opportunities and managed by regions to address GBV throughout 2020 and 2021 and managed by regions. The current pandemic has led the government to assign additional funds to shelters and anti-violence centres in order to face the increased exposure to violence caused by COVID-19. However, since there is no fixed budget percentage to invest in favour of displaced women, the resources have been distributed between the selected fields of action depending on each region's decisions and priorities.



Therefore, out of 2,7 million euros allocated in November 2020 among 10 regions to prevent and counter GBV at a national level,⁴ the actual resources attributed to the management of female migrants' needs constitute less than 1% of the total budget. Nevertheless, it has been assessed general mismanagement of the funds dedicated to all the women suffering from GBV in Italy the pandemic. Evidence is provided by the allocation of the 2020 budget dedicated to anti-violence centres: after the beginning of the COVID-19 outbreak, it took about 7 months for the Department for Equal Opportunities to transfer these funds to regions. Therefore, due to this administrative slowdown, only 2% of the budget has been so far allocated in favour of anti-violence centres, shelters and organisations working in the field of GBV prevention and protection (ActionAid, 2021). This slow attribution of resources has represented a serious impairment in the homogenous provision of the anti-violence assistance at the national level, exacerbating regional inequalities and worsening access constraints mainly experienced by the most vulnerable categories of women such as female migrants. However, although some anti-violence centre has proposed to increase the supply of accommodation facilities for migrant women in order to empty overcrowded reception centres and provide them with targeted assistance, no concrete steps have been taken in this direction so far (Demurtas et al., 2020).

4.4. Identification and management of trafficked women

Concerning the identification and management of female victims of trafficking, Italy has, once again, met regional and international recommendations only partially. Indeed, as suggested by the competent bodies, the Department for Equal Opportunities has extended all existing projects focused on this issue until 31 December 2020 to keep addressing trafficked persons' needs despite the current emergency. Due to the pandemic, the issuing of a new call for victim assistance project proposals has been postponed until May 2021, allocating a total budget of 23,9 million euros (GRETA, 2021; Save The Children, 2021). In light of the COVID-19 restrictions, the identification process of victims of human trafficking has been carried out with some difficulties. While the number of trafficked persons detected in 2019 came to 657, only 470 new victims of trafficking have been identified in 2020, assessing a majority of women (531) and individuals subjected to sexual exploitation (310). According to the Department for Equal Opportunities, in 2020 the national anti-trafficking system was in charge of 2,040 victims, 81.8% of which were women. Furthermore, the Department has reported that, since the pandemic started, fewer evaluations of potential victims of trafficking have been performed and fewer trafficked persons have been admitted to protection services than in 2019 (Save The Children, 2021; U.S. Department of State, 2021). Despite the shortcomings highlighted, some improvements have also been registered. For instance, in line with the national adoption of the new Guidelines for the identification of trafficking victims among asylum seekers, the Italian Ministry of Interior alongside with UNHCR have involved members of the Territorial Commissions for the recognition of international protection in training activities on identifying trafficked persons (GRETA, 2021). However, the current absence of an updated comprehensive national plan aimed at tackling the gendered nature of trafficking still constitutes a major obstacle to eradicate such phenomenon and fully address its root causes in a coordinated manner.

⁴ Basilicata, Calabria, Liguria, Lombardia, Marche, Molise, Piemonte, Sardegna, Umbria and Veneto are the only regions that have published evidence of how their funds have been distributed. Indeed, the total budget allocated by the DPCM dated 13 November 2020 comes to 6 million euros.



4.5. Paths for future improvements: the 2021-2023 National Action Plan

Even though the management of female migrants exposed to GBV in time of COVID-19 has appeared to have been largely inadequate so far, evidence suggests that future steps may be more promising. At the beginning of November 2021, the new National Action Plan on Male Violence Against Women covering 2021-2023 has been brought before the Italian Council of Ministers to be evaluated and adopted (Italian Department for Equal Opportunities, 2021). The proposed document appears to have embodied both the suggestions and the criticisms made on how displaced women suffering from GBV have been addressed at the national level. Female migrants have been mentioned not only among the broader category of marginalised women but also as beneficiaries of activities focused on addressing their specific condition with measures of prevention, protection, prosecution, and promotion. One of the priorities set in the prevention cluster implies organizing activities to detect and counter GBV against migrant, refugee, and asylum-seeking women. By recognising the enhanced vulnerability and marginalisation of displaced women during the migration journey and the reception process, the document provides a brief description of their high exposure to violence due to the lack of spaces dedicated to women within reception facilities. Among the necessary measures to carry out, the National Plan mentions the following actions: creating guidelines to promote the adoption of a multidisciplinary and intercultural approach within reception centres; conducting information campaigns on main concepts linked to GBV within different social and cultural contexts; raising awareness in the communities which migrant women belong to; conceiving broad activities to mitigate the risk of suffering from GBV in the reception system; promoting surveys to map the most recurrent gender-related harmful practices and the different types of support interventions conducted so far. Displaced women's needs have also been addressed through protection measures in order to guarantee female migrants, refugees, and asylum seekers' equal access to prevention, support, and social reintegration services. In order to do so, several concrete actions have been proposed, such as the allocation of economic incentives to hire more cultural mediators in anti-violence centres. Among the other actions planned, the National Plan also envisages to carry out empowerment projects that fully recognise the central and active role of refugee women in the enjoyment of their own rights and engage them in activities promoted by CSOs. With regard to the financial resources, these specific interventions in favour of female migrants are intended to be funded by the Italian Asylum, Migration and Integration Fund, suggesting that the allocation of a targeted budget may represent a clear spending commitment and a guarantee for the implementation of the activities proposed (Ibid.).

5. Conclusion

While investigating Italy's compliance with regional and international recommendations on displaced women suffering from GBV during the pandemic, the research has provided a broad picture of the current situation concerning both female migrants' actual issues and needs, supranational approaches to the topic and national measures to address such vulnerable category. Although this study makes no claim to be exhaustive, it is possible to draw some conclusions from the overall analysis carried out in this work.

It is clear indeed that the general derogation from human rights obligations characterising States' policies during the pandemic has been extremely dramatic for female migrants. However, evidence indicates that the approaches adopted by both supranational committees and national authorities to tackle such enhanced impact have been mostly inadequate. On the



one hand, the main recommendations issued during the pandemic – apart from the ones published by UNHCR and UN Women – appear to be far too generic and approximate, as they have often put different marginalised groups under the same umbrella and promoted a general call for States to draw attention to their wide range of needs. On the other hand, Italy has shown insufficient efforts in managing displaced women's demands during the coronavirus outbreak, generally failing to provide adequate assistance to victims of GBV, allocate enough financial resources to support anti-violence services, adapt the national reception system to female migrants' demands, counter foreign women's high rate of unemployment and exploitation, commit in the eradication of sex trafficking and in the prompt and effective identification of trafficked women, and create publicly accessible databases on the most recurrent gender-based issues experienced within the migrant community. Besides the detected shortcomings, it goes without saying that the recent drafting and reviewing of tailored measures in favour of female migrants affected by GBV (i.e. the 2021-2023 National Action Plan on Male Violence Against Women) leave room for hope, suggesting a positive change of direction for the coming years. However, at the time of writing, it is still difficult to make precise projections on whether these activities are going to be first adopted and then implemented in a prompt and effective manner.

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Appendix 1: Text-based analysis of recommendations

	<i>Text-based analysis</i>	
<i>Body</i>	CEDAW Committee	
<i>Title & Content</i>	<p>Guidance Note on CEDAW and COVID-19.</p>	<p>Summary:</p> <p>The Committee's document has been divided into nine detailed recommendations, calling on States parties to: address the disproportionate impact of the pandemic on women's health; provide sexual and reproductive health as essential services; protect women and girls from gender-based violence; ensure equal participation of women in decision-making; ensure continuous education; provide socio-economic support to women; adopt targeted measures for disadvantaged groups of women; protect women and girls in humanitarian settings and continue implementing the women, peace and security agenda; strengthen institutional response, dissemination of information and data collection.</p>
		<p>General focus on GBV concerning the pandemic:</p> <p>The Committee stressed the States' due diligence obligation to prevent and protect women from a further increased risk of GBV, as well as their duty to ensure victims effective access to justice and to adequate assistance services despite the pandemic constraints. In this regard, States are recommended to shape their national response plan to COVID-19 prioritizing availability of safe shelters, hotlines, and remote psychological counselling services in order not to exclude any women due to their exposure to or contagion from coronavirus.</p>
		<p>Specific focus on migrant women concerning the pandemic:</p> <p>The Special Rapporteur expresses particular concern about women at higher risk of domestic violence, such as women with disabilities, undocumented migrant women and victims of trafficking.</p>
		<p>Word frequency:</p> <ul style="list-style-type: none"> • Gender-based violence / GBV: 7. • Violence against women: 1. • Migrant women: 1. • Refugee(s): 2. • Trafficking: 1.



		<ul style="list-style-type: none"> • Asylum seekers: 0. • COVID-19: 25. • Pandemic: 8.
<p><i>Title & Content</i></p>	<p>General Recommendation No. 38 on trafficking in women and girls in the context of global migration.</p>	<p>Summary:</p> <p>This is a document with a broader scope than just addressing the current delicate historical contingency. Indeed, it focus on the general phenomenon of trafficking, its gendered dimension and States' obligation in this field.</p>
		<p>General focus on GBV concerning the pandemic:</p> <p>The Committee recognizes that trafficking and prostitution in women and girls constitutes gender-based violence. It highlights, indeed, the gendered nature of trafficking, its tight connection to sexual exploitation and its partial transposition on the Internet during the pandemic. It has been assessed a increased recruitment for sexual exploitation on-line, an increased demand for child sexual abuse material and technology facilitated child sex trafficking.</p>
		<p>Specific focus on migrant women concerning the pandemic:</p> <p>The document acknowledges that migrant and refugee women are highly vulnerable to trafficking and are often in need of international protection, especially against refoulement. With regard to the current COVID-19 outbreak, the document provides some final recommendations, such as addressing the root causes of such phenomenon, upholding victims' rights, collecting relevant data and reforming legislative, policy and institutional frameworks. Concerning the on-line sexual abuse material uploaded during COVID-19, the Committee urges States to proactively identify such production, cooperate with technology companies in creating automated tools to detect online recruitment and identify traffickers, strengthen partnerships between public and private sectors to address pandemic-related increases of this crime.</p>
		<p>Word frequency:</p> <ul style="list-style-type: none"> • Gender-based violence / GBV: 6. • Violence against women: 1. • Migrant women: 29.⁵

⁵ Including “migrant women”, “women migrants”, “migrant girls”, “migrants”.



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		<ul style="list-style-type: none"> • Refugee(s): 7. • Trafficking: 197. • Asylum seekers: 0. • COVID-19: 2. • Pandemic: 2.
<i>Body</i>	Special Rapporteur on violence against women, its causes and consequences (Ms. Dubravka Šimonovic)	
<i>Title & Content</i>	Statement dated March 2020: “States must combat domestic violence in the context of COVID-19 lockdown – UN rights expert”.	Summary: As the restrictive measures adopted to fight COVID-19 intensify the risk of gender-based harm, the Special Rapporteur urges States not to leave behind women victims of domestic violence in their attempts to contrast the pandemic effects.
		General focus on GBV concerning the pandemic: The summary already refers to GBV during the pandemic.
		Specific focus on migrant women concerning the pandemic: The Committee has requested stronger support towards marginalised categories of women, including female migrants, refugees and IDPs. Indeed, States parties have been called upon to guarantee adequate access to medical assistance for migrant women and girls regardless of their residence status or health insurance as well as to take special measures to monitor the COVID-19 infection among female refugees in refugee camps and protect them from trafficking and survival sex.
		Word frequency: <ul style="list-style-type: none"> • Gender-based violence / GBV: 0. • Violence against women: 1 (but “violence against women” recurred 7 times). • Migrant women: 1. • Refugee(s): 0. • Trafficking: 1. • Asylum seekers: 0. • COVID-19: 6. • Pandemic: 1.
<i>Title & Content</i>	Statement dated July 2020: “Joint statement by the	Summary:



	<p><i>Special Rapporteur and the EDVAW Platform of women's rights mechanisms on Covid-19 and the increase in violence and discrimination against women".</i></p>	<p>The statement represented an urgent call for States to promptly counter the worldwide increase of GBV and include measures to eliminate discrimination and violence against women in both the COVID-19 response and recovery plans.</p>
		<p>General focus on GBV concerning the pandemic:</p> <p>By suggesting the adoption of a gender-sensitive intersectional approach while addressing the pandemic, the recommendations drafted in the document embrace a variety of aspects, such as adapting political and legislative measures to both structural factors of discrimination and contingent issues caused by COVID-19, ensuring continued and safe access to healthcare and other support services, re-modulate social protection systems in accordance to women's specific needs and gathering data to monitor the gendered impact of COVID-19 on women's health and rights</p> <p>Specific focus on migrant women concerning the pandemic:</p> <p>The Special Rapporteur acknowledges that restrictive measures can lead to compounded and intersectional forms of discrimination against women belonging to disadvantaged and marginalized groups including, but not limited to, women and girls from minorities, indigenous, afro-descendant, migrant and rural communities, older women, women and girls with disabilities, homeless women, women deprived of liberty and victims of trafficking, who are particularly affected by the crisis. Therefore, she calls on States to adapt political and legislative measures to counter the pandemic to the needs of women and girls, considering the multiple structural factors that perpetuate discrimination against women and girls and increase their risk in this context, such as migrant status.</p> <p>Word frequency:</p> <ul style="list-style-type: none"> • Gender-based violence / GBV: 4. • Violence against women: 1. • Migrant women: 2. • Refugee(s): 0. • Trafficking: 1. • Asylum seekers: 0. • COVID-19: 13. • Pandemic: 10.
<p>Body</p>	<p>Special Rapporteur on trafficking in persons (Ms. Maria Grazia Giammarinaro)</p>	



<p><i>Title & Content</i></p>	<p>COVID-19 Position paper. The impact and consequences of the COVID-19 on trafficked and exploited persons.</p>	<p>Summary:</p> <p>In this document the Special Rapporteur has invited States to address the risks faced by victims and potential victims of sexual exploitation, especially women and children. In particular, she has shed light on the elements that have been enhancing exposure to be trafficked, suggesting some practical measures to States in order to tackle these driving factors</p> <hr/> <p>General focus on GBV concerning the pandemic:</p> <p>The profound economic hardship caused by the COVID-19 outbreak is particularly strong on women and girls who are generally earning less, saving less and are more involved in the informal economy, which makes them more vulnerable to exploitation. Besides recognising and addressing the gendered impact of the pandemic, States have been encouraged to intensify their efforts in effectively and properly identifying victims of sexual exploitation and refrain from detaining, charging or prosecuting them for their involvement in unlawful activities according to the non-punishment principle.</p> <hr/> <p>Specific focus on migrant women concerning the pandemic:</p> <p>Among various recommendations concerning migrants' high exposure to poverty and unemployment and their vulnerabilities linked to migration status, migration journey and restrictive migration policies, the document addressed the threat of sexual exploitation mostly affecting women and children. Other relevant recommendations concerned the suspension of services provided to victims of trafficking due to the COVID-19 outbreak. The Special Rapporteur has, indeed, called upon States to carry the recognition of the status of victims of trafficking as an urgent procedure, guarantee the extension of targeted assistance programs and ensure alternative housing solutions for residents in shelters shut down due to COVID-19 infections. Moreover, it has been suggested that States should design their relief economic packages in order to allocate adequate funding for essential services in favour of this vulnerable category, such as shelters, psychological counselling and legal assistance.</p> <hr/> <p>Word frequency:</p> <ul style="list-style-type: none"> • Gender-based violence / GBV: 0. • Violence against women: 1 (but "violence against women" recurred 7 times).
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		<ul style="list-style-type: none"> • Migrant women: 1. • Refugee(s): 0. • Trafficking: 1. • Asylum seekers: 0. • COVID-19: 6. • Pandemic: 1.
<i>Body</i>	Committee of the parties to the Istanbul Convention	
<i>Title & Content</i>	Declaration of the Committee of the Parties to the Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention) on the implementation of the Convention during the COVID-19 pandemic.	Summary: The Committee of the parties to the Istanbul Convention has published a declaration on the implementation of the treaty in time of COVID-19, attaching an annex on possible general actions, measures and integrated policies to take in terms of prevention, protection and prosecution of violence against women.
		General focus on GBV concerning the pandemic: The Committee recalls that the principles and the requirements of the Istanbul Convention provide a framework for devising and implementing measures to ensure equality between women and men and to counter violence against women and domestic violence, which applies at all times and takes on further significance under the ongoing public emergency caused by the outbreak of COVID-19. Among the measures suggested in order to adopt a gender-sensitive perspective, the document mentions several integrated policies and tailored actions to prevent GBV, protect victims and prosecute perpetrators.
		Specific focus on migrant women concerning the pandemic: The document acknowledges that exposure to GBV is particularly high for women and girls belonging to disadvantaged groups and/or at risk of multiple discrimination depending notably on their social or ethnic/national origin, such as for example women with disabilities, women in prostitution, elderly women, migrant and asylum-seeking women. In the field of protection, particular emphasis has been put on vulnerable groups of women, such as asylum seekers and refugees. Indeed, States are encouraged to make special efforts to ensure their access to information and support services for any experiences of violence in reception facilities.
		Word frequency:



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		<ul style="list-style-type: none">• Gender-based violence / GBV: 2.• Violence against women: 10.• Migrant women: 1.• Refugee(s): 1.• Trafficking: 0.• Asylum seekers: 0 (but “asylum seeking” 1).• COVID-19: 5.• Pandemic: 11.
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