



MAPPING RISKS OF VIOLENCE AGAINST WOMEN AND INTERSECTIONAL VULNERABILITIES

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FOREWORD

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UNHCR REPRESENTATIVE IN BULGARIA



Every refugee journey is marked by movement, often under difficult and uncertain circumstances. Yet protection does not end when a person reaches safety or secures a place to stay. For many women and girls, as well as others in situations of heightened vulnerability, displacement may give rise to additional risks of violence, exploitation, abuse and exclusion. Identifying these risks and addressing them in a timely and effective manner is therefore a fundamental part of our shared responsibility as protection actors.

It is within this context that UNHCR prioritized and coordinated this Safety Audit of accommodation facilities for forcibly displaced people in Bulgaria. Experience demonstrates that incidents of violence and protection concerns often remain underreported, particularly where individuals fear stigma or repercussions, lack information about available services, or are uncertain about where and how to seek support. Understanding what contributes to a sense of safety requires meaningful engagement with those directly affected. Their perspectives and experiences are essential to assessing where protection arrangements are working effectively, identifying remaining gaps, and determining practical measures that can strengthen safety and dignity. Effective protection must therefore be grounded in listening to affected communities and translating their perspectives into concrete action.

This study is particularly timely. Bulgaria continues to provide protection to people who have been forced to flee war, persecution, violence and human rights violations. While forcibly displaced people demonstrate considerable resilience and contribute to the communities in which they live, displacement can also exacerbate pre-existing inequalities and create or deepen vulnerabilities. Women and girls, children, persons with disabilities, older persons, survivors of violence, LGBTIQ+ individuals and others with specific protection needs may face intersecting risks that are not always immediately visible within reception, detention and accommodation settings. Recognizing and responding to these diverse experiences is essential to ensuring that protection is inclusive, accessible and responsive to the needs of all.

The findings reaffirm principles reflected in international refugee and human rights law: protection from violence is intrinsically linked to the effective enjoyment of rights, access to services and justice, dignity, and meaningful participation. Safety extends beyond the prevention of harm. It also requires that individuals are able to access healthcare, education, livelihoods, reliable information and legal assistance, and are provided with opportunities to regain self-reliance and rebuild their lives in dignity. One of the important messages emerging from this research is that violence against women and girls, as well as other forms of violence affecting persons in situations of heightened vulnerability, cannot be considered in isolation from the broader circumstances that may increase protection risks. Legal uncertainty, poverty, social exclusion, economic dependency, barriers to healthcare and limited access

to information can intersect and compound existing vulnerabilities. The assessment indicates that adequate infrastructure, appropriately trained personnel, accessible services and safe and confidential reporting and referral mechanisms can contribute significantly to mitigating these risks. Safety therefore requires more than physical security measures; it depends on an enabling protection environment that fosters dignity, trust, inclusion and meaningful access to rights and services.

This report should be understood not simply as an identification of gaps, but as a constructive roadmap for further strengthening protection. Bulgaria has demonstrated sustained commitment and solidarity in receiving and protecting people forced to flee. The evidence and recommendations presented in this report offer practical opportunities to build on these efforts, including through safer and more inclusive accommodation arrangements, strengthened services, enhanced opportunities for socio-economic inclusion, effective referral pathways and continued investment in institutional capacity.

I would like to express my sincere appreciation to the refugees, asylum-seekers and stateless persons who generously shared their experiences and perspectives, including on deeply personal and sensitive matters. Their openness, courage and trust were essential to this study and have helped ensure that its findings remain grounded in the lived experiences of the people we seek to protect.

I would also like to extend my particular appreciation to Diana Videva of Demetra Association and Dr. Alexey Pamporov of the Institute of Philosophy and Sociology at the Bulgarian Academy of Sciences for their professionalism, expertise and close cooperation with the UNHCR Bulgaria team throughout the study. Their substantive contributions, field engagement and commitment to evidence-based approaches have been instrumental in deepening our understanding of protection and safety risks and in identifying practical and sustainable ways forward. I would also like to express my sincere appreciation to the [State Agency for Refugees](#) and the [Directorate of Migration of the Ministry of Interior](#) for their constructive engagement and cooperation throughout the study. My thanks also extend to UNHCR's partners within the [Bulgaria Network of Compass Protection and Inclusion Centres](#) working with people in the accommodation facilities and communities across Bulgaria, whose field expertise, dedication and support were invaluable in facilitating the research and ensuring that the perspectives and experiences of forcibly displaced persons were reflected in the findings.

Our collective responsibility now is to translate this evidence into concrete action. By doing so, we can ensure that accommodation facilities are not only places of physical safety, but environments in which risks are identified and addressed, rights are accessible, and individuals are treated with dignity and respect. Such efforts can contribute to reducing the risks of violence against women and girls and other persons in vulnerable situations, while at the same time strengthening resilience, fostering social cohesion and improving protection outcomes for all forcibly displaced people in Bulgaria.

Ultimately, 75 years of UNHCR's experience have consistently demonstrated that protection cannot be measured solely by the absence of violence or harm. It is equally reflected in the presence of dignity, rights, opportunity, inclusion, a sense of belonging and, above all, hope.

ACCEPTED ABBREVIATIONS

SAA	Social Assistance Agency
UNHCR	United Nations High Commissioner for Refugees
SAR	State Agency for Refugees at the Council of Ministers
EU	European Union
ECHR	European Court of Human Rights
LAR	Law on Asylum and Refugees
IOM	International Organisation for Migration
NGO	Non-governmental organisation
UN	United Nations
RRC	Registration and Reception Centre
SCTAF	Special Centre for the Temporary Accommodation of Foreigners
SOP	Standard Operating Procedures
TC	Transit Centre
CEDAW	Convention on the Elimination of All Forms of Discrimination against Women
GBV	Gender-based violence

INTRODUCTION

In its long-standing global experience in different displacement contexts, UNHCR recognizes that violence against women and girls, as well as others with intersecting vulnerabilities, occurs across all societies and contexts, including situations of displacement, and that it remains significantly underreported due to barriers such as fear, stigma, lack of trust, dependency relationships and limited access to services. For this reason, everyone has a responsibility to identify and mitigate such risks within their respective areas of work, based on the needs and experiences of affected communities. The Safety Audit is not designed to document, verify or seek proof of individual incidents. Rather, it provides a safe and ethical way to understand perceptions of safety, identify environmental and structural factors that may increase the risk of violence, and gather community perspectives on measures that can strengthen protection, reduce risks and improve access to support services. By focusing on risk factors, safety concerns and community-led solutions, the UNHCR's Safety Audits aim to generate evidence for prevention and risk mitigation while avoiding approaches that could expose individuals to harm or place a burden on survivors to disclose experiences of violence. It also serves as a platform for strengthening collaboration among communities, authorities, service providers and humanitarian actors to enhance prevention, response and accountability mechanisms.

This study on safety in accommodation facilities for forcibly displaced persons in Bulgaria, with a particular focus on the risks of violence against women and other people with intersectional vulnerabilities, was conducted in accordance with the UNHCR's established international [framework](#) for such research, with the support of the State Agency for Refugees and the Directorate of Migration in particular. A triangulation of mixed data collection methods was used: a desk-based review of statistical data and regulatory documents; field visits to assess safety in accommodation facilities; and focus group discussions and expert interviews. Twelve accommodation sites and two Compass Protection and Inclusion Centres were visited, and the perspectives of 150 individuals were captured.

The data collected shows that the risk of gender-based violence is not a function of 'dangerous people', but of dangerous conditions. Women, children and LGBTIQ+ individuals are not seeking special treatment, but predictability, security, dignity and the right to a normal life. Hidden risks of conflict have been identified, which are carried over with forced displacement and manifest themselves in the host environment. Some of these have socio-political origins and may escalate into physical aggression between groups of different origins.

Other risks are linked to established patterns of severe violence, including gender-based violence committed under the pretext of 'honour'. These practices constitute a serious violation of human rights and require clear identification, prevention and a specialised institutional response, without their cultural justification or normalisation.

In those accommodation facilities where gender-based violence is currently being addressed with heightened attention, lower assessed levels of risk are observed – thanks to adequate spatial organisation and trained staff. At the same time, it is evident that the prevention of gender-based violence cannot be effective without functioning social, health and regulative pathways outside the immigration detention system and outside the activities of institutions within the asylum system, including treating violence against women and intersectional risks of harm as grounds for international protection.

The interviews reveal low levels of direct physical violence within accommodation centres (when security staff act as a strong protective factor), but increased risks of gender-based violence due to structural vulnerability: economic insecurity and labour exploitation (work without a contract/unpaid labour), limited and sometimes discriminatory access to healthcare services, difficult and unsafe transport for children and the sick, and a lack of clear reporting channels and psychosocial support.

Risk Level	Type of Facility	Structural and Institutional Risks	Spatial and Environmental Risks	Access to Services and Information	Intersectional Vulnerabilities
High / Medium-High	Reception Centres	Precarious legal status, prolonged procedures, economic dependency, informal employment, limited systematic GBV prevention.	Limited privacy, shared sanitary facilities, mixed accommodation, overcrowding, exposure to unsafe urban environments.	Awareness largely dependent on NGOs; referral pathways not consistently understood.	Social exclusion and harassment; reduced ability to seek help due to stigma and confidentiality concerns; violence remains unreported; exposure to coercion, exploitation and abuse.
Medium	Reception Centres	Structural vulnerabilities remain, but with comparatively lower exposure risks.	Infrastructure and sanitary facilities remain key concerns.	Stronger support; access to services generally available but unevenly utilised.	Privacy limitations and communication barriers; social isolation; difficulties accessing confidential reporting; greater vulnerability to psychological distress and exclusion.
High / Medium-High	Detention Facilities	Prolonged detention, legal uncertainty, absence of GBV screening, limited specialised support.	Lack of women's safe spaces, CCTV in sleeping areas, limited privacy, controlled movement.	Language barriers, insufficient interpretation, fear of reporting due to detention status.	Dependency on authorities; difficulty reporting violence; increased risk of hidden abuse because of lack of privacy and confidential support; prolonged uncertainty may aggravate trauma and psychosocial distress.
Medium	Detention Facilities	Prolonged detention, administrative uncertainty and lack of referral pathways for complex medical and social cases.	Separate protected area for women and children but continuing need for acts as a significant protective factor.	Stronger staff support, but continuing need for multilingual information and specialised services.	Continued exposure to stress arising from prolonged legal uncertainty and restricted autonomy; challenges accessing specialised care and referral pathways; heightened vulnerability to isolation and deterioration of mental wellbeing.
Medium-Low	Humanitarian Accommodation Facilities (Burgas)	Economic insecurity, dependence on humanitarian assistance, precarious seasonal employment, uncertainty of assistance.	Risks primarily located outside accommodation sites, including isolated routes and public spaces.	Inconsistent awareness of reporting mechanisms and emergency services; healthcare barriers in some locations.	Dependence on assistance programmes and intermediaries for access to employment, healthcare, transport and childcare; increased exposure to exploitation where economic alternatives are limited; accessibility barriers that reduce independence.
Low	Humanitarian Accommodation Facilities (Burgas)	Relatively stable environment with few institutional protection concerns.	Safe accommodation, controlled access; only isolated infrastructure concerns.	Basic access to services available, although information channels can be strengthened.	Vulnerabilities linked to dependency on external support, accessibility constraints and limited mobility; risk of social isolation and reduced access to services; barriers to full participation in community life and independent access to information and assistance.

Effective prevention of gender-based violence requires an integrated approach that combines: legal status, access to services, economic autonomy and trust in institutions. For this reason, the recommendations focus on [safe reporting](#) mechanisms, improving [access to services](#) and transport, [preventing exploitation](#), strengthening [psychosocial support](#) and raising awareness – both among those in accommodation and among staff at the State Agency for Refugees and the Migration Directorate.

RECOMMENDATIONS	
IMPROVE SAFETY AND DIGNITY	Establish secure women- and child-friendly spaces in all facilities.
	Ensure separate and safe sanitary facilities.
	Improve lighting, access control and environmental safety measures.
	Guarantee minimum standards for privacy and dignity.
STRENGTHEN PREVENTION AND RESPONSE	Introduce mandatory multilingual GBV information sessions upon arrival.
	Establish confidential and accessible reporting mechanisms.
	Designate trained GBV focal points in every facility.
	Update SOPs to promote prevention, early identification and survivor-centred responses.
ENSURE ACCESS TO ESSENTIAL SERVICES	Guarantee access to GBV services regardless of legal status.
	Strengthen access to healthcare, psychosocial support, legal aid and child protection services.
	Expand interpretation and cultural mediation services.
PREVENT DEPENDENCY AND LABOUR EXPLOITATION	Promote legal employment opportunities and livelihood support.
	Improve awareness of labour rights and reporting mechanisms.
	Strengthen monitoring and referrals related to labour exploitation and trafficking.
STRENGTHEN PROTECTION FOR HIGH-RISK GROUPS	Introduce systematic vulnerability and GBV risk screening.
	Develop tailored protection measures for women and girls, children, persons with disabilities, LGBTIQ+ individuals and survivors of violence.
ENHANCE COORDINATION AND ACCOUNTABILITY	Strengthen coordination between SAR, the Migration Directorate, municipalities, health services, police, social services and NGOs.
	Establish multidisciplinary case-management and referral pathways.
	Monitor prevention and protection indicators, not only reported incidents.

A time-bound GBV prevention, risk mitigation and response [action plan](#) will be adopted during a workshop with relevant stakeholders, with clear responsibilities assigned to the stakeholders. This plan will focus on immediate low-cost measures, such as improved information, lighting, referral visibility and confidential reporting channels, and medium-term structural measures, such as adapted accommodation, predictable access to health and psychosocial services, strengthened interpretation and alternatives to detention for persons at heightened risk. Progress will be reviewed periodically with

residents, including women, adolescent girls, persons with disabilities, older persons, LGBTIQ+ persons and other groups at heightened risk.

The findings of this study, together with an Action Plan developed to prioritize and operationalize its recommendations, support the development of a practical roadmap for strengthening Bulgaria's implementation of the EU Directive on combating violence against women and domestic violence. By identifying risks, protection gaps and barriers affecting forcibly displaced women and other individuals facing intersecting vulnerabilities, the study supports targeted measures to improve prevention, early identification, referral pathways, access to specialised services, and multi-stakeholder coordination, helping to ensure that the Directive's protections are effectively accessible to all women and girls, regardless of their legal status or displacement background.

The study's focus on intersectional vulnerabilities is closely aligned with the EU Directive on combating violence against women and domestic violence, which recognizes that certain women and girls face heightened risks of violence and greater barriers to protection due to the interaction of multiple factors, including migration or displacement status, disability, age, health conditions, sexual orientation, gender identity or expression and sex characteristics, ethnicity or socio-economic circumstances. By examining how these factors intersect to shape experiences of safety, access to services and exposure to violence within accommodation settings, the study contributes to the evidence base needed to ensure that prevention, protection and support measures are tailored to the specific needs of those at greatest risk. In doing so, it supports the Directive's call for victim-centred, inclusive and non-discriminatory responses that leave no one behind.

UNHCR Bulgaria, September 2026

1. BRIEF CONTEXT ON REFUGEES



"Second Home" Accommodation Centre in Plovdiv ©UNHCR/ Nikolay Stoykov

1.1 Legal framework

In Bulgaria, the main body responsible for procedures for granting international protection is the State Agency for Refugees (SAR) at the Council of Ministers. The Agency is responsible for registration, interviews and decisions regarding refugee status and humanitarian status. Applicants may submit applications at SAR reception centres or to other administrative bodies in Bulgaria, which are obliged to refer them to the competent authority. There are administrative and judicial mechanisms for appealing against negative decisions, including appeals to higher administrative courts, as well as the possibility of re-submitting an application in the event of a change in circumstances.

Bulgaria's legal framework provides for several types of protection status:

A. International protection

Under the Law on Asylum and Refugees (LAR), persons who meet the criteria of the 1951 Refugee Convention are granted refugee status, whilst persons who do not meet the criteria for refugee status under the law, according to the national assessment, but who face a serious risk if returned to their country of origin, may be granted humanitarian status. These statuses confer the right of residence, protection against return to the country of origin and the right of access to basic services, as regulated by national legislation and EU standards.

B. Temporary protection

Unlike individual procedures for granting asylum and international protection, temporary protection is a collective status that is activated when a large number of displaced persons arrive as a result of events such as armed conflict. Bulgaria first applied temporary protection in March 2022 in response to the Russian invasion of Ukraine. Temporary protection is granted by a general administrative act of the

government, covering persons meeting specific criteria, and is automatic and collective rather than individual.

At the time of the field research for this report (November 2025), temporary protection in Bulgaria was valid until 4 March 2026. Two weeks before the expiry of the deadline, by Decision No 190 of 17 February 2026 of the Council of Ministers of the Republic of Bulgaria amending Decision No 144 of the Council of Ministers of 10 March 2022 on the granting of temporary protection to displaced persons from Ukraine, the duration of temporary protection in the Republic of Bulgaria was extended until 4 March 2027.

Persons entitled to temporary protection are issued with a registration document confirming their legal status in Bulgaria for the duration of the scheme. From March 2022 onwards, Ukrainian citizens who have already applied for international protection in Bulgaria have automatically been issued with these documents, which replace the previous individual registration. At the time of the study, beneficiaries of temporary protection may submit applications for refugee or humanitarian status, but the examination of these applications on their merits is suspended until the expiry of the temporary protection.

1.2. Institutional framework and accommodation facilities

The institutional framework comprises a multi-tiered system of state bodies, international organisations and non-governmental service providers.

Accommodation facilities

▪ **Registration and Reception Centres (RRCs) – Sofia, Harmanli, Banya**

These are territorial branches of the SAR, which serve for registration, accommodation, medical examinations, social and medical assistance, and the conduct of proceedings to determine the state responsible for examining the application for international protection, and proceedings for the granting of international protection to foreign nationals, as well as for the accommodation of foreign nationals who have applied for asylum.



Reception Centres in Sofia.

▪ **Transit Centre – Pastrogor**

Decree No 106 of 17 May 2008 on the establishment of a transit centre in the village of Pastrogor, Svilengrad Municipality, Haskovo Region (published in the State Gazette, No. 48 of 2008, in force from 23 May 2008), as well as in the Rules of Procedure of the SAR, there is no explicit and clear distinction between the RRC and the TC. At the time of the study – October/November – the possibility of the Pastrogor TC becoming a closed-type centre was under discussion and anticipated, which became a reality at the time of drafting the first draft of this report (January 2026).

- **Transit Reception Centre – Elhovo**

Pursuant to Council of Ministers Decision No. 908 of 16 November 2022, newly arrived Ukrainian refugees who wish to benefit from the Humanitarian Assistance Programme for Internally Displaced Persons from Ukraine must first pass through the transit reception centre in Elhovo for a period of up to 14 days. Thereafter, resettlement takes place in accommodation facilities.

- **Accommodation under the Humanitarian Support and Integration Programme**

In accordance with the Programme for Humanitarian Support and Integration of displaced persons from Ukraine granted temporary protection in the Republic of Bulgaria, adopted by Council of Ministers Decision No. 278 of 2 May 2025, accommodation for beneficiaries of temporary protection was provided in a range of facilities, including both **state-owned facilities** (e.g. the Council of Ministers' holiday resort in Sunny Beach and the National Assembly's holiday resort in Velingrad) **and private hotels, guest houses, company hostels, municipal and social housing.**

Displaced persons who hold a valid registration card for a foreign national granted temporary protection in the Republic of Bulgaria, which is the only legitimate document certifying their status, are entitled to participate in the Programme for Humanitarian Support and Integration Measures. Inclusion in the Programme for receiving humanitarian support for accommodation is for a period of 60 (sixty) calendar days, on a one-off basis, within the duration of the temporary protection. After this period expires, individuals may remain at the accommodation facility by paying for their stay at the rates announced by the relevant accommodation facility. Inclusion in the Programme for receiving humanitarian support for accommodation for the entire duration of temporary protection may be granted without restriction to persons from at-risk groups where vulnerability is established or arises.

1.3. Demographics and migration trends

The profile of refugee flows to Bulgaria since 1990 has been characterised by dynamic changes, usually linked to armed conflicts in the Balkans and the Middle East, but until 2013 the number of first-time applications rarely exceeded 2,000 per year, with the main countries of origin being Afghanistan, Iraq and Armenia.¹ The escalation of the civil war in Syria into a full-scale conflict with international involvement changed the migration landscape, effectively increasing the number of applications submitted tenfold. A new significant wave has also been observed following the end of the COVID-19 pandemic. Unlike the period 2013–2017, when women accounted for between 25% and 30% of the refugee flow, the onset of the pandemic has seen a significant decline in the number of women applying for international protection, and their share currently stands at under 15%.

Over the last five years, there have also been significant changes in the countries of origin of those seeking protection. Afghanistan and Iraq remain in the top three, but Syrian nationals rank first in terms of applications for protection. It is important to note, however, that a new trend in applications is emerging, involving citizens of Morocco, Egypt, Russia and Türkiye.

¹ UNHCR Bulgaria, A. Pamporov, Z. Vankova, M. Shishkova, *Where is my home? Homelessness and Access to Housing among Asylum-Seekers, Refugees and Persons with International Protection in Bulgaria*, 2015

Table 1. Number of first applications for international protection submitted in Bulgaria, 2011–2025, by country of origin

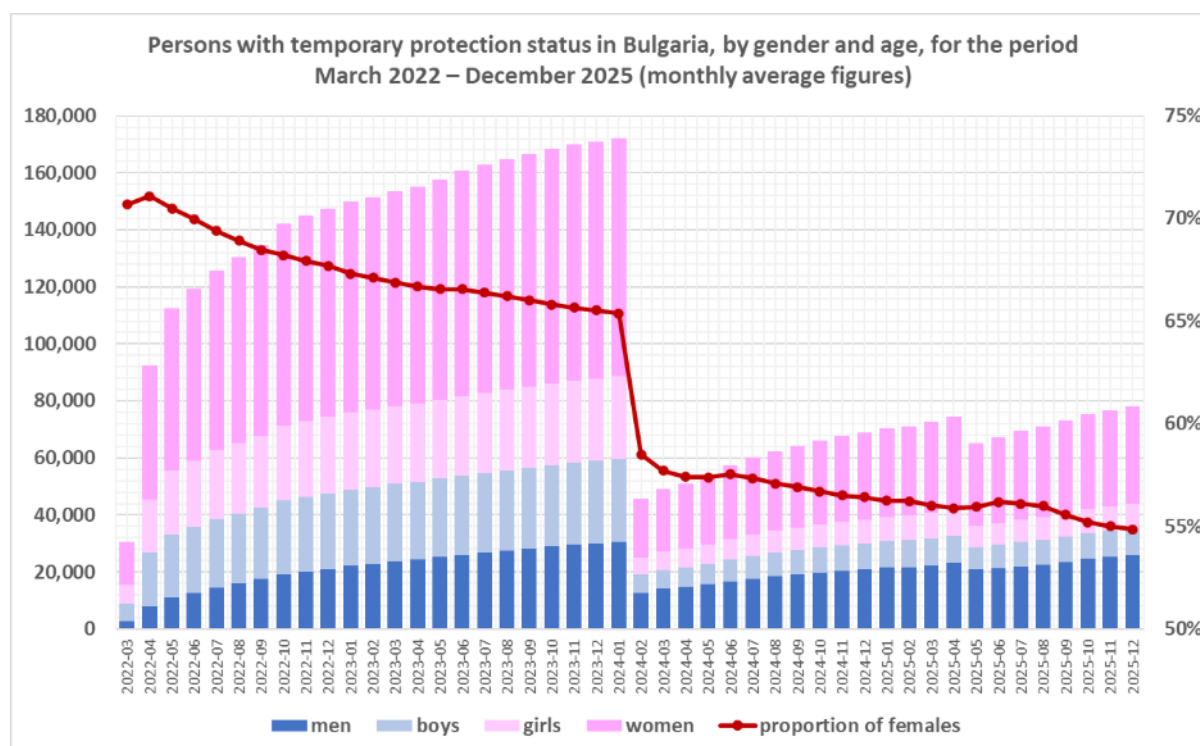
Country	Total for the period	2020–2025	Proportion of applications after 2019
Syria	55,670	34,060	61%
Afghanistan	44,970	23,645	53%
Iraq	18,375	3,070	17%
Morocco	6,655	6,440	97%
Pakistan	3,745	730	19%
Stateless	1,535	375	24%
Iran	1,395	380	27%
Algeria	1,205	485	40%
Egypt	1,035	995	96%
Russia	315	290	92%
Tunisia	230	170	74%
Turkey	225	190	84%
Bangladesh	205	90	44%
Somalia	190	40	21%
Cameroon	125	5	4%
Sudan	60	5	8%
Rwanda	55	0	-
India	50	0	-
Nepal	35	10	-
Nigeria	25	5	20%
Libya	10	5	50%
Cuba	10	10	100%
Kazakhstan	10	0	-
Kyrgyzstan	10	0	-
Israel	10	10	100%

Source: Eurostat

Unlike other persons seeking international protection, the mass arrival of refugees from Ukraine and those granted temporary protection status in Bulgaria under the EU directive are predominantly women. In the first months of the conflict, the proportion of women and girls among Ukrainian refugees exceeded 70%. The number of persons with temporary protection aged over 65 is gradually increasing from 3,765 in February 2024 to 5,660 by December 2025, mainly due to those who entered Bulgaria in early 2022 reaching the age of 65.

In summary, the gender-age profile shows: a high proportion of women; a significant number of children; and, overall, female-headed households.² These characteristics increase vulnerability to gender-based violence, including: intimate partner violence; sexual exploitation; trafficking in human beings; and violence in situations of dependency.

From an age, gender and diversity perspective, the different legal and accommodation situations described above create different exposure to GBV-related risks. Applicants for international protection may face risks linked to uncertainty of status, dependence on reception systems and limited access to employment. Persons whose claims have been rejected or who are in detention may face heightened risks linked to fear, dependency on authorities, restricted movement and reluctance to report abuse. Persons under temporary protection, particularly women-headed households, older women, adolescent girls, persons with disabilities and people with chronic health needs, may face risks linked to economic insecurity, isolation, unsafe transport, dependence on employers or informal helpers, and barriers to health and social services. These distinctions are essential evidence and “markers” and should inform the prioritisation of safety measures, referral pathways and outreach strategies.



Source: Eurostat

² UNHCR, *Gender and Age Disaggregated Data – Bulgaria*, 2024

2. LEGAL AND POLITICAL FRAMEWORK REGARDING GENDER-BASED VIOLENCE

2.1. Constitutional and legislative foundations

The legal framework for the prevention of and protection against gender-based violence³ in the Republic of Bulgaria is based on the constitutional principles of equality before the law, non-discrimination and the protection of human dignity. The Constitution of the Republic of Bulgaria guarantees equal rights to all citizens and prohibits all forms of discrimination, including on the grounds of gender.⁴

These principles form the basis for the development of sectoral legislation, policies and mechanisms for protection against domestic violence, sexual violence, human trafficking and other forms of gender-based violence. The national framework is supplemented by international treaties to which Bulgaria is a party, including the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)⁵ and the European Convention on Human Rights.⁶

Law on Protection against Domestic Violence

The Protection against Domestic Violence Act (PDVA) is the main specialised piece of legislation governing civil law protection for victims.⁷ The Act defines domestic violence as physical, psychological, sexual, emotional or economic violence committed within the context of family or partner relationships.

Key protection measures include: an immediate protection order; a restraining order; removal from the shared home; temporary placement of children; mandatory participation of the perpetrator in programmes; and referral of victims to social services.⁸

In 2023–2025, additional mechanisms were introduced, including:

- standardised risk assessment;
- an inter-agency coordination mechanism;
- expanded access to crisis services.⁹

These measures are also directly relevant to refugees when the violence has been committed within the country.

Criminal law protection

The Criminal Code contains provisions criminalising various forms of gender-based violence.¹⁰ These include: causing bodily harm; rape and sexual assault; coercion; abduction; systematic domestic violence; breach of a protection order; and human trafficking.

³ National Statistical Institute, *Metadata and methodological documents for the study 'Gender-Based Violence' / EU-GBV*, 5 May 2023

⁴ Republic of Bulgaria, Constitution of the Republic of Bulgaria, Article 6 on equality before the law and the prohibition of discrimination, including on grounds of sex

⁵ United Nations (CEDAW), *Convention on the Elimination of All Forms of Discrimination against Women*, 18 December 1979; in force in Bulgaria since 1982

⁶ Council of Europe, *European Convention on Human Rights*, 1950

⁷ Republic of Bulgaria, *Law on Protection against Domestic Violence*, 2005 (amended and supplemented 2023)

⁸ Ministry of Justice of the Republic of Bulgaria, *Guidelines for the Implementation of the Protection against Domestic Violence Act*, 2024

⁹ Council of Ministers of the Republic of Bulgaria, *Decision No 803 on the adoption of a Coordination Mechanism for Assistance and Support to Victims of Domestic Violence*, 19 November 2025

¹⁰ Republic of Bulgaria, *Penal Code*, 1968

Domestic violence has also been introduced as an aggravating factor in certain offences, leading to harsher penalties.¹¹ Legislative changes in recent years aim to strengthen criminal liability and prevention.

Law on Asylum and Refugees

The law regulates the conditions and procedures for granting protection to foreign nationals within the territory of the Republic of Bulgaria and introduces key standards of European law in the field of international protection. Refugee status is granted where there are well-founded fears of persecution based on race, religion, nationality, political opinion or membership of a particular social group. In this context, the law recognises as acts of persecution physical or psychological violence, including sexual violence, as well as acts directed against persons on the grounds of their gender or against children.¹²

The law provides for specific safeguards in the procedure relevant to victims of violence: the right to psychological support, the right to an interpreter, the conduct of the interview in conditions of confidentiality, as well as the option — upon request — for the interview to be conducted by an interviewer or with the participation of an interpreter of the same sex.

It should be noted that the broader standards for gender-sensitive interviewing, specialised support, priority processing and handling of cases of forced marriage are set out in greater detail in the UNHCR guidelines¹³ and in best practices for the examination of applications for international protection, but not all of these measures are explicitly and independently regulated in the law.

Anti-Trafficking Act

The Law on Combating Trafficking in Human Beings regulates national policy on the prevention, protection and reintegration of victims.¹⁴ A National Commission for Combating Trafficking in Human Beings has been established, as well as local commissions and shelters. Displaced women and children are identified as a high-risk group, particularly in the context of migration crises.¹⁵

Anti-Discrimination Act

The Protection against Discrimination Act prohibits direct and indirect discrimination on the grounds of gender, as well as sexual harassment.¹⁶ The Commission for Protection against Discrimination has the power to examine complaints, including those from foreigners and persons under international protection. This mechanism is key to ensuring equal access to services, employment and social protection for victims of gender-based violence.

2.2. International standards

Istanbul Convention

¹¹ Republic of Bulgaria, *State Gazette No. 16, Law Amending and Supplementing the Penal Code*, 2019

¹² State Agency for Refugees, *Law on Asylum and Refugees*, 2002

¹³ UNHCR, *Guidelines on International Protection No. 1: Gender-Related Persecution*, 2002

¹⁴ Republic of Bulgaria, *State Gazette*, Law on Combating Trafficking in Human Beings, 2003 (amended and supplemented)

¹⁵ National Commission for Combating Trafficking in Human Beings (NCCTHB), *Annual Report*, 2024

¹⁶ Republic of Bulgaria, *Protection against Discrimination Act*, 2003 (amended and supplemented)

The Council of Europe Convention on preventing and combating violence against women and domestic violence (the so-called Istanbul Convention, CETS No. 210) is the leading regional standard for combating gender-based violence, introducing an integrated '4P' model: prevention, protection, prosecution and integrated policies.¹⁷ The Convention explicitly covers all forms of violence against women, including domestic violence, and requires states to ensure accessible services and effective coordination and monitoring mechanisms (including the GREVIO mechanism).¹⁸

Bulgaria signed the Convention on 21 April 2016 but has not ratified it.¹⁹ In 2018, the Constitutional Court issued Decision No. 13/2018 on Case No. 3/2018, in which it held that the Convention was incompatible with the Constitution (in the context of the interpretation of concepts related to gender).²⁰

As a result, the Istanbul Convention is not part of domestic law, but its standards are used as an analytical framework when assessing the national system for the prevention of and response to GBV, including in areas such as: specialised services for victims, risk assessment, inter-institutional coordination and training of professionals.

Of further significance to the national context is the fact that the European Union acceded to the Istanbul Convention in 2023, which strengthens the political and legal weight of its standards within EU law and European policies for the protection of victims.²¹

European legal framework

The European legal framework relevant to gender-based violence consists of several groups of acts:

- (1) directives on victims' rights and protection;
- (2) specific instruments against violence against women;
- (3) a framework to combat trafficking;
- (4) mechanisms for the mutual recognition of protection measures; and
- (5) EU law in the field of asylum and temporary protection.

(a) The rights and protection of victims of crime

Directive 2012/29/EU establishes minimum standards for the rights, support and protection of victims of crime, including obligations for individual assessment of protection needs, access to services and measures to limit secondary victimisation.²² This Directive is key in cases of GBV where the victim is a refugee, as it provides a framework for access to support and procedural safeguards regardless of status.

(b) EU Special Act on Violence against Women and Domestic Violence (2024)

Directive (EU) 2024/1385 establishes the EU's first comprehensive legal framework to combat violence against women and domestic violence, including minimum rules on the criminalisation of certain forms

¹⁷ Republic of Bulgaria, *Protection against Discrimination Act*, 2003 (amended and supplemented)

¹⁸ Council of Europe, *Explanatory Report to the Istanbul Convention*, 11 May 2011

¹⁹ Council of Europe, *Bulgaria signs the Istanbul Convention*, 21 April 2016

²⁰ Constitutional Court of the Republic of Bulgaria, *Decision No. 13 on Constitutional Case No. 3/2018*, 27 July 2018

²¹ European Union, *Decisions on the accession of the European Union to the Istanbul Convention*, 1 June 2023

²² European Union, *Directive 2012/29/EU establishing minimum standards on the rights, support and protection of victims of crime*, 25 October 2012

of violence, protection, support and prevention measures, as well as a focus on specialised services and training.²³

(c) Combating trafficking in human beings

Directive 2011/36/EU introduces minimum standards for criminal law protection and support for victims of trafficking, whilst Directive (EU) 2024/1712 updates the framework (broadening the scope of exploitation and strengthening prevention and sanctioning tools).²⁴ This is directly relevant to the migration context, where the risk of trafficking and sexual exploitation is increasing.

(d) Mutual recognition of protection measures in cross-border situations

Directive 2011/99/EU on the European Protection Order allows victims of violence (including domestic violence and stalking) to retain their protection when moving to another Member State.²⁵ Regulation (EU) No 606/2013 supplements this through the mutual recognition of civil law protection measures.²⁶

(e) Asylum and temporary protection – qualification standards, reception and procedures.

In the context of gender-based violence, EU law on international protection is also relevant. Following the adoption of the Pact on Migration and Asylum in 2024, some of the existing directives in the field of asylum have been replaced or recast by new acts; with the exception of reception conditions, the legislation now takes the form of regulations. This is significant because regulations are directly applicable, whereas directives require transposition into national law.

The following acts are of key importance:

Regulation (EU) 2024/1347 on standards for the qualification of third-country nationals or stateless persons as beneficiaries of international protection. It replaces the previous Directive 2011/95/EU and sets out the criteria for granting refugee status and subsidiary protection. In the context of GBV, the provisions concerning acts of persecution, including physical, psychological and sexual violence, as well as the consideration of aspects related to sex, gender identity and gender expression in relation to membership of a particular social group, are relevant.²⁷

Regulation (EU) 2024/1348 establishing a common procedure for international protection in the Union. It replaces Directive 2013/32/EU on procedures for granting and withdrawing international protection. The Regulation is important in cases of GBV because it regulates procedural safeguards, including support for applicants with special procedural needs.²⁸

Directive (EU) 2024/1346 on standards for the reception of applicants for international protection. This is the recast Reception Directive, which replaces Directive 2013/33/EU. It retains the form of a directive and sets out minimum standards for reception conditions, including the assessment of special reception

²³ European Union, *Directive (EU) 2024/1385 on combating violence against women and domestic violence*, 14 May 2024

²⁴ European Union, *Directive 2011/36/EU on preventing and combating trafficking in human beings and protecting its victims*, 5 April 2011
European Union, *Directive (EU) 2024/1712 amending Directive 2011/36/EU*

²⁵ European Union, *Directive 2011/99/EU on the European Protection Order*, 13 December 2011

²⁶ European Union, *Regulation (EU) No 606/2013 on the mutual recognition of protection measures in civil matters*, 12 June 2013

²⁷ European Union, *Regulation (EU) 2024/1347 on standards for the qualification of third-country nationals or stateless persons as beneficiaries of international protection*, 14 May 2024

²⁸ European Union, *Regulation (EU) 2024/1348 establishing a common procedure for international protection*, 14 May 2024

needs, access to necessary medical and psychological care, and support for victims of torture and violence.²⁹

Regulation (EU) 2024/1356 on the screening of third-country nationals at the external borders. It is relevant in the migration context as it introduces initial checks and referral mechanisms, including where vulnerability or special needs are identified.

Directive 2001/55/EC on temporary protection remains the applicable instrument for temporary protection in the event of mass displacement. It has not been replaced by the Pact, but the new framework is complemented by Regulation (EU) 2024/1359 on crisis and force majeure situations in the field of migration and asylum, which regulates temporary measures in exceptional situations, including mass influxes and the instrumentalisation of migration.³⁰

Consequently, when analysing gender-based violence in the context of asylum, account should be taken both of the existing legislation applicable prior to the entry into force of the new acts and of the new framework under the Pact on Migration and Asylum, which strengthens the harmonisation of procedures, eligibility for protection and reception standards within the EU.

2.3. National case law

At national level, case law is relevant in three areas: (1) constitutional review against international standards; (2) civil law protection under the Protection Against Domestic Violence Act; (3) criminal law response to offences related to domestic violence and sexual violence.

(a) Constitutional Court.

Decision No. 13/2018 of the Constitutional Court on Case No. 3/2018 is a key ruling, as it defines the institutional context regarding the (non-)ratification of the Istanbul Convention and subsequent policies on GBV.

(b) Civil law protection (Protection Against Domestic Violence Act).

The practice of district and regional courts in enforcing protection orders is central to the effective protection of victims. National assessments identify challenges such as varying intensity of measures across regions, procedural difficulties and problems with the enforcement/monitoring of protection orders, which are directly relevant to the safety of women and girls in a migration context.³¹

(c) Criminal justice response and coordination.

Issues relating to effective investigation, evidence-gathering and institutional coordination in cases of domestic violence are the subject of systematic assessments and are linked to compliance with ECHR standards in cases against Bulgaria.³²

²⁹ European Union, *Directive (EU) 2024/1346 on standards for the reception of applicants for international protection*, 14 May 2024

³⁰ European Union, *Regulation (EU) 2024/1359 on crisis and force majeure situations in the field of migration and asylum*, 14 May 2024

³¹ Centre for the Study of Democracy, *The Legal Metamorphosis of Domestic Violence in Bulgaria*, 2024

³² Ombudsman of the Republic of Bulgaria, *Monitoring the Implementation of ECHR Judgments in 2024*, 2024

Beyond the legal framework, all institutional responses to GBV involving refugees, asylum-seekers, persons under temporary protection and migrants are guided by survivor-centred principles. These include safety, confidentiality, respect, non-discrimination, informed consent and the right of the survivor to decide whether, when and how to seek assistance. Reporting an incident should not automatically trigger police involvement or other institutional action without the informed consent of the survivor, except where mandatory child protection or immediate life-saving obligations apply under national law. This distinction is essential to build trust, prevent secondary victimisation and ensure that survivors can access health, psychosocial, legal and protection support without fear of retaliation, stigma or negative consequences for their legal or administrative situation.

2.4. Coordination and risk mechanisms

Effective prevention and response to gender-based violence require an integrated institutional approach based on early risk identification, coordinated action and functioning referral mechanisms. During the period 2023–2025, key tools were introduced and developed in the Republic of Bulgaria aimed at strengthening the systemic response to cases of domestic violence and other forms of gender-based violence, including in the context of refugees and other groups of displaced persons.

▪ *Risk assessment methodology*

The risk assessment methodology is a standardised tool used by the courts, the Ministry of the Interior, social services and other competent institutions in cases of domestic violence. Its purpose is to identify at an early stage the level of danger to the victim; to predict the escalation of violence; to assess the risk of serious bodily harm or murder; and to determine urgent protective measures.³³

The methodology includes a set of indicators, including: a history of previous acts of violence; death threats; possession of weapons; alcohol/drug abuse; jealousy, controlling behaviour; isolation of the victim; and the presence of children at risk.³⁴

The assessment is carried out upon initial reporting, when a protection order is issued, and during subsequent interventions. The results determine the level of risk (low, medium, high) and the necessity of a coordinated response. The methodology has been developed in accordance with European standards for risk management in cases of domestic violence and is also applied in cases involving foreign nationals and persons under international protection.³⁵

▪ *Coordination mechanism*

The inter-institutional coordination mechanism is a formalised system for cooperation between the competent authorities in cases of domestic violence and gender-based violence. It is regulated by subordinate legislation and inter-agency agreements adopted by the Council of Ministers.³⁶

Key participants: Ministry of the Interior; Prosecutor's Office of the Republic of Bulgaria; Social Assistance Agency; State Agency for Refugees; Ministry of Health; municipalities; non-governmental organisations, etc.³⁷

³³ State Gazette of the Republic of Bulgaria, *Regulations for the implementation of the Protection against Domestic Violence Act*

³⁴ Ministry of the Interior of the Republic of Bulgaria, *Methodological guidelines for the actions of Ministry of the Interior staff under the Protection against Domestic Violence Act*, 2024

³⁵ Council of Europe / GREVIO, *Risk assessment and management in cases of violence against women and domestic violence*

³⁶ Council of Ministers of the Republic of Bulgaria, *Coordination mechanism for assistance and support to victims of domestic violence*, 2025

³⁷ Council of Ministers of the Republic of Bulgaria, *Regulations for the Implementation of the Protection against Domestic Violence Act*

Key functions: exchange of information between institutions; joint risk assessment; planning of protective measures; referral to services; case tracking; coordination in high-risk situations.

The mechanism provides for the establishment of local coordination teams, which meet in serious cases or where there is a high risk. It is a key tool for implementing the standards set out in the case law of the European Court of Human Rights regarding the state's positive obligations to protect life and physical integrity.³⁸

▪ *Referral mechanism*

The referral mechanism is an operational procedure for identifying, assessing and referring victims of gender-based violence to appropriate services. It operates at national and local level and involves state institutions, international organisations and service providers.³⁹

Key stages

1. Identification: by the police, social workers, health professionals, the State Agency for Refugees, and NGOs.
2. Needs assessment: legal; medical; psychosocial; protective.
3. Referral to services: crisis centres; shelters; legal aid; psychological support; medical care; services for children.⁴⁰
4. Follow-up: case monitoring; coordination between institutions; assessment of risk of reoffending.

In the context of refugees, the mechanism also includes cultural mediation; translation; compliance with asylum procedures; and protection of confidentiality.⁴¹

UNHCR and partner organisations support the functioning of the referral system through training, standards and coordination platforms.⁴²

2.5. Service mapping

Service mapping is a key analytical component of the report, through which available resources, their geographical distribution, their response capacity and their accessibility to vulnerable groups, including refugees and those seeking international protection, are identified. The aim of the process is to assess the extent to which the national support system is capable of ensuring timely, coordinated and specialised protection for victims of gender-based violence.⁴³ The mapping covers both state-delegated social services and services provided by non-governmental organisations and international partners.

▪ *Crisis centres*

Crisis centres are the primary form of emergency protection for victims of violence, including women and children at immediate risk. They provide temporary accommodation, physical protection and

³⁸ European Court of Human Rights, *The case of Opuz v. Turkey*, 2009

³⁹ UNHCR, *Inter-agency referral form – Bulgaria*, 2024

⁴⁰ UNHCR, *Guidelines for the Inter-Agency Referral Form – Bulgaria*, 2024

⁴¹ International Organisation for Migration, *Guidelines on referral mechanisms for the protection and support of migrants exposed to violence, exploitation and trafficking*, 2019

⁴² UNHCR, *Operational Report on Bulgaria – March 2025*, 2025

⁴³ UNHCR, *Gender-Based Violence (GBV) Safety Audit Toolkit*

comprehensive support.⁴⁴ Key features include 24-hour protection and accommodation; limited capacity (usually 6–20 places); confidential location; multidisciplinary team (social workers, psychologists, lawyers).⁴⁵ Their geographical distribution shows that crisis centres operate mainly in large urbanised regions: Sofia City, Plovdiv, Varna, Burgas, Stara Zagora, Ruse, Pleven and Haskovo.⁴⁶ The actual concentration of services in regional centres and the limited coverage in peripheral regions creates difficulties in referring victims from remote refugee reception centres.⁴⁷

▪ *Psychosocial and legal services*

Psychosocial and legal support are key elements in the recovery of victims and in ensuring access to justice. Psychosocial services include individual psychological counselling; crisis intervention; group therapy; work with children who have witnessed violence; support for post-traumatic stress.⁴⁸ Services are provided both in crisis centres and in community support centres, NGO counselling centres, and by mobile teams.⁴⁹

Legal aid covers assistance with protection orders; representation in court proceedings; advice on migration status; support in criminal proceedings.⁵⁰ Providers include: the National Bureau for Legal Aid; bar associations; specialist NGOs.⁵¹

▪ *Access to social services for refugees*

Formally, persons seeking or having been granted international protection or temporary protection have equal access to social services, including services for protection against GBV.⁵² In practice, however, access is influenced by a number of factors. Main barriers: language difficulties; lack of interpreters; cultural differences; fear of institutions; dependence on a partner/community; geographical distance from services; lack of information.⁵³ Mechanisms for overcoming these barriers include: cultural mediation; translation and interpretation; mobile teams; information campaigns; coordination between the State Agency for Refugees and service providers.⁵⁴ UNHCR and partner organisations support access by developing standard operating procedures for referral, training and funding of services targeting victims of violence among the displaced population.⁵⁵

Access to services for victims of gender-based violence varies significantly depending on the geographical proximity of refugee reception centres to such specialised services. The table below provides a comparative overview of the services available near the main registration and reception centres (RRCs) and detention centres.

⁴⁴ Republic of Bulgaria, *Regulations for the Implementation of the Social Services Act*, 2020

⁴⁵ Ministry of Labour and Social Policy of the Republic of Bulgaria, *Ordinance on the Quality of Social Services*

⁴⁶ National Association of Municipalities in the Republic of Bulgaria, *National Map of Social Services*, 2024

⁴⁷ UNHCR, *Participation Assessment Report – Bulgaria 2024*, 2025

⁴⁸ World Health Organisation, *Response to intimate partner violence and sexual violence*, 16 June 2013

⁴⁹ Social Assistance Agency of the Republic of Bulgaria, *Annual Activity Report*, 2025

⁵⁰ National Legal Aid Bureau of the Republic of Bulgaria, *Annual reports and publications*

⁵¹ Bulgarian Gender Research Fund, *Projects and activities related to legal aid and gender-based violence*, 22 December 2022

⁵² Asylum Information Database (AIDA); European Council on Refugees and Exiles (ECRE), *Report on Bulgaria*, 2025

⁵³ International Organisation for Migration, *Guidelines on Referral Mechanisms*, 2019

⁵⁴ UNHCR, *Guidelines on the Inter-Agency Referral Form – Bulgaria*

⁵⁵ UNHCR, *Inter-agency referral form – Bulgaria*

Table 2. Availability of services near accommodation centres

Location	Type of centre	Crisis centre	Psychosocial services	Legal assistance	Mobile teams	Translation / mediation
Sofia – Ovcha Kupel	RRC	Yes	Yes	Yes	Yes	Yes
Sofia – Voenna Rampa	RRC	Yes	Yes	Yes	Yes	Yes
Sofia – Vrazhdebna	RRC	Restricted access	Yes	Yes	Yes	Yes
Harmanli	RRC	Limited capacity	Yes	Yes	Yes	Yes
Banya	RRC	Restricted access	Yes	Yes	Yes	Restricted
Pastrogor	RRC	Restricted access	Yes	Yes	Yes	Restricted
Busmantsi	SCTAF	No (internal access)	Restricted	Yes	No	Restricted
Lyubimets	SCTAF	No	Limited	Yes	No	Limited

Geographical distance to crisis centres and specialist services remains a key factor affecting actual access to protection, particularly for women with children and individuals at high risk of re-victimisation.⁵⁶

The mapping of services distinguishes between formal availability and effective accessibility. For each service, the assessment considers whether refugees and asylum-seekers can realistically access it in practice, including in terms of language, interpretation, physical accessibility, transport, opening hours, documentation requirements, confidentiality, child-friendly arrangements, disability inclusion, cost coverage and staff capacity to work with survivors of GBV. Particular attention is paid to whether survivors can access urgent health care, psychosocial support, legal assistance, safe accommodation and police protection without being exposed to stigma, unnecessary disclosure, repeated questioning or administrative barriers.

⁵⁶ UNHCR, *Guidelines on the Inter-Agency Referral Form – Bulgaria*

3. METHODOLOGY FOR STUDYING SAFETY IN ACCOMMODATION FACILITIES FOR FORCIBLY DISPLACED PERSONS, WITH A PARTICULAR FOCUS ON THE RISKS OF GENDER-BASED VIOLENCE

3.1. Objectives, tasks and theory of change

The objective of conducting a safety survey in accommodation facilities for forcibly displaced persons, with particular attention to the risks of gender-based violence, is:

- to gather information on perceptions of safety from gender-based violence;
- to identify the risks of gender-based violence;
- to map the strategies and mechanisms used by communities to prevent and respond to these risks.

The main objective of the study is to understand why such risks exist and how they can be reduced through an analysis of the safety and security environment in specific locations. The methodology engages gathering valuable information on communities' awareness and knowledge of existing services to combat gender-based violence.

For the purposes of this study, the term 'gender-based violence' is defined as: ***any harmful act committed against a person's will and based on culturally ascribed differences between men and women (and persons of diverse gender identity or expression). It is violence directed against a person because of their gender or which disproportionately affects persons of a particular gender.*** This definition is consistent with the existing legal concepts in the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW, 1981), the UN Declaration on the Elimination of Violence against Women (DEVAW, 1993), and with the Council of Europe's Convention on Preventing and Combating Violence against Women and Domestic Violence (CETS 210: Art. 3(d)).

The research team approaches the issue with the understanding that violence is not a single act or manifestation, but a multidimensional aspect, and in the course of the fieldwork uses six separate but interrelated indicators:

- **Physical violence:** Hitting, slapping, beating, shoving or femicide (including 'honour killings'⁵⁷).
- **Sexual violence:** Any sexual act or attempt to achieve a sexual act without consent, including rape and sexual exploitation.
- **Psychological/emotional violence:** Humiliating, degrading treatment, stalking, coercion and isolation.
- **Socio-economic violence:** Denial of access to education, health services or employment, as well as control over financial resources.
- **Harmful cultural practices:** Female genital mutilation, forced marriage and child marriage.
- **Online/cyber violence:** Online harassment and blackmail, stalking and non-consensual sharing of images.⁵⁸

⁵⁷ Honour killing is a type of intentional murder in which the victim is killed by members of their own family or extended family, due to the belief that they have brought shame upon or 'dishonoured' the family.

⁵⁸ See: UN Committee on the Elimination of Discrimination Against Women (CEDAW), *General recommendation No. 35 (2017) on gender-based violence against women, updating general recommendation No. 19 (1992)*, 26 July 2017; see also CEDAW, *General recommendation No. 32 on the Gender-related Dimensions of Refugee Status, Asylum, Nationality and Statelessness of Women*, 5 November 2014

In this case, the theory of change stems from an understanding of the ‘continuity of violence’. That is, there is a culturally and socially constructed context in which **a spectrum of forms of social domination** can be observed: from culturally normalised sexist jokes about women’s inferiority, through sexual innuendo and harassment in the workplace, to rape and murder. The various forms of violence are linked by common mechanisms of power and control, rather than by the degree of physical harm.⁵⁹ It is important to emphasise that **violence does not necessarily begin and end with official armed conflict**⁶⁰, as violence against women and girls can be perpetuated by both military structures and civilian law enforcement agencies: soldiers, humanitarian workers, border guards and police officers.⁶¹ Furthermore, numerous studies show that refugee women are at risk of being subjected to slow violence, cultural shaming, economic coercion and, last but not least, **a ‘perpetual state of insecurity’** due to the overlap between legal, structural, cultural and interpersonal forms of violence during displacement and onward movement.⁶²

This theory of change is consistent with approaches underlying UN’s standard setting documents on gender-based violence as a manifestation of unequal power relations and gender discrimination. Underlying its policy and practical guidance, UNHCR characterizes GBV as an abuse of power encompassing physical, sexual, psychological and economic harms, as well as threats, coercion and manipulation.⁶³

Ethical safeguards were central to the methodology. The report was not designed to collect prevalence data, verify individual GBV cases or request survivors to disclose personal experiences of violence. Its purpose was to identify perceived and observable risks, barriers to safe access to services, and practical opportunities for prevention and risk mitigation. Before engaging participants, the team ensured that updated referral pathways are available, that facilitators and interpreters understand survivor-centred principles, and that participants are clearly informed that participation is voluntary, anonymous and without impact on their legal status, accommodation or access to assistance. Any disclosure of violence was met with a confidential, non-judgemental and informed referral, rather than investigative questioning.

From this perspective, the entire methodology is built on the understanding that **we do not need to ask whether refugees have experienced violence, because it forms the basis of their refugee narrative**. However, it is important to know how they are feeling at present and whether they have information on who to turn to in case of need.

3.2. Data collection tools

The model of the field research carried out relies on the triangulation of various sources of qualitative data:

⁵⁹ Liz Kelly, *Surviving Sexual Violence*, 1988; Liz Kelly and Linda Regan, *Rape: The Forgotten Issue?*, 2001.

⁶⁰ Cynthia Cockburn, *The Continuum of Violence: A Gender Perspective on War and Peace*, in Wenona Giles and Jennifer Hyndman (eds.), *Sites of Violence: Gender and Conflict Zones*, 2004.

⁶¹ Cynthia Enloe, *Maneuvers: The International Politics of Militarizing Women's Lives*, 2000.

⁶² Marija Sisic, Evangelia Tastsoglou, Myrna Dawson, Claudia Holtmann, Leah Hamilton Wilkinson and Crystal Falconer, *The Continuum of Gender-Based Violence Experienced by Migrant and Refugee Women in Canada: Perspectives from Key Informants*, 2024.

⁶³ See: *UNHCR Policy on the Prevention of, Risk Mitigation and Response to Gender-based Violence*, 2020.

- a) **desk research** of existing information – data, reports, publications;
- b) **field safety visits** – through direct observations at accommodation sites;
- c) **group discussions** – with persons seeking international protection and accommodated in the RRC, persons with temporary protection and accommodated under the Humanitarian Programme, and with third-country nationals accommodated in the detention facilities;
- d) **expert interviews** with key stakeholders – public authorities, lawyers, IOM and NGO experts in the relevant regions and accommodation centres.

The desk review prepared a preliminary analysis of existing data, helping to identify the availability of official information that should be verified in the field as observed and applied practice, as well as the lack of information on certain theoretically expected issues, observed in a global context in relation to gender-based violence among refugees and persons seeking international protection. From a methodological perspective, safety rounds constitute direct observation aimed at conducting an external assessment of the environment in a minimally invasive manner. Their aim is, on the one hand, to verify the implementation of regulatory mechanisms and safety protocols in facilities accommodating asylum-seekers and refugees, including those who have been denied protection in Bulgaria and accommodated in detention facilities, and, on the other hand, to assess the environment of the accommodated refugees in order to identify potential risk areas and individuals. The information from the interviews and discussions is used to verify and validate the assumptions made on the basis of existing preliminary information and direct observations.

In view of the research brief and the diversity of locations and groups of displaced persons, the research team concluded that the most appropriate approach was to ensure the greatest possible variety of typologically distinct cases. A matrix for initial selection has been drawn up, which is based on a set of theoretical and methodological criteria, as follows:

- Regional diversity
- Representation of all types of public accommodation facilities: RRCs, SCTAFs, transit and distribution centres, accommodation facilities under the Humanitarian Support and Integration Program for persons under temporary protection (hotels, holiday resorts, guest houses, social housing).
- Maximum diversity of persons by country of origin, based on statistics on applications for international protection: Syria, Afghanistan, Iraq, Morocco, Turkey, etc., as well as persons originating from different regions of Ukraine (Odessa, Donbas, Zaporizhzhia, Kharkiv, Kyiv, etc.).
- Maximum diversity of institutional representatives among stakeholders: representatives of the State Agency for Refugees (at national and regional level), IOM, the Migration Directorate, the Regional Directorate of the Ministry of the Interior, Border Police, including temporary protection registration offices, social service providers, and NGOs working to support asylum-seekers and refugees as well as vulnerable migrants in detention facilities.

3.3. Methodology for assessing vulnerability and risk of gender-based violence

Accepted terminology and definitions

- **Legal forms of violence:** These manifest themselves through an uncertain or prolonged pending legal status, refusals of protection without a realistic alternative, the risk of detention or forced return, as well as limited access to rights and services linked to that status. This places persons seeking international protection in Bulgaria in a permanent state of dependency and fear.
- **Structural forms of violence:** These include systemic institutional barriers regarding access to healthcare, employment, social services and protection from violence. They manifest as inadequate accommodation conditions; a lack of safe spaces for women and children; and slow and fragmented administrative procedures. These factors increase vulnerability and limit the ability to make independent decisions.
- **Forms of socio-cultural violence:** These manifest as social control, stigmatisation, shaming, and pressure to submit, including through threats, isolation or restrictions on the behaviour of women and children. In some cases, this also includes transnational control practices that are carried over during forced displacement, including those that place young men in situations of voluntarily accepted labour exploitation and human trafficking.
- **Interpersonal forms of violence:** These include a spectrum of interrelated forms of violence: domestic, intimate partner, sexual or psychological. These are often exacerbated by legal and structural insecurity, economic dependence and social isolation, which make it difficult to seek help and reduce the possibility of ending the violence.

An analytical approach to assessing the risk of gender-based violence

The risk assessment is carried out on the basis of qualitative indicators and a cumulative analysis of three **types of factors**:

1. **Structural factors:** legal status, economic dependence, access to services and the length of procedures.
2. **Spatial and infrastructure factors:** availability of safe zones for women and children, sanitary conditions, lighting in public spaces in and around accommodation facilities, as well as the possibility of a safe and private space without the risk of cultural shame.
3. **Institutional capacity:** Awareness of GBV, clarity on who to report to, and coordination between institutions and NGOs.

These types of factors are directly linked to six groups of analytical indicators for violence, as follows:

A. Structural indicators:

- Type of centre (open / closed / safe zone / external address)
- Availability of 24-hour staff
- Staff-to-resident ratio
- Quality of infrastructure (particularly sanitary facilities)

B. Demographic indicators

- Age (minors ↔ adults)
- Gender homogeneity (all-male centres)
- Transitional nature of stay

C. Socio-economic indicators

- Level of employment (particularly informal)
- Financial pressure on families in countries of origin
- Lack of educational engagement

D. Institutional indicators

- Clarity of responsibilities between institutions
- Effectiveness of sanctions for violations
- Access to health and social services

E. Spatial indicators

- Lighting and environmental safety
- Entry/exit control
- Presence of 'grey areas' (underpasses, toilet facilities)

F. Cultural and symbolic indicators

- Tension between ethnic/religious groups
- Stigmatisation and external discrimination
- Informal hierarchies and group identities

A three-tier rating scale was used in preparing the analysis: Low risk (1), Medium risk (2) and High risk (3). The assessment of the applicable rank and corresponding risk level does not reflect the number of reported cases, but rather the likelihood of the occurrence and escalation of GBV, including hidden and unreported violence.

To support prioritisation even further, the three-tier risk scale is complemented, whenever it is feasible, by an operational assessment of severity of potential harm; likelihood of occurrence or recurrence; immediacy of the risk; number and profile of people potentially affected; availability of existing protective measures; and feasibility of mitigation. This helps distinguish risks requiring immediate action, such as unsafe sanitary facilities, lack of confidential reporting channels or absence of urgent referral pathways, from medium-term structural risks requiring institutional reform, budget allocation or legislative change.

4. COMPARATIVE ANALYSIS BETWEEN ACCOMMODATION SITES, WITH REGARD TO THE RISK OF GENDER-BASED VIOLENCE OCCURRING

4.1. Reception Centres

The comparative analysis indicates that the risk of violence in SAR reception centres is shaped by a combination of institutional, socio-economic, spatial and socio-cultural factors, rather than being attributable solely to individual incidents. These interacting dynamics can create conditions in which tensions, vulnerabilities and protection risks are more likely to emerge. The findings point to the value of a differentiated prevention approach, with measures tailored to the specific needs and risk profiles of children, adult men and persons in transit, supported by stronger integration between protection, security and social policy interventions.

The analysis further suggests that while existing management and security measures may help reduce the visibility, or occurrence of certain forms of violence within reception facilities, the underlying risk factors are not resolved and may instead manifest in surrounding circumstances or other settings.

This highlights the importance of viewing violence prevention through a broader systems lens, recognising the links between reception conditions, access to services, social inclusion and community-level dynamics. Strengthening preventive action across these interconnected areas would build on the efforts already undertaken by SAR and partner institutions and contribute to more sustainable protection outcomes.

- 1) **Structural factors:** legal status, economic dependence, access to services and the length of procedures.

Access to services and employment: There are significant systemic barriers to accessing legal employment and social services, leading to a high number of cases of informal work, including among minors. Procedures for accessing employment whilst seeking international protection are fragmented, and institutional oversight of employment in the economy is limited. This increases the economic dependence and vulnerability of women and families.

Access to specialised protection services: Access to support services for gender-based violence is inconsistent and largely depends on the activities of non-governmental organisations or the personal initiative of those affected.

Intersectional vulnerabilities and unequal access to protection: The assessment indicates that persons with diverse sexual orientation, gender identity and expression, or sex characteristics (SOGIESC), and persons with disabilities may experience heightened exposure to violence, discrimination and social exclusion, including among the community of forcibly displaced and stateless persons in the reception centres, due to the intersection of individual vulnerabilities and structural barriers. Limited availability of specialised services, concerns regarding confidentiality and stigma, physical and communication accessibility challenges, and a lack of targeted prevention measures can reduce their ability to seek assistance and exercise their rights on an equal basis with others. These factors increase the likelihood that incidents remain hidden and highlight the need for inclusive

protection approaches that systematically address the specific risks and needs of particularly disadvantaged groups.

2) Spatial and infrastructure factors:

Accommodation conditions: The infrastructure is outdated, with limited opportunities for personal space and privacy. Combined with tension in communal areas and displays of dominant behaviour by men, this creates an environment with an increased risk of gender-based violence.

Highly vulnerable groups:

- (a) single women housed in family accommodation, where they come into unwanted daily contact with men in shared sanitary facilities and are consequently at risk of cultural humiliation;
- (b) women from ethnic or national minorities in the respective nation states – e.g. Kurdish and Moroccan women who have fled from their spouses in Syria;
- (c) children and young people housed in mixed-gender accommodation;
- (d) LGBTIQ+ persons, more visibly gay men who are forced to conceal their sexual identity in shared dormitories with other men.

Institutional capacity: Awareness of GBV, clarity on who to report to, and coordination between institutions and NGOs.

Awareness of gender-based violence and access to information: Staff awareness of the issue is limited, and training is sporadic and does not cover all staff. In the event of turnover in management positions or staff turnover among those familiar with or responsible for the issue, there is a risk that staff at the RRC may be unable to recognise emerging cases.

The awareness of residents is also not guaranteed by systematic training or an established protocol for familiarising them with this type of information. Knowledge is mainly acquired through social workers or non-governmental organisations, but reactively – i.e. when specific cases have already arisen.

Information does not reach all at-risk groups equally, disadvantaging women, LGBTIQ+ individuals, unaccompanied children and people with disabilities. Some of them learn about risks and protection mechanisms through informal channels rather than through information provided by the institution.

Furthermore, in several reported cases, at least one woman who reported being GBV survivor as well as LGBTIQ+ individuals have been placed in the SAR closed-type facility (now transferred to Pastragor) within the premises of the Busmantsi Special Center for Temporary Accommodation of Foreigners (SCTAF) rather than in an open-type reception centre.

Domestic and intimate partner violence: Cases of domestic and intimate partner violence have been identified – generally before placement, but also in several cases following placement in the RRC. In most cases, these involve women without an independent income and without a stable legal status – i.e. those in the process of appealing an initial refusal. Severe forms of control, threats and attempts to

take children away have been noted, including situations with a cross-border dimension and an increased risk to the women's safety.

Table 3. Overview of the risks across reception centres

Centre	General risk profile	Dominant risks
Ovcha Kupel	Medium–high	labour exploitation, and institutional 'grey areas'
Voenna Rampa	Medium–high	aggression, increased risk of trafficking in human beings, risk of cultural humiliation for single women, risk in the periphery around the RRC
Vrazhdebna	Moderate	infrastructure, sanitary zones
Harmanli	Medium–high	healthcare, economic dependence, vulnerability of women and children

Reception centres could strengthen community-based prevention mechanisms, without shifting responsibility for protection onto residents. This could include regular women-only consultations, adolescent-friendly feedback sessions, engagement with trusted community members, collaboration with refugee-led and women-led organisations, and structured follow-up on safety concerns raised by residents. Such mechanisms should not replace formal reporting or institutional accountability, but can help identify emerging risks earlier, improve trust in services and ensure that prevention measures reflect residents lived experience.

4.2. Special Centers for Temporary Accommodation of Foreigners

At the Sofia SCTAF, gender-based violence manifests itself not so much through reported incidents as through the cumulative effect of restrictions, a lack of personal autonomy, communication barriers and institutional control, which place women in a constant state of vulnerability. The Lyubimets SCTAF stands out as a comparatively well-organised centre in terms of spatial and gender-sensitive protection, thanks to the separate area for women and children and the presence of female staff. The main risks in the SCTAF do not stem from violence between residents, but from institutional shortcomings such as a lack of a referral pathway for persons with serious medical or mental health conditions. This often requires management to rely on ad hoc solutions and discretionary decision-making in good faith. In addition, the legal uncertainty faced by individuals who remain in detention for excessively prolonged periods, particularly those from countries with which Bulgaria has no readmission agreements, leads to heightened stress and prolonged insecurity and uncertainty regarding their future.

More generally, for persons at heightened risk, detention should trigger an immediate and periodic vulnerability review, including assessment of GBV risks, child protection concerns, disability, serious medical conditions, mental health needs, pregnancy, family separation, trafficking indicators and risk of self-harm. Where such risks are identified, authorities should consider alternatives to detention, community-based arrangements or transfer to more appropriate care settings. The review should be multidisciplinary and should not depend solely on self-disclosure, as survivors and persons at risk may be unwilling or unable to report violence in a closed setting due to fear, stigma, language barriers or distrust of authorities.

1. Structural and institutional indicators

- **Lack of personal space for women:** Women have no separate rooms for changing or resting. → Indicator of *an increased risk of psychological and emotional abuse*.
- **Constant video surveillance in sleeping quarters:** Cameras in sleeping and changing areas. → Indicator of *institutional violence and violation of personal dignity*. Places women who are Muslim and in permanent risk of cultural humiliation.
- **Lack of women's safe spaces:** No 'safe spaces' for women, mothers or children. → Indicator of *limited prevention of gender-based violence*.
- **Closed regime and controlled movement:** Scheduled walks, in groups, for a limited time. → Indicator of *structural vulnerability and dependence on the institution*.
- **Accommodation by nationality and gender as a means of conflict prevention:** Whilst this reduces physical clashes, it fails to take into account the specific needs of women. → Indicator of *a lack of GBV-sensitive design of the environment*.

2. Indicators related to communication and access to information

- Language barrier: Lack of consistently provided interpretation during interviews and procedures. → Indicator of *a high risk of under-reporting in cases of gender-based violence*.
- Limited capacity for informed consent: Residents often do not fully understand the procedures and their rights. → Indicator of *vulnerability to abuse and institutional pressure*.
- Passive form of awareness regarding gender-based violence: Information on services related to gender-based violence is available only in the form of posters → Indicator of *formal but ineffective information provision*.

3. Psychosocial and health indicators

- Presence of individuals with mental health conditions without a specialised isolation unit: at the time of the field visit, individuals with mental health conditions were identified. → Indicator of *an increased risk of incidents*.
- Lack of specialised training for staff on mental health and GBV: staff are not systematically trained. The presence of a specialist without a specialist interpreter limits the scope for prevention → Indicator of *limited institutional capacity for early intervention*.
- Prolonged stay amid administrative uncertainty: placement for up to 18 months with no clarity on the outcome. → Indicator of *chronic stress and increased risk of intra-family tension*.

4. Indicators related to gender and vulnerable groups

- Single women placed in the family sector → Indicator of *increased risk of psychological vulnerability and cultural shame*.
- Women with children without support services: Lack of children's spaces, day care and mothering areas. → Indicator of *accumulated stress and secondary vulnerability*.
- Lack of training and understanding of the potential risk of gender-based violence among staff, particularly regarding individuals with diverse sexual orientation, gender identity or expression, or sex characteristics, including those who do not identify to be LGBTIQ+, or otherwise experience hidden vulnerabilities.
- Lack of individual GBV risk screening on admission → Indicator of *missed early signs of violence*.

5. Indicators of access to support and justice

- Limited access to specialised GBV services on site: Psychologists at the SCTAF do not have access to an interpreter with whom to carry out preventive work or provide targeted services related to the risks of gender-based violence → Indicator of *low response capacity*.
- Dependence on external organisations with discontinued projects or reduced funding: Bulgarian Red Cross, Caritas and other organisations do not operate on a permanent basis. → Indicator of *unstable support*.
- Fear of reporting due to status and detention: Women are in a situation of administrative dependency. → Indicator of *high risk of hidden violence*.

Multi-Layer Risk Map 1

Domain	Institutional Gap	Observable Condition	Risk Generated	Potential GBV Impact
Physical Environment	No private spaces for women	No changing/rest areas	Loss of privacy	Psychological harm, emotional abuse
Physical Environment	CCTV in sleeping quarters	Continuous surveillance	Violation of dignity	Cultural humiliation, distress
Protection Environment	No women's safe spaces	Absence of dedicated support areas	Reduced protection	Increased GBV vulnerability
Communication	Language barriers	Lack of interpretation	Under-reporting	Hidden GBV cases
Communication	Limited understanding of rights	Weak informed consent	Dependence on authorities	Increased vulnerability to abuse
Mental Health	Limited specialist support	Persons with mental health conditions remain in shared settings	Heightened tensions	Increased incident risk
Vulnerable Groups	No GBV screening	Risks unidentified at admission	Missed prevention opportunities	Delayed response
Access to Services	Limited specialised GBV support	Insufficient interpretation for counselling	Low response capacity	Unaddressed survivor needs
Access to Justice	Fear of reporting	Administrative dependency	Hidden violence	Lack of accountability

Table 4. Overview of the risks across SCTAF

SCTAF	Overall risk profile	Dominant risks
Busmantsi	 Medium–high	Psychological and institutional violence; risk of under-reporting; direct risk of gender-based physical violence.
Lyubimets	 Medium	Legal and systemic risks.

4.3. Intersectional vulnerabilities in reception and detention facilities

The interaction of gender, disability, age, sexual orientation, gender identity or expression, legal status and detention-related restrictions can create compounded vulnerabilities that are not adequately captured by standard protection measures. As a result, some individuals may face heightened exposure to violence, discrimination and exclusion while simultaneously encountering greater barriers to accessing protection, support and justice. This points to the need for targeted, intersectional and survivor-centred protection approaches.

Women with physical, sensory, intellectual or psychosocial disabilities face additional barriers in accessing information, movement, services and complaint mechanisms. Dependence on family members or other care givers, other residents or staff for daily activities may increase exposure to neglect, exploitation or abuse. → Indicator of heightened vulnerability arising from the intersection of gender, disability and detention.

Individuals with diverse sexual orientation, gender identity, gender expression or sex characteristics may face stigma, social exclusion, harassment or violence from other residents, particularly in environments where privacy is limited and cultural attitudes toward gender and sexuality differ significantly. → Indicator of elevated risk of hidden violence, social isolation and under-reporting.

Absence of specialised screening for intersectional vulnerabilities: Reception and detention procedures do not systematically identify risks linked to disability, sexual orientation, gender identity, gender expression or sex characteristics. → Indicator of reduced institutional capacity to detect and address complex protection needs at an early stage.



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Accommodation arrangements based primarily on nationality, family composition or biological sex: Existing placement practices may not adequately consider the specific protection needs of persons with disabilities, transgender individuals, or other persons with heightened vulnerabilities, including within their presumed communities. → Indicator of increased exposure to discrimination, psychological distress and protection incidents.

Communication barriers affecting vulnerable groups disproportionately: The lack of interpretation and accessible communication formats can have a particularly severe impact on survivors with disabilities, low literacy levels, or those experiencing stigma related to their sexual orientation or gender identity. → Indicator of increased likelihood of non-disclosure and unmet protection needs.

Limited availability of specialised and confidential support services: Access to psychosocial, legal and protection services tailored to the needs of persons with disabilities and LGBTIQ+ individuals is limited and often dependent on external actors. → Indicator of unequal access to protection and recovery mechanisms.

Fear of discrimination, retaliation or adverse consequences: Individuals who already occupy a marginalised position within the resident population may be less likely to report violence, harassment or exploitation due to concerns about confidentiality, social exclusion or negative impacts on their legal or administrative situation. → Indicator of elevated risk of hidden and recurring violence.

Prolonged uncertainty combined with pre-existing vulnerabilities: Extended periods of detention or administrative uncertainty can have a disproportionate impact on persons with disabilities, survivors of trauma, and LGBTIQ+ individuals, exacerbating stress, anxiety and feelings of insecurity. → Indicator of cumulative psychosocial harm and reduced resilience.

Lack of staff training on intersectional vulnerabilities: Staff often have limited knowledge of the specific protection risks affecting persons with disabilities and LGBTIQ+ individuals, including the ways in which discrimination and violence can manifest. → Indicator of reduced capacity for prevention, identification and survivor-centred response.

4.4. Humanitarian Support and Integration Programme

The comparative analysis shows that the risk of gender-based violence in the locations covered by the Programme for Humanitarian Support and Integration of Displaced Persons from Ukraine granted temporary protection in the Republic of Bulgaria is rather low and that the individuals are relatively well integrated into local communities.

Structural violence is primarily linked to the temporary nature of the programme, which cyclically generates systemic insecurity for the accommodated persons and is a typical example of so-called 'slow violence', giving rise to a risk of homelessness or economic dependency.

Isolated incidents of xenophobia and discrimination have been reported, which are due in part to political sentiments within local communities and are not linked to gender characteristics.

Many respondents described experiences and reactions consistent with trauma-related distress linked to direct exposure to military action (sirens, shells landing nearby, the death of loved ones), forced displacement and the loss of home and employment, as well as the severing of ties with relatives and friends; with the uncertainty generated by the temporary nature of protection and the cyclical changes in humanitarian programmes, and the risk that those who already feel integrated in Bulgaria may be returned to Ukraine once the hostilities end.

- **Defence mechanism against xenophobia:** Every interview begins with *"We thank Bulgaria and the Bulgarian people..."* and initially they do not share the problems they face.
- **Scale mechanism:** Compared to the horrors of war and bombing they have experienced, the problems here seem insignificant to them. This also manifests in an overstatement of being safe in Bulgaria while speaking to host community members and humanitarian stakeholders.
- **Needs mechanism:** As their basic needs for food and economic security are not met, the issue of GBV is of no importance to them at all, and questions on this subject are overshadowed by the need for medicines, access to doctors, the cost of household chemicals and the quality of food.
- **Normalisation of discrimination:** As it occurs in numerous everyday situations, they have learnt to live with discrimination; that is, they have normalised everyday racism and taunts such as *'Go back to Ukraine!'* and are not inclined to report them.

1) Context and vulnerable groups

The most frequently mentioned groups with increased vulnerability:

- women (including single mothers), elderly women, people with disabilities;

- families with children; children travelling alone or on public transport;
- people with chronic illnesses (diabetes, cancer) and limited mobility;
- people without a stable income/pension, dependent on the Programme;
- people with pets (stress/pressure to 'get rid of' them, risk of forced relocation).

2) Risks relating to gender-based violence

A. Physical safety and risks in and around accommodation

- **Inside the centre/hotel, the atmosphere is calm**, there is security and restricted access.
- **The town is peaceful**, and the police respond quickly and respectfully

Risk areas:

- **risk areas outside the resort/hotel: typical of holiday resorts** (paths to the beach, darker/secluded areas; 'nudist beach'; beach bars)
- **Incidents/petty crime**: the aforementioned bag snatching/theft
- **a lack of clear information** on 'who to call' in the event of an incident; some people are unsure how to use the 112 emergency number or have been refused an ambulance or police patrol by 112.

GBV link: The risk is highest for women and girls who travel alone in the dark, on isolated routes, or where there is no quick access to help.

B. Exploitation and economic violence

- seasonal work, often precarious: **working without a contract** and instances where employers **do not pay** or **pay only half** of the agreed amount (as forms of economic exploitation)
- dependence on income for transport/medical care/children's needs → increases the risk of women accepting unfavourable working conditions that carry risks of gender-based violence

GBV link: economic dependence is a 'gateway' to coercion, exploitation, pressure and control.

C. Institutional vulnerability and 'structural violence'

- **lack of accessible local healthcare** (especially for older persons and persons with serious health conditions)
- **Discriminatory/degrading treatment** in healthcare (people are afraid to lodge complaints)
- **logistical difficulties for children** (picking up/dropping off at school), transport, costs for childminders
- **lack of lifts/accessibility** → dependence on others, inability to be independent

GBV link: when there is no access to services, women and vulnerable people become more dependent on intermediaries (strangers, 'helpers', employers), which increases the risk of abuse.

D. Psychological pressure and insecurity (coercive control / stressors)

- fear of changes to the programme/funding, of relocation, of losing one's place

- pressure regarding rules (e.g. regarding a dog) → risk of forced relocation of a family with a sick person
- **chronic stress**: “there are no guarantees for anyone”, “the future is unclear”

GBV link: chronic stress and insecurity increase the risk of family conflicts, intimate partner violence and seeking “risky solutions”.

E. Social hostility/stigma

- Social aporophobia: “You’re living off our money”
- Political xenophobia: “Let Putin finish you off!”

GBV link: stigma can limit the seeking of help and increase isolation

Multi-Layer Risk Map 2

Structural / Environmental Factor	Observable Condition	Risk Generated	Potential GBV / Protection Impact
Information gaps re: emergency assistance	Residents unclear who to contact in an emergency	Delayed access to protection and emergency response	Increased vulnerability during incidents of violence
Exposure to isolated public spaces	Routes to beaches, poorly lit areas, secluded locations and reduced natural surveillance	Increased exposure to harassment, assault or opportunistic crime	Heightened GBV risks for women and girls travelling alone
Petty crime in surrounding areas	Reported incidents of theft and bag snatching	Reduced perception of safety and confidence in movement	Increased fear and self-restriction
Informal and precarious employment	Work without contracts and incomplete or withheld payment	Economic exploitation and dependency	Increased susceptibility to coercion, abuse and exploitative relationships
Dependence on income for basic needs	Earnings are required for transport, healthcare and children's needs	Reduced ability to refuse unsafe conditions	Increased risk of labour exploitation and survival-related risks
Limited economic alternatives	Lack of stable employment opportunities	Financial insecurity	Greater exposure to control, pressure and economic violence
Limited access to healthcare	Difficulties accessing healthcare, particularly for older persons and those with serious health conditions	Dependence on intermediaries for support	Increased risk of exploitation and unequal access to assistance

Reported discriminatory or degrading treatment	Fear of complaints due to anticipated negative treatment	Reduced help-seeking behaviour	Under-reporting of violence and protection incidents
Childcare and school-transport challenges	Difficulties managing school logistics, transport costs and childcare arrangements	Increased caregiving burden, particularly for women	Heightened stress and vulnerability to economic and domestic pressures
Lack of accessibility infrastructure	Absence of lifts and adapted facilities	Dependence on others for mobility and daily activities	Increased vulnerability of persons with disabilities and older persons
Uncertainty of humanitarian support continuity	Fear of funding changes, relocation or losing accommodation	Chronic insecurity and loss of control	Increased psychological distress and household tensions
Pressure associated with rules and compliance requirements	Concerns that minor issues could result in relocation or loss of support	Heightened anxiety and dependence	Increased vulnerability to coercive dynamics
Prolonged uncertainty about the future	Persistent concerns regarding status and prospects	Chronic stress and reduced coping capacity	Elevated risk of family conflict and intimate partner violence
Social stigma and aporophobia	Negative perceptions related to receiving assistance	Social isolation and reduced sense of belonging	Reduced willingness to seek help or report abuse
Xenophobic attitudes and hostile rhetoric	Verbal hostility and discriminatory comments from members of the public	Fear, exclusion and reduced community engagement	Increased vulnerability and barriers to accessing support

Table 5. Overview of the risks across accommodation sites

Location	General risk profile	Dominant risks
Montazhi Dorms (Burgas)	 Low	Infrastructure, lack of cooking facilities
Holiday House Council of Ministers (Sunny Beach)	 Medium-Low	Voluntary invasion of personal space; discrimination off-campus; isolated reports of labour exploitation
Sun City (Sunny Beach)	 Low	-

Apartments (Pomorie)	 Low	Sanitary facilities
BDZ (Primorsko)	 Medium–low	Structural violence, economic insecurity

In accommodation under the Humanitarian Support and Integration Programme, GBV risk mitigation could be integrated into broader community-based protection and local integration measures. This includes safe mobility planning, information on labour rights, referral for unpaid wages or exploitation, access to trusted health providers, local anti-discrimination pathways, and structured dialogue with municipalities and host communities. Measures to address xenophobia, aporophobia (prejudice based on a person's poverty), and misinformation could be considered part of GBV risk mitigation, as stigma and isolation can reduce help-seeking, increase dependency and expose women, older persons, persons with disabilities and single parents to unsafe coping mechanisms.

5. RECOMMENDATIONS

Operational recommendations

1. Clearly designated, physically secure areas for women and children

Each centre should have a clearly designated, physically secure area for women and children, including separate bedrooms; separate sanitary facilities (bathrooms and toilets); a relaxation room for women, inaccessible to men; a children's play area with toys. In centres where this is not possible, temporary spatial solutions should be introduced (such as partitions, scheduled use by different groups, temporary rooms).

2. Minimum standards for personal privacy and dignity

Ensure the provision of private changing areas for women and girls. Cameras in sleeping quarters should only be used in strictly defined exceptional cases and should not cover changing and sleeping areas; where this is not possible, compensatory measures (partitions, visual barriers) should be introduced. Lighting in communal areas and along routes within and around the centres should be adequate and constant, particularly around toilet facilities and outdoor areas.

3. Accessible and safe communal areas

Ensure supervised but regular opportunities for outdoor activities, without discrimination on the basis of gender or age and introduce clear rules for the use of communal areas, with a focus on preventing conflict and violence. This should be supported by clear spatial organisation by gender and age; provision of protected areas for women and mothers with children; effective access control (particularly at night); minimum standards for personal space, privacy and safe use of sanitary facilities. Designation of safe and accessible areas for: single women; mothers with children; pregnant women. Improved lighting, CCTV and access control, implemented for the purposes of prevention and protection, rather than in a repressive or criminalising manner towards residents.

4. Mandatory information sessions on gender-based violence

Introduction of mandatory, periodic information sessions for all women, men and young people held: on initial admission; on change of status or relocation; periodically (e.g. every 3 months). The sessions should be conducted in the participant's native language or with an interpreter and cover: what constitutes gender-based violence (including economic violence, control, coercion and trafficking); how and where to report incidents; and available support inside and outside the centre.

5. Recognition of GBV as a structural risk in the reception system

Gender-based violence should be formally recognised as a structural and cumulative risk linked to lack or loss of legal status, economic dependence and irregular employment, separated families, and limited access to services. This requires strengthened institutional oversight of child labour and informal employment, also recognised as forms of exploitation and structural violence, through enhanced coordination with the Executive Agency "General Labour Inspectorate" and social services.

Key measures include:

- Protective monitoring mechanisms for economically dependent or coerced women and young people, such as structural GBV indicators in reception centre monitoring (e.g. lack of status, child labour, lack of access to healthcare).
- An institutional procedure for targeted employment support, particularly for youth aged 16–18, facilitating legal, temporary employment during protracted protection or appeal procedures to reduce economic dependence and abuse risk.
- Effective sanctions and reporting mechanisms against employers who exploit vulnerable persons, through close operational cooperation with the General Labour Inspectorate.

6. Guaranteed access to GBV services, regardless of legal status

The applicable provision in the national legislation – the Law on Asylum and Refugees and the Foreigners in the Republic of Bulgaria Act – should explicitly provide for the right of victims of gender-based violence to access specialised services regardless of their current status. These legal provisions should be incorporated into the rules of organisation and internal order of the Reception Centres for Asylum Seekers, the Specialised Centre for Temporary Accommodation of Foreigners and the accommodation facilities under the Humanitarian Support and Integration Programme, and should be matched by actual access to gynaecological care, paediatric care, mental health support, and crisis support. The regulative framework should prohibit any refusal of medical or psychological assistance based on lack of documents. This should include regular and predictable medical care through the permanent presence or mobile teams of a paediatrician and gynaecologist; guaranteed and effective access to vaccinations, prevention and treatment without formal or administrative barriers, including in the absence of documents or legal status; and accessible dental care, identified by women as a serious and chronic health problem, with a clear procedure for referral and coverage of costs.

7. Proposal to update the SAR's Standard Operating Procedures (SOPs) for the prevention of and response to gender-based violence and for the Migration Directorate to adopt identical or similar procedures.

Every SAR centre and the Migration Directorate should have a written operational protocol covering how to identify risk, who responds, how to ensure victim safety, and when to involve police, social services, and health services. Existing protocols and SOPs should be updated to treat gender-based violence as an ongoing risk, with clear responsibilities divided between SAR, the Ministry of the Interior, ASA, MoH, and municipalities. All staff, including police guards, should be trained to recognize indicators of gender-based violence and equipped with the mechanisms and authority to act proactively rather than only in response to incidents. Local cross-sectoral mechanisms should be established at each site, including regular meetings, designated points of contact, and a referral protocol.

Specific recommendations regarding the necessary changes to the SOP:**Key shortcomings identified in the study:**

- Focus on post-incident response rather than on prevention and early risk identification
- Low and sporadic awareness among women and vulnerable groups
- Uneven access to services, depending on status, NGOs or individual initiative
- Lack of clearly defined responsibilities at central level

Need to update definitions and principles:

- Inclusion of risk factors that increase vulnerability (lengthy procedures, economic dependence, accommodation conditions, limited access to services)
- Recognition of an increased risk of violence, allowing for preventive action
- Principle of effective access to protection and services, regardless of status
- Principle of early identification and prevention

Operational and systemic additions to the SOP**Reporting and support system**

- Recognition of informal sharing as a primary signal
- Clear distinction between reporting an incident and consenting to follow-up actions
- Possibility of support without automatically involving the police or other institutions

Organisation and responsibilities

- Appointment of a designated officer for gender-based violence in each centre
- Formalised coordination between the SAR, health and social services and NGOs
- Minimum standards for information provision: upon arrival and periodically; in understandable language; verbally and visually.

Monitoring

Supplementing reporting with preventive indicators, e.g.: duration of procedures; access to health services; availability of safe spaces for women and children; frequency of information sessions.

The updated SOPs should ensure a transition from a reactive to a preventive model, based on early risk identification, accessibility of support and a coordinated institutional response.

Recommendations for Specific Measures in RRCs:

To introduce risk-based protection measures for vulnerable persons whose applications have been definitively rejected, particularly where they are: single mothers; pregnant women; persons exposed to violence or trafficking; parents of children born or educated in Bulgaria; stateless women; and children with chronic illnesses. These measures should focus on preventing exposure to trafficking, forced marriage, and economic or sexual exploitation; avoiding automatic transfer to administrative detention or restrictions on freedom of movement, especially where children or other vulnerable persons are present; systematically applying alternatives to detention and community-based arrangements; and ensuring continued access to basic services and protection mechanisms, irrespective of status in line with EU law and human rights obligations.

1. RRC Harmanli

A more regular and predictable schedule for doctors. Access to a doctor; paediatrician; dentist; nursery and school. Clear information on vaccinations and children's health. Legal assistance that is understandable and consistent, rather than merely formal. Clear deadlines and information regarding court proceedings. Protection against forced return and against the administrative detention of parents

with children in closed facilities. Protection against transnational partner violence (threats, child abduction). Support for legal employment to prevent dependency and exploitation. Flexible employment opportunities for single mothers and separated families.

2. RRC Sofia, Ovcha Kupel district

Stricter control of entry/exit to the building and grounds. Effective coordination with legal representatives. An end to the 'normalisation' of child labour. More language and educational programmes with real incentives.

3. RRC Sofia, Voenna Rampa district

Reduction in mixed accommodation. More female social mediators. Clearly designated safe spaces for women. Active prevention of domestic and psychological violence. Restriction of unauthorised external contacts in the vicinity of the centre.

4. RRC Sofia, Vrazdebna district

Improving infrastructure regarding sanitary facilities and potential risks of gender-based violence between men in toilets. Accessible psychological services. Working with the local community to reduce stigma.

5.1. Special Centre for Temporary Accommodation of Foreigners (SCTAF)

1. **Creation of safe spaces for women and children**, including: changing rooms without CCTV; women's rooms for rest and conversation; areas for mothers with children.

2. **Review of the CCTV policy in sleeping quarters**: the current practice poses a risk to dignity and privacy. It should be replaced with alternative conflict prevention mechanisms (more staff, training, mediators).

3. **Language and procedural safeguards**: provision of professional interpretation upon admission; interviews regarding origin, age and vulnerability; information on rights and GBV mechanisms. The lack of interpretation at the SCTAF increases the risk of secondary victimisation and incorrect assessment of vulnerability.

4. **Working with people with mental health conditions**: Establish a clear protocol for people with mental health conditions, including: a temporary isolation room or safe space; specialist training for staff; regular access to a psychiatrist. In cases of acute mental health crisis, an individualised risk assessment and timely specialised support are needed to identify and mitigate any potential risks, including risks related to gender-based violence, without assuming that mental health conditions in themselves are associated with violent behaviour.

5. Building on and disseminating good practices from the Lyubimets Centre

The centre in Lyubimets demonstrates positive practices for the prevention of gender-based violence, which should be introduced as standard: a physically separate and protected area for women and

children; a relaxation room for women; an equipped children's play area with toys; significant participation of women in key positions (interviewers, security staff, management).

Recommendation: These elements should be formally incorporated into national standards for accommodation in open and closed centres.

6. Addressing systemic shortcomings

Recommendation: Specialised national social centres for foreign nationals should be established, categorised by profile: physically ill persons; persons with mental health conditions. These centres should operate under the joint responsibility of the Ministry of the Interior and the Ministry of Labour and Social Policy.

Ensure that persons residing irregularly have a real opportunity to access general and specialised services according to their specific needs (e.g. physically ill persons, persons with mental health conditions, etc.). This can be achieved either by establishing national social centres for foreigners or by specifically enhancing the capacity of existing such services in the Sofia Municipality (for Busmantsi) and in the Harmanli Municipality (for Lyubimets), ensuring sustainability through partnership with the participation of the Social Assistance Directorate.

Specialisation and capacity-building must be linked to training in working in a multicultural environment, the provision of interpreters, and the development of explicit regulatory guidelines for services on how to assist undocumented individuals in such cases.

Closed facilities should have confidential, accessible and multilingual complaint and feedback mechanisms, including options to report misconduct, abuse, discrimination, harassment, exploitation or violence by staff, guards, service providers or other residents. Information on these mechanisms should be provided verbally and in writing upon admission and repeated periodically. Complaints should be handled through procedures that protect the complainant from retaliation, ensure confidentiality, separate complaint intake from immigration decision-making, and provide safe referral to protection, health, psychosocial and legal services where required.

7. Legislative and procedural changes

1. Developing and implementing alternatives to detention for vulnerable women and families.
2. Establishing a regulatory mechanism governing the stay in Bulgaria of individuals who cannot be returned but cannot be detained either.
3. Introduction of mandatory protocols for the prevention of and response to GBV in all centres.

Specific recommendations to Migration Directorate

Sofia

1. Creating authentic private living spaces instead of depending on ad hoc privacy barriers, such as bed sheets hung around beds.
2. Clear rules on when and how staff may enter the sleeping quarters.

3. Ensure women can approach a female member of staff if they have problems, including GBV.
4. Information on gender-based violence should not be provided solely via noticeboards, but through information sessions. Involve NGOs in regular information meetings, not just on a project basis.
5. Provision of a play area for children adjacent to the accommodation areas – so that special permission is not required and children do not have to pass through gates with bars like a prison cell (as is currently the case with the family wing).
6. More time spent outdoors;
7. Clarity regarding health procedures.
8. Support for vulnerable individuals in accessing hospitals and in emergencies – a practice that already exists but should be formalised and improved.

Lyubimets

1. Preservation and further development of the protected area for women and children, with guaranteed access to materials in the mother tongue or national language of the relevant country of origin, regardless of nationality or legal status.
2. Regular presence of a psychologist in the women's area and the running of support groups for mothers to reduce the risks of internal intercultural conflicts among individuals accommodated together with young children
3. Improving language accessibility – information in appropriate languages on rights, services and protection from violence.
4. A clear mechanism for cooperation with the Ministry of Health and the Agency for Social Assistance to refer serious medical and mental health cases to appropriate social services outside the centre.

5.2. Humanitarian Support and Integration Programme

Specific recommendations for accommodation facilities under the Humanitarian Support and Integration Programme

1. Reporting and information channels

- Visible '**where to call**': 112, police, social worker, Bulgarian Red Cross, crisis services
- anonymous reporting mechanisms (box/telephone/contact person)
- brief instructions in understandable language (Ukrainian/Russian/Bulgarian)

2. Safety around accommodation sites

- map/information on **high-risk routes** and recommended safe routes
- lighting and signage (where applicable)
- encouraging people to travel in pairs in the evening (as a community practice)

3. Preventing labour exploitation

- promoting **contractual** employment, information on employment rights

- access to legal advice/referrals in cases of unpaid wages
- information on where to report labour exploitation

4. Access to healthcare without humiliation or discrimination

- list of **recommended** doctors/option to change doctors in the event of discrimination
- clear complaints procedure (without risk of 'retaliation')
- Basic on-site medical services (medical staff on a regular basis)

5. Psychosocial support (PSS)

- Regular visits by a psychologist/social worker **on site**
- support groups for women/single mothers/older people
- opportunity for one-to-one conversations (confidential)

6. Transport and accessibility as a GBV measure

- organised transport to the doctor/school (especially for children and the sick)
- solutions for people with disabilities (lift/relocation to more accessible rooms)
- reducing dependence on casual helpers/paid carers

7. Minimum infrastructure measures (directly related to safety)

- non-slip flooring/handrails in showers (falls = risk, especially for older women)
- Bright lighting in communal areas
- safe meeting spaces

8. Specialised services for victims of violence

- Visible contact details for crisis services
- referral protocol for domestic violence (without exposing the victim)

References

1. Asylum Information Database (AIDA); European Council on Refugees and Exiles (ECRE), *Country Report: Bulgaria*, 2025
2. Bulgarian Gender Research Foundation, *Legal Aid for GBV Survivors in Bulgaria*, 2023
3. Centre for the Study of Democracy, *The Legal Metamorphosis of Domestic Violence in Bulgaria: National Study on Domestic and Gender-Based Violence*, 2024
4. Cockburn, C., *The continuum of violence: a gender perspective on war and peace*, in C. W. Giles and J. Hyndman (eds.), *Sites of Violence: Gender and Conflict Zones*, Berkeley, CA: University of California Press, 2004
5. Constitutional Court of the Republic of Bulgaria, *Decision No. 13 on Constitutional Case No. 3/2018 (Istanbul Convention)*, 27 July 2018
6. Council of Europe, *Bulgaria Signs the Istanbul Convention (Press Release)*, 21 April 2016
7. Council of Europe, *Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence (CETS No. 210)*, 2011
8. Council of Europe, *European Convention on Human Rights*, 1950
9. Council of Europe, *Explanatory Report to the Istanbul Convention (CETS No. 210)*, 2011
10. Council of Europe, *Risk Assessment and Safety Management in Domestic Violence Cases*, 2018
11. Council of Ministers, *Coordination Mechanism for Cooperation in Cases of Domestic Violence*, 2025
12. Council of Ministers, *Regulations for the Implementation of the Protection against Domestic Violence Act*
13. Council of the European Union, *Decision Implementing Temporary Protection*, 2022
14. Enloe, C., *Maneuvers: The International Politics of Militarizing Women's Lives*, Berkeley, CA: University of California Press, 2000
15. European Court of Human Rights, *Opuz v. Turkey – Positive Obligations in Domestic Violence*, 2009
16. European Union, *Council Directive 2001/55/EC on Temporary Protection in the Event of a Mass Influx of Displaced Persons*, 2001
17. European Union, *Council of Europe Convention on Preventing and Combating Violence against Women and Domestic Violence — EU Instrument of Accession/Publication in OJ*, 2023
18. European Union, *Directive (EU) 2024/1346 of the European Parliament and of the Council of 14 May 2024 laying down standards for the reception of applicants for international protection*, 2024
19. European Union, *Directive (EU) 2024/1385 on Combating Violence against Women and Domestic Violence*, 14 May 2024
20. European Union, *Directive (EU) 2024/1712 amending Directive 2011/36/EU on trafficking in human beings*, 13 June 2024
21. European Union, *Directive 2011/36/EU on Preventing and Combating Trafficking in Human Beings and Protecting its Victims*, 2011
22. European Union, *Directive 2011/99/EU on the European Protection Order*, 2011

23. European Union, *Directive 2012/29/EU Establishing Minimum Standards on the Rights, Support and Protection of Victims of Crime*, 2012
24. European Union, *Directive 2013/32/EU (Asylum Procedures Directive) on Common Procedures for Granting and Withdrawing International Protection*, 2013
25. European Union, *Directive 2013/33/EU (Reception Conditions Directive) Laying Down Standards for the Reception of Applicants for International Protection*, 2013
26. European Union, *Regulation (EU) 2024/1347 of the European Parliament and of the Council*, 14 May 2024
27. European Union, *Regulation (EU) 2024/1348 of the European Parliament and of the Council of 14 May 2024 establishing a common procedure for international protection in the Union and repealing Directive 2013/32/EU*, 2024
28. European Union, *Regulation (EU) No 606/2013 on the Mutual Recognition of Protection Measures in Civil Matters*, 2013
29. Eurostat; European Commission, *Temporary Protection Statistics*, 2025
30. International Organisation for Migration, *Guidelines on referral mechanisms for the protection and support of migrants exposed to violence, exploitation and trafficking*, 2019
31. Kelly, L., *Surviving Sexual Violence*, Cambridge: Polity Press, 1988
32. Kelly, L. and Regan, L., *Rape: The Forgotten Issue?*, London: Child and Woman Abuse Studies Unit, University of North London, 2001
33. Ministry of Justice of the Republic of Bulgaria, *Implementation Guidelines under the Law on Protection against Domestic Violence*, 2024
34. Ministry of the Interior of the Republic of Bulgaria, *Methodology for Risk Assessment in Cases of Domestic Violence*, 2023
35. Ministry of the Interior of the Republic of Bulgaria, *Report on Amendments to the Criminalisation of Domestic Violence*, 2024
36. National Assembly of the Republic of Bulgaria, *Constitution of the Republic of Bulgaria*, 1991 (amended and supplemented)
37. National Association of Municipalities, *Map of Social Services in Bulgaria*, 2024
38. National Commission for Combating Trafficking in Human Beings (NCCTHB), *Annual Report*, 2024
39. National Legal Aid Bureau, *Annual Activity Report*, 2024
40. Ombudsman of the Republic of Bulgaria, *Monitoring the Execution of ECtHR Judgments in 2024 (Report)*, 2024
41. Republic of Bulgaria, State Gazette, *Law on Asylum and Refugees*, 2002 (amended and supplemented)
42. Republic of Bulgaria, State Gazette, *Law on Combating Trafficking in Human Beings*, 2003 (amended and supplemented)
43. Republic of Bulgaria, State Gazette, *Law on Protection against Domestic Violence*, 2005 (amended and supplemented 2023)
44. Republic of Bulgaria, State Gazette, *Penal Code*, 1968 (amended and supplemented)
45. Republic of Bulgaria, State Gazette, *Protection against Discrimination Act*, 2003 (amended and supplemented)

46. Republic of Bulgaria, State Gazette, *Regulations for the Implementation of the Social Services Act*, 2019
47. Sisic, M., Tastsoglou, E., Dawson, M., Holtmann, C., Wilkinson, L. and Falconer, C., *The continuum of gender-based violence experienced by migrant and refugee women in Canada: perspectives from key informants*, 2024
48. Social Assistance Agency of the Republic of Bulgaria, *Annual Activity Report*, 2025
49. State Agency for Refugees, *Annual Report on the Activities of the SAR*, 2024
50. UNHCR, *GBV Safety Audit Tool and Service Mapping Guidance*, 2024
51. UNHCR, *Gender and Age Disaggregated Data – Bulgaria*, 2024
52. UNHCR, *Guidelines on International Protection No. 1: Gender-Related Persecution*, 2002
53. UNHCR, *Handbook on Procedures and Criteria for Determining Refugee Status*, 2019
54. UNHCR, *National GBV Referral Pathways – Bulgaria*, 2024
55. UNHCR, *Inter-agency referral form – Bulgaria*, 2024
56. UNHCR, *Guidelines for the Inter-Agency Referral Form – Bulgaria*, 2024
57. UNHCR, *Operational Report on Bulgaria – March 2025*, 2025
58. UNHCR, *Participatory Assessment – Bulgaria*, 2025
59. UNHCR, *Voices of Refugees in Bulgaria*, 2025
60. United Nations, *Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)*, 1979
61. World Health Organization, *Responding to Intimate Partner Violence and Sexual Violence*, 2013

ANNEXES

Annex 1. Matrix of the sample surveyed: typology of respondents by type of instrument, gender and place of accommodation.

Location	Experts	NGOs/IOM	FG – men	FG – women	Interviews with men	Interviews with women
RRC Ovcha Kupel	1	2	-	-		
RRC Voenna Rampa	1	5	-	-		
RRC Vrazhdebna	6	-	-	-		
RRC Harmanli	7	1	-	10	1	
SCTAF Busmantsi	4	-	5	-		
SCTAF Lyubimets	2	-	-	3	1	
“Montazi” – Burgas	-	-		8		
Holiday House Council of Ministers – Sunny Beach	-	-	18	51		
Sun City Hotel – Sunny Beach	-	-				6
Private accommodation – Pomorie	1	-				5
BDZ – Primorsko	2	-	-	4		1
Compass Centre – Burgas	2	1	2	2		
TOTAL	24	9	25	78	2	12

APPENDICES

Appendix 1. Structure of the monitoring protocol

Module	Topics	Sub-themes
Social environment	Location and boundaries (to)	access to the area; public transport; pavements; street lighting; car parks; shops
	General description of the area (in)	what the residential buildings look like; are there clearly defined pedestrian areas; lighting; is there a park/garden; car parks
	Micro-zones and internal stratification	noisy area; dirty area; 'Addictions' area; 'Prostitution' area; 'Slums' area; VIP area; dark area
	Public spaces	shops; cafés/restaurants; casinos; clubs/libraries; playgrounds; churches/mosques; workshops/factories
	Private areas of the home	condition of the premises: walls, windows and doors, furnishings; kitchen; children's room/toys
Indicators of social adaptation and behaviour determined by gender-specific roles	Care and neglect of appearance	Women: clothing, hairstyles, make-up Men: clothing, hairstyles, beards Children's appearance Eating on the go: junk food Supervision of children
	Gender-specific roles	Examples of gender-specific behaviour in public places Male/female public spaces
	Publicly expressed emotions	anxiety/worry; crying; aggression/anger; affection/intimacy; apathy; curiosity
Social issues (informal interviews)	Significant social problems in the area	Lack of facilities: school, nursery, doctor, pharmacy, shop Lack of infrastructure: street lighting, waste collection, water and sanitation, road surfaces, pavements, transport links to the town and the municipality; unreasonably high prices, external discrimination, self-segregation
Social context (informal interviews)	Nationalities and languages (spoken at home)	Arabic, Farsi, Fari, Kurdish (Kurmanji, Sorani, Laki), Pashto, Russian, Ukrainian
	Institutions (mentioned spontaneously)	
	Significant people (opinion leaders)	
	Places (mentioned in conversations)	
	Numbers (which appear in conversations)	number of people, prices

Appendix 2. Do-no-harm checklist for facilitators

Before any focus group, interview or safety walk, facilitators should confirm that:

1. Participants understand the purpose of the exercise and that it is not a case investigation.
2. Participation is voluntary and can be stopped at any time.
3. No one is asked to disclose personal experiences of violence.
4. Referral information is available in relevant languages.
5. Interpreters are briefed on confidentiality and neutrality.
6. Discussions take place in a safe and private setting.
7. No names or identifying details are recorded in the analysis.
8. Any disclosure is met with supportive listening and referral, not probing questions.
9. Findings are shared in aggregate form only.
10. Recommendations are followed up through an action plan.

Appendix 3. GUIDE TO CONDUCTING A FOCUS GROUP DISCUSSION IN CONNECTION WITH A SAFETY SURVEY IN ACCOMMODATION FACILITIES FOR REFUGEES AND MIGRANTS

Good afternoon. Hello and welcome.

Thank you for accepting our invitation today to talk about your stay at this centre.

My name is Alexei Pamporov, and I am a professor of sociology at the Bulgarian Academy of Sciences. With me here is Diana Videva – a psychologist from the ‘Demetra’ association, who is an expert on the issues we will be discussing today.

Also, with us is [name of interpreter], who will be our interpreter.

Our meeting today relates to the work of UNHCR in Bulgaria and the need to explore various aspects of the security of refugees who have sought protection in Bulgaria, for example, how they feel, what concerns them, and what they would like to see changed. This is a form of feedback from you to the Bulgarian authorities. The meeting will be organised in such a way that you remain anonymous and can say everything that has been worrying you so far, without worrying that there might be negative consequences for you. Everything you say here will be summarised in our report in such a way that no one will be able to tell exactly who said it.

That is why, at the start, I won't ask you to introduce yourselves by name but will hand out a slip of paper to each of you with the name of a character from a popular children's cartoon written on it. As I want to use a voice recorder so as not to waste your time and so that we can finish our work more quickly – when I give you the floor during the conversation, I will use that name. So, in the recording, Aladdin, Ali Baba and Scheherazade will be speaking, and no one will be able to link what you have said specifically to you.

Unfortunately, sometimes when we discuss such topics, it is possible that some of you may experience unpleasant feelings: for example, sadness, anger, pain or guilt. Please do not worry or feel ashamed about this. On the contrary, these are normal feelings, and if necessary, we can even pause the conversation for a moment or change the subject. And I trust that the other participants will be understanding. What's more, you are here of your own free will, for which I thank you once again. So at any moment, if you feel unwell during the conversation and need to leave – you are welcome to do

so. Although, to be honest, I hope that doesn't happen, because if you all decide to leave, I won't have anyone to talk to.

The last thing I'd like to ask of you before we begin is to listen to one another and not interrupt during the discussion, so that the interpreter can do their job more easily. We're here to hear the views of every single one of you. Every single one of you is important. And the fact that you may have different opinions and different perspectives on the same issue is also normal. Don't be afraid to argue or disagree with the views of other participants, but please let's keep a civil tone, listen to one another and respect each other.

Well... that's it. Do you have any questions for me before we start, or shall we not waste any more time and get on with it?

1. Right. To start with, I'd like to ask each of you to tell me how long you've been living in this area and how you came to be here?

2. When you hear the word... {safety}

... what does it mean to you?

3. Overall, do you feel safe in this place, and what makes you feel that way – safe or unsafe?

4. Overall, how safe do you think the area is for you and for other people living in this centre?

5. Do you have any safety concerns whilst living in the centre and going out into the surrounding area or travelling into the city centre (for example, for shopping, prayer or a walk)?

6. [mental mapping] I'm now going to hand out a printed map of the area around the city centre to each of you. Could you please draw on the map and mark the places or areas where you feel safe and where you feel unsafe?

>>> Let's say... you have 5 minutes, and then we'll talk about it.

>>> Right. Is everyone ready? Great. Let's talk about this now. Please show me your map and tell me which places these are...

7. What are the main types of violence and insecurity that might affect your ability to travel or go for a walk, in terms of safety in public spaces in [Sofia/Harmanli, etc.] or in this neighbourhood?

8. Have you ever received information about gender-based violence? For example, gender-based violence is:

A: "If a girl is afraid to go to school because boys on the street tease her or touch her, that is not safety."

B: "If a woman loses her job because she refused to let her boss touch her, that's not safety."

C: "If a boy is bullied or mocked because people say, 'This job or that thing is only for girls', that isn't safety either."

9. What do you think are the main risks of gender-based violence for you or for people like you in Bulgaria?

10. Do you know where to turn to for services related to gender-based violence (health, legal, psychological support) ... and do you know where to go/who to contact for emergency services in cases of gender-based violence (hotline, emergency contraception, safe place to stay)?

11. What kinds of obstacles and barriers exist for the refugee community that might prevent you or people like you from accessing these services?

12. If an incident involving sexual assault or rape were to occur, do you think the survivor would report it to the police or other authorities?

13. Would they be likely to tell someone else (a community leader, a friend, a family member, etc.)?

14. In your opinion, what is the best way to raise awareness of gender-based violence issues in your community here?

15. What could be done to improve people's sense of safety in this area?

16. Is there anything you would change about this centre to help them feel safer or more comfortable?

Thank you once again for your time. If anyone would like to speak to me or Diana in private, I will stay here after we have finished. Or if there is anything else you would like to say and discuss with the others on this topic now, but we haven't touched upon it – please don't hesitate to speak up...

Appendix 4. GUIDELINES FOR CONDUCTING INTERVIEWS WITH KEY EXPERTS IN CONNECTION WITH A SAFETY SURVEY OF ACCOMMODATION FACILITIES FOR REFUGEES AND MIGRANTS

1. Please tell me what your work here involves – what your tasks and responsibilities are, and the biggest challenges you face.

2. Tell me a bit more about this place (where we are/where you work). What sort of people are housed here: where do they come from, what do they complain about, what are they afraid of?

3. In recent years, there has been a lot of talk about so-called 'gender-based violence'. Tell me, what kinds of cases do you encounter here in this regard?

4. To the best of your knowledge, what cases are there in this area involving sexual harassment, sexual violence or sexual exploitation of women seeking international protection in Bulgaria?

5. Tell me what state and local authorities in the region are doing to tackle the various forms of gender-based violence – both milder cases of discrimination and serious cases of sexual violence or exploitation?

6. Experts like you often have very good ideas about what can be done to stop or at least reduce violence, but their ideas come up against the legal framework, institutional structure or budgetary constraints. What would you change if it were entirely up to you and no other circumstances were involved?

Appendix 5. GUIDE FOR CONDUCTING INTERVIEWS WITH KEY DISPLACED PERSONS IN CONNECTION WITH A STUDY ON SAFETY IN ACCOMMODATION FACILITIES FOR REFUGEES AND MIGRANTS

1. Please tell me a little more about this place. What are the biggest problems that people living here face?

2. In any neighbourhood like this, there are good and bad areas. Which areas here do you avoid: because they are noisy, dirty or dangerous for some reason?

- What sort of people live in those areas?

3. And what are the good areas where you feel safe?

- What sort of people live there?

4. Please tell me what job opportunities are available to people living in this area, and in your opinion, do they feel safe and secure when they are at work or when travelling to and from their workplace?

5. Sometimes, such places are home to families with children or even teenagers who have arrived in Bulgaria without their parents. What is the situation regarding their ability to attend nursery or school, and do you think they feel safe?
6. Tell me what you do when you need to see a doctor. Do you feel safe and reassured that you can find a doctor and that they will treat you in a way that allows you to trust them?
7. Sometimes in areas like this there are people whose behaviour makes others feel uneasy. Do you know of any such people here, and what are they like: where do they come from, what do they do, and why are others worried about them?
8. Often, the best solutions to problems come from the people who are directly affected by them. In your opinion, what needs to be done for the area where you live so that you personally, and the other people here, can feel more at ease?

Appendix 6. Analytical matrix by indicators: RRC and SCTAF

Legend for overall risk (assessment): Low / Medium / High

‘Environmental risk’ = risk arising from the organisation of the environment (space, regime, control, privacy, access to help), rather than necessarily from a specific perpetrator.

Indicator	Ovcha Kupel	Voenna rampa	Vrazhdebna	Harmanli Compass/RRC	Busmantsi	Lyubimets
1) Perceptions of risk of gender-based violence	There are indications of a hostile urban environment and risks when moving around (reported attacks/harassment in urban areas and on the underground). The risk is greater outside the service itself, in the neighbourhood/town.	A moderate environmental risk, typical of a mixed community and high population density: tension in interactions between groups and dependence on rules/control.	Indications of heightened tension/hostility in the wider environment and risk when going out/interacting with outsiders, particularly for women and young people.	Women (Arab mothers) state that they feel relatively safe in the centre and in the city, “nobody bothers them”. The risks are linked more to precarious status, poverty and dependency.	Environmental risk is significant due to a lack of separate areas for women/children, cameras in bedrooms, restricted scheduled walks, a lack of personal space for changing; single women housed with families.	Lower environmental risk compared to Busmantsi, as there is a separate and secure half-storey area for women and children, including a women’s relaxation room and a children’s play area with toys.
2) Awareness of gender-based violence and access to information	There is an indication of a need for clear information (particularly for new arrivals) and	There is usually a need for information materials in an appropriate language and	Need for information, prevention and referral; in a tense external environment,	Some women say they have not been spoken to about the issue, others know “to go to the police/staff”. There is a psychologist/therapist, but not everyone has used them.	There is information in the corridor on where to seek help in cases of	The staff play a key role (there are many women on the team). There is a need for more materials/literature in Arabic and other

	language mediation. In an urban setting, the risk is heightened by a lack of referral to services.	referral to services; in the absence of these, the risk remains 'hidden'.	information is key to raising the alarm.		gender-based violence. However, there is a language barrier and limited resources for interpreters → this reduces effective access to information.	languages (the difficulty in providing these has been mentioned).
3) Accommodation and conditions (privacy, separate areas, lighting, security)	Urban environment: lighting, transport, safe routes, and secure locations are critical. In the event of neighbourhood tension, women may avoid certain areas.	Rated as mixed-use premises/access arrangements (limited personal space is a typical risk factor).	Environmental risk due to a lack of separate safe zones for women and children and due to conflictual external contacts.	Main problems: food, pests (cockroaches), lack of cooking facilities, need for clothing/winter items, baby supplies. The women do not describe direct threat from people, but they describe stress and harsh conditions.	There are no designated areas for women/children, and walks are restricted to a timetable. The bedrooms are monitored by cameras; the women cover their beds with sheets for minimal privacy; there is no private space for changing clothes.	There is a secure area for women/children + a relaxation room for women + a children's play area. This is a distinct protective factor.

4) Access to services and employment (discrimination, barriers, slow procedures)	In an urban environment, people look for work, but the risks are exacerbated by precarious status and exploitation in the informal economy.	Structural barriers: documents, status, labour rights, risk of exploitation.	The risk increases when people are forced to seek informal work.	The central problem: rejections/precarious status → inability to secure an employment contract, pushed into the black economy, dependence on others (including risk of trafficking/exploitation). Women want to integrate, learn the language, pay rent, but lack legal security.	Short-term accommodation (up to 18 months), high turnover. The BHC assists with appeals. The language barrier and lack of interpreters complicate procedures; determining the age of minors within a short timeframe is a challenge.	A pronounced structural problem: detention/administrative regimes, difficulties with documentation/coordination with consulates. There are serious cases (sick individuals) who become 'stuck' without an adequate social pathway.
5) Networks and interaction with the local community	Indications of hostile attitudes and risk of attacks by youth groups (reports of attacks by teenagers on refugee teenagers).	Interactions depend on access to the neighbourhood and the visibility of the group; risk in the event of negative attitudes.	The risk stems from external reactions/xenophobia and limited defence mechanisms.	In Harmanli: local protests 'during elections', but and interdependence (locals work in the centre). Women report that locals do not harass them; at school, the attitude towards the children is good.	Busmantsi is a more closed environment; contact with the community is limited. The main risk is internal (organisation of space/privacy), rather than external.	Lyubimets is a small town: "everyone knows each other", lower likelihood of anonymous attacks; less tension because contact with residents is limited and controlled.

6) Intimate partner violence (control, threats, coercion)	In urban settings, the risk is heightened by dependence on a partner or relatives and a lack of income.	Potential risk in cases of family dependency; need for reporting mechanisms and confidentiality.	Similarly.	There are clear examples of control/threats from a partner (harassment by phone, threats), attempts to abduct children, police intervention and prevention of removal across the border. Women are vulnerable due to their status and economic situation.	The risk is medium to high in potential due to low privacy and dependence on the environment; although few specific cases have been reported, the conditions (lack of privacy/safe spaces) make it difficult to raise the alarm.	The presence of a women's area and staff is a protective factor; however, structural stress and insecurity may exacerbate domestic conflicts.
7) Access to services for gender-based violence (police, psychologist, referral)	Referral and mediation (language) are key, because in an urban environment services are 'scattered'.	Need for clear reporting channels and trusted individuals.	Need for clear channels and prevention.	There is referral to the police and a psychologist/therapist is available, but some women say that no one has spoken to them about the issue. Regular information provision and trust are important.	There is visible information in the corridor; however, the language barrier and lack of an interpreter limit access. There is a lack of separate, quiet spaces	The female staff and improved zoning are strong protective factors. There is a need for systematic liaison with social services in severe cases (mental/physical illnesses).

					for confidential conversations for women.	
8) Higher-risk groups (chronically ill, pregnant women/new mothers, children/teenagers, minorities, LGBT)	Increased risk for women and teenagers of assault/harassment; for people without support networks.	Increased risk for mentally vulnerable and isolated individuals.	Increased risk for women/young people in a conflict-ridden external environment.	Pronounced: pregnant women and new mothers, single women, families without legal status, stateless persons (Kurds), children with health problems, families separated due to procedures.	Pronounced: mentally ill individuals (2 people without a suitable isolation room and a need for staff training), minors (premises due for renovation), single women (in the families sector), children (rapid response in emergencies), risk of exploitation due to legal uncertainty.	Expressed: seriously ill individuals (dementia/oncology), need for specialised social services for foreigners; risk of institutional 'stagnation' without resolution. For women/children, a protective factor is the separate zone.
Overall assessment of GBV risk	Medium to high (mainly social/external and	Medium (depends on the	Medium to high (indications of hostility/tension;	Medium (women feel relatively physically safe, but structural insecurity and poverty increase	High environmental risk (lack of	Medium (good protective factors for women/children

(combined: situational + structural + social)	when moving around; risks for young people and women).	organisation and access to confidentiality and services).	risk when in contact with the external environment).	the risk of exploitation/trafficking/dependence).	privacy for women, cameras in bedrooms, confined spaces, language barriers; additional risk for those with mental health issues and high turnover).	through a separate area; but high institutional risk in severe cases and lack of a social pathway for foreigners).
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Brief summary of key differences

- **Highest environmental risk: Busmantsi** (privacy, compartmentalisation of bedrooms, lack of women's/children's areas, restricted walks, language barrier).
- **Best structural protective factors for women and children: Lyubimets** (protected area + recreation room + children's corner).
- **Harmanli:** physical security is considered relatively good, but **structural insecurity (status/work/dependence)** is the main 'driver' of risk (exploitation, trafficking, coercion, domestic tension).
- **Ovcha Kupel / Voenna Rampa / Vrazhdebna:** the risk is more closely linked to **the urban environment, mobility, youth groups and xenophobic incidents**, plus general structural barriers.

MAPPING RISKS OF VIOLENCE AGAINST WOMEN AND INTERSECTIONAL VULNERABILITIES

2026