



# Analysis and identification of good practices



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# Analysis and identification of good practices



- Literature on the intersection of gender and migration, where available, addresses issues such as violence during the migration process, sexual and reproductive health (SRH) and female genital mutilation (FGM).
- Two main strands of literature:
  - Migration-related issues
    - migration to Malta
    - reception and detention
    - Integration
  - Violence issues
    - violence against women (VAW)
    - gender-based violence (GBV)
    - specific focus on intimate partner violence (IPV)



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- Migration
  - Malta's transition from a country of emigration to a destination for immigrants
  - Peaked in 2013 and declined since
  - Various Legislative tools
    - National
    - European
    - International
  - A situation that was not helped by the EU's slow realisation of the gravity of the situation and also lack of funds required to aid in the identification, monitoring, retrieval and managing of the phenomenon, as well as reluctance in burden sharing
  - Deals between neighbouring countries



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- Migration
  - Detention Centres
    - From 18 months reduced to 2-12 months
    - Only 30 individuals as at December 2014
  - Open Centres
    - accommodate asylum-seekers, refugees, beneficiaries of subsidiary protection, failed asylum-seekers enjoying national protection, and other migrants

Figure 8. Migrant job waiting hot spots and NNH (red) and 2NNH (green) poverty hot spots. Compiled using MapInfo (2012)



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- Migration (based on medical examinations conducted by Padovese et al. in 2010-2011)
  - The majority of people in the open centres were male and had been detained for an average of 6 months prior to being transferred to an open centre
  - Only 31% of migrants resulted to be in good health, with the most frequent diagnosis being skin diseases, respiratory diseases and gastro-enteric diseases
  - 384 women who were examined, 12.5 % were pregnant at the time of the examination and 42.5 % had undergone FGM
  - Over 50% of female migrants were referred to local services for gynaecological problems.
  - Poor hygiene, overcrowding, dampness, unhealthy diets were identified as major factors exerting a negative influence on migrants' health



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- Migration
  - Integration Issues
  - Although reference to integration is made in several pieces of legislation, there is no one ministry solely responsible for integration and no fully-fledged integration policy in the Maltese context
  - Access is often hampered by lack of information and difficulties in communication arising from language barriers
  - It is also the case that many migrants with an uncertain immigration status feel discouraged from investing too much time and energy in integration
  - Another major obstacle is discrimination: Africans are the main target of discrimination and represent the minority group with the highest rate of unemployment



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# Analysis and identification of good practices

- Migration
  - Integration Issues
  - The findings underscored high rates of unemployment
  - This in spite of women's high qualifications and work experience
  - The main obstacle to accessing and securing employment being discrimination on the basis of age, religion or nationality
  - Broad reliance on seasonal employment or casual jobs put asylum seekers living in Malta at an increased risk of poverty



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# Analysis and identification of good practices

- **Violence against women and gender-based violence**
  - Various legislation:
    - Chapter 481, Domestic Violence Act
    - Chapter 452, Employment and Industrial Relations Act
    - Chapter 456, Equality for Men and Women Act
    - Chapter 9, Criminal Code
  - It should be noted that the Domestic Violence Act is soon set to become the 'Gender-based Violence and Domestic Violence Act'
    - Bill issued for public consultation in 2016
  - In Malta, domestic violence, both as psychological violence and in the form of bodily harm, has seen a rapid increase in recent years, reaching 7% of all offences in 2015 and 2016



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- 1205 cases (7% of all offences) in 2015
- 1272 cases in 2016
- An increase of 183% between 2008 and 2016



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- **Violence against women and gender-based violence**

- 2011 study on domestic violence surveyed 1200 women aged 18-59. 26.5% of ever-partnered women in Malta have experienced acts of physical, sexual or emotional violence perpetrated by a current or former partner in their lifetime



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- NCPE (2015) study on elderly highlight that abuse on the elderly appears to begin in their 20's and 30's, and that for a large majority of victims it carries on for 30-40 years. The most common type of abuse is psychological, emotional, financial or in the form of neglect, occurring at the hand of the male spouse, children or partners



- A rather worrisome finding is that around 44% of the interviewed victims never reported the abuse

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- **Violence at the intersection of gender and migration**

- Most of the studies examining violence at the intersection of migration and gender focus on Somali women, allegedly due to the **Somali** community being one of the largest migrant communities in Malta
- Fear and insecurity act as drivers for migration: rape and sexual violence are a daily reality in Somalia and are used as a weapon by soldiers and civilians alike
- Single women are the most vulnerable to violence and thus most likely to flee the country in the quest for safety.
- Departure does not put a cap on vulnerability:
  - dynamics are made worse through abuse of power, sexual battering of women, sexual assault, rape, abduction by armed forces, mass rape and forced pregnancies as well as sexual attacks by smugglers, slave traders and pirates





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- **Violence at the intersection of gender and migration**

- Poor living conditions in detention centres have a severe impact on the health and safety of female asylum seekers - Many women purposely get pregnant, in the hope of being moved to an open centre
- Since February 2014, FGM is explicitly criminalised through Article 251 E (1-7) under title VIII 'Crimes against the Person' and subtitle IX 'Threats, Private Violence and Harassment' of the Maltese Criminal Code
- Refugee women's understanding of sexual and reproductive health is often limited to pregnancy
- Refugee women living in Malta feel at loss when attempting to navigate the health system, and are often unable to communicate with health practitioners due to language and cultural barriers



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- **Gaps in the literature**

- There is a growing body of literature examining violence through an intersectional lens
- There is still a perceived and tangible divide between the extensive literature on migration, which focuses primarily on men
- Literature on VAW/GBV does not always give enough consideration to the experiences of migrant women
- Moreover, human trafficking remains, to this day, an under-explored issue
- Research on and knowledge of trafficking in the Maltese context remains scarce



# What are the women's experiences?

- **Findings**

- Interviews with migrant women victims of S/GBV
- Testimony n. 1 – Montenegro
  - Abuse by husband
  - Kidnapping of son
  - Stalking
  - Found local help from individuals
  - Police not very helpful
  - Support by Appogg and other church agencies
- Testimony n. 2 – Philippines
  - Abuse by partner
  - Continuous migration between shelters
  - Police knew the abuser and did not help much
  - Services helped



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# What are the women's experiences?



## • Findings

- Both women reported having received valuable support from Appogg, Dar Merhba Bik and 'Dar Qalb ta' Gesu'.
- Received help as well from private citizens, in the case of the Montenegrin interviewee.
- Both women highlighted lack of support from government agencies and the police;
- The Filippino interviewee further stressed the impact that gender and nationality have on court proceedings and the discrimination faced in the court setting.
- Filippino interviewee argues that there is a need to teach foreigners how to stand up for themselves in Malta.



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# What are the service providers' experiences?

- **Interviews with Stakeholders**

- Aditus Foundation
- APPOGG
- Dar Merhba Bik
- Dar Qalb ta' Gesu
- Integra
- Migrant Women Association
- Mount Carmel Hospital
- NCPE (National Commission for the Promotion of Equality)
- The Malta Police Force
- Victim Support Malta
- Women's Rights Foundation (WRF)



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# What are the service providers' experiences?

- **Findings**

- Degree of interaction with immigrant communities:
  - ranging from 100 % in the case of organisations like Integra Foundation and the MWAM
  - to 50% in the case of Dar Qalb ta' Gesu
  - to 20%-30% for organisations like Aditus Foundation and Dar Merchora Bik and 10% for Victim Support Malta
  - Mount Carmel reported providing services to approximately 15 migrants per month

- Nationalities served:

- Somali, Nigerian, Eritrean, Ethiopian, Serbian, Middle-Eastern, Eastern European, Egyptian, Moroccan, Russian, Sudanese, Italian, Polish, Norwegian, Finnish, British, Hungarian, Bulgarian



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# What are the service providers' experiences?



## • Findings

- All respondents stated that they lack a specialised service for migrant women who have suffered DVA
- Dar Merhba Bik and Dar Qalb ta' Gesu' stressed that it acts as an emergency domestic violence shelter for all women who have suffered DV, regardless of their nationality
- Mount Carmel provides psychological care to both migrant genders
- All services except for those provided by the two shelters included in the sample are fee-free
- Most service providers reported that staff receive specific training in the issues faced by immigrant clients and in GBV, yet only Mount Carmel, Dar Merhba Bik and Integra relayed that training is provided in both areas



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# What are the service providers' experiences?

- **Findings**
  - Channels through which services are accessed vary by entity
  - Cross-referral occurs between entities
  - Identified issues and problems faced by immigrant women:
    - concerns with documents, issues finding a job, lack of support system and access to child care, no access to rights, difficulties navigating the system, cultural barriers, language, appearance, colour, religion
  - Although several service users mentioned the intention to take steps to address the gaps in service provision for immigrant women exist, there is a need for:
    - further education or training
    - Funding
    - Help with limited resources



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# What does the training program look like?

- Migrant women identified
  - Regular
  - Irregular
- Guidance needed for
  - Health
  - Employment
  - Education
  - Housing
- They are at a loss on how to navigate the system because of communication problems due to cultural and linguistic barriers



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# What does your training program look like?

- Legislation – they do not know what the law says
- Equality and their rights
- Safety issues
- Integration
  
- They need childcare, court accompaniment and emotional support.



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# Any Questions?

# THANK YOU



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