

**RESEARCH INTO THE POLICING  
RESPONSE TO DOMESTIC, SEXUAL  
AND GENDER-BASED VIOLENCE  
IN MIGRANT COMMUNITIES**

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# TABLE OF CONTENTS

Background and research objectives..... 5

Methodology..... 7

Legal and policy framework of relevance for DSGBV in Ireland..... 9

Findings..... 11

Recommendations..... 17

Conclusions..... 21

Bibliography..... 22

Annex I: Research questions for AGS Members..... 24

Annex II: Research questions for victims/survivors<sup>1</sup> of DSGBV in Ireland..... 25

Annex III: Complaint mechanisms, counselling and other support services for DSGBV victims/survivors and migrants in Ireland..... 27

Annex IV : Information sheet and interview consent form ..... 28

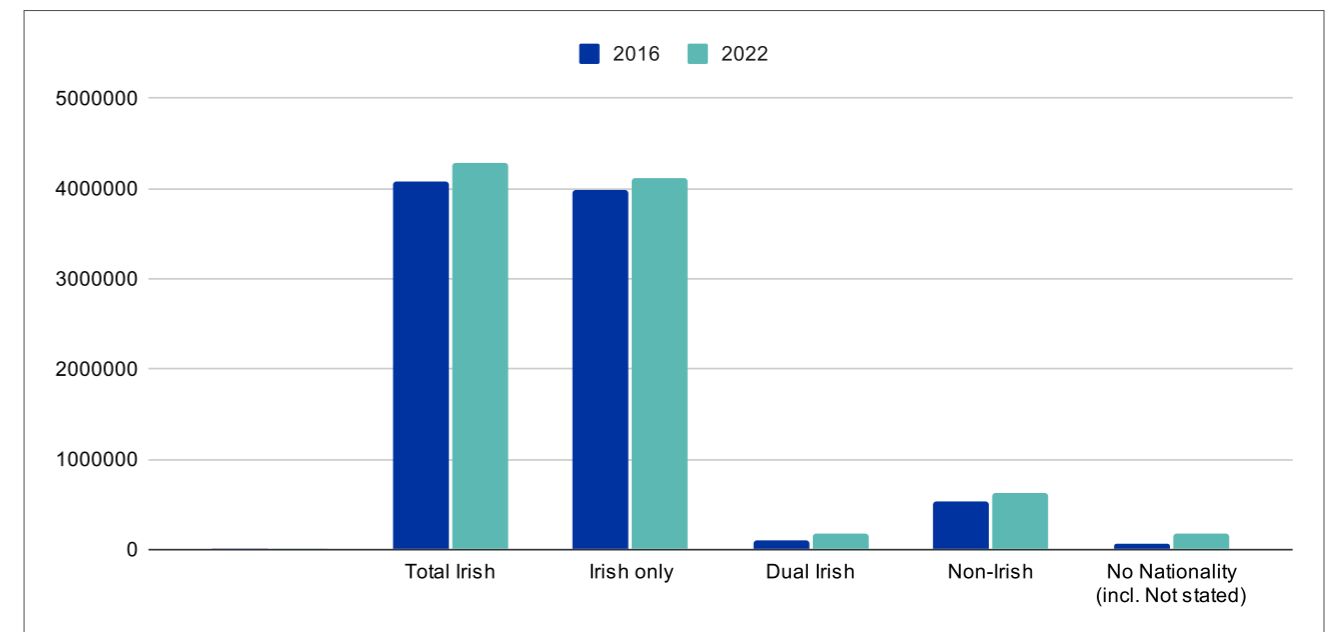
# 1. BACKGROUND AND RESEARCH OBJECTIVES

The IOM project (hereafter: the project) ‘PROTECT II’ aims at ‘Preventing Sexual and Gender-Based Violence against Migrants and Strengthening Support to Victims’ in Ireland. Following two previous phases, the present research focused on phase III of the project. Funded by the Irish Department of Justice (DOJ), the project aims to assist vulnerable migrants, particularly victims of trafficking and domestic, sexual and gender-based violence (DSGBV)<sup>2</sup>. It contains a number of elements and activities relating to cultural mediation and cultural competency training, counter-trafficking and community policing (CP). The latter strand relates primarily to: enhancing awareness among migrant communities of the work of An Garda Síochána (AGS); improving levels of trust to encourage the reporting of incidents of DSGBV; and ameliorating responses to such incidents.

The present research examines, through qualitative data analysis, the perception of/by AGS among/by migrant victims/survivors of DSGBV in Ireland. This research also examines perspectives on barriers and includes recommendations elaborated by the consultant on the basis of suggestions and responses from the three different cohorts of research participants. The results of the research can be used to develop standard operating procedures to enhance the response of AGS to incidents of DSGBV among migrant communities across Ireland.

The Irish Central Statistics Office recently released its Census 2022 figures. These show that: ‘[b]etween 2016 and 2022, Ireland’s population increased by 387,274. Natural increase made up 167,487 of the change. The estimate for net migration therefore is 219,787. This represents an annual average increase of almost 65,000 people.’<sup>3</sup> In total,

[t]here were 4.3 million people who usually lived in Ireland who indicated that they had either Irish only or dual Irish citizenship. This made up 84% of the population of usual residents. The number of non-Irish citizens increased in 2022, accounting for 12% of the population (emphasis added). The biggest non-Irish groups were Polish and UK citizens followed by Indian, Romanian and Lithuanian. Brazilian, Italian, Latvian and Spanish citizens were also among the larger non-Irish groups.<sup>4</sup>



Graph 1: Population usually Resident and present in the State by citizenship, 2016 to 2022

<sup>1</sup> The two terms ‘victims’ and ‘survivors’ will be used interchangeably in the report as both are used by organisations, policies and legislation that refer to people who have experienced DSGBV. In the table on recommendations, V/S stands for victims/survivors.

<sup>2</sup> For definitions on DSGBV as interpreted by Ireland, please see: DoJ, ‘Zero Tolerance. Third National Strategy on Domestic, Sexual and Gender-Based Violence (DSGBV) 2022-2026.’

<sup>3</sup> Central Statistics Office, ‘Census of Population 2022 - Summary Results.’

<sup>4</sup> Central Statistics Office, ‘Census of Population 2022 - Summary Results.’

These figures illustrate that the foreign-born population in Ireland is significant and growing. The country is quickly changing from being a homogenous, mostly white, Catholic country to one that is host to a multitude of nationalities, ethnicities, religions and linguistic groups. This increased diversity in the population of Ireland presents challenges in terms of integration, cultural understanding, equality and inclusion. Those challenges become especially poignant when public bodies, service providers and AGS, are confronted with sensitive issues and incidents, including those pertaining to DSGBV.

Against this backdrop, it is important to recall that:

*Gender-based violence affects women from all ethnic and social groups but younger women are among those most at risk, as are women who face multiple discriminations and marginalisation due to their ethnicity, socioeconomic status, and immigration status (emphasis added), such as Traveller, Roma and migrant women (WHO, 2021).<sup>5</sup>*

Ireland's policy response to GBV as it affects migrant women was examined and documented in a recent study. Reilly, Sahraoui and McGarry identified four particular areas of policy response that 'reveal a pattern of policy failure on the part of the Irish state characterized by exclusion, minimization, and/or inaction. These relate to assessment of vulnerability of applicants for international protection; addressing gender-based violence in the context of direct provision accommodation; identification and referral of trafficking victims; and response to domestic violence linked to dependent migration status.'<sup>6</sup>

While DSGBV is a longstanding and unresolved problem in all societies, tackling this issue in migrant communities comes with additional challenges. As victims/survivors of DSGBV often face re-victimisation, stigma and shame, they are reluctant to speak out for fear of inaction on the part of the authorities on the one hand, and fear of bringing additional and potentially lethal, harm upon themselves on the other. In migrant communities, these fears are compounded by concerns that reporting could lead to, inter alia, a negative impact on a future citizenship application, expulsion from the country, removal of the only source of financial/economic/emotional support they might have (i.e. the perpetrator of violence) as well as attracting negative attention to their communities and perpetuating pre-existing, negative stereotypes.

## 2. METHODOLOGY

The present research started in mid-January 2023 and was completed in early June 2023. The research began with an in-depth desk review of relevant secondary literature, legislation and policies applicable in Ireland in the realm of DSGBV. This review included: concluding observations and statements issued by international human rights mechanisms and instruments relating to Ireland and migration,<sup>7</sup> and the EU Directive on 'establishing minimum standards on the rights, support and protection of victims of crime.'<sup>8</sup> Also included in the desk review were: mapping, project and good practice reports on CP and assistance to victims of DSGBV by the International Organization for Migration (IOM);<sup>9</sup> gender equality, racism and DSGBV reports and strategies adopted by Irish national bodies and institutions (including the Irish Human Rights and Equality Commission<sup>10</sup> and An Garda Síochána);<sup>11</sup> shadow reports and other relevant documents on DSGBV issued by Irish civil society organisations and public policy platforms.<sup>12</sup>

Based on this desk review, the consultant drew up a list of draft questions for potential participants (one for victims/survivors of DSGBV – which was then adapted to also address DSGBV service providers - and another one for members of AGS). This list was then shared with the two IOM contact points for this consultancy: the IOM National Programme Officer (NPO) responsible for the 'PROTECT II' project in Ireland and the Belgium-based Regional Immigration and Border Specialist. Their feedback on the questions was duly incorporated.

From March to May 2023, the consultant, facilitated by the IOM NPO, engaged in extensive outreach to identify potential research participants. Online and offline meetings with IOM staff, AGS, the Irish Policing Authority and various DSGBV service providers (including some with a specific migrant and/or minority focus) were also held to explain and discuss the research background, rationale, aims and proposed methodology.

During the data collection phase, the consultant conducted semi-structured interviews with 16 key informant interviewees through an online conference software 'Zoom' (chosen as the preferred method by all interviewees). The consultant facilitated the interview while leaving the interviewees free to bring insights and discussions in areas of specific relevance for them. Interviews included around 15 core questions plus relevant follow-up questions where appropriate (see Annex I and II). Questions revolved around: the relationship between migrant communities and AGS; sense of and integration in their local communities and community policing; reporting and addressing an incident of DSGBV; investigating and prosecuting DSGBV incidents; and recommendations and evaluations to improve reporting of DSGBV incidents to AGS. Jointly with the IOM National Programme Officer, the consultant also compiled a list of complaint mechanisms, counselling and other support services for DSGBV victims/survivors and migrants in Ireland (Annex III), which was shared with interviewees. The consultant also produced an information sheet and a participant consent form that all interviewees had to read and sign before the interviews took place (Annex IV).

To ensure that interviewees would not be re-traumatised (in the case of victims/survivors), the consultant explained in detail the research to gatekeepers and ensured that the interviewees were comfortable in undertaking the interview including by pausing/stopping whenever distress was noticed or communicated. The consultant also insisted on interviewing people who had overcome the experience of violence to the extent possible (in their own assessment), were comfortable being interviewed, and were interested in contributing to possible legal and policy changes to address DSGBV in their communities. The consultant made sure at the end of these interviews to check that participants were not feeling distressed in any way. No probatory questions were asked on the experience of violence unless the interviewees brought it up themselves and chose to talk about it. In terms of data protection, interview data was saved on secure online drives, requiring a double password and only accessible by the consultant. The anonymised interview transcripts were subsequently transferred to the IOM NPO through One Drive, where it is recommended to destroy them within one year from the data collection phase (May 2024).

<sup>7</sup> These include the concluding observations, reports, recommendations, and press releases on Ireland issued by United Nations Treaty Bodies, the Special Procedures of the Human Rights Council, the Universal Periodic Review. See: UN OHCHR, 'Ireland.'

<sup>8</sup> EU, 'Directive 2012/29/EU of the European Parliament and of the Council Establishing Minimum Standards on the Rights, Support and Protection of Victims of Crime.'

<sup>9</sup> See, inter alia: IOM, 'Study on Border Community Perception of Border Security and Management in the Liptako-Gourma Region' and IOM, 'Police de Proximité Sans Frontières. Rapport de Bonnes Pratiques. WP4 : Police de Proximité.'

<sup>10</sup> See, inter alia: IHREC, 'Developing a National Action Plan Against Racism. Submission to the Anti-Racism Committee.'

<sup>11</sup> AGS, 'An Garda Síochána Diversity and Integration Strategy 2019-2021.'

<sup>12</sup> Dublin Rape Crisis Centre, 'Shadow Report to GREVIO. Implementation of Istanbul Convention in Ireland.'

<sup>5</sup> Foley, 'Gender-Based Violence in Ireland.'

<sup>6</sup> Reilly et al., 'Exclusion, Minimization, Inaction: A Critical Review of Ireland's Policy Response to Gender-Based Violence as it Affects Migrant Women,' abstract.

Interviews lasted between 30 and 60 minutes each and were audio/video recorded. The interviewees came respectively from three cohorts: DSGBV victims/survivors (five); DSGBV service providers (four); AGS (seven). The interviews were summarised (when held in a language other than English i.e. Spanish), transcribed, and thematic analysis was employed to analyse the data. After familiarising herself with the data, categories and themes were identified by the consultant. The themes were enumerated in the report findings and divided by cohort of interviewees, together with a list of respective barriers identified to report and address DSGBV in migrant communities, as well as a summary table of related recommendations.<sup>13</sup>

The consultant drafted and shared preliminary observations in mid-May 2023, followed by a first draft of this report, which was sent for discussion and updated following feedback from IOM. The final report was delivered on 7 June 2023.

Interviewee cohort breakdown	
DSGBV Victims/Survivors	5
DSGBV Service Providers	4
AGS	7
<b>Total</b>	<b>16</b>

13 Braun and Clarke, 'Thematic analysis.'

### 3. LEGAL AND POLICY FRAMEWORK OF RELEVANCE FOR DSGBV IN IRELAND

As of 2023, Ireland has ratified nearly all core international human rights treaties, with the exception of the Convention for the Protection of All Persons from Enforced Disappearance and the International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families. Ireland is not a party member to the Optional Protocol for the Convention against Torture and the *Optional Protocol to the Convention on the Rights of the Child, on the sale of children, child prostitution and child pornography*.<sup>14</sup>

Prior to ratifying the Council of Europe (CoE) Convention on Preventing and Combating Violence Against Women and Domestic Violence (Istanbul Convention) in 2019, Ireland had also introduced new laws concerning DSGBV. These include: the Criminal Law (Sexual Offences) Act 2017, which introduced new offences related to child grooming, strengthened offences tackling child pornography, and criminalised the purchase of sex;<sup>15</sup> the Criminal Justice (Victims of Crime) Act 2017;<sup>16</sup> and the Domestic Violence Act 2018, which introduced the criminal offence of coercive control,<sup>17</sup> criminalised forced marriage and allows victims to apply for safety protection orders regardless of whether they live with their abuser.<sup>18</sup> Ireland also ratified the CoE Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse (Lanzarote Convention) in 2020.<sup>19</sup>

Furthermore, 'through the Harassment, Harmful Communications and Related Offences Bill (known as Coco's Law), which came into force in 2021, new offences were created in relation to online and offline harassment and harmful communication, including the criminalisation of non-consensual distribution or publication of intimate images.'<sup>20</sup> In 2022, the Minister for Justice published the Criminal Justice (Incitement to Violence or Hatred and Hate Offences) Bill 2022, after securing Cabinet approval for the new legislation. This legislation is expected to be passed in 2023. The new legislation:

[w]ill also create new, aggravated forms of certain existing criminal offences, where those offences are motivated by hatred of a protected characteristic (emphasis added). These will carry an enhanced penalty and the criminal record will clearly state that the offence was a hate crime. (...) The protected characteristics in the new legislation are race; colour; nationality; religion; *national or ethnic origin*; descent; gender; sex characteristics; sexual orientation; and disability (emphasis added).<sup>21</sup>

In 2022, Ireland adopted a Third National Strategy on DSGBV 2022-2026 under the name of 'Zero Tolerance'.<sup>22</sup> In this strategy, the Government recognises that certain groups face additional challenges with regard to DSGBV, including migrants, refugees and international protection applicants.<sup>23</sup> As noted in a CoE report on the Istanbul Convention:

Migrant women, with or without documents, and women asylum seekers are *particularly vulnerable to gender-based violence* (emphasis added). Although their reasons for leaving their country vary, as does their legal status, both groups are at an increased risk of violence and face similar difficulties in overcoming such violence. That is why the Istanbul Convention ensures that its provisions are implemented without discrimination on the grounds of migrant status, refugee status or other status (Article 4, paragraph 3).<sup>24</sup>

14 UN OHCHR 'UN Treaty Body Database. Ireland.'

15 Irish Statute Book, 'Criminal Law (Sexual Offences) Act 2017.'

16 Irish Statute Book, 'Criminal Justice (Victims of Crime) Act 2017.'

17 Irish Statute Book, 'Domestic Violence Act 2018.'

18 IOM Ireland, 'Mapping Report on Legal Frameworks and Assistance Available to Migrant Victims of Sexual and Gender-Based Violence (SGBV)'; 49-55.

19 CoE, 'Lanzarote Convention.'

20 Foley, 'Gender-Based Violence in Ireland.'

21 DoJ, 'New Bill to tackle hate crime and hate speech includes clear provision to protect freedom of expression.'

22 DoJ, 'Zero Tolerance. Third National Strategy on Domestic, Sexual and Gender-Based Violence (DSGBV) 2022-2026.'

23 Ibidem, 20.

24 CoE, 'Convention on Preventing and Combating Violence Against Women and Domestic Violence (Istanbul Convention). Protecting Migrant Women, Refugee Women and Women Asylum Seekers from Gender-Based Violence.'

In terms of frameworks regulating the work of AGS, their functions are mandated and regulated by the Garda Síochána Act 2005. Amongst other functions, of relevance in the context of DSGBV and human trafficking is that AGS shall: protect life and property (b); vindicate the human rights of each individual (c); prevent crime (e); and bring criminals to justice, including by detecting and investigating crime (f).<sup>25</sup> Against this backdrop, it is also important to recall the six specific principles that CP perform within AGS: community engagement; community partnerships; problem solving; crime prevention; law enforcement; and accountability. CP objectives include using a community-based approach to resolve problems and prevent and tackle crime, also through meaningful inclusion of young people.<sup>26</sup>

Six specific principles that Community Policing (CP) performs within AGS
Community Engagement
Community Partnerships
Problem Solving
Crime Prevention
Law Enforcement
Accountability

<sup>25</sup> Irish Statute Book, 'Garda Síochána Act 2005,' section 7.  
<sup>26</sup> AGS, 'Community Policing.'

## 4. FINDINGS

### 4.1 VICTIMS/SURVIVORS OF DSGBV

Interviewees from this cohort underlined the difficulty in proving coercive control and emotional abuse. Without evidence of the abuse suffered, some of them reported not being believed or being asked for evidence of physical violence by AGS. One victim/survivor recalled being asked by the AGS attending at the incident: 'Where are the bruises?' Some of the interviewees noted that victims/survivors will not report DSGBV to AGS until the (emotional/psychological/financial) abuse turns into physical violence; and even so, possibly only after a pattern emerges that might become lethal to the victims/survivors or their children.

Victims/survivors also highlighted the importance of the first contact with the AGS. In previous interactions with AGS – some of them relating to a decade ago or more – this first experience was not positive in that victims/survivors either felt a lack of empathy or cultural/religious understanding from AGS. An example given was one of two male police officers entering a female victim/survivor's bedroom to ask her questions; this might be perceived as an invasion of privacy, especially when this practice would not be considered culturally acceptable for specific minority and migrant groups. Another example – in this case relating to a hate crime – was the perceived lack of understanding displayed by AGS in a case of hijab-snatching incident suffered by a Muslim woman. The gravity of the incident – stripping the victim/survivor of a key part of her identity – seems to have been missed by AGS officers who dealt with the case, reinforcing the perception held by the victim/survivor that AGS lacks empathy and cultural understanding for minority women, in this case Muslims.

The profile of AGS officers attending the scene of a DSGBV incident seemed to be for the large part young/middle aged white Irish males. Yet, in terms of diversity, victims/survivors stressed the importance of speed and effectiveness of AGS response over the diversity representation of the officers attending the scene. Yet, in cases of coercive control, female victims/survivors expressed more confidence in possibly reporting this to a female AGS officer as 'she would understand' as opposed to a male, as one respondent explained.

All the interviewees who availed of Women's Aid support services rated them very highly. On the other hand, those who had to access homeless accommodation or domestic violence (DV) refuges painted a grim picture. They reported, inter alia, lack of safety; absence of cultural understanding and empathy from staff; lack of follow-up on incidences of robbery/theft within the accommodation; staff pressure on victims/survivors to leave the accommodation as soon as possible; and quite concerningly, intimidation by staff to prevent victims/survivors from filing any complaint on conditions/incidents at the accommodation to AGS. An interviewee also complained about the perceived structural, racial and institutional discrimination present in Tusla, Ireland's Child and Family Agency. To illustrate this, this interviewee shared anecdotal examples of white Irish women, intoxicated or dealing drugs, dragging their children around O'Connell Street and not having their children removed from their care, while a Roma or woman of African descent 'would face immediate action from relevant agencies.'

#### Barriers to report a DSGBV incident from migrant victims/survivors' perspectives<sup>27</sup>

- a. Victims/survivors' insufficient language and legal knowledge to communicate/understand in English, including relevant legal provisions and their basic rights.
- b. Lack of awareness amongst migrant victims/survivors on DSGBV-related support services available in Ireland.
- c. Perceived lack of compassion and empathy towards victims/survivors by AGS.
- d. Perceived lack of cultural understanding towards victims/survivors by AGS.
- e. Perception that AGS does not take incident reports seriously and lack of follow up on first incident resulting in diminished trust for AGS.
- f. Fear of intimidation by AGS and/or previous negative experience with police (either in Ireland or in country of origin).
- g. Fear of being subject to re-victimisation by offender.
- h. Financial and/or social dependence on the spouse/partner (offender) and lack of support networks (including family and friends) in Ireland.<sup>28</sup>
- i. Fear of stigma and shame within their community as 'their secret would be out.'
- j. Fear of deportation if one's visa is dependent on the abusive spouse/partner and that any report to AGS might negatively affect the victims'/survivors' citizenship application.

## 4.2 SERVICE PROVIDERS

Interview participants from this cohort pointed out that progress on DSGBV is visible, notably in terms of increased reporting of incidents, for Irish victims/survivors, but not for migrant victims/survivors. They also reported coercive control to be on the rise, although this form of violence continues to be generally misunderstood, undetected and not/under-reported across communities in Ireland.

The level of professionalism, approach and support provided to DSGBV victims/survivors by AGS is perceived to vary across Garda stations in Ireland, with some very good examples and others less so. As it can be expected, CP officers (CPOs) seem to enjoy a higher level of respect, trust and familiarity with local communities than the rest of AGS.

Diversity representation in the public sector and AGS is very important for all service providers (who are all migrants to Ireland themselves), as this would also reflect the growing ethnic diversity in Ireland's population. As one respondent noted: 'Just walking into a place and seeing people like you makes you feel more comfortable.' However, service providers' opinions differ as to what diversity representation should look like with some noting that diversity should be better reflected across the whole AGS organisation; whereas others would prioritise victims/survivors' interaction with AGS officers from diverse backgrounds at reporting or investigating stages. There is an acknowledgement that being from a diverse background does not necessarily mean knowing how to treat a migrant victim/survivor of DSGBV in a sensitive and respectful manner. Cultural and religious knowledge of migrant communities helps in dealing with victims/survivors but is not sufficient to ensure a survivor-centred approach (SCA).

Service providers recognise the importance for victims/survivors to be able to speak good English to explain one's situation and access DSGBV services. A key issue that was highlighted was the lack of police role models in migrant communities in terms of elders/relatives who are former members of AGS, as is the case for people in Irish communities. It was also reported that many female DSGBV service users/clients would more willingly report DSGBV incidents to a female officer. However, service providers agree that the priority in responding to DSGBV incidents is AGS efficiency and speed over cultural sensitivities.

<sup>27</sup> The barriers listed were the most commonly mentioned by participants in this cohort.

<sup>28</sup> This is especially relevant for victims/survivors who came over to Ireland as newly married – and/or through arranged marriages - to a foreign national holding a study/work permit in Ireland. These victims/survivors seem to come from a lower socio-economic background, speak limited or no English, and rely almost/completely on their spouse for living in Ireland.

An interviewee shed light on cases of DSGBV in direct provision centres, which are mostly sexual and financial in nature. The respondent worried that response to DSGBV violence in such centres is generally inadequate and not coordinated with AGS. As the respondent noted, 'We need to get to the point where we are addressing this [situation], before people are actually victimised.' This point speaks about the need for targeted and tailored interventions for the prevention of DSGBV in direct provision centres, inter alia.

There were differences in opinions on whether safe houses and DV shelters/refuges should be segregated on ethnic, religious or cultural grounds. Some respondents explained that this would be beneficial to cater to the different needs (e.g. relating to religious or dietary requirements) of especially stigmatised and marginalised migrant/minority communities who can become re-traumatised/ discriminated against by the staff and the general population in shelters. Concurring with this position, another respondent highlighted the harassment suffered by children of African descent and Muslims in orphanages and foster care centres. Other respondents, however, noted that segregation in shelters would not be conducive to empowering victims/survivors and increasing inter-cultural understanding and integration in the long run.

One interviewee argued that 90% of international protection applicants that are subject to DSGBV would like to report, but are afraid of reporting to AGS. As the interviewee put it, if a victim/survivor is dependent on someone else's visa, '[h]e (the offender) has the perfect tool to keep her in check.'

Women's Aid, the Immigrant Council of Ireland and Ruhama were identified as good quality service providers, as evaluated by respondents working for other agencies/organisations.

#### Barriers/difficulties in reporting DSGBV incidents from service providers' perspective<sup>29</sup>

- a. Lack of access to or knowledge of support services for DSGBV victims/survivors.
- b. Language barriers for DSGBV victims/survivors in reporting incidents & accessing services.
- c. Fear of deportation if immigration/visa status is linked to the spouse's immigration status and that any report to AGS might negatively affect victims/survivors' citizenship application.
- d. Financial dependence on the (often male) breadwinner in migrant communities;<sup>30</sup>
- e. Fear of losing custody of children.
- f. Negative experience of DV shelters.<sup>31</sup>
- g. Negative perception of AGS as culturally unaware (e.g. how they enter a 'Muslim house'.)
- h. Experience/perception of a delayed response by doctors, police and/or the judicial system (i.e. slow proceedings in court).
- i. Unavailability of/or shortage of (especially in-person and same gender) interpreters to cater to different parts of the country.
- j. Manipulation of cultural and religious norms to enforce control over women in migrant communities<sup>32</sup> and cultural rationalisations of violence by victims/survivors resulting in victim-blaming/self-blaming.
- k. Difficulty in ensuring that people understand what economic or financial abuse is in Irish law, as culturally/legally this may not easily translate.
- l. Housing crisis resulting in insufficient accommodation across the country.
- m. Reluctance among male victims to come forward for fear of shame, stigma and ingrained gender roles in communities and society at large.
- n. Fear of perpetuating existing negative cultural stereotypes on specific communities.

## 4.3 AN GARDA SÍOCHÁNA

Community policing seems to be an under-staffed and under-funded area of policing, whereas there is a wide consensus amongst research participants from all three cohorts that this should not be the case. For marginalised,

<sup>29</sup> The barriers/difficulties listed were the most commonly mentioned by participants in this cohort.

<sup>30</sup> This seems to affect especially women who have disabilities and mothers of young children.

<sup>31</sup> For instance, it was reported that they are too full and staff are biased/discriminatory against specific groups of migrants such as Muslims.

<sup>32</sup> This includes control by in-laws and extended families on how migrant women behave within marital relations.

minority and migrant communities, CPOs are the face of AGS on the ground and those who are most trusted at the local level. As a respondent noted: 'We try to gain trust and allay fears that we do take incidents seriously.' Hence, CPOs should be enabled and empowered to play an even larger role in establishing a good rapport with migrant communities, act as a bridge between the latter and the rest of AGS and wider society and be intermediaries in diffusing tensions and further inter-community and inter-cultural understanding. This is especially important amidst a rise in anti-migrant sentiment and spread of othering discourses in Irish society. A larger investment in funding/staffing/education and prioritisation of community policing, in turn, would increase trust and legitimacy of AGS vis-à-vis marginalised groups (including the Traveller and Roma Communities); contribute to higher reporting rates of DSGBV and hate incidents; and build a more inclusive, cohesive and resilient society.

The role of Garda Diversity Officers (GDO) (previously known as 'Ethnic Liaison Officer' [ELO]) is described as an additional duty or 'add-on' to existing policing functions; often times, this GDO role is taken up by CPOs. The GDO role does not come with mandatory or standardised training attached to it. Respondents positively recalled a past Garda Diversity Course in Athlone, which was described as a gathering of representatives from different communities in Ireland and a forum for mutual exchange. Whilst AGS respondents believe that additional and regular trainings in cultural awareness, mediation and unconscious bias would be beneficial to perform the duties of both a CPO and a GDO, some of them stressed that the most important learning comes from actual practice. This means working closely with/in (migrant) communities having regular and more informal exchanges with them. As a respondent explained: 'The only way we are learning is when we meet people themselves.' This engagement from AGS with migrant communities is especially beneficial from an early age, when migrant children are in school for instance, so that they can grow up with a more positive and accessible image of AGS. As a respondent noted:

[i]f communities can see that we take them seriously and that, while we may not be from the same background, we can empathise and understand the problem they are dealing with, and we will deal with this no differently to how we would deal with someone from Ireland, I think that's probably the only way it's going to change and I think that's going to take a long time. I don't see that being something that's fixed anytime soon.

Some respondents stressed that diversity in AGS representation is not a panacea to address problems and grievances in migrant communities; and indeed it might be counter-productive if it is the only step taken to address the structural and cultural barriers to integrate and report DSGBV and hate incidents affecting members of the migrant community.

Another area where respondents seem in agreement is the fact that the first exchange that the population – especially for victims/survivors of DSGBV and foreign nationals/migrants – has with AGS is the most important. If this is unsatisfactory for a variety of reasons - but especially if the injured party does not feel they are taken seriously and treated with respect - any following interaction will be tainted by this initial negative experience. Showing empathy, openness and respect vis-à-vis victims/survivors of DSGBV is crucial.

Respondents acknowledged the high quality of professionalism in the Garda National Protective Services Bureau and related detectives but they regret that, due to lack of reporting/under-reporting, most victims/survivors will never access these services. While each Garda station seems to have at least a few members trained in level-3 interviewing techniques, only victims/survivors of serious crime who decide to report would be exposed to this high standard within AGS. More education and training on a survivor-centred approach and trauma-informed techniques would be beneficial for AGS members, and especially those in CP and performing diversity-related duties.

While the reporting rates of DSGBV in Irish communities is increasing and progress has been made, AGS respondents confirmed what was noted by other research participants. Namely, migrant victims/survivors of DSGBV, for the most part, do not (ever) come forward to report incidents.

In terms of human trafficking, a survivor-centred approach would mean identifying the needs of victims/survivors so as to remove the trafficker from the picture. In the words of a respondent, this approach would mean:

Firstly identifying the needs [in terms of] housing, childcare, health, education, communication, welfare of their families in other areas, if they are in in danger. It means to meet all those needs first, and you eliminate the need or the niche that a trafficker will insert themselves into.

Only after this first needs identification can, and should, AGS focus on the investigations. A SCA means empowering a victim to become a survivor and, later on, possibly, a strong witness in a trial. As another respondent highlighted:

They are a victim whether they are meant to be in this country or not. They are still a victim. And so I would like to think that it is a rare thing that's asked [about their immigration status] when you're a victim of crime.'

As one respondent explained, '[i]t's the criminal that is the one who should be on trial not the victim. (...)The system is in favour of the person who is the suspect, the perpetrator, even when there's overwhelming evidence; and the courts put the victims and the injured parties through unnecessary trauma (...). The system tests the victim instead of testing the evidence.'

AGS respondents highlighted the importance of civil society in making Irish society more inclusive, less tolerant of violent behaviour and contributing to third party reporting and self-reporting of incidents.

#### Barriers to addressing DSGBV in migrant communities and human trafficking from AGS's perspectives<sup>33</sup>

- a. Victims/survivors' lack of trust in police in general (due to prior negative experiences in countries of origin).
- b. Victims/survivors' lack of trust in AGS if members of a marginalised community (e.g. LGBTI) perceive a previous incident was not taken seriously or appropriately.
- c. Victims/survivors' difficulties in communication, language knowledge, and low educational attainment.<sup>34</sup>
- d. Perceived lack of empathy by AGS vis-à-vis victims/survivors of DSGBV, especially in cases of coercive control.
- e. Lack of prioritisation of and investment in community policing by the State.
- f. Judicial system and courts not being victim-friendly (incl. lengthy duration of court proceedings).
- g. Fear of repercussions against the reporting victim/survivor, rather than for the offender.
- h. Victims/survivors' of bringing stigma, shame to family/community and/or betrayal of one's own marginalised community if reporting DSGBV to AGS.<sup>35</sup>
- i. Victims/survivors' fear of deportation if they report an incident or that their asylum or citizenship application will be negatively affected.
- j. Victims/survivors of DSGBV's lack of financial independence and access to support networks, housing and healthcare, and full reliance on their abuser/s (e.g. especially in cases of human trafficking).
- k. Perception/experience by victims/survivors of AGS intolerance towards them (incl. racism, misogyny, Islamophobia).
- l. Lack of understanding by AGS of intersecting factors such as gender, religion and cultural norms – referred to as 'the intersectionality of exclusion' by a participant - and how they play a role in someone's decision to report.

<sup>33</sup> The barriers listed were the most commonly mentioned by participants in this cohort.

<sup>34</sup> These include: the gendered nature of language usage; using an interpreter makes an interview very formal; shortage of specialised female interpreters; issues regarding confidentiality and vetting of interpreters; lack of continuity in interpretation services.

<sup>35</sup> See, in the previous section, fear of perpetuating negative stereotypes on one's community.



## 5. RECOMMENDATIONS<sup>36</sup>

	Victims/survivors (V/S)	DSGBV service providers	AGS
Prevention of DSGBV and human trafficking			<p>1. Strengthen relations with embassies/consulates (from where most migrants and V/S of DSGBV and trafficking come from) and exchange regular information on DSGBV &amp; trafficking laws and policies in Ireland for newcomers.</p> <p><b>2. Produce infographics, audio and video materials on what constitutes DSGBV (with a focus on coercive control) in different languages/sign language and formats.</b></p> <p><b>3. Place DSGBV and trafficking-related infographics and useful numbers to call at any ports of entry into Ireland.</b></p> <p>4. Strengthen coordination between the Garda Diversity and Integration Unit and the Garda National Protective Service Bureau, both at the national and local levels (through CPOs/GDOs and protective services detectives).</p>

	Victims/survivors (V/S)	DSGBV service providers	AGS
Awareness raising on DSGBV laws in force and relevant policies in Ireland	<p><b>1. Provide information on DSGBV supports available and reporting modalities in user-friendly formats and different languages in all ports of entry into the country (as well as GP surgeries, hospitals, community centres, places of worship, sport venues, supermarkets);</b></p> <p><b>2. Facilitate safe spaces where migrant women can discuss family-related matters and avail of family mediation services, if appropriate;</b></p> <p><b>3. Establish induction/information sessions on DSGBV laws and policies for all new asylum-seekers, people entering direct provision centres and people arriving on spouse dependent visas.</b></p>	<p>1. Include DSGBV-related questions on GP and hospital questionnaires;</p> <p><b>2. Provide information/trainings to asylum-seekers, direct provision members, potential V/S etc. on how to report and collect evidence on DSGBV, if appropriate;</b></p> <p>3. Engage with and educate potential/actual perpetrators of DSGBV on laws and policies applicable in Ireland.</p>	

<sup>36</sup> The recommendations are divided by thematic area (on the left) and who made the recommendation (on the top). When similar/same recommendations were made by various cohorts, they are listed only once and emboldened for ease of reference.

	Victims/survivors (V/S)	DSGBV service providers	AGS
Survivor-centred approach (SCA)	<p><b>1. Treat V/S with compassion and respect to avoid further victimisation/re-traumatisation.</b></p> <p><b>2. Maintain the same AGS liaison/case officer and same interpreter (if appropriate) throughout the case and ensure regular follow-up with V/S.</b></p> <p><b>3. Offer possibility of reporting DSGBV incident to AGS officer (and interpreter) of same gender and/or cultural background.</b></p> <p><b>4. Introduce online reporting for DSGBV incidents.</b></p> <p><b>5. If V/S are placed in homeless accommodation, provide information on DSGBV supports available as soon as they arrive.</b></p>	<p><b>1. Never ask about the immigration status of someone reporting an incident of DSGBV.</b></p> <p>2. Provide an accompaniment service to Garda stations and courts for migrants who want to report an incident of DSGBV.</p>	<p><b>1. Focus on the protection of life of V/S and their immediate/practical needs in terms of housing, healthcare, childcare (before any investigation and prosecution-related steps).</b></p> <p>2. Develop a holistic system to reintegrate V/S of DSGBV and trafficking in society so they are not re-victimised or lest they become offenders (especially in trafficking).</p>
Migrant community engagement & empowerment	<p><b>1. Provide functional English language classes upon arrival, especially for women coming on spouse dependent visas.</b></p> <p><b>2. Hold information sessions on DSGBV laws and policies with female community leaders, cultural ambassadors, religious leaders.</b></p>	<p>1. Carry out migrant community-needs assessments to better inform community policing and response.</p> <p><b>2. Establish peer/support networks for new arrivals/migrants/DSGBV victims/survivors.</b></p> <p><b>3. Include mandatory educational sessions on DSGBV for all asylum-seekers and citizenship applicants.</b></p>	<p>1. Introduce regular/bi-monthly meetings between AGS and religious and community leaders to foster inter-cultural understanding and improve informal relations.</p>

	Victims/survivors (V/S)	DSGBV service providers	AGS
Staffing and training		<p>1. Establish Garda Diversity Units outside of Dublin and increase community policing presence across Ireland.</p> <p>2. Improve a just and inclusive recruitment of diversity candidates in AGS.</p> <p><b>3. Introduce mandatory training on cultural understanding and unconscious bias for all DV shelter and homeless accommodation staff and DSGBV service providers.</b></p>	<p>1. Increase numbers of AGS working on human trafficking, labour exploitation and community policing.</p> <p><b>2. Allocate more GDOs in area with a heavy migrant population.</b></p> <p>3. Introduce regular &amp; standardised (mandatory) training on SCA, trauma-informed and diversity-related and skills and techniques for all CPOs.</p>
Migration policy and visa regime		<p>1. Consider granting an independent temporary residence permit to people reporting a DSGBV incident (similarly to how is done for V/S of trafficking).</p>	

## 6. CONCLUSIONS

The report contextualised the relevant legal and policy frameworks to address domestic, sexual and gender-based violence in Ireland, with a focus on its migrant communities. Through a thematic analysis of 16 semi-structured interviews with three cohorts of respondents (victims/survivors, DSGBV service providers and An Garda Síochána), the main research findings were identified and presented. Key recommendations, including practical action points, were listed. Annexes informing the research are also included at the end of the report.

Amidst an increasingly diverse population in Ireland, and against a backdrop of underreporting of DSGBV to AGS in the country, the three cohorts agreed on a number of key points to prevent, address and improve the response of authorities and service providers to incidents of DSGBV.

While progress is being reported on rates of DSGBV by Irish victims/survivors, migrant victims/survivors of DSGBV tend to (never or seldom) report this type of incidents. This speaks to the complex nature of DSGBV in communities that are already marginalised, isolated and stigmatised in intersecting ways. Entrenched gender roles and norms in both society and 'othered' communities play a key role in reducing the reach and impact of human rights, equality and non-discrimination provisions of the lived experiences of women and gender non-conforming others from migrant backgrounds.

Limited communication/language skills coupled with low or in-existent awareness of and access to DSGBV-related support services and/or relevant remedies in Ireland heighten the vulnerability of migrants (especially newly arrived and from a low socio-economic background) to DSGBV. The full reliance of, predominantly female, migrants on abusive partners, networks and communities for social, financial, logistical, linguistic and legal supports appears a key barrier to reporting incidents of DSGBV and human trafficking to AGS.<sup>37</sup> These difficulties in and barriers to reporting are compounded by victims/survivors' fear of deportation from Ireland, further victimisation for themselves and their children, a general lack of trust in law enforcement authorities and in the adequacy of their responses.

A number of lessons drawn from either surviving an experience of violence, providing DSGBV-related services, or working in Community Policing roles, among others, is presented in the form of various recommendations on how the current situation of under/non reporting of DSGBV in migrant communities can be addressed and ameliorated.

From these recommendations, it is clear that An Garda Síochána can only prevent and adequately address DSGBV in migrant communities, if it has previously established a close and positive relationship with these groups through a capillary presence on the ground. This would be best instantiated by a reinforced presence, in the districts most heavily populated by immigrants across Ireland, of CPOs with a specific skillset (including intercultural competencies, awareness of unconscious bias, communicating with different groups, gender-sensitive, trauma- and survivor-centred techniques and approaches etc.).

AGS can improve its grounding and legitimacy at the local level by fostering familiarity and trust through an increased proximity with migrant communities. This can be achieved via informal and regular exchanges (including through leisure activities, sport events, information sessions) and through the identification of key gatekeepers who are empowered to represent their groups and liaise with AGS. Special attention to female community leaders, religious leaders and minority representatives (including members of the LGBTI community) should be made. As a result, this more robust rooting at the local level would lay the bases for a more open dialogue and frank exchange with migrant communities and their members on the reasons for and incidents and patterns of DSGBV with a view to addressing them through a survivor-centred approach and ultimately to eradicating them.

<sup>37</sup> This barrier seems to be especially pronounced for female migrants with disabilities.

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## ANNEX I: RESEARCH QUESTIONS FOR AGS MEMBERS

### Introduction and relationship with migrant communities

1. Thank you for taking the time to speak with me today. Can you please confirm that you have read the research info sheet and participant consent form and you are happy to go ahead with this interview, which I will keep confidential and anonymise?
2. What is your function/main role within An Garda Síochána (AGS)?
3. How long have you been in this role for?
4. Could you tell me briefly about your experience working with/in migrant communities in Ireland?
5. Which community/ethnic group do you identify with?
6. Do you think your own profile helps/hinders your work with migrant communities?
7. What are the key challenges that you encounter working with migrant communities?
8. What type of incidents do you respond to in migrant communities in Ireland?
9. What reasons do you think there are for this?

### Investigation & Prosecution on DSGBV

10. In light of the existing legislation on DSGBV in Ireland and the third national strategy on DSGBV, have you noticed a change in the situation of victims of DSGBV and trafficking?
11. Since the end of Covid-19, have you noticed a change in reporting rates relating to DSGBV?
12. If you attended at an DSGBV incident, how would you record it?
13. What are the main obstacles for investigating DSGBV incidents in migrant communities in Ireland in your opinion?
14. What are the main obstacles for prosecuting a DSGBV incident in migrant communities in Ireland in your opinion?
15. Does AGS offer any special training (like trauma-informed techniques or the survivor-centred approach) to its members to prevent or address DSGBV in migrant communities or in general?
16. How would you describe the availability of specialised interpreters and/or specialised Garda members to undertake interviews with victims/survivors of DSGBV incidents?
17. Does this availability decrease once outside the main Dublin area?
18. Have you ever approached/accessed a Garda National Protective Services Bureau (GNPSB)?

### Recommendations/evaluations (assessment based on their experience)

19. Are you satisfied that legislation, policies and strategy in the area of DSGBV have sufficient a focus on migrant communities? What could be improved?
20. What would a survivor-centred approach in addressing DSGBV incidents look like in your view?
21. How can civil society organisations help Ireland and AGS to address and adequately respond to incidents of DSGBV in your view?
22. Do you have any questions for me?

## ANNEX II: RESEARCH QUESTIONS FOR VICTIMS/SURVIVORS OF DSGBV IN IRELAND

### Informed consent

- Thank you for participating in this interview today. I appreciate and value your time and efforts in speaking with me.
- Could you please confirm that you have read (or that these forms were read to you) and understood both the information sheet and participant consent forms and you want to go ahead with the interview?
- Do you have any questions before we start?
- Do you feel comfortable and safe speaking to me today?
- Is there anything I can do from the start to make you feel more comfortable?
- May I record this interview, which I will keep confidential and anonymise after?

### Introductory questions

1. How long have you been living in Ireland? And at your current address?
2. Do you feel integrated into Irish society?
3. Which community do you feel that you belong to?

### Community and community-policing

4. Do you feel safe in the community where you live?
5. What do you think about the AGS compared to the police where you are from?
6. Do you trust An Garda Síochána (AGS)? If not, why not?
7. Have you ever contacted AGS in relation to any incident or crime?
8. If you have reported an incident, what did the AGS officer profile look like in terms of age, sex/gender, languages spoken, ethnicity etc.?
9. Is it important for you that the AGS is diverse in its composition?
10. Would you feel more comfortable reporting an incident to someone who spoke your same language, shared your same ethnic background or country of origin? Why is that?

### DSGBV

11. For your reference, 'Data shows that since the outbreak of COVID-19, there was an increase in calls to domestic violence helplines in many countries. In Ireland, figures showed that the Gardaí received approximately 43,000 calls regarding domestic abuse incidents in 2020, which was a 16% increase on 2019 figures (Tusla, 2022).' Do you think DSGBV in your community has worsened as a result of Covid?
12. Are you aware of/familiar with the media campaign (2019-2021) on sexual harassment and sexual violence entitled 'No Excuses'? You can show videos here: 'Does Ireland have a problem? - YouTube ; Let's stop excusing - YouTube.'
13. As described by the Irish Government, DSGBV includes instances of: domestic violence (which can include physical, psychological, emotional, and financial abuse and sexual violence), rape and sexual assault, prostitution and trafficking, female genital mutilation, forced marriage, sexual harassment, stalking and related acts, forced abortion and forced sterilisation together with new and emerging forms of DSGBV e.g. cyber violence, sharing of intimate images without your consent etc. Based on this definition, are you at risk of DSGBV and/

or have you experienced or witnessed an incident of DSGBV?

14. Is the DSGBV ongoing or has it stopped?
15. Are you safe now?
16. Who do you think is more vulnerable to DSGBV in your community? Why?
17. What do you think causes DSGBV in your community and in society generally?
18. What would you recommend in order to prevent DSGBV at the community level?
19. Are there organisations that you trust working in the area of DSGBV?
20. What does a survivor-centred approach mean to you?
21. What does intersectionality mean to you in your experience of DSGBV?

### Reporting and addressing an incident of DSGBV

22. If you have experienced or witnessed DSGBV, did you report this incident?
23. If so, when and how? To family, friends, community leaders, AGS? Someone specific/a specific unit within AGS?
24. Did they help you and refer you/your family to specialised support services?
25. Did you ever access a shelter for victims/survivors of DSGBV? Was it easy and quick to do that? Could your family members come with you?
26. If you have never reported an incident of DSGBV to AGS but one were to occur, would you feel comfortable and safe reporting it? Who would you report it to?
27. What are the main obstacles if any in reporting a DSGBV incident to AGS?
28. Did/would your immigration status play a factor in your decision to report/not report an incident of DSGBV? Why is that?
29. What would you recommend in terms of procedures to improve reporting of DSGBV?
30. What could AGS do to assist you and others in your community in reporting it?
31. Do you have any questions for me? Is there anything I can do to assist you in what you shared with me today?

## ANNEX III: COMPLAINT MECHANISMS, COUNSELLING AND OTHER SUPPORT SERVICES FOR DSGBV VICTIMS/SURVIVORS AND MIGRANTS IN IRELAND

### 1. Formal complaints regarding An Garda Síochána : Garda Síochána Ombudsman Commission (GSOC)

This can be done online: Submit a complaint - Garda Ombudsman (this can be done through an online form, email or phone).

### 2. Counselling and other support services for DSGBV victims/survivors:

**Dublin Rape Crisis Centre:** Counselling & therapy | Dublin Rape Crisis Centre (drcc.ie) . They offer therapy and counselling with all services accessible through their hotline; they also offer court accompaniment and referrals to other services.

**Cork Sexual Violence Centre:** services | Sexual Violence Cent also offer counselling and other support services.

**Offaly Domestic Violence Support Services:** Domestic Violence (odvss.ie) and also convene a specific ethnic minority DSGBV group (in which IOM takes part).

### 3. Migrant focused organisations:

**Akidwa:** Victims of Crime Support - Akidwa offer counselling and therapy to victims of crime, particularly DSGBV and also court accompaniment, referrals etc.

**Immigrant Council of Ireland:** Community Navigators | Immigrant Council of Ireland Community navigator programme to assist migrant victims of DSGBV.

**Doras:** Migrant Victim Support - Doras Migrant victim support including victims of DSGBV (They also focus on trafficking).

**Amal Women's Association:** Women - Amal Women's Association (amalwomenirl.com) primarily targeted at Muslim Women and have a specific group and focus on DSGBV.

**Ruhama:** Ruhama Services to victims of trafficking and organised prostitution.

## ANNEX IV : INFORMATION SHEET AND INTERVIEW CONSENT FORM

Title of study: Research for Protect II Project

Please ensure you have read (or have read to you) the project information below before signing this consent form. The project information provides you with information about the study and explains what involvement in the study means for you.

### 1. NAME AND CONTACT DETAILS OF RESEARCH TEAM

Main contact:	
Dr Silvia Gagliardi, Principal Investigator/ IOM Consultant	<a href="mailto:sgagliardi@iom.int">sgagliardi@iom.int</a> +353 85 867 7276
Ms Tegwyn Stephenson National Programme Officer, IOM Ireland	<a href="mailto:tstephenson@iom.int">tstephenson@iom.int</a>

### 2. ABOUT THE PROJECT

The PROTECT II project is funded by the Irish Department of Justice and aims to assist vulnerable migrants, particularly victims of trafficking and domestic, sexual and gender-based violence (DSGBV). It contains a number of elements and activities relating to cultural mediation and cultural competency training, counter-trafficking and community policing. The latter strand relates primarily to enhancing awareness among migrant communities of the work of An Garda Síochána (AGS); improving levels of trust to encourage the reporting of incidents of DSGBV and to enhance responses to such incidents.

The research for the PROTECT II project will examine, via semi-structured interviews, the perception of/by AGS among/of migrant communities in Ireland and the levels of mutual trust between the two groups. The results of the research will be used to develop operating procedures to enhance the response of AGS to incidents of DSGBV among pre-identified migrant communities.

### 3. YOUR PARTICIPATION IN THIS RESEARCH

You have been invited to participate in a semi-structured interview for this study.

Your participation in this project is entirely voluntary. It is up to you to decide whether or not to take part. If you decide to take part, you are still free to withdraw at any time and without giving a reason. This would not affect your legal rights.

You are free to decide whether or not to respond to any question asked in the interview. You will not be pressured or required to respond, or to respond in a certain way.

Participating in this study may not benefit you directly, but it will be used to advocate for better responses to help address DSGBV.

If you have any questions or concerns, you can contact any member of the research team (contact details included above).

#### 4. INFORMED CONSENT FORM

Please respond to the following statements by checking the yes/no boxes

##### 4.1. Study information provided

<input type="checkbox"/> Yes <input type="checkbox"/> No	1. I confirm that the purpose of the study, and of this interview, have been explained to me and that I have understood.
<input type="checkbox"/> Yes <input type="checkbox"/> No	2. I confirm that I have read (or had read to me) and understood the interview participant information sheet for this study.
<input type="checkbox"/> Yes <input type="checkbox"/> No	3. I have had the opportunity to ask questions and these questions have been answered to my satisfaction.

##### 4.2. Voluntary participation

<input type="checkbox"/> Yes <input type="checkbox"/> No	4. I understand that my participation in this study is voluntary and that I am free to withdraw from the study at any time, without giving a reason and without consequence.
<input type="checkbox"/> Yes <input type="checkbox"/> No	I understand that there are no known risks or hazards associated with participating in this study.

##### 4.3. Data and recording

<input type="checkbox"/> Yes <input type="checkbox"/> No	6. I consent to a secure online recording of my participation, and for the audio file to be transcribed and used within the study.
<input type="checkbox"/> Yes <input type="checkbox"/> No	7. I consent to my data being transcribed, and understand that I will be given the opportunity to review and amend this transcript.
<input type="checkbox"/> Yes <input type="checkbox"/> No	8. I understand that my data will be deleted by IOM Ireland if I decide to withdraw within 14 days from when this consent form was signed. I understand that if I withdraw from the study after that date that my data cannot be entirely deleted as it will have already been analysed and included in project outputs.

#### 4.4. Anonymity

A- If you wish to be anonymised, complete column A below	B- If you wish to be identified, complete column B below
<input type="checkbox"/> Yes <input type="checkbox"/> No 9A. I wish to be referred to anonymously in written outputs and other forms of research dissemination.	<input type="checkbox"/> Yes <input type="checkbox"/> No 9B. I consent to be identified by name and relevant details in written outputs and other forms of research dissemination.
<input type="checkbox"/> Yes <input type="checkbox"/> No 10A. I understand that identifying factors (e.g. my name) will be removed from any presentation of my data, including research dissemination and policy-related activities with non-academic partners.	<input type="checkbox"/> Yes <input type="checkbox"/> No 10B. I understand that identifying factors (e.g. my name) may be included in presentations of my data, including research dissemination and policy-related activities with non-academic partners.
<input type="checkbox"/> Yes <input type="checkbox"/> No 11A. I understand that there will not be any connection between the personal information and the data.	<input type="checkbox"/> Yes <input type="checkbox"/> No 11B. I understand that there will not be any connection between personal information provided outside the interview and the data, and that personal information provided in the interview will be included in the data.
<input type="checkbox"/> Yes <input type="checkbox"/> No 12A. I understand that I am able to review and revise the anonymous description of me used in the data and publications.	<input type="checkbox"/> Yes <input type="checkbox"/> No 12B. I understand that I will be able to review and revise references made to me and my data in planned publications that identify me.
<input type="checkbox"/> Yes <input type="checkbox"/> No 13A. I understand that I am able to request to be identified at any point prior to 30 May 2023, with details identifying me being included in project outputs and data prior to being made public.	<input type="checkbox"/> Yes <input type="checkbox"/> No 13B. I understand that I am able to request anonymisation at any point prior to 30 May 2023, and that all details identifying me will be removed from project outputs and data prior to being made public.
<input type="checkbox"/> Yes <input type="checkbox"/> No 14A. I understand that changes requested after 30 May 2023 may not be represented in project outputs, but that these changes will be implemented on stored data and future outputs.	<input type="checkbox"/> Yes <input type="checkbox"/> No 14B. I understand that changes requested after 30 May 2023 may not be represented in project outputs, but that these changes will be implemented on stored data and future outputs.

By signing this form, I agree that my responses, which I have given voluntarily, can be used for research and policy purposes.

Signed (interviewer):	Date:
Signed (participant):	Date:

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