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Initiative Féministe EuroMed

POLICY BRIEF

# PUBLIC SERVICES FOR WOMEN VICTIMS OF VAWG

Regional Civil Society Observatory on VAWG (RSCO)



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بتمويل من الإتحاد الأوروبي

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## Executive Summary

Violence against Women and Girls (VAWG) is a violation of human rights and a major public health issue globally. It impacts women's mental, physical, sexual and reproductive health. At individual level, short and longer-term effects of VAWG include injuries, unintended pregnancies, sexually transmitted infections, miscarriages, abortions/voluntary interruptions of pregnancies, panic attack, depression, anxiety and suicide. At collective level, VAWG has social and economic costs ranging from loss of wages to limited social and political participation.

This policy brief addresses the essential public services for women victims of VAWG. It is based on the regional study<sup>1</sup> conducted by the Regional Civil Society Observatory (RCSO) in 2020 and on the results pertaining to women's perception and level of awareness on the services available for victims. The brief also relies on the 2020 Regional Index on VAWG<sup>2</sup>. It shows the situation of services in the sectors of health, police and justice, as well as social services in the light of best standards and international agreements, especially the Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention)<sup>3</sup>.

The brief first draws upon the standards for the service provision and how the essential services should be provided. Afterwards, it highlights the situation of the services available in the studied countries<sup>4</sup> and provides policy recommendations to improve these services.

Regarding health sector, the brief recommends enhancing the access of women to health care services and provide health facilities specialised to support victims of VAWG. Concerning police and justice, the policy recommends establishing special units within police dedicated to domestic violence and VAWG, establishing special courts for women victims of VAWG, and providing free legal assistance. The brief also recommends enhancing social services, by increasing the number of shelters for women victims of VAWG as well as conducting awareness campaigns informing on the existing services. Finally, training of first respondents should be institutionalised and provided on a regular basis for health, justice and police as well as social services.

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1- The study can be found at: <https://www.efi-rcso.org/sites/default/files/2021-07/Regional%20study-English.pdf>

2- The regional index can be found at: <https://www.efi-rcso.org/publications/reports/regional-index-combating-violence-against-women-and-girls-vawg>

3- Istanbul convention is not applicable in the studied countries (Tunisia was invited to accede to it though), but it remains the main and most advanced reference as a human rights instrument when it comes to preventing and combating VAWG.

4- Countries included are: Algeria, Egypt, Jordan, Lebanon, Morocco, Palestine, Tunisia.

## Essential services for victims of VAWG - Standard practices

Addressing VAWG goes hand-in-hand with ensuring efficient public services provided for women victims of VAWG. It starts first with adopting a comprehensive legislation that criminalises all forms of VAWG and ensures access to a wide range of services, which is a critical entry point for addressing this prevalent and devastating phenomenon. Ensuring access means improving the availability, accessibility, acceptability, affordability and quality of medical and psychological treatment, police and justice (including legal aid), social and economic support (including shelters) for victims of VAWG.

### Improving the 4 A's<sup>5</sup> to ensure access to relevant services to support victims of VAWG<sup>6</sup>:

- Availability of the services: ensuring that all types of services required to prevent and respond to all forms of VAWG (including health, psychological, legal aid, protection shelters, social and economic support) exist in sufficient quantity for the population.
- Accessibility of the services: ensuring that all services are easy to access for victims, including women and girls with disabilities, living in remote geographical area or with linguistic differences. This also requires that procedures and rules are clear and information about services is simple and straightforward.
- Acceptability of services: ensuring that all services are in line with international standards, compliant with international conventions and meet quality standards with regards to attitudes and expectations of the victims of VAWG (people-centred approach). This encompasses efficiency in delivering the services and staff's capacity development schemes.
- Affordability: ensuring that direct and indirect costs of services (e.g. including transportation, loss of wages involved, etc.) are not a barrier for victims of VAWG to access the service. As VAWG is often linked with financial dependence, this requires the availability of services to be free of charge.

Article 20 of the Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention) says that "parties shall take the necessary legislative or other measures to ensure that victims have access to services facilitating their recovery from violence. These measures should include, when necessary, services such as legal and psychological counselling, financial assistance, housing, education, training and assistance in finding employment". The table below shows a non-exhaustive list of the main services that need to be provided for victims of VAWG.

5- Adapted from the framework for assessing access barriers to health services by Peters DH, Garg A, Bloom G, et al. Poverty and access to health care in developing countries, *Annals of the New York Academy of Sciences*, 2008, vol. 1136 (pg. 161-71)

6- Shelters for Women Survivors of Violence: Availability and Accessibility in the Arab Region, Economic and Social Commission for Western Asia, 2019, p 13.

**Table 1:** Essential services that need to be provided for victims of VAWG<sup>7</sup> :

	Health	Justice & Police	Social Services
<b>Essential services and actions</b>	<ul style="list-style-type: none"> <li>▪ Identification of victims of intimate partner violence</li> <li>▪ Care of injuries and urgent medical treatment</li> <li>▪ Health facilities specialised to support victims of violence, sexual assault examination and care</li> <li>▪ Reproductive healthcare</li> <li>▪ Mental health assessment</li> <li>▪ Psychological and psychiatric support</li> <li>▪ Medico-legal documentation</li> <li>▪ Advocacy and awareness raising</li> </ul>	<ul style="list-style-type: none"> <li>▪ Prevention</li> <li>▪ Hotline</li> <li>▪ Initial contact</li> <li>▪ Assessment/investigation</li> <li>▪ Pre-trial processes</li> <li>▪ Trial processes</li> <li>▪ Perpetrator accountability and reparations</li> <li>▪ Post-trial processes</li> <li>▪ Safety and protection</li> <li>▪ Assistance and support</li> <li>▪ Communication and information</li> <li>▪ Representation, including in plural legal systems</li> <li>▪ Justice sector coordination</li> <li>▪ Legal aid</li> <li>▪ Advocacy and awareness raising</li> </ul>	<ul style="list-style-type: none"> <li>▪ Crisis information</li> <li>▪ Crisis counselling</li> <li>▪ Help lines</li> <li>▪ Safe accommodations and protection shelters</li> <li>▪ Material and financial aid</li> <li>▪ Creation, recovery and replacement of identity documents</li> <li>▪ Legal and rights information and advice</li> <li>▪ Psycho-social support counselling</li> <li>▪ Case management services</li> <li>▪ Women-centred support</li> <li>▪ Social security and health insurance</li> <li>▪ Community information</li> <li>▪ Education and community outreach</li> <li>▪ Assistance towards economic independence</li> <li>▪ Recovery and autonomy initiatives including capacity building and life skills training</li> <li>▪ Advocacy and awareness raising</li> </ul>

7- Essential Services Package for Women and Girls Subject to Violence Core Elements and Quality Guidelines, UN Women, UNFPA, WHO, UNDP and UNODC, 2015, P19.

Ensuring easy access to **healthcare services** for women is an essential prerequisite for the identification and reporting of cases of VAWG. There should be health facilities specialised to support women victims of VAWG, sexual assault examination and care. Family planning services and abortion should be accessible and allowed to all women. While reiterating that violence, in particular against women and girls, is a leading worldwide public health problem, the resolution adopted by the 67<sup>th</sup> World Health Assembly (2014) highlights the importance of strengthening national health systems in addressing VAWG. It calls for ensuring timely, effective and affordable health services, particularly sexual and reproductive health; improving the collection and dissemination of comparable data; enhancing capacities to respond to and prevent such violence; and establishing and supporting standard operating procedures aimed at identifying victims of violence and providing effective and appropriate services.

**Police and justice** have an essential role at prevention and protection level. To improve women's access to legal aid, the General Assembly of the United Nations unanimously adopted in 2012 the UN Principles and Guidelines on Access to Legal Aid in Criminal Justice Systems (67/187). The guidelines, which represent the first international instrument on the right to legal assistance, recommend providing **legal aid, advice and court support services** in all legal proceedings to women victims of VAWG in order to ensure access to justice and other such services and avoid secondary victimisation. These may include the translation of legal documents whenever requested or required. Throughout the legal process, services should include providing domestic violence counsellors to support victims during investigations and judicial proceedings. It includes psychologically preparing victims to endure testifying in front of the offender and accompanying victims to court. Personnel of these units need to have the relevant skills to receive victims in a sensitive way, carry out the necessary investigations, and refer the cases.

The **provision of shelters** is closely linked to State due diligence obligations to address VAWG and protect victims under international human rights instruments. States' obligations were initially limited to the actions of State actors (national bodies or agents of the State). However, since the 1990s these obligations included the actions of non-State actors<sup>8</sup>. Government should fund shelters that are established and run by Civil Society Organisations (CSOs)<sup>9</sup>.

Services should also include the **rights and needs of child witnesses**. Article 26 of the Convention on Preventing and Combating Violence against Women and Domestic Violence (Istanbul Convention) states that "*parties shall take the necessary legislative or other measures to ensure that in the provision of protection and support services to victims, due account is taken of the rights and needs of child witnesses of all forms of violence covered by the scope of this Convention*".

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8- Shelters for Women Survivors of Violence: Availability and Accessibility in the Arab Region, IBID, P11.

9- Article 125 (a) of Beijing Declaration and Platform for Action calls all parties to "provide well-funded shelters and relief support for girls and women subjected to violence".

## The situation: Services available for women victims of VAWG in the South Mediterranean

### Health

As VAWG damages the physical, mental, sexual and reproductive health of women, the health sector represents an important early point for preventing, assessing risk situations, identifying and reporting cases of VAWG through medico-legal services, providing care for victims of VAWG, as well as making referrals to the concerned authorities for investigation or to other services.

In all studied countries, service providers in the health sector have an obligation to care for and refer VAWG cases. Some of the countries include these obligations within the laws, like in Algeria and Jordan where the public health law and the law on family protection respectively oblige service providers in the health sector to care for and refer VAWG cases. In Jordan, the reporting is made with the consent of the women victim if she is capacitated and if the offence constitutes a felony according to the same article of the law. The law on combating violence against women and the law on eliminating violence against women in Morocco and Tunisia respectively include principles for providing care for the victims of VAWG. In Palestine, there are procedures and a set of rules for service providers for transferring the cases of VAWG from one service provider to another that comes under the National Referral System (NRS).

None of the countries institutionalise the trainings on VAWG for the nurses and doctors within the Ministry of Health. However, in Tunisia, the law on eliminating violence against women of 2017 stipulates that a special curriculum should be integrated in the programs for medical and nurse students. The same law declares that the Ministry of Health shall be responsible to detect, assess and evaluate all forms of violence against women.

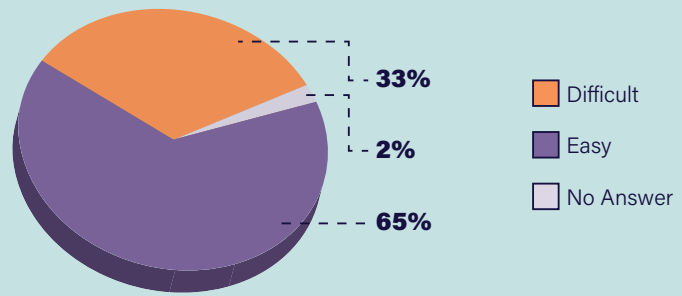
The study shows that in the region, a significant proportion of women (33%, ranging from 10% in Tunisia to 69% in Morocco) consider that access to healthcare services is difficult.

Only in Tunisia, abortion/voluntary interruption of pregnancy is allowed without requiring specific conditions for women. In Lebanon, Jordan, and Palestine, abortion/voluntary interruption of pregnancy is prohibited even for women victims of rape.

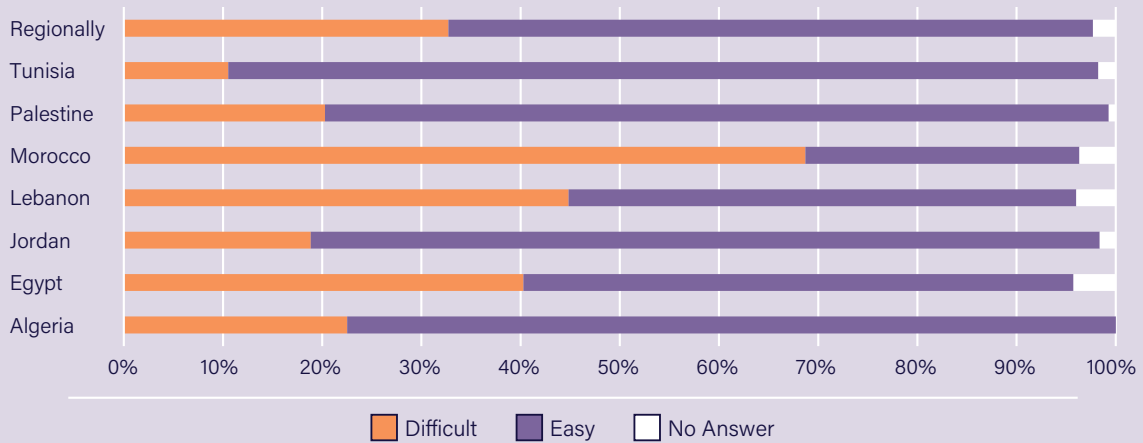


The diagrams below show women's perception towards accessing health care services.

**Figure 1:** Women's perceptions of accessing health care services in the community, all countries



**Figure 2:** Women's perceptions of accessing health care services in the community, by country



## Police and justice

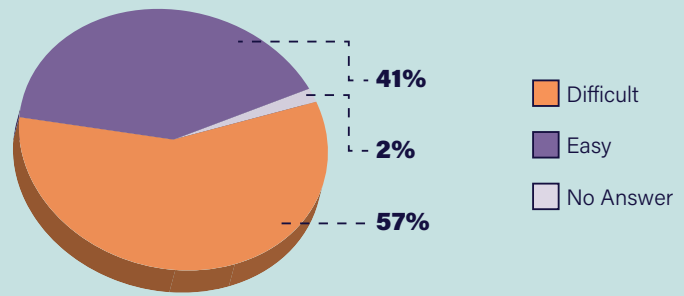
Addressing cases of VAWG, especially domestic violence, is more likely to be efficient if there are specialised units within police forces with sufficient resources to deal with the complex nature of VAWG and have support helplines. In Egypt and Tunisia, special units exist, dealing with VAWG in general and not specifically dedicated to domestic violence. In Lebanon, although the law provides for the establishment of such a unit, it has not yet been created. Algeria does not have any specialised unit yet within its police force. Jordan, Palestine and Morocco have specialised units for domestic violence. 57% of the women interviewed in the region (from 32% in Tunisia to 70% in Morocco) report that access to police services in the community is difficult.

In Jordan, there are training programs for police officers, organised by the Ministry of Interior. In Lebanon, police stations and units receive regular training on VAWG. In Morocco, the Ministry of Interior provides institutionalised trainings for the policemen. In Tunisia, the Ministry of Interior conducts trainings to the judicial police on the skills and knowledge for dealing with women victims of VAWG.

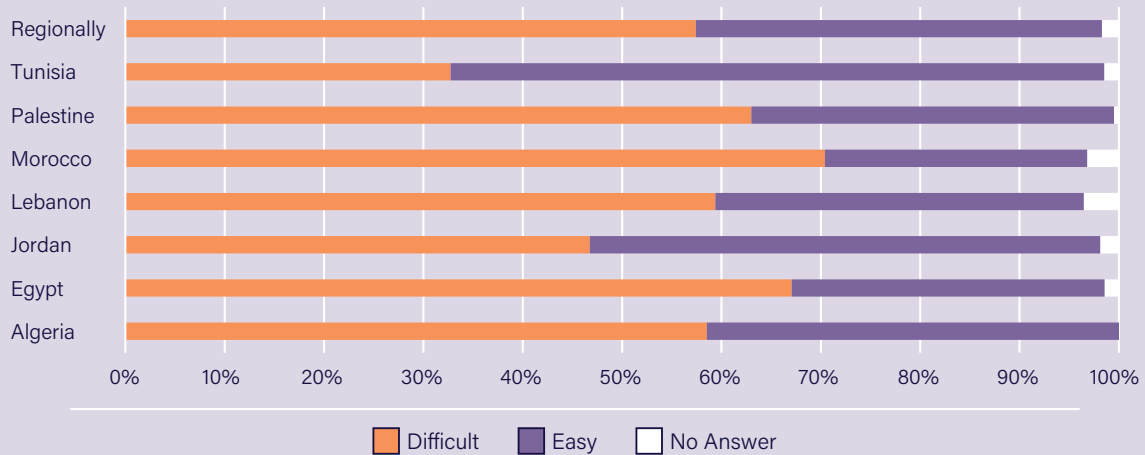


The diagrams below show women's perception towards accessing police services.

**Figure 3:** Women's perceptions of accessing police services in the community, all countries



**Figure 4:** Women's perceptions of accessing police services in the community, by country

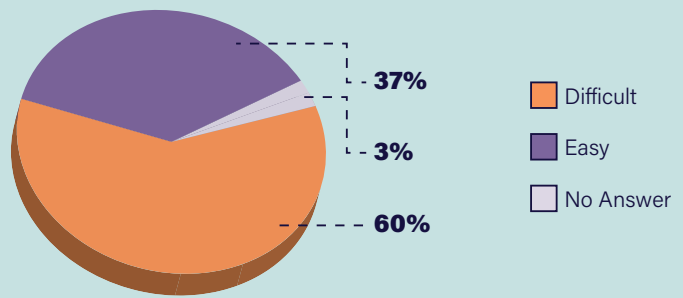


In the region, only a minority of cases of VAWG that are reported to the police result in charges being brought against a perpetrator, with fewer still leading to convictions<sup>10</sup>. Among the main reasons are the lack of legal assistance provided for women victims of VAWG as well as lack of capacity of court staff in responding to VAWG, especially considering the absence of allocation of special courts for women victims of VAWG. While Morocco and Tunisia's comprehensive laws addressing VAWG foresee free legal assistance to victims of VAWG, the other States offer legal assistance for those who are without financial means but not specifically for victims of VAWG. Yet, according to the results of the RCSO study on VAWG, 60% of women (from 45% in Jordan to 76% in Morocco) report that accessing legal aid services in the community is difficult. In Egypt, the Ministry of Justice has established a department for combating violence against women to provide training for judges to deal with such violence. In Jordan, the judicial council adopted a guide for judges on responding to cases of violence against women. In Morocco, there are institutionalised trainings for the court staff provided by the Ministry of Justice.

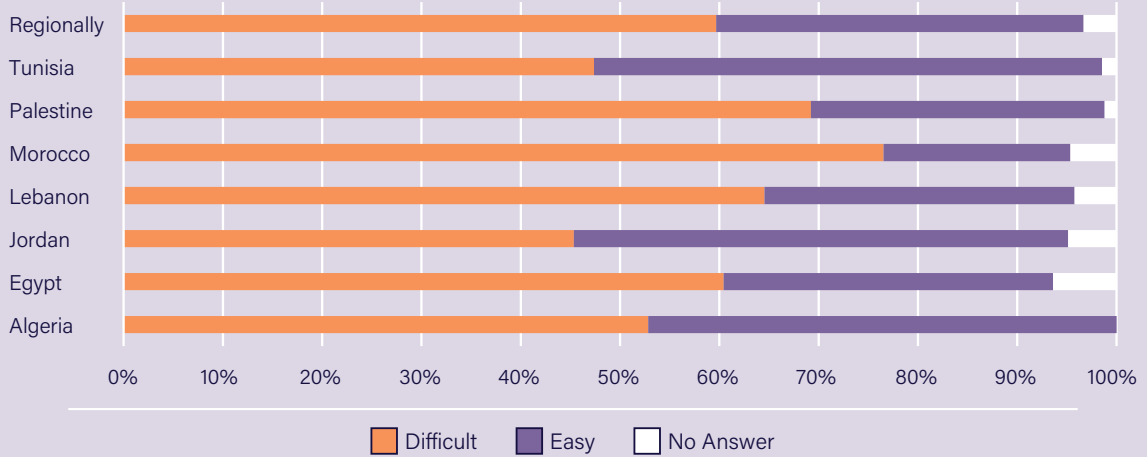
10- <https://www.unwomen.org/en/digital-library/publications/2015/12/essential-services-package-for-women-and-girls-subject-to-violence>

The diagrams below show women's perception towards accessing legal aid.

**Figure 5:** Women's perceptions of accessing legal aid services in the community, all countries



**Figure 6:** Women's perceptions of accessing legal aid services in the community, by country



## Social services

Social services comprise sheltering, telephone helplines, counselling sexual violence services, support for child witnesses, and referral services for care and treatment of physical, mental and psychosocial health issues.

### Hotlines, helplines

Except Morocco and Lebanon, all countries dedicate specific hotlines for receiving complaints of women victims of VAWG. In Egypt the hotline for women's complaints is established by the National Council for Women (NCW). In Algeria, the hotline for women's complaints is operated under the supervision of the Ministry of National Solidarity, Family, and Women's Affairs. In Jordan the Family Protection Department provides a 24-hour hotline. The Tunisian Ministry of Women, Family, Childhood and Elderly provides a green number (helplines). In Morocco, victims of VAWG can report cases through using the general lines established by the police for reporting crimes which are not specialised for VAWG cases. In Lebanon, the Internal Security Forces (ISF) provides a hotline for domestic violence – (1745).

### Shelters

Government-run shelters are available in all countries for women victims of VAWG. Except, in Lebanon, the government cooperates with CSOs for providing shelters.

All shelters provide housing and basic necessities, counselling, legal support and almost all provide community reintegration services<sup>11</sup>. Counselling is offered as part of the integrated services available within the shelter. These also include psychosocial support, advice and counselling to victims of VAWG. Support for victims of sexual violence is provided in rape crisis centres. Rape crisis centres typically offer long-term help such as face-to-face counselling, support groups and contact with other services. Some countries have specialised centres for rape victims like in Jordan, and others offer help for women victims of rape only within shelters. Except for Tunisia, no government provides funding for the shelters run by CSOs. Moreover, in all countries, shelters do not cover all geographic areas which undermines the access of women victims of VAWG to these shelters. Several women's shelters were at full capacity due to the Covid-19 conditions and have reported no longer being able to host any new victims. This was the case in Morocco. In Jordan, women CSOs encountered challenges in getting around town and were therefore not able to reach women victims of VAWG<sup>12</sup>.

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11- Shelters for Women Survivors of Violence: Availability and Accessibility in the Arab Region, IBID, P62.

12- Covid-19 and essential services provision for survivors of violence against women and girls VIOLENCE AGAINST WOMEN AND GIRLS, UN Women, Policy Brief 2020. at [https://www2.unwomen.org/-/media/field%20office%20arab%20states/attachments/publications/2020/08/policy%20brief%20esp\\_en\\_19820-min.pdf?la=en &vs=4849](https://www2.unwomen.org/-/media/field%20office%20arab%20states/attachments/publications/2020/08/policy%20brief%20esp_en_19820-min.pdf?la=en &vs=4849)

The table below shows the number of shelters in each studied country.

**Table 2:** Services specifically dedicated to VAWG in the studied countries:

Country	Number of shelters and supervising ministries	Existence of police directorate or unit dedicated to VAWG	Existence of specialised courts for women victims of VAWG
<b>Algeria</b>	2 shelters - Ministry of National Solidarity, Family and Women's Affairs	No	No
<b>Egypt</b>	9 shelters - Ministry of Social Solidarity	Combating Violence Crimes against Women Unit	No
<b>Jordan</b>	3 shelters - Ministry of Social Development	Family Protection Directorate	No
<b>Lebanon</b>	No <sup>13</sup>	No	No
<b>Morocco</b>	10 shelters - Ministry of Solidarity, Social Development, Equality and Family	There are Police Units to support women victims of all forms of VAWG	No
<b>Palestine</b>	2 shelters - Ministry of Social Development	Family and Juvenile Protection Unit	No
<b>Tunisia</b>	6 shelters - Ministry of Women, Family, Childhood, and Elderly	There are Specialised Units for combating violence against women	No

### Protection and support for child witnesses

Children are exposed to domestic violence which causes a range of harms including anxiety, developmental delays, sleeping and communication problems that affect their health, wellbeing and education. Some countries provide childcare staff like Algeria and Jordan which have dedicated childcare staff to support the children in the shelters<sup>14</sup>.

13- The government of Lebanon cooperates with CSOs in providing shelters.

14- Shelters for Women Survivors of Violence: Availability and Accessibility in the Arab Region, IBID, P51.

## National Cooperation

Due to the interdependency needed response to VAWG, providing efficient services requires coordinated actions at all levels and across all sectors. The Regional Index of VAWG (RCSO, 2020) shows the governmental mechanisms and measures adopted across all sectors. In Algeria, there are cooperation mechanisms for referring VAWG cases and an institutional information system on VAWG. In Egypt, the government established a cooperation between police, hospitals and ministries on the referral level. The same goes for Jordan where there is cooperation for receiving complaints, between the Family Protection Department, Ministries and shelters. In Lebanon, a service order was issued by the government about the different measures that must be taken by different actors dealing with women at risk of violence. In Morocco, the government established a protocol for the cooperation mechanisms between police, shelters, hospitals, courts/ judiciaries, Ministries, and civil society to exchange information on cases of violence. In Palestine, the Norwegian Refugee Council (NRC) was established between hospitals, police and different institutions. In Tunisia, multi-sectorial protocols have been signed for protecting women victims of VAWG among relevant ministries.

### **Tunisia: Provision of services and cooperation between governmental institutions are included in the law on eliminating violence against women**

Law No. 58 on eliminating violence against women of 2017 in Tunisia established the legal framework for provision of services and cooperation for addressing VAWG.

The law includes the principles for providing care for the victims of VAWG (article 4). It also places general obligations to be shouldered by every care provision entity (article 39) and special obligations to be carried out by specialised units when caring for victims of VAWG (articles 25-26).

Article 8 of the law declares that the Ministry of Health shall introduce programs in medical and paramedical teaching curricula to address violence against women and to train health personnel at all levels to detect, assess and evaluate all forms of violence against women, to examine victims and to care for them and their dependent children. The law also declares that the Ministry of Health shall be responsible to detect, assess and evaluate all forms of violence against women.

The law requires specialised training for judges and police. Articles 9 and 10 of the law state that the Ministry of Interior, and the Ministry of Social Affairs must ensure the provision of trainings for staff on combating violence against women. The work on institutionalisation has started at the Ministry of Interior which conducts trainings to the judicial police on the skills and knowledge for dealing with women victims of VAWG.

In terms of cooperation, there is inter-ministerial coordination between the Ministry of Health, the Ministry of Education, the Ministry of Social Affairs, the Ministry of Interior, and the Ministry of Women, Family, Childhood and Elderly in the frame of the multi-sectorial protocols adopted in the implementation of the provisions of article 12 of the law and article 8 of the Inter- Sectoral Agreement to Provide Care to Victims.

## Palestine: Establishment of National Referral System

In Palestine, the Council of Ministers issued decision No. 18 of 2013 related to NRS and emphasises the importance of partnership between service providers in dealing with women victims of violence. This decision states the need for cooperation between different sectors to provide services for victims through several means.

NRS includes institutionalising the cooperation between all parties through channels of cooperation, professional teams and memoranda of agreements. It also requires that a referral form be completed to refer a victim from one sector to another; professional reports should be produced as needed to avoid duplication and enhance integration.

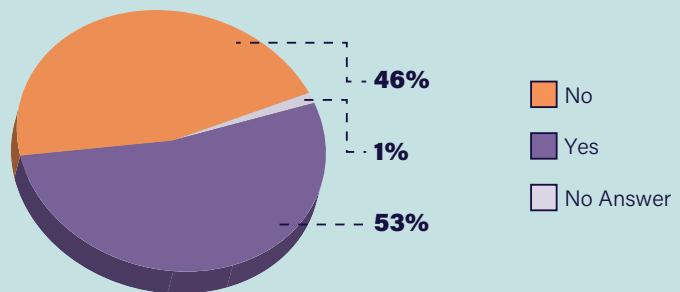
According to the interviewed observers of Palestine in the regional study on VAWG (RCSO, 2020), the referral system is one of the best plans in the Arab countries. Among major challenges, the observers mention the lack of coordination and procedures for referral system between parties and related stakeholders. Also, there is limited access of women victims of VAWG to protection services, especially those who live in remote communities and East Jerusalem due to the occupation and checkpoints.

## Spreading information about social services

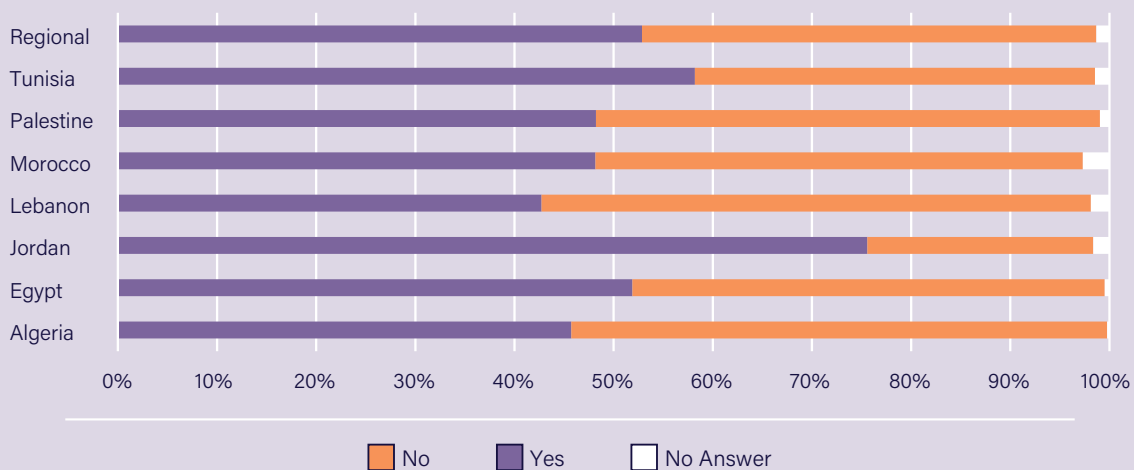
Article 19 of Istanbul Convention states that “Parties shall take the necessary legislative or other measures to ensure that victims receive adequate and timely information on available support services and legal measures in a language they understand.” Despite the importance of social services for victims of VAWG, 53% of women interviewed in the RCSO study (ranging from 23% in Jordan to 55% in Lebanon) report that they are not aware of the existing government services established to that end.

The diagrams below show the level of awareness of women towards the existing governmental institutions that address VAWG.

**Figure 7:** Respondents’ awareness of the existence of government institutions that address VAWG, all countries



**Figure 8:** Respondents' awareness of the existence of government institutions that address VAWG, by country





## Policy recommendations

- Adopt a comprehensive legislation that criminalises all forms of VAWG and ensures satisfactory number and quality of public services for victims as well as an easy access of victims to these services. Provision of services cannot be efficient and comprehensive without adopting a specific and comprehensive legislation on VAWG that ensures not only criminalisation of perpetrators but also prevention and protection of women.
- Oblige service providers by law to report, refer and care for VAWG cases.
- Provide specialised health facilities to support women victims of VAWG such as sexual assault examination and care.
- Establish special units to deal with VAWG cases in police and court. It is necessary to establish a specific department within police dedicated to domestic violence and VAWG and special courts in the justice system for women victims of VAWG. Special courts are more responsive and effective in enforcing laws on VAWG.
- Provide, by law, free legal assistance to women victims of VAWG. Comprehensive laws on VAWG should include the provision of free legal assistance for women victims of VAWG.
- Increase the number of shelters for victims of VAWG including the establishment of rape crisis centres dedicated to victims of sexual violence. Shelters should also offer psychological support for women victims of VAWG including throughout court procedures.
- Institutionalise capacity-building trainings of first respondents in the sectors of health, justice and police as well as social services. All first respondents from different sectors should have sufficient skills and knowledge to deal with victims of VAWG and refer the cases. Training of healthcare providers in recognising and responding to cases of VAWG is very important, especially because they represent the first respondents who can detect domestic violence.
- Support and conduct national information campaigns to enhance the information of women about the existing social services provided for victims of VAWG. This can be achieved through public service announcements to victims of VAWG on service referrals and how to access these services for different categories of women.
- Support and conduct national campaigns to raise the awareness about the consequences of VAWG.

The policy brief is based on a regional study on VAWG in the South Mediterranean conducted by the Regional Civil Society Observatory (RCSO) on VAWG between December 2019 and November 2020. The study involved collecting and analysing primary data in seven countries, Algeria, Egypt, Jordan, Lebanon, Palestine, Morocco and Tunisia, by applying combined qualitative and quantitative approaches. It aimed to assess the level of awareness of women towards the laws and services provided for victims of VAWG, as well as to know the personal experience, perception and values related to VAWG. Following the study findings, in 2019 the RCSO established the first edition of the Regional Index on VAWG.

#### **Regional Civil Society Observatory (RCSO) on VAWG**

The Regional Civil Society Observatory (RCSO) on VAWG was established as an independent mechanism to follow up on VAWG and support the implementation of the Union for the Mediterranean (UfM) Ministerial Declaration (2017, Cairo). The RCSO is established and hosted by EuroMed Feminist Initiative (EFI) in Amman and is funded by the European Union (EU).