

WE GO!

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WE GO!3

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From individual IPV empowerment to community activation

White Paper Greece



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LIST OF ACRONYMS

- ANKA**, Development Agency of Karditsa
- AVC**, Anti-Violence Center
- COINSEP**, Social Cooperative Enterprise
- DYPA**, Public Employment Agency
- ELSTAT**, Hellenic Statistical Authority
- ESPA**, Corporate Agreement on Regional Development
- INE**, Labour Institute
- IPV**, Intimate Partner Violence
- KDAP**, Center for Creative Employment of Children
- NEETs**, people that are “Not in Education, Employment or Training”
- NGO**, Non-Governmental Organization
- STEM**, Science, Technology, Engineering, and Mathematics
- YES**, Young Entrepreneurs Succeed
- WCK**, Women Center of Karditsa
- WE GO**, Women Economic Independence & Growth Opportunity

INTRODUCTION

In 2014 the European Fundamental Rights Agency published the first EU-wide survey on violence against women based on interviews with 42.000 women about their experiences of physical, sexual, and psychological violence, including incidents of intimate partner violence (IPV). The results were alarming: almost 1 in 4 women experienced violence in a relationship with a man. **It was a wake-up call.**

A year later, the Rights, Equality and Citizenship Programme funded **WE GO! Women Economic Independence & Growth Opportunity**, a project that allowed actors from seven EU countries to exchange know-how and practices on how to support the social and economic empowerment of women who survived violence. The project thrived especially on the crucial knowledge and expertise of Anti-Violence Centres (AVCs), which eventually led to the development of ad hoc recommendations.

WE GO! 2 - Building Economic Independence, the Way Out of IPV was built on the foundations laid by WE GO!1. Six organizations from Italy, Spain, Greece, and Bulgaria continued the work begun in 2015, namely 3 NGOs, 2 AVCs, and a research institute.

WE GO! 2 **aimed to broaden the use and deepen the impact of promising practices to foster the IPV survivors' economic empowerment**, through a better coordination among all relevant stakeholders, including the private sector. The project's specific objectives were:

- » To design and deliver transferable training sessions to strengthen the capacity of professionals to support the economic empowerment of IPV survivors, also through the establishment of local networks (Capacity Building).
- » To test scalable models of territorial multi-agency coordination to boost IPV survivors' employability via a local ecosystem capable to provide for workable solutions for IPV survivors (Networking).
- » To update knowledge on the economic empowerment of IPV survivors and share it through trainings for companies, events, and debates, involving a wide range of actors (Awareness Raising).

WE GO3 – From individual IPV empowerment to community activation was built on the main findings of the former WE GO! projects. It started in April 2021 and will end in March 2023.

The third edition of the project targets 4 countries and is implemented by 6 partners: ActionAid Italia-Italy, Istituto per la Ricerca Sociale (IRS)-Italy, Center for Sustainable Communities Development-Bulgaria, Rel.Azioni Positive Società Cooperativa Sociale-Italy, Fondation agir contre l' Exclusion (FACE)-France, Women's Center of Karditsa (WCK)-Greece.

WE GO3 aims to increase the local multi-agency networks' capacity to foster the IPV survivors' socio-economic independence through the design and adoption of gender-responsive labour policies.

The project's specific objectives are:

- » To strengthen AVCs and support services' capacity to influence institutional processes on socio-economic empowerment-related issues.
- » To increase the active participation of companies and the world of work at large in a multi-stakeholder local ecosystem to promote the economic independence of IPV survivors, also through decent

work opportunities and support. The consolidated networks of companies created in the previous projects will collaborate to extend the audience of organizations engaged in the IPV survivors' support.

- » To improve the policies that support IPV survivors to overcome barriers to their economic empowerment.
- » To advocate for the integration of policies addressing IPV survivors' support, socio-economic empowerment, and discrimination both at national and EU level.

AVCs, institutions, companies, trade unions, job placement and training centres will co-design and test supporting measures for IPV in the field of work, including the adaptation of work-life balance measures to IPV specific needs, the extension of anti-discrimination policies to GBV cases, the introduction of support measures for IPV searching for a job or employed in precarious jobs.

The genesis of the White Paper

Economic independence is the key to women's successful exit from situations of domestic violence: access to work and decent professional opportunities is of utmost importance. Indirect barriers to women's ability to find and maintain work include: manipulative behaviors by the abuser, difficulty reconciling work demands with the path out of violence, and balancing work needs with those of child rearing. Qualitative data showed that women with greater levels of social support, including support from employers (vocational training, help for women who have a job, sensitivity to family situations, flexible working hours), are more likely to keep their jobs.

The previous WeGo! Projects promoted the empowerment of female victims of domestic violence through separate support plans, but also shed light on the inadequate design and implementation of policies related to victim support, empowerment, employment and anti-discrimination; these inadequacies create systemic problems that hinder the achieving socio-economic independence of women. The first two editions of WEGO! contributed to the consolidation of the skills of the operators of the anti-violence centers to encourage the employment of women, to raise the awareness of companies on the issue of gender-based violence and above all to create a territorial network between the organizations/agents that, for various reasons, can promote women's economic independence. The current edition aims, through a participatory planning process, involving anti-violence centers, national, regional and local bodies, employment centers, employment offices, trade unions, companies and training centers, to create and/or strengthen and tools that favor integration and retention in the labor market of women who are or have been subjected to violence.

With this background and following on from the first and second editions of the WeGo! Programmes, the EU-funded **WE GO! 3 – From the individual empowerment of domestic violence women to social activation** has designed a guide for the development of a Policy Workshop Program to establish and execute a co-designed policy proposal and measures to support the economic independence of victims of domestic violence, step- step.

This guide shows how the Policy Workshop Program should be structured and organized, namely:

- » establishing the need and purpose of the Policy Laboratory
- » selection and invitation of participants

- » preparation of the Policy Workshop
- » planning the meetings
- » planning the program and assistance
- » implementation of the Policy Workshop
- » reporting of results
- » testing and analyzes of the selected measures
- » converging discussions to discuss the outcome, finalize the promotion plan and monitor and evaluate the program.

Specifically, the participatory planning process was implemented between the second semester of 2021 and the first semester of 2022 and was divided into:

- » collection of “women’s voices” data from the counseling centers to support women experiencing violence (20 AVCs and 1 NGO), which formed the basis for the following actions
- » 6 meetings aimed at highlighting the needs and critical points they identified:
 1. the women supported by the AVC of the Karditsa Women’s Center,
 2. counseling centers for women survivors of gender-based violence,
 3. individuals in the world of work and
 4. Institutions
- » 3-day policy workshop, to allow the aforementioned stakeholders to discuss the needs identified in the previous phase and identifies policies, or tools that can respond to them.

The needs

From the meetings aimed at highlighting the needs and critical issues identified by the women (3 focus groups with participation of 14 women), the anti-violence centers (1 workshop) identified the following needs:

- » none of the existing national measures holistically address the issue of socio-economic empowerment of female survivors of intimate partner violence
- » the most urgent issue - which needs to be addressed by central decision - is free vocational training for female IPV survivors
- » to highlight proposals and solutions, which will lead to stable and well-paid employment for women, as the currently available tools, such as the employer’s subsidy for hiring the unemployed, or training and internship vouchers, are not very effective
- » strengthening measures for work-life balance, example: babysitting at home – increasing the number of subsidized places in nurseries and kindergartens, restructuring the care program for the elderly

- » vocational training combined with childcare for women with children or vocational training according to their professional wishes
- » the recording per Municipality or Prefectures of services that can support female survivors and interconnection of services

Data from focus groups and workshops were presented and analyzed during the policy workshops. The topics that were examined in depth mainly concerned the ways of balance between family and work life and the ways of information or women's access to support services. From the discussion during the policy workshops it emerged that the current national policies and services for reconciling family and work life are satisfactory to a certain extent, but at the same time they are insufficient. And this is because they are policies aimed at the wider society, they are family-centered, they do not take into account the particularities of the needs of women who have suffered violence and they are mainly bottom-down and not bottom-up policies. Therefore, the need arose to strengthen measures to facilitate the balance between professional and family life and to combine the need to create "tools" that could support women in trying to leave a violent relationship, through decent and well-paid work.

The White Paper

This document contains information that was obtained through participatory processes with face-to-face or online meetings. Women IPV survivors, staff of Counseling Centers for the Support of Women Victims of Violence, representatives of organizations, businesses, training centers, local and regional public organizations took part in the participatory processes. The main objective of the document is to present the proposals co-designed during the policy workshops, proposals that take into account the existing needs at the local level, with bottom up actions, without the need for institutional interventions. The two main topics that were discussed were: the harmonization of family and work life as a crucial factor in entering the labor market and information about organizations and bodies at the local/regional level that provide support services.

The first chapter refers to the balance between family and professional life, the need to meet the care needs of young children or other depended as a key pillar for the successful re-entry in labour market for women IPV survivors; the existing institutional framework, the origin of the issue, the definition of the test, the test and its results are presented.

The second chapter examines the necessity of mapping the organizations and agencies at the local/regional level, which provide support services.

The conclusions contain some results from the local trial and some general remarks from the policy lab paths.

CHAPTER I

The work life balance and access to the Labour Market for Intimate Partner Violence Survivors

1.1 - Issue description

According to the **Article 22**, paragraph 1, of the Greek Constitution, “All employees, regardless of gender or any other categorical division, are entitled to equal payment for work of equal value provided.” **Law 3896/2010** validates the constitutional canon and constitutes the law which secures the equality of the two genders in work relationships – the law codified the preceding legislation in a unified text.

The advocacy of the principle of equal treatment and the fight against discrimination based on race, color, national or ethnic origin, lineage, religious or other beliefs, disability or chronic disease, age, marital or social status, sexual orientation, gender identity or characteristics, are stipulated by the Law [4443/2016](#).

With the Law **4604/2019**, for the advocacy of profound equality, its provisions concerning public and private life, and employment, are supplementary implemented along with any other current provision about gender equality and equal treatment.

The Law **4808/2021** sanctions **the Convention 190 of the International Labour Organization** for the extinction of violence and harassment in workplaces, the Convention 187 of the International Labour Organization for the Purview of Advocacy of Work Safety and Health and incorporates the 20th June of 2019 Guideline of the European Parliament and Council (2019/1158) for balance between professional and private life.

In Greece, the women’s access to the labour market is much lower than that of men, in comparison to the other EU countries. The low participation of women in the labour market is recognized as one of the main problems of the Greek economy in the Development Plan for the Greek Economy Report¹, with a strong effect on productivity, since the average educational level of those outside the labour market is high. The low participation of women is mainly due to the traditionally low participation and the early retirement of women, but also due to existing discrimination from employers, especially regarding women of reproductive age. The main obstacle to the labour market participation is the absence of quality childcare and elderly-care services. Also, there has been recorded a retardation to the professional development of women due to the low participation percentage to directorial positions. Gender-based segregation in the labour market is a reality for both women and men. In the educational,

¹ <https://government.gov.gr/schedio-anaptixis-gia-tin-elliniki-ikonomia>

medical and social work sectors, the employment percentages are 22,8% for women in contrast to just 8,2% for men.

Regarding the participation of women in the labor market in Greece, in 2018 the employment rate of women, in Full Employment Equivalent (FTE), amounted to 31,4%, while that of men reached 50%. Compared to the corresponding figures in 2015 (29,8% and 47,2%), although women's employment appears to be improving, the gender gap is increasing. Particularly significant is the gap in the percentage of FTE employment of women and men with a partner and children (50% vs. 79% respectively), where it reaches almost 30 percentage points (2018) and is greater than that observed among couples without children, in which the gender gap amounts to 6 percentage points.

The low participation of women in the labor market is recognized as one of the key problems of the Greek economy in the Report on the Development Plan for the Greek Economy, with a significant impact on productivity, as the average educational level of those outside the labor market is high. The low participation is due on the one hand to the chronically low participation and early retirement of women, on the other hand to the discrimination faced by employers, especially women of reproductive age. The main barrier to participation in the labor market is the absence of quality care services for children and the elderly. Characteristic is the percentage of women who state that caring for young children affects their work, with the percentage for women exceeding twice that of men (32,0% versus 14,6%) (ELSTAT,2018).

In particular, the interruption of the career to take care of children concerns mainly women (49,7% against 4,0% of men), while 10,9% of women did not work in order to take care of their children. In addition, there is a lag in the professional advancement of women through their low percentage of participation in managerial positions.

Gender segregation in the labor market is a reality for both women and men. Employment rates in the fields of education, human health and social work are 22.8% for women compared to only 8,2% for men. Regarding the wage gap, ELSTAT data for 2018, show that the difference in the average annual earnings of women is 2,6% lower than that of men.

The causes of low participation of women in the labor market are particularly linked to the lack of work-life balance services. There is also a high sectoral segregation of labor due to women's educational choices (low presence in STEM studies) leading to horizontal (sectoral) and vertical segregation of female employment, despite the fact that the level of education of women is significantly higher than that of men. Despite the adoption of some positive actions to directly or indirectly support the socio-economic empowerment of women survivors of violence, existing policies and measures do not adequately respond to the needs of women survivors of IPV. Rather than a comprehensive set of tools to address structural gender inequalities in the world of work, most existing measures are ad hoc and not designed to support the long-term economic empowerment of IPV survivors.

Furthermore, existing measures are often neither easily accessible nor responsive to the diverse needs of IPV survivors. Much more than men, women engage in entrepreneurship out of necessity and not because they consider business activity an opportunity. For 37,4% of all women's businesses, necessity was the main motivation. The obstacles faced by women entrepreneurs are related to environmental, family, educational, financial, social, political factors.

Brief description of the issue origin and evolution

Inadequate access to quality and affordable care services and the unequal distribution of care responsibilities between parents are two of the main reasons for gender inequality in the labor market.

In Greece, the harmonization of family and professional life is one of the issues that concern the whole of society and especially women, as they are the main recipients of discrimination from employers, especially women of reproductive age. A major barrier to participation in the labor market is the absence of quality care services for children and the elderly, tasks that traditionally “burden” women. Characteristic is the percentage of women who state that caring for young children affects their work, with the percentage for women exceeding twice that of men (32,0% versus 14,6%) (ELSTAT, 2018). In particular, the interruption of the career to take care of children concerns mainly women (49,7% against 4,0% of men), 10,9% of women did not work in order to take care of their children. In addition, there is a lag in the professional advancement of women through their low percentage of participation in managerial positions.

The protection of motherhood, paternity and family life is based on Law 3896/2010, while recently, with Law 4808/2021, Directive (EU) 2019/1158 on work-life balance for parents and children has been incorporated caregivers.

In the Report on the Development Plan for the Greek Economy, it is stated that the main obstacle for women to participate in the labor market is the absence of quality care services for children and the elderly. Characteristic is the percentage of women who state that caring for young children affects their work, with the percentage for women exceeding twice that of men (32,0% versus 14,6%) (ELSTAT, 2018). Career interruption to care for children mainly concerns women (49,7% versus 4.0% of men), while 10,9% of women did not work in order to care for their children.

The labor market entry process, parental burden and work-life balance are among the key needs of women survivors of IPV that are not yet addressed by existing measures. Existing support services, or welfare services, are particularly important for women who (because of the violence they have suffered) no longer have a support network of family and/or friends. Although there are some solutions, very often they are not known or are insufficient. In addition, the supply and quality of services are often characterized by territorial heterogeneity. The access of women survivors of IPV to existing measures is hindered by several factors such as: lack of resources, administrative barriers (income criterion), complex administrative and financial management, long duration of procedures; family-centered approach, fragmentation of services, discriminatory access criteria for immigrant women.

Caring for family members is largely (partially) covered by existing national policies and measures, but there are gaps, concerning on:

a) The care of **elderly members** - who live alone in a separate residence - there is at national level “Help at Home” program. Income criteria apply to participation in the program. Elderly people who live with their children are excluded from this program’s services.

b) Child Care

2 months – up to preschool age

Municipal and private kindergartens operate. To reserve a place in the Municipal kindergartens the procedure is following a priority of a lower family income and is clearly lower than the private kindergartens. Private Child Care Centers are paid monthly at a fairly high cost, which the average of the women IPV survivors cannot easily cover. Both types of childcare centers participate in the

national program “Reconciliation of family and working life”, which grants vouchers (placement value) to mothers for the childcare center of their choice. The criteria are income, depending on the family situation and in the last 10 years the places offered have not met the demand, with the result that a large number of children do not find a place in a daycare center. Most municipal and private daycare centers for children aged 2 months to pre-school only operate in the morning, until 3.30, leaving women who work rotating shifts, entrepreneurs without support and effectively reducing the chances of entering the labor market in a full-time position for women IPV survivors.

Preschool age until the end of Primary school

The national program “Reconciliation of family and professional life”, grants vouchers (placement values) for children in a Center for Creative Employment of Children of their choice, named KDAP, which is private or municipal. The criteria are income, depending on the family situation and in the last 10 years the places offered are not enough, so as with the daycare centers - the need is not adequately covered.

Gaps:

A. the coverage of childcare needs does not correspond to labor market hours, as in the private sector a business may operate in the morning and afternoon or in shifts

B. many women they can't find a place in a childcare center through a voucher. The “Neighborhood Babysitters” program enables home care for children from 2 months to 2.5 years old, it is being implemented as a pilot in some municipalities in Greece and the Municipality of Karditsa is not among them.

1.2 - Solution proposed

Through a participatory process involving AVCs and women survivors, national, regional and local institutions, actors of the world of work a number of inputs were gathered in order to establish and/or strengthen policies and tools that favor the integration and job retention of women who suffer or have suffered violence.

In the policy lab paths (workshops), **the first issue** that emerged and was discussed extensively was the issue of harmonizing/balancing family and work life, as a critical factor in returning to the labor market, or looking for work for female IPV survivors, who have to care at the same time young children, children or elderly members.

From all the groups of the workshops -AVCs, Institutions, World of work- the following stood out:

1. the need to cover the care needs of children or other dependent members as a key pillar for the successful entry or re-entry into the labor market of female IPV survivors
2. the fact that this need is not adequately covered by existing policies, as care for young children -2.5 months to 5 years old- is provided until 3 in the afternoon, not taking into account the afternoon working hours or the opening hours of a sole proprietorship
3. the need to have care structures for young children or elderly members and in the afternoon, in support of a flexible schedule on the part of the employers or the business.

A second issue that emerged is the need for individualized training and highlighting the abilities and skills of female IPV survivors, so that they can join the labor market in a targeted manner, or create their own business.

The aim of the local trial was to design care services for women with children, a design that will cover the existing care gaps at the local level initially, with the possibility of transferring methodology and know-how to other areas as well. The planning of the local trial involves bodies that have already signed the Local Cooperation Protocol, as well as the AVC of WCK. Specifically, female IPV survivors:

- » they will strengthen skills and abilities for entering the labor market,
- » they will receive support services for the creation of a business in a specific subject - childcare services
- » they will be trained and prepared regarding the creation of a Social Cooperative Enterprise - COINSEP
- » they will be trained - up to 50 hours - in the way of providing care services for children, elderly members or household works

Based on the two issues above, the local trial will attempt to:

- » to provide technical support to a group of women IPV survivors in the preparation and planning regarding the creation of a Social Cooperative Enterprise, as a means of integration into the labor market
- » to support the group of women in the creation of the business in question, with the aim of providing care services for family members (small children, elderly etc.), focusing also on the gap that exists at the given time: the provision of childcare services after 3 in the afternoon and the care of elderly members who cannot fit into national policies
- » to plan and implement training programs for the care of children, elderly members, or household. The trainings will address: 1. to refugee women aged 18-29 2. in women of the general population aged 18-29 years 3. in women over 30 years of age

Note: women survivors of domestic violence will participate in the three categories above

Actions of the pilot local trial

A. COINSEP

- » Cooperation between WCK – ANKA executives
- » Designation of trainers
- » Preparation and empowerment of women IPV survivors by staff of the AVC of the WCK
- » Invitation to participate in the training of other people (inclusion and avoidance of stigmatization of women)

- » Training schedule and team training meetings
- » Research
- » Legal and other procedures
- » Organization of a business plan
- » Provision of technical support for the preparation of undertaking business activity and the establishment of a Social Cooperative Enterprise

B. CARE SERVICES TRAINING

- » Design of a training program in the field of social care (care of children, elderly, household works). There will be 3 programs: 2 will be implemented by ANKA within the framework of YES project (target group young people aged 18-29 NEETs) and 1 by WCK with collaboration of ANKA or other organization.
- » Monitoring of actions.

Expected local trial results

1. Women benefiting in three directions: as trainees, as prospective entrepreneurs and as final recipients of services in order to facilitate their entry into the labor market. Female IPV survivors can participate in the local trial as:
 - » trained to undertake entrepreneurial action
 - » prospective cooperative members following the technical support for the creation and establishment of the social cooperative business
 - » trained in the three training programs that aim to form the “reservoir” of people who will be part of the employees of the social cooperative enterprise
 - » beneficiaries/recipients of the social care services provided by the social cooperative enterprise,
2. Connecting with local labor market and filling gaps in childcare services
3. Strengthening the skills of female IPV survivors to enter and remain in the labor market
4. Strengthening the collaborations between the bodies of the ecosystem of Karditsa
5. Positive impression and good practice for other areas of the Thessaly region, such as the Municipality of Elassona, a partner of the Territorial Protocol.

1.3 - The local trial

A. Training on the creation of a Social Cooperative Enterprise, with the object of providing child and elderly care services and household also

It is important to emphasize that during the trial we used ‘empowerment’ as an approach in order to have a feminist perspective on the process. Empowerment is a way in which women realize their place among others, their rights and the need to transform the situation and establish equality in human relations. It is a long process that is not necessarily easy and often predisposes external support to build a woman’s ability to think like a free person and make independent decisions, to manage to transform the inequalities of both sides to some extent. Women’s empowerment is also a realization of the right to ‘rights’ and gaining self-confidence to achieve one’s own goals. Women build their independence from others (abusive partners, family, power relations, etc.) when they gain self-confidence, a sense of security, and by protecting the right to be who they are. Through the empowerment process they begin to make decisions and gain control over their bodies. They understand that the main reason for using any kind of violence is the need to express power and control over the other person. The moment women understand the essence of the concept of empowerment, they can make the decision to escape from the abusive relationship, among other things, moving towards their financial independence.

Women trying to escape from abusive relationships often need extra support because they also face many practical problems such as childcare which limit their options. The need to meet the care needs of young children or other dependent as a key pillar for the successful re-entry in the labour market of women IPV survivors was the basic for the local trial. According to the plan, WCK staff prepared and empowered female survivors of IPV. Afterwards, the executives of WCK and ANKA met and planned the training program and the schedule of group meetings.

The group of women who attended training sessions on the steps to establish and run a Social Cooperative Enterprise was mixed, women survivors of IPV and women from the general population, based on the principle of inclusion, avoiding stigma and protecting personal data.

The scheme was small, maximum number of 9 women. 6 women were survivors of IPV, 2 women were vulnerable and 1 was from the general population. The women IPV survivors had completed the empowerment counseling cycle for exiting the abusive relationship and were in the process of job counseling. Their professional abilities and skills were complementary, in order to realize that even seemingly incompatible specialties can complement each other and lead to a business idea.

To develop how to establish and create a Social Cooperative Enterprise, the Business Model Canvas was chosen, as it is a visualized presentation of summary elements and data that describe the value, infrastructure, customers and financial data of a business or product. This approach offers very easily and quickly the key points in each of the above categories that we need to complete. In this way, even after filling in the boxes of the business model canvas, one can briefly “see” his data, the pluses and minuses of his data. Another reason for choosing it is that it allows for the creative use of brainstorming, so that none of the participants feel excluded, but encouraged and included in participatory discussion and decision-making processes.

17 collaborative learning sessions were held. Its duration was 27 hours and included the following sections:

1. Analysis of the advantages – disadvantages of salaried work in relation to Entrepreneurship. Entrepreneur’s skills, beneficiary skills

2. Analysis of the advantages - disadvantages of Social enterprises over private ones
3. Presentation of the forms of private enterprises (advantages – disadvantages of each form)
4. Presentation of the forms of social enterprises (specific characteristics of each form)
5. Selecting and working out a business idea using the Business Model Canvas tool
6. Presentation and article-by-article discussion of the model draft statutes of a Joint Venture
7. After the 4th session, participants were invited to propose various business ideas and then discuss with acquaintances and friends the feasibility and sustainability prospects of each. The result of this investigation was the selection of a specific idea entitled “Establishment and operation of a household care business”. Then, using the technique “Business model canvas” the idea was elaborated by analyzing 9 fields:
8. Value – Utility
9. Market segments
10. Distribution channels
11. Customer relationships
12. Revenue streams
13. Critical resources
14. Main activities
15. Critical partnerships
16. Cost structure

The beneficiaries were invited to explore each field by developing direct communication with respective “players” in the market: customers, suppliers of raw materials, suppliers of equipment, service providers that the company will need, prospective partners, etc.

The target group of COINSEP will consist of client and beneficiaries: clients who will pay for the services, beneficiaries (vulnerable group) to whom the services will be free.

The statutes were then worked out and scenarios for the next steps were discussed. The prevailing scenarios were:

1. The beneficiaries establish a Joint Venture with the technical support of the Women’s Center of Karditsa and ANKA
2. The Women’s Center of Karditsa organizes the provision of services to households in cooperation with the beneficiaries, and when they are trained in practice, they undertake - gradually - business activity until the complete substitution of the Women’s Center in this activity.

The women prefer the 2nd scenario, but this presents time obstacles for implementation by WCK, until the end of the WEGO3 programme

5 women completed the training, 4 IPV survivors, 1 from vulnerable social groups.

After the end of the training, a new trainings course was organized in order for the participants to

acquire practical knowledge and skills in the provision of care services.

B. Training on care services

The two training programs emerged as a need for personalized training and highlighting the abilities and skills of women IPV survivors, in order to integrate into the labor market in a targeted manner, or to create their own business. Two (2) training courses of 40 hours each were held. The first one was implemented by ANKA, with the aim of providing care services to elderly people and children with disabilities. The second one was implemented by the WCK, with the aim of providing care services to children aged 2 months until they enter to Primary School.

The total number of women who participated in both programs was 12.

The aims of two training were the trainees to be able on:

- » to know the theoretical framework, issues such as the code of ethics, neglect/abuse, assistance services, care of children and children with disabilities, elderly or vulnerable people
- » to learn how to provide first aid to the elderly and children with disabilities
- » to recognize and manage difficulties that may occur during infancy, toddlerhood and childhood and are related to separation, behavioral difficulties, and self-regulatory functions of the infant, toddler or child.
- » to recognize in the importance of play, but also of the bonds that the child makes with the people around him
- » to understand the basic principles for the child's health or elderly people and systematic medical monitoring
- » to acquire knowledge about nutrition in the life cycle, covering an age range from 0 to primary school age
- » to prevent and deal with emergency situations, which threaten the physical integrity of the infant, toddler, child and elderly people and to acquire skills to manage and deal with them

Through the training program, an attempt was made to inform the participants and encourage them to think about completing their training (for those who had abandoned it), in order to gain the opportunity to register again in the DYPA² list of unemployment.

1.4 The local trial results

The Greek local trial was and still is ambitious. The design of the local trial involved actors that already signed the Local Territorial Protocol, as well as the AVC of WCK. The local trial was designed in such a way as to bring about short-term and long-term results: short-term regarding the empowerment and training of women IPV survivors in social and solidarity economy processes and long-term in establishing and operating of COINSEP during and after the end of the program WEGO3, benefiting a greater number of women and families.

The local test brings together the characteristics of collectivity, solidarity, caring for the community,

² State Organization

focusing on local problems and empowering the local community. The care services are the object of the creation of a social cooperative, which will be managed and established with the participation of women IPV survivors and supported by WCK and the signatories of the Local Territorial Protocol.

For the participants, the creation of COINSEP, beyond a professional perspective, was also treated as a way of decent living and reintegration into professional and social life. During the discussions held with AVC officials, they mentioned that the training process strengthened their self-esteem and they considered this important because they often find it difficult to find a professional way out due to low self-esteem. The cooperative learning process also worked to some extent therapeutically, by building positive interdependence among group members. **Women benefited from the trial along three dimensions:** as trainees, as prospective entrepreneurs and as final recipients of services to facilitate their entry into the labor market.

The local trial, but also the participatory design process that led to it, strengthened existing links with local actors and at the same time paved the way for the continuation of participatory design through synergies and collaborations.

The implementation of the local trial could potentially be transferred as know-how and good practice to other territorial areas, but it will not be very easy to implement as is. The social conditions, the economic conditions and also the collaborations between organizations are different from region to region; the local ecosystem will not be the same. It could be adapted and tested in the local socio-economic environment, taking into account the existing stakeholders of the area. **Critical point for transfer** (as difficulty or ease): the existence or not of a network of collaborations, the signing or not of collaboration protocols between organizations, the gender perspective in approaching solutions, program synergies. The transfer of know-how should be combined with a list of good practices, such as: methodology for recording regional bodies and organizations, methodology for organizing and signing local cooperation protocols, organizing targeted awareness-raising actions for the empowerment of women IPV survivors in the path to economic independence.

The implementation of the local trial action it is not easy to transpose it horizontally to become a policy proposal. **But it can be an occasion for policy-making. In what way;** Initially, it should be implemented for at least 1 year in Karditsa in order to have statistically measurable results. Afterwards, the Trade Union of Karditsa will promote and present the idea of local trial, its implementation and its results to the Labor Institute (INE) of the General Confederation of Greek Workers. Afterwards, the INE will propose the implementation of the specific action to the Public Employment Agency³, in order to implement it as a pilot in other regions and then nationally (procedure based on institutional framework)

Challenge

Creating a Hackathon (an intensive process of generating ideas, prototypes for predefined or undefined problems or business opportunities):

- » a good opportunity for under establishment COINSEP members to get to know the ecosystem of the region and the other businesses
- » to present the idea in front of an audience
- » the team to get advice from people in the field

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- » the team to bond without being “stigmatized”
- » and the team to see how it goes through all the stages for a product or service, from the idea phase to the creation of a minimally viable product

In the next month WCK will hold meetings with the Entrepreneurship Support Center for Unemployed and Disadvantaged Citizens of the Municipality of Karditsa, which is operating by the Development Agency of Karditsa, in order to organize the hackathon.

Next steps

- » Find financing sources for the operation

We await the public announcement from the Regional Government of Thessaly, the ESPA Administrative Authority in specific, for the invitation for New and Existing Social & Solidarity Economy Enterprises. This action provides funds the salary for 1 member of COINSEP, for one unemployed person and operating costs.

- » New opportunities for synergies and collaborations

The implementation created new opportunities for synergies and collaborations: in the coming months the trial will be “extended” to the remaining refugee population in the city - mainly from Ukraine - and to women under 29 years old. The idea is for the two groups of trainees to come into contact and think about the possibility of cooperation, of creating a business. If the “new team” includes a person under the age of 29, then the establishment and initial support of the business can be funded by the YES program. The WCK will schedule a meeting with executives implementing the YES program.

CHAPTER II

The services addressing to Women Intimate Partner Violence Survivors in local/regional area

2.2 - Issue description

The lack of information about services addressing to women IPV survivors at local and regional level and the lack of coordination of services

Women's economic independence is a determining factor in trying and leaving an abusive partnership. Many women face economic or poverty risk as a result of intimate partner violence. For women living in violent relationships, economic dependence can limit their ability and desire to leave it. This fact pushes many female victims of violence to remain or return to unsafe situations.

In order to enhance women's readiness for work, greater provision of information on vocational and labour issues, access to training and education/training actions, as well as access to job-finding services that will be in harmony with the needs of these women are required.

According to the data of the survey, which was conducted in the counseling centers for the support of women victims of violence in the first year of WEGO, 76.4% of the women supported declare that they suffered economic violence at least in the percentage of 21-40% or more. A characteristic point of the survey is that the majority (85.7%) respond that they do not know if there are one or more specific measures to promote the socio-economic empowerment of IPV survivors. However, women survivors' accessibility to existing measures (including covid_19 measures) is considered medium to low by the majority of respondents.

Therefore, access to information emerges as the critical factor on the path to women's economic independence. Support services should be able to help women IPV survivors find work, resolve childcare issues, and provide support during the empowerment and confidence building phase. Indicative actions:

- » Referral of women to appropriate agencies and programs for professional preparation
- » Encouraging participation in training programs and enhancing skills/qualifications
- » Referral for work to suitably prepared employers
- » Work in positions less threatening to their self-esteem
- » Active participation and support to meet women's immediate needs such as accommodation and

access to welfare services, creation of networks at a personal, social, job finding level

During the policy lab paths, issues regarding the socio-economic support of women were identified and discussed extensively. The main ones that stood out were:

1. The welfare system is essential for women IPV survivors, who often no longer have a family or personal support network, but sometimes it's not "friendly" to them
2. There is territorial fragmentation in the support structures for women IPV survivors, for example there are not AVCs and Shelters in each prefecture
3. There are a number of involved supporting structures, such as Community Centers, Municipal Social Welfare Directorates, AVCs, Shelters
4. Many government agencies provide standardized answers to the needs of women; only AVCs and Shelters support in a specific way, because the professionals are educated of the phenomenon of Gender-Based Violence and the special needs of women IPV survivors
5. Professionals outreach are sometimes insufficient, except professionals of AVCs and Shelters, because employees in many actors are not being trained on gender-based violence issues
6. Non-existence of a cooperation framework between the organizations

So, the existence of many bodies that provide support to the general population (financial and support services) and their fragmentation into different organizations often confuses women IPV survivors.

2.2 - Solution proposed

Service mapping in order to inform the women IPV survivors about the local or regional services and structures

The mapping of the Services could be implemented as follows:

1. divided in main key areas, such as legal, fiscal, access to services/benefits (bureaucratic procedures), psychological support structures, health structures, anti-violence counseling centers, etc. Possible options for the women IPV survivors and the gaps that exist in coverage of these could be identified.
2. according to the ways of empowerment: categorization of the possibility of empowerment by sector, e.g. psychologically, financially, in the field of professional training, legal support, etc.
 - » The Regional Observatory for Social Inclusion⁴, Department of Social Welfare of the Region of Thessaly has started the creation of an online database on the actors and organizations that provide support to vulnerable social groups at the level of the Thessaly region. The Regional Observatory for Social Inclusion will create a special field on the platform for women victims or IPV survivors, in which it will include the respective organizations, the type of services they provide and the geographical area in which they operate. The mapping of services "at a glance", which will address to women IPV survivors in local/regional level, including key sectors, such as structures:
 - » for psychological and social support
 - » for housing

⁴ State Organization

- » for AVCs
- » providing access to services/allowances
- » providing care services to children and elderly
- » for professional trainings

This issue was not selected for the local trail, because a large number of local or regional stakeholders providing services to women IPV survivors had already mapped by the WCK. The WCK will share the file with the Observatory, and will cooperate with it.

CONCLUSIONS

The majority of registered unemployed in Greece are women. Women in Karditsa, like all the women of the south Europe, have been affected more in recent years due to deficiencies in social structures, flexible forms of work, unemployment, impoverishment, domestic violence, the burden of caring for those who need help.

In the local trial, the field of social economy was chosen for two reasons: the region has a “tradition” in cooperative schemes and the perspective of the feminist approach of the social solidarity economy makes care work visible, integrates the gender dimension into the economic analysis and contributes to a fairer socio-economic system.

The first step of the local trial concerned the organization and the delivery of several trainings, involving also women IPV survivors, to provide them with knowledge and skills on social cooperative business and care provision. The local trial had also **a positive impact on the women IPV survivors**, who acquired knowledge and skills. The participation in the local trial contributed then to enhance IPV survivors’ skills and abilities, and thus foster their re-integration in the labour market. Women received support and guidance for setting up their personal business in the field of care provision.

The trial aimed at **strengthening the collaborations between the actors of the local ecosystem of Karditsa**, involving different stakeholders in training design and implementation. The trial was able to generate a positive impact on the local territory and can be presented as a good practice other areas of the region of Thessaly, such as the Municipality of Ellassona, partner of the Territorial Protocol.

The local trial was designed **to bring about short-term and long-term results:** short-term regarding the empowerment and training of women IPV survivors in social and solidarity economy processes and long-term in establishing and operating of COINSEP during and after the end of the program WEGO3, benefiting a greater number of women and families. The establishment of the social cooperative might generate benefits on those who cannot benefit from the existing policies of reconciliation of family and professional life, either due to lack of places, or due to opening hours of care services, or due to economic conditions.

Finally, the local trial, but also the participatory design process that led to it, strengthened existing links with local actors and at the same time **paved the way for the continuation of participatory design through synergies and collaborations**. The participatory planning process - which led to the local trial - also created a new condition of participatory decision-making: actors do not need to wait for institutional decisions in order to face and solve local problems. As local society, as organizations and as Civil Society we can work together and create support tools for women IPV survivors, without waiting for central political decisions. By documenting at the local level the work needs of female survivors as well as the local labor market, we design targeted tools that will strengthen women’s entry into the labor market and contribute to their economic independence.

All the participants in the local trial and in its participatory design process, emphasized that for **any efforts to be sustainable there should be:**

- » Stability (in organizations and executives) and not fragmentation in support structures or change

of reference persons

- » Dissemination of information also to people who are digitally illiterate which may also be from the target group of women
- » Integrating of information for the women migrants and refugees or other social vulnerable group in the network of services and organizations related to the needs of IPV women

From the beginning of the implementation of the local there was a question:

Can we – and how – reassure that there will be customized and as complete as possible reply to the needs of women IPV survivors?

The answer is:

- » By being aware of the phenomenon and the specific needs of women IPV survivors
- » By synergies that will result in suggestions for the development and adoption of actions by the local community that can also act as a pressure mechanism for political change

Why do we need cooperation and synergies?

Because of

“alone I go fast, together we go far”

Partnership

ActionAid Italia, Italia

Istituto per la Ricerca Sociale (IRS), Italia

Rel.Azioni Positive Società Cooperativa Sociale, Italia

Center for Sustainable Communities Development, Bulgaria

Fondation Agir Contre l'Exclusion (FACE), Francia

Women's Center Of Karditsa (WCK), Grecia

WEGO!



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