

DEVELOPMENT OF REFERRAL PATHWAYS FOR REFUGEE AND ASYLUM-SEEKING VICTIMS OF GENDER-BASED VIOLENCE (GBV) IN LITHUANIA

AUTHORS OF THE STUDY

Prepared under a consultancy implemented by Diversity Development Group (DDG) for the United Nations High Commissioner for Refugees (UNHCR).

This research paper was commissioned by the UNHCR Representation for the Nordic and Baltic Countries. The views expressed in this paper are not necessarily those of UNHCR.

This paper is available online at <https://www.unhcr.org/neu/>.

Laurynas Biekša

Mažvydas Karalius

Akvilė Kriščiūnaitė

Vilana Pilinkaitė Sotirovič

Ilona Šaltė

Eitvydas Zurba

© United Nations High Commissioner for Refugees 2025

All rights reserved. No part of this publication may be reproduced, stored in a retrieval system, or transmitted in any form or by any means, electronic, mechanical, photocopying, recording, or otherwise without the prior written permission of UNHCR.

TABLE OF CONTENTS

ACRONYMS.....	4
EXECUTIVE SUMMARY	5
INTRODUCTION.....	9
1. OVERVIEW OF THE REGULATORY FRAMEWORK ON GENDER-BASED VIOLENCE IN LITHUANIA	12
2. EXISTING LEGAL AND POLICY STANDARDS GOVERNING THE PREVENTION OF AND RESPONSE TO GENDER-BASED VIOLENCE IN LITHUANIA.....	17
2.1 Criminalisation of GBV and the Role of Law Enforcement.....	17
2.2 Access to Health Services.....	20
2.3 Support Services for Victims of Crime.....	21
2.4 Support Services for Victims of Domestic Violence.....	23
2.5 Support Services for Victims of Sexual Violence.....	25
2.6 Support Services for Victims of Human Trafficking.....	27
2.7 Child Protection in Gender-Based Violence Cases	29
2.8 Access to Social Services.....	31
3. INSTITUTIONAL SUPPORT FOR REFUGEES, ASYLUM-SEEKERS, AND OTHER FOREIGN NATIONALS IN THE CONTEXT OF GENDER-BASED VIOLENCE	33
3.1. Access to Services Based on the Status of Foreigner	33
3.1.1. Asylum seekers	35
3.1.2. Refugees and Beneficiaries of Subsidiary Protection During the Social Integration Period.....	38
3.1.3. Beneficiaries of Temporary Protection and Individuals in Refugee-like Situations	39
3.2. Non-Governmental Organisations Assisting Migrants and Refugees	40
3.3. Inter-Institutional Coordination Mechanisms at the Local (Municipal) Level.....	41
4. AVAILABILITY AND ACCESSIBILITY OF GENDER-BASED VIOLENCE RESPONSE SERVICES FOR REFUGEES, ASYLUM-SEEKERS, BENEFICIARIES OF TEMPORARY PROTECTION, AND PERSONS IN REFUGEE-LIKE SITUATIONS	43
4.1. Methodology and Scope of the Study	43
4.2. Provision of Assistance to Refugee, Asylum-Seeking, and Displaced Survivors of GBV: Service Providers' Practices.....	46
4.2.1. Available Support Services in GBV Cases.....	46
4.2.2. Organisations' Experiences and Responses to GBV Cases.....	47
4.2.3. Inter-Institutional Coordination	49
4.3. Existing Gaps.....	49
4.3.1. Overarching Challenges	50
4.3.2. Specific Challenges	55
5. REFERRAL PATHWAYS.....	59
5.1. Institutional System.....	59
5.1.1. Identification	60
5.1.2. Initial Response.....	60
5.2. Gaps in Referral Pathways for Specialised Assistance.....	61
5.2.1. Detainees	61
5.2.2. Members of the Target Group with Limited Freedom of Movement.....	61
5.2.3. Linguistic and Intercultural Barriers	61
5.3 Referrals to Specialised Services	61
5.4. Proposal for Improvements.....	62
6. CONCLUSIONS.....	63
7. RECOMMENDATIONS.....	65
ANNEX I: INFORMATION ON COMPULSORY HEALTH INSURANCE (CHI).....	67
ANNEX II: CATALOGUE OF MAINSTREAM SOCIAL SERVICES AND ASSISTANCE.....	69
ANNEX III: INFOGRAPHICS FOR GBV REFERRAL PATHWAYS.....	84
ANNEX IV: GBV SPECIALIZED SERVICE ASSISTANCE DIRECTORY FOR STANDARD OPERATIONAL PROCEDURES.....	88

ACRONYMS

CEDAW – Convention on the Elimination of All Forms of Discrimination against Women

CRC - Convention on the Rights of the Child

EU – European Union

FGM – Female genital mutilation

FRC – Foreigners Registration Centre of the State Border Guards Services of the Ministry of the Interior of the Republic of Lithuania

GBV – Gender-based violence

IASC – Interagency Standing Committee

LFPRC – Law on Fundamentals of Protection of the Rights of the Child

LPDV – Law on the Protection from Domestic Violence

LSF – Law on the Legal Status of Foreigners

LSS – Law on Social Services

MD – Migration Department under the Ministry of the Interior

NGO – Non-governmental organisation

RIA – Reception and Integration Agency

SBGS – State Border Guard Service under the Ministry of the Interior

SCAC – Specialised Comprehensive Assistance Centres

SCRPS – State Child Rights Protection and Adoption Service

UN – United Nations

UNHCR – United Nations High Commissioner for Refugees



EXECUTIVE SUMMARY

This study examines the availability and accessibility of mainstream support services in Lithuania for survivors of gender-based violence (GBV) who are asylum seekers, refugees, beneficiaries of temporary protection, or individuals in refugee-like situations – the designated target group of this research. It investigates the legal norms and standards governing access to assistance for GBV survivors within this population. The study further outlines the institutional framework – comprising governmental, municipal, and non-governmental actors – tasked with victim support, and identifies key practical barriers that hinder access to essential services.

METHODOLOGY

The methodology adopted in this study includes desk-based research on legal and policy documents relevant to GBV prevention and protection, alongside an analysis of legislative instruments addressing both criminalised and non-criminalised forms and manifestations of GBV. It also incorporates sociological research, which comprises both data collection and analysis of: (a) an online survey completed by key assistance and municipal service providers (n = 32), and (b) a series of expert interviews and focus group discussions. The qualitative component includes eleven in-depth individual interviews and four focus group discussions, involving a total of 28 experts.

KEY FINDINGS

LEGAL AND INSTITUTIONAL FRAMEWORK: ACCESS TO MAINSTREAM GBV PROTECTION SERVICES

The legal norms and policy standards examined suggest that Lithuania has developed a comprehensive regulatory framework for the prevention of and response to gender-based violence. Although the term ‘gender-based violence’ is not explicitly defined in national legislation, the Lithuanian government has undertaken substantial efforts to address various manifestations of GBV, including domestic violence, human trafficking, sexual violence, and violations of children’s rights. Among these, domestic violence has received the most robust institutional response, supported by established referral mechanisms, inter-agency coordination structures, and dedicated legal provisions. For criminalised forms of GBV, which encompass a range of serious offences, a victim support system is in place, providing access to assistance services and protective measures. The findings indicate that asylum seekers, refugees, beneficiaries of temporary protection, and persons in refugee-like situations generally have access to mainstream GBV response services. However, legal and practical obstacles arise in certain contexts, such as limited access to healthcare and social services for asylum seekers and some groups of temporary protection beneficiaries and persons in refugee-like situations.

The police are typically the first responders in potential GBV cases, with responsibilities that include ensuring victim safety, conducting investigations, collecting evidence, and apprehending suspected perpetrators as appropriate. Depending on the nature of the GBV offence, the police are required to refer survivors to a victim support centre, a Specialised Comprehensive Assistance Centre, and/or relevant healthcare facilities. In Lithuania, in certain cases, there is an obligation to report crimes to the police. Grave crimes – such as murder, aggravated severe health impairment, or sexual violence against young children – must be reported, and a failure to do so may constitute a criminal offence. Similarly, any violations of children’s rights must



be reported, and failure to do so may result in an administrative sanction. In domestic violence cases, child protection units, social service providers, healthcare and educational institutions must inform a Specialised Comprehensive Assistance Center if they identify a person at risk of domestic violence. If violence has occurred, they must notify both a Specialised Comprehensive Assistance Center and the police, providing the victim's basic contact details. In other cases, it is up to the victim to decide whether to report the crime. Importantly, victims can turn to specialized assistance services without engaging law enforcement. These services play a critical role in protecting the well-being of victims and enabling them to make informed decisions regarding their course of action.

Emergency medical care, including treatment for survivors of sexual violence, is available to all individuals regardless of their legal status. However, access to non-emergency healthcare services is free of charge only for survivors of GBV who are covered by compulsory health insurance (CHI); those without CHI must bear the costs themselves. This includes all asylum seekers, certain categories of temporary protection beneficiaries, and individuals in refugee-like circumstances. Such requirements may impede access to essential healthcare and timely support for vulnerable GBV survivors.

In Lithuania, different forms of gender-based violence are addressed through specialised support mechanisms tailored to distinct groups of victims, including: (1) victims of crime, (2) victims of domestic violence, (3) victims of sexual violence, (4) victims of human trafficking, and (5) child victims of GBV. Although female genital mutilation (FGM) and so-called 'honour crimes' are not explicitly criminalised, relevant provisions in the Criminal Code may be applied, allowing affected individuals to access the general victim support system. Despite the differentiation of services based on the type of GBV, the core components of assistance typically include access to information, social and legal counselling, referrals to social and related services, and psychological or emotional support. In cases involving human trafficking or violations of children's rights, the range of services tends to be broader and often includes safe accommodation and long-term case management. All assistance is provided free of charge.

The analysis reveals that, although the mainstream support system is generally accessible to the target population – since eligibility is not directly conditioned on legal status – certain legal barriers persist. Where crimes were committed outside the European Union prior to the individual's arrival, access to the victim support mechanism for crime victims may be restricted. Moreover, asylum-seeking children and families are often ineligible to receive mainstream municipal social services due to their legal status, despite the critical role these services play in comprehensive case management. These findings underscore the need to evaluate how existing support systems align with national migration and asylum frameworks, particularly where legal status influences access to services and protective measures.

PROTECTION GAPS IN THE IDENTIFICATION OF GENDER-BASED VIOLENCE SURVIVORS WITHIN THE ASYLUM AND RECEPTION SYSTEM

The timely identification and referral of GBV survivors within the asylum and reception system are essential to ensuring effective access to appropriate protection and support services. Currently, the Reception and Integration Agency, the Migration Department, and the State Border Guard Service are not considered and do not act as first contact institutions for GBV victims, despite being frontline agencies that regularly engage with asylum seekers and refugees. Their role should include promptly identifying potential GBV victims¹, providing clear information about available support services, and ensuring safe and confidential referrals. Non-governmental organisations (NGOs) assisting migrants and refugees also act as important points of contact for asylum seekers, refugees, beneficiaries of temporary protection, and individuals in refugee-like situations.

¹ Pursuant to point 25.5.3 of the Description of the Procedure for Granting and Withdrawing Asylum in the Republic of Lithuania, as approved by Order No IV-131 of the Minister of the Interior of 24 February 2016 (as amended), the Migration Department and the State Border Guard Service when conducting an initial asylum interview are required to conduct an initial vulnerability assessment. Annex II to the Order lists categories of vulnerable asylum-seekers, which include persons who have been subjected to torture or other serious forms of psychological, physical or sexual violence and victims of human trafficking. This arrangement may need to be further developed to inform vulnerability assessments conducted by the Reception and Integration Agency and facilitate referrals to support services.



To fulfil this role adequately, these NGOs must be supported by clear operational guidelines and sufficient training on the identification and referral of GBV survivors.

The existing legal framework governing specialised services and support for foreign nationals establishes a vulnerability assessment procedure for asylum seekers and other foreigners accommodated at reception centres or held under court order by the SBGS. This procedure, among other objectives, is intended to identify individuals who may have experienced GBV – whether in their country of origin, during transit, or upon arrival in Lithuania – and to direct them to appropriate protection and support. However, the procedure currently excludes beneficiaries of international and temporary protection, except in rare cases where they reside in reception facilities.

PRACTICAL BARRIERS TO ACCESSING SUPPORT SERVICES FOR VICTIMS

Refugees, asylum seekers, beneficiaries of temporary protection, and persons in refugee-like situations frequently encounter multiple, intersecting challenges as a result of forced displacement. These may include psychological distress, social marginalisation, economic insecurity, and restricted access to information and networks of social support. Such circumstances not only heighten the risk of GBV but also create significant barriers for survivors attempting to access assistance. Although specialised support services are in principle available to all GBV survivors regardless of legal status, access to additional forms of essential assistance – such as emergency accommodation, tailored social assistance, and material support – is often constrained. Consequently, members of the target group may receive immediate aid but experience significant difficulty in securing sustained, long-term assistance. Combined with the lack of social support networks, this often puts GBV survivors who are refugees, asylum seekers, beneficiaries of temporary protection, and persons in refugee-like situations in precarious situations.

These structural shortcomings are exacerbated by practical challenges that impede access to the mainstream GBV response system. Barriers include: (1) limited awareness and understanding of legal norms, available services, and the rights of survivors; (2) linguistic obstacles when engaging with both GBV-specific services and general institutional systems such as healthcare or social assistance; and (3) insufficient cultural competence and sensitivity in service provision. These impediments not only affect the quality and relevance of the assistance delivered, but also influence whether survivors choose to seek help at all. When individuals lack awareness of their entitlements or perceive that their needs may be misunderstood or dismissed, they are less likely to come forward or engage with available services.

Findings from the sociological component of the study indicate that service provision to the target group is often characterised by *ad hoc* responses and inconsistencies in addressing critical needs, particularly in relation to interpretation and cultural mediation. Currently, free interpretation services are provided only to asylum seekers for the purposes of asylum-related procedures. As a result, GBV survivors who fall within the target group cannot access free interpretation services for issues outside the scope of asylum applications. This absence of a coordinated and institutionalised response framework undermines the accessibility, quality, and continuity of care for GBV survivors.

INTER-INSTITUTIONAL COORDINATION

While inter-institutional coordination mechanisms exist at the national level – and, to some extent, at the municipal level – these frameworks are not designed with the specific needs of asylum seekers and refugees in mind. Relevant ministries have played an active role in strengthening responses to domestic violence, human trafficking, sexual violence, and violence against children. These developments have considerably enhanced the overall support infrastructure for survivors and provide a solid foundation for extending services to all most vulnerable individuals. To ensure genuinely inclusive protection, support measures must



be specifically tailored to address the distinct needs of refugees, asylum seekers, beneficiaries of temporary protection, and individuals in refugee-like situations. Achieving this objective requires proactive involvement of migration and asylum agencies – such as the Reception and Integration Agency (RIA), the State Border Guard Service (SBGS), and the Migration Department (MD) – alongside non-governmental organisations to establish a cohesive and responsive support system aligned with the specific needs of the target population.

RECOMMENDATIONS

This study recommends that survivors of gender-based violence who are asylum seekers, refugees, beneficiaries of temporary protection, or individuals in refugee-like situations be granted full and unconditional access to the mainstream GBV response system. This includes amending legal acts to ensure inclusivity and access to support services regardless of legal status, while expanding the roles and capacities of institutions such as RIA, MD, SBGS, and migrant- and refugee-assisting NGOs in identifying, informing, and referring victims to available assistance. Support services for GBV survivors must be adapted to reflect the specific needs of the target group, addressing critical gaps such as the lack of interpretation and cultural mediation services. Institutional capacities across all relevant service providers must be strengthened to deliver linguistically accessible and culturally competent assistance. Additionally, targeted awareness-raising initiatives should be undertaken to inform the target population of their rights and of the available support mechanisms, thereby enabling them to make informed decisions and seek help when needed.



INTRODUCTION

Gender-based violence constitutes a serious violation of human rights and undermines all aspects of personal safety, dignity, and well-being.² Although GBV is significantly underreported, it is recognised to occur across all contexts and populations. While women and girls are disproportionately affected by GBV and face heightened risks globally, men and boys may also become victims. Refugees, asylum seekers, beneficiaries of temporary protection, and individuals in refugee-like situations are vulnerable to GBV irrespective of age, gender, or other diversity characteristics. In displacement contexts, GBV often emerges at the intersection of multiple factors – including legal status, gender, ethnicity, and socio-economic marginalisation – which together can contribute to vulnerability and amplify the risk of violence throughout the migration experience. Enhancing the prevention of and response to GBV is a core component of the protection mandate of the United Nations High Commissioner for Refugees (UNHCR).

GBV remains a pervasive concern across Europe, with high prevalence rates documented in many Member States, including Lithuania. According to the 2024 European Union survey on GBV prevalence, one in three women has experienced physical violence, sexual violence, or threats. One in six women in the EU has experienced sexual violence, including rape, while one in five has suffered physical or sexual violence perpetrated by a partner, family member, or other household resident. Moreover, one in three women has reported experiencing sexual harassment in the workplace.³ Underreporting remains a critical issue: only one in five women who have experienced violence have contacted a healthcare or social service provider, and merely one in eight has reported the incident to the police.⁴ A national survey conducted in Lithuania in 2024 revealed that 58% of respondents did not disclose their experiences of violence to anyone, and nearly half were unaware of the existence of specialised comprehensive assistance centres.⁵

Barriers to reporting GBV and seeking support are well documented and are often particularly severe among individuals with compounding vulnerabilities, including forcibly displaced populations. Empirical research indicates that underreporting frequently results from limited awareness of available services, restricted access to resources, distrust in institutions, and deeply embedded gender biases.⁶ These obstacles are further exacerbated by cultural, social, and economic barriers, especially for women and girls who face multiple, intersecting forms of discrimination. Globally, forcibly displaced individuals often experience GBV in their countries of origin, during transit, or following their arrival in host countries.⁷ It is therefore imperative to ensure that all individuals – particularly those at heightened risk – have access to accurate information, protective mechanisms, and victim-centred support services that are responsive to their specific needs and contexts.

Since 2020, the number of refugees and asylum seekers in Lithuania has increased significantly due to regional geopolitical developments, including the political crisis in Belarus, the war in Ukraine, and shifts in migration patterns towards the European Union. The aim of this study is to assess the availability and accessibility of mainstream GBV response services for survivors who are asylum seekers, refugees,

² Under international human rights law, acts of GBV constitute violations. See United Nations General Assembly resolution 34/180 (1979), Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), available from <https://www.un.org/womenwatch/daw/cedaw/cedaw.htm>. See also, UN General Assembly Resolution, A/RES/48/104, Declaration on the Elimination of Violence against Women (DEVAW) which recognises that the violence against women is a manifestation of historically unequal power relations between men and women, and which have led to the domination over and discrimination against women by men and to the prevention of the full advancement of women, available from <https://undocs.org/en/A/RES/48/104>.

³ European Union Agency for Fundamental Rights (FRA), EU Gender-Based Violence Survey, 25 November 2024, available at: <https://fra.europa.eu/en/news/2024/one-three-women-eu-have-experienced-violence>.

⁴ Ibid.

⁵ Ministry of Social Security and Labour. Reprezentatyvi Lietuvos gyventojų apklausa apie specializuotos kompleksinės pagalbos centrų (SKPC) žinomumą ir Lietuvos gyventojų požiūrį į smurtą artimoje aplinkoje <https://socmin.lrv.lt/lt/veiklos-sritys/tyrimai/ministerijos-uzsakymu/>.

⁶ Council of Europe. Guaranteeing Equal Access for Women to Justice. <https://www.coe.int/en/web/genderequality/equal-access-of-women-to-justice>. Gurm, B., Salgado, G., Marchbank, J., and Early, S. (2020) Making Sense of a Global Pandemic: Relationship Violence & Working Together Towards a Violence Free Society, ch. 8. <https://kpu.pressbooks.pub/nevr/chapter/why-do-survivors-not-report-to-police/>.

⁷ World Bank, UNHCR, 2021, The Gender Dimensions of Forced Displacement: Findings from New Empirical Analysis, https://www.jointdatacenter.org/wp-content/uploads/2021/12/Quarterly-Digest_-December-2021_Final.pdf.



beneficiaries of temporary protection, and individuals in refugee-like situations. In addition, the study seeks to identify practical challenges within the existing GBV response framework and to develop referral pathways that address existing gaps in access to support and services for these groups in the context of GBV. Finally, the study presents recommendations to improve the accessibility of GBV support services for asylum seekers, refugees, beneficiaries of temporary protection, and persons in refugee-like situations.

This study adopts the United Nations High Commissioner for Refugees (UNHCR) / Inter-Agency Standing Committee (IASC) definition of GBV as an umbrella term encompassing any harmful act perpetrated against a person's will that is based on socially ascribed (i.e., gender) differences between males and females.⁸ GBV may be physical, psychological, sexual or socio-economic in nature. The definition includes acts that inflict physical, sexual, or mental harm or suffering, threats of such acts, coercion, and other forms of deprivation of liberty. Such acts may occur in public or private settings.⁹ Common forms of GBV include intimate partner violence, so-called 'honour-related crimes', child sexual abuse, child marriage, female genital mutilation, and trafficking in persons for the purpose of sexual exploitation. In GBV-related contexts, the terms 'victim' and 'survivor' are both used to describe individuals affected by GBV, with 'victim' emphasising the experience of harm and 'survivor' highlighting resilience and recovery. For the purposes of brevity and readability, this study uses the terms 'victim' and 'survivor' interchangeably. The term 'victim' is primarily used when referring to official documents or frameworks that employ this term.

The target group of this study includes the following categories:

1. Asylum seekers: An asylum seeker is a foreign national who has submitted an application for asylum and is awaiting a final decision;¹⁰
2. Refugees (or foreigners granted international protection):
 - a. A refugee is a foreign national who has been recognised as such in accordance with the 1951 Refugee Convention.¹¹ Upon the granting of refugee status, a permanent residence permit is issued.¹² Refugees and their family members are entitled to receive integration support.
 - b. Beneficiaries of subsidiary protection are foreign nationals granted such status because, in their country of origin, they face a real risk of torture, inhuman or degrading treatment or punishment, the death penalty, or are exposed to a serious and individual threat as a result of indiscriminate violence in the context of armed conflict.¹³ These individuals are issued a temporary residence permit.¹⁴ Foreign nationals, who have been granted subsidiary protection, as well as their family members, are entitled to receive integration support.
3. Beneficiaries of temporary protection are foreign nationals who are granted such protection as an exceptional measure to provide immediate and temporary shelter in the event of a mass influx or imminent mass influx of foreign nationals, pursuant to a decision of the Council of the European Union.¹⁵ Currently, temporary protection is extended to individuals who have fled Ukraine due to the ongoing war. A temporary residence permit is issued to any foreign national who has been granted temporary protection.¹⁶
4. Other categories include foreign nationals in refugee-like situations. This term refers to individuals who, for various personal reasons, have not applied for asylum but are unable to return to their country of origin owing to a risk of persecution or other serious harm.¹⁷ In such cases, the individual may be issued a temporary residence permit in Lithuania.¹⁸ In particular, Article 130¹ (2) of the Law on the Legal Status

⁸ Inter-Agency Standing Committee, 2015, Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action: Reducing risk, promoting resilience and aiding recovery, <https://gbvguidelines.org/en/gbv-guidelines/>.

⁹ UNHCR, UNHCR policy on the prevention of, risk mitigation and response to gender-based violence, 2020.

¹⁰ Article 2 (20) of the Republic of Lithuania Law on the Legal Status of Foreigners, 29 April 2004, No IX-2206, Vilnius, (as amended), <https://www.e-tar.lt/portal/lt/legalActEditions/TAR.42837E5A79DD> (hereinafter the Law on the Legal Status of Foreigners).

¹¹ Articles 2 (18), 86 (1) of the Law on the Legal Status of Foreigners.

¹² Article 53 (1) (7) of the Law on the Legal Status of Foreigners.

¹³ Article 87 (1) of the Law on the Legal Status of Foreigners.


¹⁴ Article 40 (1) (9) of the Law on the Legal Status of Foreigners.

¹⁵ Article 2 (20), 92 (1, 2) of the Law on the Legal Status of Foreigners.

¹⁶ Article 40 (1) (10) of the Law on the Legal Status of Foreigners.

¹⁷ Articles 130 (1) and (2) and 130¹ (2) of the Law on the Legal Status of Foreigners.

¹⁸ Articles 40 (1) (8) and 130¹ (2) of the Law on the Legal Status of Foreigners.



of Foreigners provides for the possibility of issuing a temporary residence permit to a foreigner who is persecuted by a non-democratic regime and/or has suffered, or is at risk of suffering, from repressions perpetrated by such a regime, provided that the foreigner is unable to return to his country of origin for these reasons and where the Ministry of Foreign Affairs of the Republic of Lithuania has mediated with regard to his or her entry into the Republic of Lithuania.

The methodology of this study comprises desk research, legal analysis, and field research. Desk research focused on contextual information relevant to the development of GBV policy in Lithuania. A comprehensive legal analysis of the provisions governing the protection of GBV victims was undertaken to identify the legal standards underpinning the existing national response system. The legal analysis also served to clarify the conditions under which assistance may be extended to asylum seekers, refugees, beneficiaries of temporary protection, and individuals in refugee-like situations. Field research consisted of a small-scale survey, focus group discussions, and individual interviews (a detailed description of the methodology is provided in Chapter 4). By integrating legal analysis with field research, the study enabled triangulation of data from multiple sources, thereby enhancing the validity of the findings.

STRUCTURE OF THE STUDY

The study begins with an overview of the policy framework and contextual data outlining Lithuania's system of protection against various forms of GBV (Section 1). Section 2 provides a legal analysis-based review of the mainstream response system to GBV in Lithuania, including domestic violence, trafficking in persons, sexual violence, and violence against children. It also examines the enabling and constraining factors that influence the ability of GBV victims within the target groups to access health and social services. Section 3 describes the existing institutional landscape in Lithuania, including governmental and non-governmental actors, and outlines their roles and responsibilities in providing integration, social, and legal services in accordance with the legal status of members of the target groups. Section 4 presents the findings of the empirical research on the practices, challenges, and experiences of service providers concerning the accessibility of services for GBV survivors within the target groups. Section 5 highlights key shortcomings in the current referral system that limit the ability of the target group to access mainstream GBV responses. Finally, Section 6 sets out the study's conclusions and key recommendations for improving the current assistance system to ensure it is more inclusive of GBV victims who are refugees, asylum seekers, beneficiaries of temporary protection, and persons in refugee-like situations.

1. OVERVIEW OF THE REGULATORY FRAMEWORK ON GENDER-BASED VIOLENCE IN LITHUANIA

The Constitution of the Republic of Lithuania¹⁹ sets out key principles relevant for the prevention of and response to gender-based violence. It, first, provides that the human person is inviolable and prescribes that human dignity is protected by law. Pursuant to the Constitution, it is prohibited to torture or injure a human being, degrade his or her dignity, and subject him or her to cruel treatment.²⁰ The Constitution also provides for the principle of the equality of the rights of persons and prohibits discrimination.²¹ As clarified by the Constitutional Court of the Republic of Lithuania, this includes the prohibition of discrimination on the grounds of “gender”, i.e. the socially constructed roles, behaviours, activities, and attributes that a certain part of society considers appropriate for women and men.²² According to the Constitutional Court, gender-based violence not only violates the inviolability of the person, and degrades human dignity, but it also constitutes a form of discrimination prohibited by the Constitution.²³

Furthermore, the Constitution stipulates that ratified international treaties are a constituent part of the national legal system,²⁴ while the Law on International Treaties makes it clear that a ratified treaty which has entered into force prevails over the laws and other legal acts of the Republic of Lithuania.²⁵ In this regard, Lithuania has ratified the majority of human rights instruments of the United Nations (UN)²⁶ and the Council of Europe²⁷, thereby committing to the protection of individuals from human rights violations on the grounds of gender, race, disability, or other applicable factors. As a member of the European Union, Lithuania has also transposed numerous relevant directives into its national legal framework, which are discussed in detail in the subsequent analysis of national legislation.

However, Lithuania has not ratified the International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families²⁸, nor the Optional Protocol to the International Covenant on Economic, Social and Cultural Rights.²⁹ Furthermore, Lithuania has not made the optional declaration under

¹⁹ Constitution of the Republic of Lithuania, 25 October 1992 (as amended), <https://www.e-tar.lt/portal/lt/legalAct/TAR.47BB952431DA/asr> (hereinafter the Constitution).

²⁰ Paragraphs 1, 2 and 3 of Article 21 of the Constitution.

²¹ Article 29 of the Constitution.

²² Constitutional Court of the Republic of Lithuania, Conclusion on the compatibility of the provisions of the of the Council of Europe Convention on preventing and combating violence against women and domestic violence with the Constitution of the Republic of Lithuania, No KT24-II/2024, 14 March 2024, para. 271, <https://www.e-tar.lt/portal/lt/legalAct/617d9230e20411ead77e967e3995264>.

²³ Ibid., para. 26.3.

²⁴ Paragraph 3 of Article 138 of the Constitution.

²⁵ Republic of Lithuania Law on International Treaties, No VIII-1248, 22 June 1999 (as amended), Article 11 (2), <https://e-seimas.lrs.lt/portal/legalAct/lt/TAD/TAIS.83882/asr>.

²⁶ International Covenant on Civil and Political Rights, International Covenant on Economic, Social and Cultural Rights, International Convention on the Elimination of All Forms of Racial Discrimination, Convention on the Elimination of All Forms of Discrimination against Women, Convention on the Rights of the Child, Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, the Convention on the Rights of Persons with Disabilities, and 1951 Refugee Convention and its 1967 Protocol.

²⁷ Council of Europe Convention for the Protection of Human Rights and Fundamental Freedoms, Convention on the Protection of Children against Sexual Exploitation and Sexual Abuse, Convention on Action against Trafficking in Human Beings, European Social Charter (revised).

²⁸ International Convention on the Protection of the Rights of All Migrant Workers and Members of their Families, 18 December 1990, New York, https://treaties.un.org/pages/ViewDetails.aspx?src=TREATY&mtdsq_no=IV-13&chapter=4.

²⁹ Optional Protocol to the International Covenant on Economic, Social and Cultural Rights, 10 December 2008, New York, https://treaties.un.org/pages/ViewDetails.aspx?src=TREATY&mtdsq_no=IV-3-a&chapter=4.

strengthen policies, improve victim support, and advance measures to combat domestic violence. Quarterly interagency coordination meetings are convened, offering a platform for NGOs to highlight pertinent issues and advocate for policy reforms. An action plan encompassing inter-institutional measures is adopted periodically. In 2023, the Action Plan for the Prevention of Domestic Violence and the Provision of Support to Individuals Experiencing, Having Experienced, or Posing a Threat of Domestic Violence for 2024–2026 was approved.³⁹ The plan outlines four strategic objectives: (1) raising public awareness and promoting education; (2) strengthening the competencies of personnel in state institutions and agencies; (3) improving the quality and accessibility of support services; and (4) enhancing inter-institutional cooperation. To date, domestic violence against asylum seekers, refugees, or individuals in refugee-like situations has not been addressed within the scope of adopted Action Plans. Nonetheless, support is provided to all victims regardless of whether a pre-trial investigation has been initiated and irrespective of legal status, nationality, or citizenship (see Section 2.4 for further discussion).⁴⁰

The development of Lithuania's anti-trafficking response and support system has progressed substantially, shaped by both domestic initiatives and international obligations. Human trafficking was criminalised in Lithuania in 1998, with the most recent legislative amendments in 2020 introducing a non-punishment clause for victims who were compelled to engage in forced labour or services.⁴¹ At the institutional level, the Commission for Coordination of the Fight against Trafficking in Human Beings, established in 2016, remains active and serves as a platform for inter-agency coordination. The Commission is chaired by the Minister of the Interior, with the Minister of Social Security and Labour acting as Deputy Chair, and includes senior representatives from relevant ministries, law enforcement bodies, the judiciary, municipal and labour institutions, child protection and migration authorities, non-governmental organisations, trade unions, and international partners.⁴² Since 2024, the role of National Rapporteur on Trafficking in Human Beings has been transferred from the Ministry of the Interior to the Seimas Ombudspersons' Office in order to ensure greater institutional independence. Furthermore, the Recommendations on the Identification of Victims of Human Trafficking, Pre-Trial Investigation, and Inter-Institutional Cooperation have been adopted and provide indicators for identifying potential victims and various forms of human trafficking. In addition, the recommendations establish an inter-institutional referral mechanism that delineates the roles and responsibilities of relevant stakeholders. Support for victims or potential victims of human trafficking, provided by state-funded non-governmental organisations, is not contingent upon the initiation of a pre-trial investigation and is available regardless of an individual's legal status, citizenship, or other personal circumstances.

The current Action Plan for Combating Human Trafficking 2024–2026⁴³ has been adopted with four primary objectives: (1) strengthening inter-institutional and international cooperation; (2) enhancing the capacity of law enforcement agencies; (3) improving victim identification and referral mechanisms; and (4) ensuring effective prevention measures. Of the sixty measures included in the plan, a limited number specifically address the target group of this study – namely, forcibly displaced persons. One such measure provides for training on the identification of trafficking victims among asylum seekers, while another outlines reception conditions for foreign nationals identified as victims or potential victims of human trafficking, including provisions for accommodation, essential medical care, and psychological consultations at the Reception and Integration Agency.⁴⁴ Lithuania has also undertaken preventive initiatives aimed at protecting refugees from Ukraine from the risks of human trafficking. For instance, following the onset of Russia's invasion of Ukraine in 2022,

³⁹ Minister of Social Security and Labour, Action Plan for the Prevention of Domestic Violence and the Provision of Support to Individuals Experiencing, Having Experienced, or Posing a Threat of Domestic Violence for 2024–2026, 13 September 2023, No A1-602, Vilnius, <https://www.e-tar.lt/portal/lt/legalActEditions/96b83b20520e11ee81b8b446907f594f>.

⁴⁰ Articles 2 (4, 7), 10, 14 of the Law on Protection Against Domestic Violence.

⁴¹ In November 2020, in addition to the existing non-punishment provisions under Articles 147(3) and 157(3) of the Criminal Code – which exempt victims of human trafficking from liability for offences they were compelled to commit as a result of trafficking – a corresponding clause was introduced into Article 147¹ of the Criminal Code concerning "Exploitation for Forced Labour or Services". Law amending Articles 60, 147¹, 151¹, 189, 214, 218, 224¹ and the Annex to the Criminal Code of the Republic of Lithuania, 5 November, 2020, No XIII-3350, Vilnius, <https://www.e-tar.lt/portal/lt/legalAct/8a42fb40299a11eb932eb1ed7f923910>.

⁴² Government of the Republic of Lithuania, Decree On Coordinating the Fight Against Human Trafficking, 11 August 2016, No 785, Vilnius, <https://www.e-tar.lt/portal/lt/legalActEditions/19730980609211e68abac33170fc3720>.

⁴³ Minister of the Interior, Order on the Approval of the 2024–2026 Action Plan for Combating Human Trafficking, 29 July 2024, No 1V-474, <https://www.e-tar.lt/portal/lt/legalAct/b8c4b7504daf11efbdaea558de59136c>.

⁴⁴ Ibid.



the State Border Guard Service introduced risk-based inspections of vehicles arriving from Poland and Latvia to detect potential instances of trafficking. In addition, training sessions were conducted to raise awareness among professionals in the fields of anti-trafficking and migration regarding the specific vulnerabilities faced by refugees from Ukraine.

Another significant development in the GBV support system was the adoption of the Law on Assistance to Victims of Crime.⁴⁵ This legislation is intended to ensure that individuals who have suffered criminal offences committed within the European Union are entitled to appropriate support services in Lithuania. Pursuant to this law, eighteen state-accredited Assistance Services (AS) are mandated to assess victims' individual needs, provide information regarding their rights, guide them through criminal proceedings, arrange accommodation, and offer other forms of support. Such support is free of charge and available to all victims or potential victims, irrespective of whether a pre-trial investigation has been initiated and regardless of their legal status, nationality, citizenship, or other personal circumstances.⁴⁶ Victims of gender-based violence in Lithuania may access support through the Assistance Services, provided that the specific form of GBV they have experienced is criminalised (see Section 2.3 for detailed discussion).

Since 2021, tangible efforts have been undertaken in Lithuania to address sexual violence in both domestic and non-domestic contexts. In that year, a new legal framework was introduced, mandating five major regional hospitals to provide specialised services to individuals who may have experienced sexual violence.⁴⁷ Since 2023, the Ministry of Social Security and Labour has funded a non-governmental organisation – selected via a public procurement process – to offer methodological support and implement activities aimed at the prevention of sexual violence.⁴⁸ Based on this framework, the National Information Centre on Sexual Violence, currently operated by the Klaipėda Social and Psychological Support Centre and its partners, provides legal, psychological, and emotional support to individuals who have experienced or are at risk of sexual violence. Nonetheless, the development of a coherent response system to sexual violence remains relatively recent, and further progress is required to establish a reliable and comprehensive structure for both support and prevention (see Section 2.5 for further details).

Cases of GBV involving children are addressed through the national child protection system as violations of children's rights. Notably, under Lithuanian law,⁴⁹ children who witness domestic violence – without being directly subjected to it – are legally recognised as victims, thereby ensuring access to appropriate protection and support through the child protection system. This support includes case management and, where necessary, the immediate placement of the child in a safe environment. Specialised services for children who may have experienced sexual violence are delivered by the State Child Rights Protection and Adoption Service, ensuring access to essential care, including social counselling, medical assessments, psychological consultations, and a child-friendly setting during legal proceedings.⁵⁰ Although certain forms of GBV such as child marriage are technically possible in Lithuania, they are rare due to strict legal safeguards stipulating the minimum age of marriage as 18. Any exception to this rule requires judicial authorisation in exceptional circumstances, making child marriage both unlikely and discouraged in practice (see Section 2.5 for further analysis).

⁴⁵ Republic of Lithuania Law on Assistance to Victims of Crime, 20 December 2021, No XIV-169, <https://www.e-tar.lt/portal/lt/legalAct/599af1605b-2b11eb9dc7b575f08e8bea> (hereinafter the Law on Assistance to Victims of Crime).

⁴⁶ Articles 1, 2, 10 of the Law on Assistance to Victims of Crime; Article 8 (1, 5) of the European Parliament and European Council, Directive 2012/29/EU of the European Parliament and of the Council of 25 October 2012 Establishing Minimum Standards on the Rights, Support and Protection of Victims of Crime, and Replacing Council Framework Decision 2001/220/JHA, 14 November 2012, OJ L 315, <https://eur-lex.europa.eu/eli/dir/2012/29/oj/eng> (hereinafter Directive 2012/29/EU).

⁴⁷ The Minister of Health, Order on the Approval of the Description of the Provision of Health Care Services to Female Persons Who Have Possibly Experienced Sexual Violence, 30 July 2021, No V-1765, Vilnius, <https://www.e-tar.lt/portal/lt/legalActEditions/c4d940e0f0f811eb9f09e7df20500045> (as amended) (hereinafter the Description of the Provision of Personal Healthcare Services to Victims of Sexual Violence).

⁴⁸ Minister of Social Security and Labour of the Republic of Lithuania, Order on the Approval of the Rules of Procedure for the Organisation of a Call for Proposals for the Organisation of a Project for the Provision of Methodological Support and the Organisation of Activities Aimed at the Prevention of Sexual Violence in 2023, 16 March 2023, No A1-169, <https://www.e-tar.lt/portal/lt/legalAct/486c71a0c3ef11ed97b2975f7dad7488>.

⁴⁹ Article 2 (4) of the Law on Protection Against Domestic Violence.

⁵⁰ About "Specialized services", the State Child Rights Protection and Adoption Service, <https://vaikoteises.lrv.lt/lt/veiklos-sritys/specializuota-pagalba-teikiama-tarnyboje/kas-vra-specializuota-pagalba-teikiama-tarnyboje/>.



The above evidence suggests that, despite the absence of an explicit legal definition of GBV, the Lithuanian government has enacted legislation and implemented policies addressing various forms of gender-based violence. These legal and policy frameworks have evolved incrementally, expanding to include new protection and prevention measures, such as the introduction of emergency barring orders in domestic violence cases. The Lithuanian government has allocated resources to operationalize these measures through Action Plans and has established institutional infrastructure to support GBV victims. The Ministry of Social Security and Labour plays a central role in the implementation of the Law on Protection against Domestic Violence and coordinates efforts among governmental institutions, non-governmental organisations, and subject-matter experts to strengthen victim support in domestic violence cases. Significant progress has also been achieved in the field of human trafficking, including the development of indicators for identifying potential victims and the various forms of exploitation. Further advances have been made in establishing support mechanisms for victims of sexual violence and violence against children. These initiatives have substantially contributed to the expansion and refinement of Lithuania's assistance system for victims of domestic violence, human trafficking, sexual violence, and violence against children. However, the current support system is primarily designed to address the needs of Lithuanian citizens and other permanent residents. Specific provisions tailored to the particular circumstances and requirements of refugees, asylum seekers, beneficiaries of temporary protection, and individuals in refugee-like situations are either lacking or only sporadically implemented. This may hinder access to mainstream support and services for some members of the target group. This issue will be further addressed in the present study.

2. EXISTING LEGAL AND POLICY STANDARDS GOVERNING THE PREVENTION OF AND RESPONSE TO GENDER-BASED VIOLENCE IN LITHUANIA

This section provides an analysis of the existing standards and norms governing the prevention of and response to gender-based violence in Lithuania. It examines the national legal framework, evaluates its compliance with international obligations, and explores the availability and accessibility of support services for GBV survivors who are refugees, asylum seekers, beneficiaries of temporary protection, or persons in refugee-like situations – the target groups of this study.

2.1 CRIMINALISATION OF GBV AND THE ROLE OF LAW ENFORCEMENT

Certain forms of GBV are explicitly criminalised under Lithuanian law, while others fall under broader legal provisions or remain insufficiently addressed. Notably, harmful practices such as female genital mutilation (FGM) and so-called ‘honour crimes’ are not explicitly criminalised under Lithuanian criminal law, though they may be prosecuted under general provisions related to bodily harm of other offences. In GBV cases, the police act as primary responders, ensuring the victim’s immediate safety, conducting risk assessments, initiating necessary legal and protective actions, and informing victims about available support services.

The following criminal offences are explicitly listed in the Criminal Code and cover various forms of GBV, including physical, sexual, and, to a certain extent, psychological violence:

- Murder;
- Health impairment.
- Illegal abortions;
- Threatening to kill, cause severe bodily harm, or engaging in acts of terrorisation;
- Unlawful deprivation of liberty;
- Trafficking in human beings, including children;
- Stalking;
- Rape, sexual assault, sexual abuse, sexual harassment, grooming, and molestation;
- Exploitation of a child for pornography.⁵¹

Although FGM and ‘honour crimes’ are not separately codified as offences under Lithuanian criminal law, relevant provisions of the Criminal Code may be applied in such cases. In instances of FGM, various offences related to bodily harm may be applicable depending on the severity⁵² of the injury. ‘Honour crimes’ may

⁵¹ Articles 129, 142-143, 145-147, 157, 162, Chapters XVIII, XXI of the Criminal Code.

⁵² Articles 135, 138, 140 of the Criminal Code.

fall under a number of criminal provisions, including murder, incitement or assistance in suicide, various forms of bodily harm, illegal abortion and coercion to terminate a pregnancy, failure to assist a person in a life-threatening situation, threats, unlawful deprivation of liberty, restriction of personal freedom, and a range of crimes against personal liberty and sexual autonomy, such as rape, sexual assault, sexual abuse, and sexual harassment, as well as libel and abuse of parental or guardianship rights.⁵³ In accordance with Lithuania's obligations under the CEDAW and CRC,⁵⁴ the explicit criminalisation of harmful practices such as female genital mutilation (FGM) and so-called 'honour crimes' would establish clear societal norms that these practices are unacceptable. It would also help prevent future harm, empower survivors, and support law enforcement and service providers in responding in a timely and effective manner.

It is important to note that the Criminal Code recognises violence perpetrated by family members as an aggravating circumstance,⁵⁵ which is particularly pertinent in cases of domestic violence, FGM, and 'honour crimes'. Additional aggravating circumstances are also listed in the Criminal Code and are relevant in such cases. By torturing the victim or subjecting them to taunting; against a young child or a minor taking advantage of their dependency; against a person in a helpless state; where the act has inflicted serious harm or posed a real threat to the victim's life, among other circumstances.⁵⁶ There are no specific assistance arrangements for victims of female genital mutilation or 'honour crimes'. However, such victims may receive support through other mechanisms described further in this report. Moreover, the transposition of European Parliament and Council Directive (EU) 2024/1385 on Combating Violence Against Women and Domestic Violence into national law will require the explicit criminalisation of several forms of GBV, including female genital mutilation, harassment, and cyber incitement to violence or hatred. The deadline for the directive's transposition is 14 June 2027.⁵⁷

In relation to international humanitarian law, Article 100 of the Criminal Code, which addresses the treatment of persons protected under international law, can be applied in cases of rape or sexual coercion, sexual slavery, forced prostitution, unlawful deprivation of a forcibly inseminated woman of liberty with a view to altering the ethnic composition of the population or committing another violation of the norms of international law; forcible sterilisation of persons or carrying out other sexual coercion actions of a similar character. Similar offences are criminalised under Article 103, which covers bodily harm, torture, or other inhuman treatment of persons protected under international humanitarian law, including violations of their property rights.⁵⁸

Since most forms of GBV fall within the remit of criminal law, criminal justice institutions play a significant role. In Lithuania, prosecutors are responsible for directing and supervising pre-trial investigations, representing the state in criminal proceedings, and ensuring the legality of criminal procedures in GBV-related cases.⁵⁹

The police serve as a pre-trial investigation body and are usually the first responders to potential GBV cases. They frequently represent the initial point of contact for survivors seeking assistance and justice. Their primary responsibilities include ensuring the safety of GBV victims, conducting investigations, collecting evidence, and arresting perpetrators when appropriate. They also have the authority to issue emergency barring orders in cases of domestic violence. Furthermore, they are obliged to provide information regarding available resources, such as counselling services and legal aid, to enable survivors to make informed decisions regarding subsequent actions (see Sections 2.3 and 2.4 for further discussion on domestic violence and victims of crime).⁶⁰

⁵³ Articles 129, 133-136, 138, 140, 142-146, 148, 154 and Chapter XXI of the Criminal Code.

⁵⁴ Convention on the Elimination of All Forms of Discrimination against Women, Articles 2, 5 and 16, and Convention on the Rights of the Child, Articles 19 and 24 (3).

⁵⁵ Articles 129 (2) (3), 135 (2) (3) of the Criminal Code.

⁵⁶ Article 60 of the Criminal Code.

⁵⁷ Chapter 2, Article 49 of the European Parliament and European Council, Directive (EU) 2024/1385 on Combating Violence Against Women and Domestic Violence, 24 May 2024, OJ L, 2024/1385 (hereinafter Directive (EU) 2024/1385).

⁵⁸ Articles 100, 103 of the Criminal Code.

⁵⁹ Article 2 (2) of the Republic of Lithuania Law on the Public Prosecutor's Office, 13 October 1994, No I-599, Vilnius, <https://www.e-tar.lt/portal/lt/legalActEditions/TAR.3EB53577EFCA> (as amended).

⁶⁰ Republic of Lithuania Law on Police Activities, 17 October 2000, No VIII-2048, Vilnius, <https://www.e-tar.lt/portal/lt/legalActEditions/TAR.CA89372D00AA> (as amended); Law on Protection Against Domestic Violence.



Lithuanian legislation provides for mandatory reporting of certain crimes. The Criminal Code foresees penalties for a failure to report a grave crime to a law enforcement agency or to a court. Close relatives and family members of the perpetrator are exempted from the duty to report.⁶¹ The Criminal Code defines a grave crime as a premeditated crime punishable, under the criminal law, by a custodial sentence of the maximum duration in excess of ten years.⁶² Based on this criterion, there is a duty to report *inter alia* a murder,⁶³ aggravated severe health impairment,⁶⁴ aggravated trafficking in human beings,⁶⁵ rape of a young child,⁶⁶ or sexual assault of a young child.⁶⁷ Furthermore, the Law on Fundamentals of Protection of the Rights of the Child provides for a duty to report a violation of a child's right⁶⁸, while the Code of Administrative Offences foresees sanctions for a failure to report such a violation to the Child Rights Protection and Adoption Service, the Police or the Prosecutor's Office.⁶⁹

Under the Law on the Protection from Domestic Violence, institutions such as the State Child Rights Protection and Adoption Service and its territorial units, social service providers, healthcare and educational institutions are required to report suspected or identified cases of domestic violence.⁷⁰ In particular, if a person has experienced domestic violence, these institutions must inform both the police and a Specialised Comprehensive Assistance Centre. In cases where a person is identified as being at risk of domestic violence, they are required to notify a Specialised Comprehensive Assistance Centre and provide the victim's basic contact information to enable timely intervention and support. To support the effective implementation of this framework, relevant institutions and organisations are encouraged to adopt standard operational procedures for identifying victims and persons at risk of domestic violence and for determining appropriate response actions. The Ministry of Social Security and Labour has developed a methodology for identifying adults at risk, intended for use by specialists in the relevant institutions.⁷¹ Additionally, the Police Department has established procedural guidelines to support law enforcement officers in responding effectively to domestic violence cases.⁷²

Importantly, while engagement with law enforcement is mandatory in certain GBV cases to ensure victim protection and legal response, victims also have the option to access specialized assistance services independently, without involving the police. This approach helps ensure that support is accessible to all victims, regardless of their readiness or willingness to report to the authorities.

⁶¹ Article 238 of the Criminal Code.

⁶² Article 11 (6) of the Criminal Code.

⁶³ Article 129 of the Criminal Code.

⁶⁴ Article 135 (2) of the Criminal Code.

⁶⁵ Article 147 (2) of the Criminal Code.

⁶⁶ Article 149 (4) of the Criminal Code.

⁶⁷ Article 150 (4) of the Criminal Code.

⁶⁸ Articles 29 (3) and 35 (1-3) of the Republic of Lithuania Law on Fundamentals of Protection of the Rights of the Child, No I-1234, 14 March 1996, as amended, <https://e-seimas.lrs.lt/portal/legalAct/lt/TAD/TAIS.26397/asr> (hereinafter the Law on Fundamentals of Protection of the Rights of the Child).

⁶⁹ Article 75 (1) of the Republic of Lithuania Code of Administrative Offences, No XII-1869, 25 June 2015, as amended, <https://www.e-tar.lt/portal/lt/legalAct/4ebe66c026231e5bf92d6af3f6a2e8b/asr>.

⁷⁰ Article 13 (4) of the Law on Protection Against Domestic Violence.

⁷¹ Ministry of Social Security and Labour of the Republic of Lithuania, Criteria for Identifying an Adult who has Experienced or is at Risk of Gender-Based Violence (2024), <https://socmin.lrv.lt/public/canonical/1742305675/4523/SAA%20patyrisio%20ar%20SAA%20pavoj%C5%B3%20patirian%C4%8Dio%20pilname%C4%8Dio%20asmens%20identifikavimo%20kriterijai.pdf>.

⁷² Police Commissioner General of Lithuania, Order on the Approval of the Procedural Guidelines for Police Officers Responding to Domestic Violence Cases, No 5-V-96, 31 January 2023, <https://www.e-tar.lt/portal/lt/legalActEditions/1b59a9b00f2d11ee9f7ec2ffce8b47bc>.

2.2 ACCESS TO HEALTH SERVICES

In Lithuania, healthcare services are free of charge for GBV survivors covered by compulsory health insurance. Access to compulsory health insurance is guaranteed for specific categories of foreigners, including recognised refugees, persons granted subsidiary protection, and certain beneficiaries of temporary protection. Individuals covered by compulsory health insurance have access to primary care via registered family doctors and, when referred, to specialist care. Uninsured persons are required to pay for healthcare services. However, emergency care is provided to all individuals irrespective of their insurance status.

In addressing GBV in Lithuania, the accessibility and eligibility of health services constitute a critical component of support. This includes both immediate emergency medical attention and ongoing non-emergency healthcare, as the impact of gender-based violence extends beyond physical injury to encompass psychological trauma and long-term health consequences.

Lithuania operates a universal healthcare system, primarily funded through compulsory health insurance contributions and general taxation. Healthcare services are delivered through both public and private providers. Compulsory Health Insurance (CHI) ensures that the costs of healthcare services – including mental health and psychosocial support services (MPHSS), reimbursable medicines, medical aids, and orthopaedic technical equipment – are covered for all insured persons by the health insurance funds from the Compulsory Health Insurance Fund (CHIF) budget. Payments from health insurance funds are made directly to medical institutions, pharmacies, and orthopaedic suppliers. The Law on Health Insurance⁷³ regulates CHI.⁷⁴

Certain members of the target group qualify for coverage under the CHI scheme. The Law on Health Insurance specifies categories of persons eligible for CHI coverage. These include (i) foreign nationals permanently residing in Lithuania; (ii) foreign nationals granted subsidiary protection in Lithuania; (iii) unaccompanied foreign minors;⁷⁵ (iv) several categories of foreigners granted temporary protection, such as minors or persons with disabilities; and (v) foreigners issued temporary residence permits who are either currently employed, were previously employed for at least six months, or are registered as unemployed with the Public Employment Service. Accordingly, recognised Convention refugees issued permanent residence permits, persons granted subsidiary protection, and some categories of temporary protection beneficiaries – including children and employed adults – are encompassed within the CHI system. The same applies to unaccompanied minors irrespective of their legal status.

However, all asylum seekers, including children, and certain categories of temporary protection beneficiaries – such as women not yet engaged in employment in Lithuania – are ineligible for CHI coverage. Instead, they are entitled only to basic medical aid, including emergency healthcare services.⁷⁶ Similarly, persons in a refugee-like situation (for example, a woman issued a temporary residence permit based on the principle of non-refoulement) may access CHI only if they are either employed or were previously employed for at least six months and are registered as unemployed with the Public Employment Service.

Within the CHI system, individuals obtain health insurance either by paying compulsory health insurance contributions or by belonging to a state-insured category. The latter includes persons receiving pensions

⁷³ Republic of Lithuania Law on Health Insurance, No I-1343, 21 May 1996, Vilnius, <https://www.e-tar.lt/portal/lt/legalActEditions/TAR.94F6B680E8B8> (as amended) (hereinafter the Law on Health Insurance).

⁷⁴ “About Compulsory health insurance”, National Health Insurance Fund: <https://ligoniukasa.lrv.lt/en/sector-activities/about-compulsory-health-insurance> (visited 22 March 2025).

⁷⁵ Pursuant to Article 2 (16) of the Law on the Legal Status of Foreigners, ‘unaccompanied minor foreigner’ means a foreigner below the age of 18 who enters the Republic of Lithuania unaccompanied by parents or other legal representatives or who, after he has entered the Republic of Lithuania, is left unaccompanied until effectively placed under the curatorship by the above-mentioned persons. In Article 2 (28) of the law, it is further clarified that ‘legal representative’ refers to the parents or other persons who, under legal acts of the country whose national or permanent resident a minor foreigner is, are responsible for the minor staying in the Republic of Lithuania.

⁷⁶ Pursuant to Article 71 (1) (7) of the Law on the Legal Status of Foreigners, asylum seekers are entitled to free basic medical aid as well as other state-guaranteed (free) health care referred to in the Law on the Health System. The latter includes basic healthcare services which are deemed necessary to prevent deterioration of health that could require emergency medical assistance (Article 47 (2) (1) of the Law on the Health System).



or social assistance, individuals under eighteen years of age, unemployed persons registered with the Public Employment Service, unaccompanied foreign minors, and foreigners granted temporary protection in Lithuania who are children under eighteen, pension recipients, or persons officially recognised as persons with a disability under Lithuanian or their home country's legislation.⁷⁷

Persons covered by CHI in Lithuania are required to select a primary healthcare provider and register with a family doctor. The primary healthcare institution typically includes an outpatient mental health centre where initial emotional support and emergency psychological and psychiatric care can be provided free of charge to registered patients. Services delivered by family doctors and psychologists at the primary healthcare centre are funded by the Health Insurance Funds. If the family doctor determines that specialised outpatient services or hospitalisation are necessary, they will issue a referral. In emergencies, inpatient and specialised outpatient healthcare services are provided and funded by the Health Insurance Funds without a referral, including specialised medical care for victims of sexual violence at five major regional hospitals located in Vilnius, Kaunas, Klaipėda, Šiauliai, and Panevėžys.

Persons not covered by CHI must bear the full cost of medical services, except for state-guaranteed healthcare services, which primarily include emergency medical care. Emergency medical care is provided when an individual is in a critical condition with a serious threat to life or health.

2.3 SUPPORT SERVICES FOR VICTIMS OF CRIME

In Lithuania, victims of crime, including criminalised forms of gender-based violence, are entitled to receive assistance. The established system currently provides support to victims of crimes committed within the European Union and, in certain cases, outside the European Union, provided that legal proceedings are ongoing in Lithuania. This assistance may encompass information about legal procedures as well as emotional or psychological support. Support is available before, during, and after criminal proceedings, even if the individual elects not to file a formal complaint. Victims of any crime may choose to contact any of the eighteen available centres that provide assistance. These centres offer support without legal restrictions to refugees, asylum seekers, beneficiaries of temporary protection, and persons in refugee-like situations.

The Law on Assistance to Victims of Crime is the principal legal instrument in Lithuania regulating this form of support and transposes Directive 2012/29/EU (the "Victims' Directive"). The law applies only if the individual has experienced GBV within the EU; for example, if a person first entered the EU in Greece, experienced GBV there, and subsequently relocated to Lithuania, they would be eligible for assistance through the system. However, if the person experienced genital mutilation outside the EU prior to seeking asylum in Lithuania, they would not benefit from the assistance system, as the offence occurred outside the EU and prior to their arrival in Lithuania. More straightforward cases are generally covered by the law; for instance, a refugee who has suffered sexual violence in Lithuania may apply for assistance. No restrictions exist regarding the citizenship or legal status of foreign nationals. Assistance must be accessible before, during, and after criminal proceedings, including in the absence of a formal complaint.⁷⁸

Only accredited Centres for Victims of Crime provide assistance within the victim support system. First contact institutions – including pre-trial investigation bodies, prosecutors' offices, courts, municipalities, and social service providers – are obliged to inform victims of (potential) crimes about available assistance and provide contact information for the Centres. Currently, frontline agencies that regularly engage with asylum seekers and refugees – the Reception and Integration Agency, the Migration Department, and the State Border Guard Service – are not considered and do not act as first contact institutions, facilitating access to the mainstream assistance system for GBV victims. Victims may choose any accredited centre for victims of crime, as victims'

⁷⁷ Article 6 of the Law on Health Insurance.

⁷⁸ Article 8 (1, 5) of the Directive 2012/29/EU.



data are not automatically transferred, and victims are only informed of the existence of the Centres.⁷⁹ In 2025, 18 centres operate in Vilnius, Kaunas, Klaipėda, Šiauliai, Panevėžys, Alytus, Anykščiai, Kupiškis, Raseiniai, Tauragė, and Telšiai. Help can also be provided remotely.⁸⁰

The centres typically draft an assistance plan for victims and can offer support through various means: providing information about relevant institutions and legal procedures, referrals to social and other services, and emotional and psychological support (for more information see Annex IV).⁸¹

Assistance is provided free of charge.⁸² If the offence for which the victim seeks assistance was committed outside the EU and no criminal proceedings have been initiated in Lithuania regarding that offence, the victim will be informed of their rights and the possible steps to initiate criminal proceedings in Lithuania, enabling the centres to organise and provide appropriate support.

Assistance should be provided in a language comprehensible to the victim, using methods and means agreed upon between the victim and the service, taking into account the individual needs for interpreting, translating, and sign language interpretation.⁸³ However, it should be noted that, at present, official information on how to access help is available only in English, Russian, and Polish.⁸⁴

This system functions as a comprehensive framework encompassing all criminal offences. Currently, it does not differentiate between categories such as hate crimes, property crimes, financial crimes, and others, including criminalised forms of gender-based violence (GBV), all of which fall under the same umbrella. Although the centres providing assistance are expected to consider individual needs, it is evident that greater differentiation is necessary, as the nature of offences and the needs of victims vary considerably. The only clear exceptions are victims of domestic violence and child victims, who are addressed under separate legislation.⁸⁵

Certain provisions of the Criminal Procedure Code, notably those concerning victims' rights in criminal proceedings, are also pertinent. Criminal proceedings in Lithuania are conducted in Lithuanian. Nevertheless, for individuals who do not understand the language, translator or interpreter services must be provided, and documents served must be translated. All victims have the right to seek compensation for damages caused by the criminal act and, where provided by law, compensation from the Crime Victims Fund, as well as the right to receive state-guaranteed legal aid free of charge. The Criminal Procedure Code also permits the application of supervisory measures to prevent further criminal acts, including criminalised forms of GBV, directed at the suspected perpetrator. Such measures may include remand detention, house arrest, an obligation to reside separately from the victim, and/or prohibition on approaching the victim within a prescribed distance.⁸⁶

Primary legal aid is available to all persons legally residing in Lithuania and other EU countries, but excludes asylum seekers. Primary legal aid, provided by municipalities, includes legal information, advice, drafting documents for state and municipal authorities, advice on out-of-court dispute settlement, amicable settlement actions, and preparation of procedural documents for divorce by mutual consent and agreements on the legal consequences of divorce.

⁷⁹ Articles 4 (1) (1), 9 (1) (1), 12 of the Law on Assistance to Victims of Crime.

⁸⁰ "Pagalbą teikiančios tarnybos 2025 m.", The Ministry of Social Security and Labour of the Republic of Lithuania: <https://socmin.lrv.lt/lt/veiklos-sritys/socialine-integracija/pagalba-nuo-nusikalstamos-veikos-nukentejusiems-asmenims/pagalba-teikiancios-tarnybos-2024-m> (visited 22 March 2025).

⁸¹ Articles 9-10 of the Law on Assistance to Victims of Crime.

⁸² Article 4 (1) (1) of the Law on Assistance to Victims of Crime.

⁸³ Points 11, 12.1, 20 of the Minister of Social Security and Labour, Order on the Approval of the Description of the Procedure for the Provision of Accredited Assistance to Victims of Crime, 19 July 2021, No A1-528, Vilnius, <https://www.e-tar.lt/portal/lt/legalActEditions/c1bafb50e8701feb-9f09e7df20500045> (as amended).

⁸⁴ Minister of Justice of the Republic of Lithuania, Order on the Approval of the Description of the Procedure for the Preparation, Publication and Updating of the Electronic Information Publication (Leaflet) Containing Information Referred to in Article 9 (1) of the Law of the Republic of Lithuania on Assistance to Victims of Criminal Offences, 3 January 2022, No 1R-7, Vilnius, <https://www.e-tar.lt/portal/lt/legalAct/Oe4eb0306cae1fec993ff5ca6e8ba60c>.

⁸⁵ Articles 1 (2-3), 2 (4) of the Law on Assistance to Victims of Crime.

⁸⁶ Articles 8, 44 (10), 119-120 of the Republic of Lithuania Criminal Procedure Code, 14 March 2002, No IX-785, Vilnius, <https://www.e-tar.lt/portal/lt/legalActEditions/TAR.EC588C321777> (as amended).



Victims of trafficking in human beings, domestic violence, sexual crimes, and hate crimes are entitled to secondary legal aid – comprising document drafting, defence, and representation – regardless of assets and income, in criminal proceedings. The same applies to minors in cases involving offences against human health, liberty, sexual self-determination, the child and family, morality, and other criminal cases, where a reasoned decision by a pre-trial investigator, prosecutor, or court deems the presence of an authorised representative necessary, or notification is received from the State Child Rights Protection and Adoption Service. All victims of criminal offences are entitled to secondary legal aid regardless of assets and income when claiming compensation in civil proceedings. This entitlement extends to asylum seekers, unlike primary legal aid.⁸⁷

Collectively, the target group – refugees, asylum seekers, beneficiaries of temporary protection, and persons in refugee-like situations – can access victim assistance services. However, it is important to note that assistance is accessible only for crimes committed within the European Union and, in some cases, outside the European Union if legal proceedings are conducted in Lithuania. Asylum seekers are ineligible for primary legal aid in Lithuania.

Victims of crime have the right to be informed about assistance provided by Centres for Victims of Crime. This information is to be communicated by first-contact institutions, including pre-trial investigation bodies, prosecutors' offices, courts, municipalities, social service providers, and others.

Victims of crime are entitled to **linguistic assistance, interpretation, and translation** during court proceedings. They also have the right to receive assistance in a language they understand at Centres for Victims of Crime; however, in practice, this provision may be limited.

Victims have the **right to legal assistance and representation** in both criminal and civil proceedings when claiming compensation for offences suffered, through the State-guaranteed Legal Aid system.

2.4 SUPPORT SERVICES FOR VICTIMS OF DOMESTIC VIOLENCE

Individuals experiencing domestic violence or at risk thereof can seek support from the Specialised Comprehensive Assistance Centres. These Centres offer counselling, legal assistance, and referrals to other services, such as healthcare and social support. The police are mandated to intervene in domestic violence cases, conduct risk assessments, and may issue emergency barring orders for 15 days, requiring perpetrators to leave the residence and restricting contact with the victim. Police responding to domestic violence incidents automatically transmit relevant data to the Specialised Comprehensive Assistance Centres; alternatively, victims may contact these Centres independently. The Centres provide assistance without legal restrictions to refugees, asylum seekers, beneficiaries of temporary protection, and persons in refugee-like situations.

The Law on the Protection from Domestic Violence (LPDV) establishes a system for prevention and protection. Although Lithuania has not ratified the Istanbul Convention, the LPDV is inspired by its principles.⁸⁸ Domestic violence is defined as intentional or unintentional physical, mental, sexual, economic, or other harm inflicted on a person by action or omission within a close environment, resulting in physical, material, and/or non-material harm. The LPDV recognises both victims of domestic violence and persons at risk. While the definitions do not explicitly mention the target group, there is no indication that the LPDV cannot be applied to members of this group when experiencing domestic violence. Uniquely, children are recognised as victims if they witness domestic violence, even if they are not directly affected.⁸⁹ Assistance for children is provided through the child rights protection system (see Section 2.7 Protection of Children).

⁸⁷ Articles 2 (6), 11 (1), 12, 15 (7) of the Republic of Lithuania Law on State-guaranteed Legal Aid, 1 January 2000, No VIII-1591, Vilnius, <https://www.e-tar.lt/portal/lt/legalActEditions/TAR.EAA93A47BAA1> (as amended).

⁸⁸ Ministry of Social Security and Labour, Lietuvos Respublikos apsaugos nuo smurto artimoje aplinkoje įstatymo Nr. XI-1425 ir Lietuvos Respublikos administracinių nusižengimų kodekso 489 straipsnio pakeitimo įstatymo projektų aiškinamasis raštas, 2021, <https://e-seimas.lrs.lt/portal/legalAct/lt/TAK/701921603e0011ec99bbc1b08701c7f8>.

⁸⁹ Article 2 (5-7) of the Law on Protection Against Domestic Violence.



In domestic violence cases, the police are obliged to intervene and protect victims, including those at risk, from further harm. Police officers must assess the domestic violence situation. In most cases, they initiate a pre-trial investigation immediately and may arrest the perpetrator. Where information is insufficient to commence a pre-trial investigation, officers assess the risk and may issue an emergency barring order for 15 days. The decision to issue the order is made immediately or within 12 hours of receiving a report of suspected domestic violence. Risk assessment follows a prescribed list of criteria. The barring order imposes restrictions on communication and proximity, and requires the perpetrator to vacate the residence (Art. 8).⁹⁰ There are no restrictions based on the citizenship or legal status of the foreigner.

Lithuania does not have long-term civil orders that victims or those at risk can apply for through civil courts. Those not protected by civil or criminal procedural measures receive no further protection after 15 days without additional police intervention. The police may only reassess the situation and issue a subsequent emergency barring order. However, this limitation has been criticised in case law and requires systematic resolution.⁹¹ This situation is likely to change following the transposition of Directive (EU) 2024/1385 into national law, which envisages multiple types of orders, some of which will have longer durations than the current emergency barring order.⁹²

Specialised Comprehensive Assistance Centres provide support to victims and persons at risk of domestic violence. Unlike cases involving other crimes, these Centres automatically receive personal data of victims and at-risk individuals from police, healthcare, education, and social institutions. The Reception and Integration Agency and the State Border Guard Service are currently not obliged to inform victims about available assistance or to transfer data of domestic violence survivors to the Specialised Comprehensive Assistance Centres. Upon receiving such information, the Centres proactively contact the individual concerned to offer support. Victims and persons at risk may also self-refer for assistance.⁹³ There is no evidence to suggest that members of the target group are treated differently regarding data handling or self-referral, as no restrictions exist based on citizenship or legal foreigner status. Nevertheless, official information on how to access assistance is presently available only in English, Russian, and Polish.⁹⁴

In 2025, **twenty-five Specialised Comprehensive Assistance Centres** operate throughout Lithuania. The assistance is funded and organised to ensure coverage across all municipalities, enabling Centres to provide direct, in-person support locally.⁹⁵

The Centres perform diverse functions. **They assess the individual and specific needs of victims and, in collaboration with the victim, develop and implement support plans tailored to the needs of the victim.** These Centres conduct expert assessments of domestic violence risks and incidents, particularly when police manage complaints related to emergency barring orders. **They offer information and counselling on domestic violence issues and provide specialised psychological and legal assistance.** Furthermore, they inform survivors of their rights and relevant protective institutions. In cases involving child victims, or when the Centres independently identify child victims, they notify the Child Protection and Adoption Service.

Additionally, the Centres **provide information about social and healthcare services**, assist victims in contacting these services, and **may accompany them to other institutions.** They also **inform survivors of**

⁹⁰ Article 8 of the Law on Protection Against Domestic Violence.

⁹¹ Kaunas Regional Court, 6 September 2023, No A1S-545-1049/2023, Kaunas.

⁹² Article 19 of the Directive (EU) 2024/1385.

⁹³ Articles 13-14 of the Law on Protection Against Domestic Violence.

⁹⁴ Minister of Social Security and Labour of the Republic of Lithuania, Order on the Approval of the Description of the Procedure for Obtaining Information from Institutions and Bodies and Publishing this Information on the Website of the Ministry of Social Security and Labour of the Republic of Lithuania [...], 30 September 2022, No A1-653, Vilnius, <https://www.e-tar.lt/portal/lt/legalActEditions/232c5a2040de11edbc04912defe897d1> (as amended).

⁹⁵ "Nukentėjusiems", Ministry of Social Security and Labour of the Republic of Lithuania: <https://socmin.lrv.lt/lt/veiklos-sritys/seima-ir-vaikai/seimos-politika/smurto-artimoje-aplinkoje-prevencija/nukentėjusiems> (visited 22 March 2025); "Jstaigų, kurioms suteikta teisė teikti akredituotą specializuotą kompleksinę pagalbą smurto artimoje aplinkoje patyrusiems bei smurto artimoje aplinkoje pavojų patirintiems asmenims, sąrašas", Department of Supervision of Social Services under Ministry of Social Security and Labour: <https://sppd.lrv.lt/lt/veiklos-sritys/akreditacija/specializuotos-kompleksines-pagalbos-centru-akreditacija> (visited 22 March 2025).



their right to file complaints and provide details about pre-trial investigation bodies, prosecutors, and courts. Support is offered to victims seeking to enter the labour market, and the Centres exchange information with other relevant institutions involved in provision of assistance.⁹⁶ The assistance provided is outlined in Annex II.

Overall, victims of domestic violence among the target group – **refugees, asylum seekers, beneficiaries of temporary protection, and persons in refugee-like situations** – can access these assistance services.

Victims have the **right to be informed** about the services described above. Victim data is transferred by police, prosecutors' offices, healthcare, education, and social service institutions to the Specialised Comprehensive Assistance Centres, which subsequently contact victims to offer support. If a victim of domestic violence has children, the first-contact institution reports the case to the State Child Rights Protection and Adoption Service, which assesses the child's situation.

No direct right to linguistic assistance, interpretation, or translation exists when requesting or receiving support related to domestic violence. Similarly, no direct right to legal assistance and representation is provided, although Specialised Comprehensive Assistance Centres offer legal counselling (see also Section 2.3 Support Services to Victims of Crime for a description of assistance in criminal proceedings).

2.5 SUPPORT SERVICES FOR VICTIMS OF SEXUAL VIOLENCE

Medical care and support are available to persons who have experienced sexual violence in Lithuania. Specialised medical care is provided on a 24/7 basis in five major regional hospitals (Vilnius, Kaunas, Klaipėda, Šiauliai, and Panevėžys). Basic health needs will be met at other healthcare providers, with transport arranged to one of the five designated regional hospitals if necessary. Emergency care is accessible regardless of health insurance status, whereas non-emergency care may require payment if insurance is absent. The National Information Centre on Sexual Violence offers counselling, emotional support, and legal consultations via telephone, email, or online chat. This support is accessible to both survivors and those at risk, irrespective of status, including refugees, asylum-seekers, beneficiaries of temporary protection, and persons in refugee-like situations.

Support services for victims of sexual violence are not regulated by law in Lithuania, although this is likely to change following the transposition of Directive (EU) 2024/1385 into national legislation; currently, these services are regulated through ministerial by-laws. The only legislative exceptions concern sexual violence within the context of domestic violence and sexual violence against children, as detailed below.

Specialised healthcare services exist for victims of sexual violence and are regulated by a Description approved by the Minister of Health.⁹⁷ This Description is specifically aimed at female victims of sexual violence but, since November 2024, has been applied – with exceptions – to male victims as well. The Description applies to patients who have allegedly experienced sexual violence, encompassing suspicion, diagnosis, and/or treatment of diseases and/or injuries as classified by ICD-10-AM.⁹⁸ Sexual violence within the healthcare context is understood as any offence listed under Section XXI of the Criminal Code.⁹⁹

⁹⁶ Minister of Social Security and Labour of the Republic of Lithuania, Order on the Approval of the Description of the Procedure for Provision of Specialised Comprehensive Assistance [...], 9 May 2023, No A1-296, Vilnius, <https://www.e-tar.lt/portal/lt/legalActEditions/7c8e0500ee2b11ed9978886e-85107ab2> (as amended).

⁹⁷ Description of the Provision of Personal Healthcare Services to Victims of Sexual Violence.

⁹⁸ It should be noted that Lithuania continues to use the tenth revision of the International Classification of Diseases (ICD), despite the adoption of ICD-11 in 2019, which came into force in 2022. "International Statistical Classification of Diseases and Related Health Problems (ICD)," World Health Organisation: <https://www.who.int/standards/classifications/classification-of-diseases> (visited 22 March 2025).

⁹⁹ Points 1-3 of the Description of the Provision of Personal Healthcare Services to Victims of Sexual Violence.

Although the target group is not explicitly mentioned in the Description, **no limitations exist preventing refugees, asylum-seekers, beneficiaries of temporary protection, or persons in refugee-like situations from accessing healthcare services following sexual violence**, as the Law on the Health System guarantees state-funded emergency healthcare for those in need, including foreigners (see Section 2.2 Access to Emergency and Non-Emergency Health Services for further details).¹⁰⁰

Healthcare services for victims of sexual violence are provided continuously (24/7). These services may involve various specialists, including an obstetrician-gynaecologist, emergency physician, paediatrician trained in the care of sexual violence victims, other medical specialists as appropriate to the nature of the injury, a forensic medical expert, medical psychologist, social worker, psychiatrist, and general nurse. Both emergency services (provided when patients present within seventy-two hours of the sexual violence) and non-emergency services (provided when patients present after seventy-two hours) are available. These services are only available at the five largest regional hospitals (Vilnius, Kaunas, Klaipėda, Šiauliai, and Panevėžys), rendering access relatively difficult. However, victims of sexual violence who seek care at any health centre and receive immediate treatment are subsequently transferred to one of the five hospitals offering specialised services. Emergency services must be provided irrespective of the individual's health insurance status.¹⁰¹ Non-emergency services may require payment if the individual lacks health insurance.¹⁰²

In cases of domestic violence, the victim will be referred to a Specialised Comprehensive Assistance Centre. When sexual violence occurs outside domestic settings, the victim will be referred to the Centre for Victims of Crime. In instances of child sexual abuse, referrals are made to the State Child Rights Protection and Adoption Service.¹⁰³

Since 2023, the Ministry of Social Security and Labour has financed an organisation that provides methodological support and coordinates activities aimed at the prevention of sexual violence – the National Information Centre on Sexual Violence.¹⁰⁴ As these financing mechanisms are periodic, the most recent approval covers the years 2025–2026, with details outlined in the Rules of Procedure. The Rules of Procedure stipulate that the Methodological Centre provides support – including counselling, emotional support, and legal consultations – to adult persons who have experienced sexual violence and adults at risk of sexual violence. No restrictions exist regarding the citizenship or legal status of foreign nationals. The Centre also offers methodological support to specialists working in the field of protection from sexual violence.¹⁰⁵ Victims can access assistance via telephone, email, or live chat¹⁰⁶; however, it remains unclear whether support is available in languages other than Lithuanian. Based on this framework, the Centre's website, *prabilk.lt*, is accessible.

In 2023, the Klaipėda Social and Psychological Support Centre (*Klaipėdos socialinės ir psichologinės pagalbos centras*) was financed; in 2024, funding was granted to the Lithuanian Women's Lobby organisation; and in 2025, the Klaipėda Social and Psychological Support Centre received further financing to continue its activities.¹⁰⁷ These organisations have maintained the same identity throughout these years.

¹⁰⁰ Article 47 of the Republic of Lithuania Law on the Health System, 19 July 1994, No I-552, Vilnius, <https://www.e-tar.lt/portal/lt/legalActEditions/TAR.E2B2957B9182> (as amended) (hereinafter the Law on the Health System).

¹⁰¹ Points 3.1-3.4, 6, 11 of the Description of the Provision of Personal Healthcare Services to Victims of Sexual Violence.

¹⁰² Article 47 of the Law on the Health System.

¹⁰³ Points 12.11, 18, 20.11, 21, 26.1, 27.2, 33, 35, 37, 42 of the Description of the Provision of Personal Healthcare Services to Victims of Sexual Violence.

¹⁰⁴ Minister of Social Security and Labour of the Republic of Lithuania, Order on the Approval of the Rules of Procedure for the Organisation of a Call for Proposals for the Organisation of a Project for the Provision of Methodological Support and the Organisation of Activities Aimed at the Prevention of Sexual Violence in 2023, 16 March 2023, No A1-169, Vilnius, <https://www.e-tar.lt/portal/lt/legalAct/486c71a0c3ef11ed97b2975f7dad7488>.

¹⁰⁵ Points 2.3-2.6, 18.2 of the Minister of Social Security and Labour of the Republic of Lithuania, Order on the Approval of the Rules of Procedure for the Organisation of a Call for Proposals for the Organisation of a Project for the Provision of Methodological Support and the Organisation of Activities Aimed at the Prevention of Sexual Violence in 2025–2026, 18 September 2024, No A1-618, Vilnius.

¹⁰⁶ Cinskienė, J., et. al. Pagalbos teikimo seksualinį smurtą patyrusiems asmenims ar seksualinio smurto pavojų patiriantiems asmenims metodika, The Ministry of Social Security and Labour: <https://socmin.lrv.lt/lt/veiklos-sritys/seima-ir-vaikai/seimos-politika/smurto-artimoje-aplinkoje-prevencija/seksualinis-smurtas> (visited 22 March 2025); "Apie", Nacionalinis informacijos apie seksualinį smurtą centras: <https://prabilk.lt/apie> (visited 22 March 2025).

¹⁰⁷ "Projektų konkursų rezultatai", Department of Supervision of Social Services under the Ministry of Social Security and Labour: <https://sppd.lrv.lt/lt/veiklos-sritys/projektu-konkursai/projektu-konkursu-rezultatai> (visited 22 March 2025).



Overall, **the target group – refugees, asylum-seekers, beneficiaries of temporary protection, and persons in refugee-like situations – can access assistance for victims of sexual crimes. Emergency healthcare services are also accessible to the target group;** however, **non-emergency services may incur charges** for those without health insurance (see Section 2.2 Access to Emergency and Non-Emergency Health Services for further details).

While there is **no direct right to be informed** about these services, the target group receives information through the support systems for victims of crime and domestic violence, which can direct victims to specialised assistance.

No direct right to linguistic assistance, interpretation, or translation exists when requesting or receiving support related to sexual violence. **No direct right to legal assistance and representation is provided** (see Section 2.3 Support Services to Victims of Crime for a description of assistance in legal proceedings).

2.6 SUPPORT SERVICES FOR VICTIMS OF HUMAN TRAFFICKING

Victims of human trafficking can obtain assistance from non-governmental organisations implementing government-funded programmes. Support is provided regardless of whether individuals are formally recognised as victims in criminal proceedings. Services are typically offered for up to twelve months or until the conclusion of criminal proceedings. Referrals to these services may originate from various sources, including law enforcement agencies, border guards, labour inspectors, and international organisations. These organisations collaborate with other service providers across Lithuania to deliver comprehensive assistance, including information, counselling, essential items, and legal and psychological support. The organisation provides assistance without legal restrictions to refugees, asylum-seekers, beneficiaries of temporary protection, and persons in refugee-like situations.

In Lithuania, specific support for victims of human trafficking is not explicitly established at the legislative level. Nevertheless, support mechanisms exist and comply with Directive 2011/36/EU.¹⁰⁸ The Ministry of Social Security and Labour finances support services through competitive tenders. The Rules of Procedure specify that services are offered to victims of human trafficking (officially recognised in criminal proceedings) and to other persons who may have been victims in Lithuania or abroad, regardless of formal recognition or cooperation with law enforcement. The Rules of Procedure do not explicitly reference the target group, and no access restrictions are imposed.¹⁰⁹

In 2024, the National Association against Trafficking in Persons (*Nacionalinė asociacija prieš prekybą žmonėmis*), an umbrella NGO uniting organisations providing assistance to trafficking victims, was awarded the tender. The association operates a national helpline where victims can receive support in Lithuanian, English, and Russian. The helpline operates twenty-four hours a day.¹¹⁰ The organisation coordinates with other NGOs located in Vilnius, Kaunas, Klaipėda, Šiauliai, Panevėžys, Marijampolė, and Tauragė.¹¹¹

¹⁰⁸ European Parliament and of the Council, Directive 2011/36/EU on Preventing and Combating Trafficking in Human Beings and Protecting its Victims, and Replacing Council Framework Decision 2002/629/JHA, 15 April 2011, OJ L 101, <https://eur-lex.europa.eu/eli/dir/2011/36/oj/eng>.

¹⁰⁹ Point 2 of the Minister of Social Security and Labour of the Republic of Lithuania Order on the Approval of the Rules of Procedure for the Call for Proposals for the Organisation of a Project for the Provision of Social Assistance to Victims and Potential Victims of Human Trafficking for the Period 2024-2025, 17 October 2023, No A1-683, Vilnius, <https://www.e-tar.lt/portal/lt/legalActEditions/2aecfdc06ce11ee8f3cbca2fb16d96d> (as amended) (hereinafter the Rules of Procedure for Human Trafficking Assistance).

¹¹⁰ "Dėl projekto, skirto socialinei pagalbai asmenims, nukentėjusiems ir galėjusiems nukentėti nuo prekybos žmonėmis, teikti finansavimo 2024 metais", Ministry of Social Security and Labour of the Republic of Lithuania: <https://spdp.lrv.lt/media/viesa/saugykla/2024/2/bAHC2Z0qarY.pdf> (visited 22 March 2025); "Narystė", National Association against Trafficking in Persons: <https://stop-trafficking.lt/naryste> (visited 22 March 2025).

¹¹¹ "Nariai", National Association against Trafficking in Persons: <https://stop-trafficking.lt/nariai> (visited 22 March 2025). "Pagalba prekybos žmonėmis nusikaltimų aukoms", Ministry of Social Security and Labour of the Republic of Lithuania: <https://socmin.lrv.lt/lt/veiklos-sritys/socialine-integracija/pagalba-prekybos-zmonemis-nusikaltimu-aukoms> (visited 22 March 2025).

Assistance is comprehensive and, depending on the victim's needs, may include funding and provision of services such as information, counselling, essential items (clothing, footwear, personal hygiene products), temporary accommodation and meals, as well as psychological and legal support. Support is provided for no longer than twelve months or until the conclusion of criminal proceedings.¹¹² Inter-institutional cooperation is promoted, as assistance is delivered and coordinated in accordance with the Recommendations on the identification of victims of human trafficking, pre-trial investigation, and inter-institutional collaboration. Victims may seek help directly or be referred by other institutions and organisations to the NGO providing assistance. Given the diverse forms of human trafficking, the State Child Rights Protection and Adoption Service is informed about any child victims. The State Border Guard Service, Ministry of Foreign Affairs, State Labour Inspectorate, and International Organisation for Migration (with the Migration Department not explicitly mentioned) may identify victims, provide initial assistance, and refer victims to non-governmental organisations for further support. Where feasible, assistance should also extend to victims' families.

Victim data is transferred by the identifying institution or organisation, and assistance is provided only with the victim's consent, except in cases involving children, where all instances are reported to the State Child Rights Protection and Adoption Service.¹¹³

Assistance is needs-based and structured through the development of an assistance plan. Although the Rules of Procedure enumerate twelve forms of assistance (detailed in Annex II), NGOs are required to select at least five when applying for funding. Consequently, there is no assurance that all forms of assistance will be consistently available.¹¹⁴

The association categorises assistance into four types: 1) initial assistance – immediate support provided at first contact; 2) one-off assistance – support delivered after initial contact, organised for a defined period; 3) long-term assistance – support extending beyond one month; 4) supportive assistance – provided following the usual assistance period when the individual is considered integrated.¹¹⁵

It should be noted that, as human trafficking constitutes a criminal offence, victims may also seek assistance through the mechanism for victims of crime (see section 2.3 Support services to victims of crime).

Overall, victims of human trafficking within the target group (**refugees, asylum-seekers, beneficiaries of temporary protection, and persons in refugee-like situations**) have access to support services.

Victims possess the right to be informed about the available services and will receive such information from the institution that identified them.

No explicit entitlement to linguistic assistance, interpretation, or translation exists when requesting or receiving support related to human trafficking. **Similarly, there is no direct right to legal assistance and representation**, although legal support may be provided by organisations funded by the Ministry of Social Security and Labour (see section 2.3 Support services to victims of crime for details on procedural assistance).

¹¹² Points 2 13.1-13.3, 14.11 of the Rules of Procedure for Human Trafficking Assistance.

¹¹³ Points 2, 29-38, 40.3 and Section V of the General Prosecutor, Minister of Interior and Minister of Social Security and Labour of the Republic of Lithuania, Order on the Approval of the Recommendations on the Identification, Pre-trial Investigation and Inter-institutional Cooperation of Victims of Human Trafficking, 17 December 2015, No I-327/IV-1015/A1-758, Vilnius, <https://www.e-tar.lt/portal/lt/legalActEditions/801bbb20ad5311e5b12fbb7d-c920ee2c> (as amended).

¹¹⁴ Point 13.1 of the Rules of Procedure for Human Trafficking Assistance.

¹¹⁵ National Association against Trafficking in Persons, Kompleksinės socialinės pagalbos teikimo prekybos žmonėmis aukoms, nukentėjusiems ir galėjusiems nukentėti nuo prekybos žmonėmis asmenims teikimo standartas, 2023, available at: <https://drive.google.com/file/d/1-bruhw3Wp252B5G-d0t1D8apnknDTK74/view>.

2.7 CHILD PROTECTION IN GENDER-BASED VIOLENCE CASES

The State Child Rights Protection and Adoption Service (hereafter referred to as the Service) manages reports concerning violations of child rights. Any person who becomes aware of a child experiencing violence or rights violations is obligated to report this to the police and/or the Service. The Service evaluates the child's circumstances in line with the best interests of the child,¹¹⁶ and may implement measures to ensure their immediate safety. A family may be assigned a case manager responsible for coordinating services and devising an assistance plan encompassing social, psychological, and healthcare support. Specialised assistance for child victims of sexual violence is available, predominantly in Vilnius, with some services offered through mobile units. Although infrequent, child marriage remains legally permissible in Lithuania through court-approved exceptions. Children subjected to forced marriage or other forms of gender-based violence may access support via the child rights protection system. The Service provides assistance to all children within Lithuania's territory, including refugees, asylum-seekers, beneficiaries of temporary protection, and persons in refugee-like situations.

The Law on Fundamentals of Protection of the Rights of the Child (LFPRC) establishes the framework for child rights protection in Lithuania. This legislation aligns with Directive 2011/36/EU, Directive 2011/93/EU, Directive 2012/29/EU,¹¹⁷ and Directive 2016/800.¹¹⁸ Gender based violence is covered under the LFPRC's definition of violence.¹¹⁹

The LFPRC explicitly includes provisions applicable to members of the target group. Children who are asylum-seekers, recognised refugees, beneficiaries of subsidiary protection, or unaccompanied foreign minors are entitled to assistance and protection.¹²⁰ No restrictions based on citizenship or legal status apply when receiving assistance or services in cases of potential child rights violations.

The Service responds to all indications and reports of child rights infringements and assesses the child's situation. If a child's safety within the family is jeopardised, temporary care arrangements may be made with relatives or trusted individuals, or the child and one or both parents/guardians may be placed in a social care institution. Case management is also initiated where no immediate safety risk exists but family support is required.¹²¹ The evaluation process follows procedures established by the Minister of Social Security and Labour.¹²²

In violence-related cases, the Service refers the child to case management within the municipality where the family resides. Case management involves coordinating various services from multiple providers and monitoring progress in addressing child rights violations within the family. Beyond cases triggered by reports, families may also voluntarily initiate case management. Case management entails assessing the needs of the child, formulating a plan, and implementing the requisite measures.¹²³ The services provided through case management depend on the needs of the child and their legal representative, as well as the availability of services within the specific municipality. These services include social support (see section 2.8 Access to social services) and any additional services required and available, such as those offered by non-governmental organisations. The child or family may also be referred to specialised services for victims of

¹¹⁶ UN Committee on the Rights of the Child, in its most recent recommendations to Lithuania, underlines the need to ensure that the right of the child to have his or her best interests taken as a primary consideration is appropriately integrated and consistently interpreted and applied as a children's right in all legislative, administrative and judicial proceedings and decisions as well as in all policies, programmes and projects that are relevant to, and have an impact on, children. See Art. 7 and 21 of UN Committee on the Rights of the Child, Concluding Observations on the Combined Fifth and Sixth Periodic Reports of Lithuania, CRC/C/LTU/CO/5-6, 7 March 2024, <https://docs.un.org/en/CRC/C/LTU/CO/5-6>.

¹¹⁷ European Parliament and European Council, Directive 2011/93/EU on Combating the Sexual Abuse and Sexual Exploitation of Children and Child Pornography, and Replacing Council Framework Decision 2004/68/JHA, 17 December 2011, OJ L 335, <https://eur-lex.europa.eu/eli/dir/2011/93/oj/eng>.

¹¹⁸ European Parliament and European Council, Directive (EU) 2016/800 on Procedural Safeguards for Children who are Suspects or Accused Persons in Criminal Proceedings, 21 May 2016, OJ L 132, <https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=celex%3A32016L0800>.

¹¹⁹ Articles 2 (5, 10), 3, 29 of the Law on the Rights of the Child.

¹²⁰ Article 22 of the Law on the Rights of the Child.

¹²¹ Articles 36 to 43 of the Law on the Rights of the Child.

¹²² Minister of Social Security and Labour of the Republic of Lithuania, Order on the Approval of the Procedure for Assessing the Situation of a Child, 30 December 2019, No A1-803, Vilnius, <https://www.e-tar.lt/portal/lt/legalActEditions/3c6dd8702b1911eabe008ea93139d588> (as amended).

¹²³ Article 37 of the Law on the Rights of the Child.



sexual violence provided by the Service, which may be delivered immediately or within sixty days, contingent upon the needs identified.¹²⁴

Child victims of sexual violence are entitled to specialised assistance encompassing social, psychological, healthcare, and other support measures administered by the Service. Assistance is accessible when a child is referred to the Service either through general reports of child rights violations or via referrals from law enforcement and healthcare institutions. Legal representatives of the child also receive support.¹²⁵ This specialised assistance is currently available only in Vilnius; however, some mobile services have recently commenced operation. Further details concerning the specialised service are provided in Annex II.

Child marriage is recognised as a form of gender-based violence. In Lithuania, marriage is governed by the Civil Code and is permitted exclusively between a man and a woman, with monogamy enforced. Marriage is allowed only for individuals who have reached the age of eighteen at the time of contracting. It must be entered into voluntarily and based on free consent. By court order, the legal age for marriage may be lowered by no more than two years for a person intending to marry before turning eighteen. In cases of pregnancy, the court may authorise marriage prior to the age of sixteen.¹²⁶ This practice has drawn criticism from international bodies, including the UN Committee on the Elimination of Discrimination against Women, which has recommended the abolition of any age-related exceptions.¹²⁷ According to Statistics Lithuania (State Data Agency), in 2023 no males under eighteen married, whereas twelve females did.¹²⁸

When deciding on reducing the legal age of consent to marriage, the court must consider the opinions of the minor's parents or guardians and evaluate the minor's mental and psychological state, financial circumstances, and other pertinent factors. The Service also provides its opinion during the judicial proceedings.¹²⁹ Forced and fictitious marriages are criminalised under legislation relating to human trafficking offences.¹³⁰ Criminal law is expected to be amended upon transposition of Directive (EU) 2024/1385 into national legislation, as the Directive classifies forced marriage as a criminal offence.¹³¹

Although it is highly improbable that child marriage would be legally recognised in Lithuania, the possibility of formalising such marriages within the country remains. Children affected by this form of gender-based violence may access requisite support through the previously described child protection system.

Overall, **assistance for child victims is accessible to the target group** (refugees, asylum-seekers, beneficiaries of temporary protection, and people in refugee-like situations). In practice, case management may encounter difficulties in securing accessible services for children and families within this group due to limited availability in certain regions. **Asylum-seeking children and families may be ineligible to receive mainstream social services in municipalities** owing to their status (see section 2.8 Access to social services).

Victims have the **right to be informed** about the services described and will receive such information from the State Child Rights Protection and Adoption Service.

No direct right to linguistic assistance, interpretation, or translation exists when requesting or receiving assistance for child victims. There is no direct right to legal assistance and representation, although the State Child Rights Protection and Adoption Service intervenes in cases relating to child rights (see section 2.8 Support services to victims of crime for a description of assistance in proceedings).

¹²⁴ Articles 2 (1), 3 (3), 36 (3), 36⁶ of the Law on the Rights of the Child.

¹²⁵ Ibid.

¹²⁶ Articles 1.25, 3.7 (1), 3.12-3.14, 3.16 of the Republic of Lithuania Civil Code, 18 July 2000, No VIII-1864, Vilnius (as amended) (hereinafter the Civil Code).

¹²⁷ UN Committee on the Elimination of Discrimination against Women (CEDAW), Concluding Observations on the Sixth Periodic Report of Lithuania, No CEDAW/C/LTU/CO/6, 8 November 2019, <https://docs.un.org/en/CEDAW/C/LTU/CO/6>.

¹²⁸ Underage Marriages, Lithuania's Statistics Department: <https://osp.stat.gov.lt/statistiniu-rodikliu-analize?hash=e2f-d8a83-bb8f-48c6-a658-c17722ceefb8#/> (visited 22 March 2025).

¹²⁹ Article 3.14 (4-5) of the Civil Code.

¹³⁰ Articles 147, 157 of the Criminal Code.

¹³¹ Article 4 of Directive (EU) 2024/1385.

2.8 ACCESS TO SOCIAL SERVICES

Social services play a crucial role for survivors of gender-based violence, particularly when specialised services are unavailable or provided only in response to emergencies. In many instances, survivors may be referred to social services for long-term support by other providers of assistance. Although social services are not specifically designed for survivors of gender-based violence, their broad remit encompasses relevant forms of support, including temporary accommodation and social counselling for access to social benefits. Members of the target group are entitled to receive social services; however, the availability of these services depends on: 1) whether the individual holds a permanent or temporary residence permit in the Republic of Lithuania; 2) the social services offered by the municipalities; 3) the social services provided at reception centres to those without a residence permit. Since municipalities are responsible for social service provision, geographical disparities in access are likely to occur.

The Law on Social Services (LSS)¹³² governs the provision of social services in Lithuania. The scope of specific services is outlined in the Catalogue of Social Services¹³³ and detailed in Annex II. Municipalities bear responsibility for the delivery of social services.¹³⁴

According to the LSS, the following groups have the right to receive social services: citizens of the Republic of Lithuania; foreigners, including stateless persons, who hold a permanent or temporary residence permit in the Republic of Lithuania; and other persons in cases stipulated by international treaties to which the Republic of Lithuania is party.¹³⁵

The Law on the Legal Status of Foreigners (LSF) provides that foreigners entitled to temporary protection or who have been granted temporary protection, unaccompanied minors, and asylum seekers have the right to receive social services pursuant to relevant ministerial orders.¹³⁶ This right is, however, context-specific and permits access either to particular types of social services or to services provided solely at reception or detention centres.

Those without a permanent or temporary residence permit, including all asylum seekers, rely on the limited services provided at reception centres. When feasible, reception centres refer individuals to obtain necessary services elsewhere (see Section 3). According to the LSF, reception centres provide social services for:

- Asylum seekers;
- Refugees and their family members in cases of family reunification;
- Unaccompanied minors;
- Foreigners who are or have been victims of human trafficking;
- Foreigners during the period of adoption or implementation of decisions regarding their return to a foreign country or expulsion from Lithuania;
- And other foreigners for whom, pursuant to the LSF, other laws or government decisions, reception services or parts thereof must be provided.¹³⁷

¹³² Republic of Lithuania Law on Social Services, 19 January 2006, No X-493, Vilnius, <https://www.e-tar.lt/portal/lt/legalActEditions/TAR.91609F53E29E> (as amended) (hereinafter the Law on Social Services).

¹³³ Minister of Social Security and Labour of the Republic of Lithuania, Order on the Approval of the Catalogue for Social Services, 5 April 2006, No A1-93, Vilnius, <https://www.e-tar.lt/portal/lt/legalActEditions/TAR.51F78AE58AC5> (as amended) (hereinafter the Catalogue for Social Services).

¹³⁴ Article 14 of the Law on Social Services.

¹³⁵ Article 5 of the Law on Social Services.

¹³⁶ Articles 32 (4) (4); 71 (1) (7); 94 (1) (8), 140⁸ (6), 140¹³ (2), 140¹⁴ of the Law on the Legal Status of Foreigners. See, for example, Minister of Social Security and Labour of the Republic of Lithuania, Order on the Approval of the Description of the Conditions and Procedure for the Provision and Financing of Social Services to Foreigners Who are Entitled to Temporary Protection or Who Have Been Granted Temporary Protection, 15 September 2022, No A1-604, Vilnius, <https://www.e-tar.lt/portal/lt/legalActEditions/6e2fb490351c1edb4cae1b158f98ea5> (as amended); Minister of Interior of the Republic of Lithuania, Order on the Approval of the Description of the Conditions and Procedure for the Detention of Detained Foreigners in the State Border Guard Service under the Ministry of the Interior of the Republic of Lithuania, 4 October 2007, No 1V-340, Vilnius, <https://www.e-tar.lt/portal/lt/legalActEditions/TAR.416A9F142BD3> (as amended).

¹³⁷ Articles 2 (23) of the Law on the Legal Status of Foreigners.



This implies that individuals who do not fall within the categories specified in the Law on Social Services (LSS) or the above list will not have access to social services unless a municipality elects to provide such services at its own discretion.¹³⁸

Social services are likely to be utilised by survivors of gender-based violence when specialised assistance is either unavailable or only provided on a short-term basis. Survivors of gender-based violence are frequently referred to social services by other assistance providers discussed herein. For example, the Specialised Comprehensive Assistance Centre may refer a domestic violence victim to a local municipal social services provider if shelter is required. Additionally, social workers offer social counselling, including referrals for social benefits and other forms of support.¹³⁹ Children or families with children are referred to social services through case management within the framework of child rights protection (see section 2.7: Protection of Children in GBV Cases).

Although **no direct right exists to be informed about social services**, the target group receives such information through other assistance providers previously described. For instance, in domestic violence cases, Specialised Comprehensive Assistance Centres, upon receiving information about a survivor or upon the survivor's request for assistance, inform and refer individuals to social services. Preventive social services include the identification of potential beneficiaries, whereby social service providers actively seek out individuals who may require assistance.

No direct right to linguistic assistance, interpretation, or translation exists when requesting or receiving social services.

No direct right to legal assistance or representation exists in the context of requesting or receiving social services. However, "mediation and representation" is encompassed within general social services, providing support in resolving legal, health, economic, and household issues, managing daily tasks, and facilitating interactions with institutions, specialists, and individuals.

¹³⁸ For example, Jonava Municipality Council, Decision on the Jonava Municipality Social Services Centre's Regulations, 21 December 2023, No 1TS-214, Jonava, https://jonavosspsc.lt/storage/285/CENTRO-NUOSTATAI_2023_12.pdf.

¹³⁹ Catalogue for Social Services; Article 14(4)(7) of the Law on Protection Against Domestic Violence.

3. INSTITUTIONAL SUPPORT FOR REFUGEES, ASYLUM-SEEKERS, AND OTHER FOREIGN NATIONALS IN THE CONTEXT OF GENDER-BASED VIOLENCE

This section outlines the services available from governmental, municipal, and non-governmental institutions within Lithuania's integration processes and reformed reception system since January 2025. It describes the governmental institutional framework and accessibility of standardised services, including accommodation, social services, and legal counselling, for the target group, contingent upon their legal status. However, the analysis reveals existing limitations in delivering victim-centred services in cases of gender-based violence due to restricted staff capacity and insufficient collaboration pathways with specialised assistance providers within the mainstream system.

A brief overview of the operational roles of refugee-assisting non-governmental organisations in providing integration support to refugees, asylum-seekers, beneficiaries of temporary protection, and persons in refugee-like situations will elucidate their mediating functions in integration processes. This overview will also identify their strengths and shortcomings in addressing the needs of victims within the target group of this study.

3.1 ACCESS TO SERVICES BASED ON THE STATUS OF FOREIGNER

Since 1 January 2025, two key legal amendments have come into effect, reforming the structure of the Lithuanian reception system and standardising procedures for vulnerability assessment.¹⁴⁰ Firstly, the reform significantly altered the reception system by consolidating service provision under the newly established Reception and Integration Agency (*Priėmimo ir integracijos agentūra, RIA*).¹⁴¹ The RIA administers three facilities: Pabradė Reception Centre (*Pabradės priėmimo centras, PRC*), Rukla Reception Centre (*Ruklos priėmimo centras, RRC*) including its Girionys unit, and Vilnius Reception Centre (*Vilniaus priėmimo centras, VRC*). The RIA ensures the provision of standardised services across all its facilities. The RRC is notable for having designated quarters specifically for unaccompanied children and victims of human trafficking. The Foreigners Registration Centre (FRC), operating under the State Border Guard Service at the Ministry of the Interior of the Republic of Lithuania (*Užsieniečių registracijos centras prie Valstybės sienos apsaugos tarnybos*

¹⁴⁰ Order on the Approval of the Description of the Procedure for the Conditions and Procedures for the Accommodation of Foreigners in Temporary Accommodation Places and for the Temporary Departure from Temporary Accommodation Places, 3 January 2025, No A1-2, Vilnius, <https://www.e-tar.lt/portal/lt/legalAct/ee843634c9cf11efa5ddd96c482819f5> (hereinafter the Description of the Procedure for the Conditions and Procedures for the Accommodation of Foreigners in Temporary Accommodation Places and for the Temporary Departure from Temporary Accommodation Places); and Point 6 of the Minister of Social Security and Labour of the Republic of Lithuania, Order on the Approval of the Description of the Procedure for Determining the Vulnerability of Foreigners, 31 December 2024, No A1-947, Vilnius, <https://www.e-tar.lt/portal/lt/legalAct/cdca5713c74711efa5ddd96c482819f5> (hereinafter the Description of the Procedure for Determining the Vulnerability of Foreigners).

¹⁴¹ Minister of Social Security and Labour of the Republic of Lithuania, Order on the Approval of the Description of the Procedure for the Conditions and Procedures for the Accommodation of Foreigners in Temporary Accommodation Places and for the Temporary Departure from Temporary Accommodation Places, 3 January 2025, No A1-2, Vilnius, <https://www.e-tar.lt/portal/lt/legalAct/ee843634c9cf11efa5ddd96c482819f5> (hereinafter the Description of the Procedure for the Conditions and Procedures for the Accommodation of Foreigners in Temporary Accommodation Places and for the Temporary Departure from Temporary Accommodation Places).



prie Lietuvos Respublikos vidaus reikalų ministerijos) and located in Pabradė, serves as the sole detention centre in Lithuania for asylum seekers.

Secondly, a general vulnerability assessment procedure has been instituted.¹⁴² Under this procedure, information concerning vulnerability is submitted to the MIGRIS system and transferred to the Migration Department or the State Border Guard Service (SBGS) if the foreigner is detained at an SBGS facility.¹⁴³ The assessment is conducted by a RIA doctor, psychologist, and social worker.¹⁴⁴ The foreigner is informed about the vulnerability assessment process and asked to provide consent.¹⁴⁵ When the assessment concerns children, a legal representative participates. If the child is unaccompanied, representatives from the State Child Rights Protection and Adoption Service and a state-guaranteed legal aid lawyer also participate.¹⁴⁶

Based on the assessment, profile, and individual needs of a vulnerable person, he/she may be provided with technical assistance and/or medical aid and/or hygiene equipment if the foreigner has a disability; provided with special meals if subjected to diet or cannot cook himself/herself; provided with necessary medical care; provided with medical treatment and health (including mental health) care if the person has been subjected to torture, rape or other serious acts of violence and/or has been trafficked; arrangements made for the provision of rehabilitation services if the person is a child who has been subjected to any form of abuse, has been subjected to neglect, exploitation and/or torture, has been subjected to cruel, inhuman and degrading treatment or has been a victim of military conflict; provided with legal aid and post-traumatic therapy and psychosocial care if the person has experienced sexual or gender-based violence; other assistance measures provided as required.¹⁴⁷

A social worker reviews the persistence of vulnerability factors periodically, every three months.¹⁴⁸ Personnel working with victims of torture, rape, or other serious violence are required to have undergone appropriate specialised training.¹⁴⁹ Additionally, RIA staff, non-governmental workers, and volunteers must sign confidentiality agreements.¹⁵⁰ Should the vulnerability status change, the social worker updates the information in MIGRIS, and this update is subsequently communicated to the Migration Department and the SBGS.¹⁵¹ Within seven working days, the foreigner is informed in writing that they are no longer considered vulnerable, the appeal procedure concerning the decision, and the possibility of requesting a re-assessment.¹⁵²

Vulnerability assessments are conducted for all foreigners accommodated in RIA facilities or detained by the State Border Guard Service, subject to their consent. It is important to note that asylum seekers residing in municipalities may request the RIA to conduct a vulnerability assessment.¹⁵³ This provision increases the likelihood of identifying victims of gender-based violence and enables their needs to be more adequately addressed.

Within RIA facilities, incidents of sexual harassment, discrimination, domestic violence, and workplace violence are classified as crises, to which the centre responds by applying approved standard operational procedures for crisis management in accordance with the Crisis Management Methodology.¹⁵⁴ A crisis management team, consisting of five members, is established. In response to the situation, a crisis management plan is developed. According to the Methodology, the centre utilises internal resources but may engage external

¹⁴² Description of the Procedure for Determining the Vulnerability of Foreigners.

¹⁴³ Point 6 of the Description of the Procedure for Determining the Vulnerability of Foreigners.

¹⁴⁴ Points 16.2, 16.3, and 16.4 of the Description of the Procedure for Determining the Vulnerability of Foreigners.

¹⁴⁵ Points 12 and 13 of the Description of the Procedure for Determining the Vulnerability of Foreigners.

¹⁴⁶ Point 9 of the Description of the Procedure for Determining the Vulnerability of Foreigners.

¹⁴⁷ Points 26.1 to 26.7 of the Description of the Procedure for Determining the Vulnerability of Foreigners.

¹⁴⁸ Point 29 of the Description of the Procedure for Determining the Vulnerability of Foreigners.

¹⁴⁹ Point 28 of the Description of the Procedure for Determining the Vulnerability of Foreigners.

¹⁵⁰ Point 31 of the Description of the Procedure for Determining the Vulnerability of Foreigners.

¹⁵¹ Point 29 of the Description of the Procedure for Determining the Vulnerability of Foreigners.

¹⁵² Point 30 of the Description of the Procedure for Determining the Vulnerability of Foreigners.

¹⁵³ Point 5 of the Description of the Procedure for Determining the Vulnerability of Foreigners.

¹⁵⁴ Director of the Refugee Reception Centre, Order on the Approval of the Crisis Management Methodology, 27 July 2022, No VK-767 (not available publicly).



service providers, such as specialised psychologists, if necessary. The crisis management team notifies other institutions of the situation when required. Once the crisis is contained, post-crisis measures are implemented as necessary. Depending on the nature and scale of the crisis, crisis management may follow operating procedures approved by the Director of the Centre, which align with nationally prescribed mechanisms for providing assistance. The Methodology encompasses crisis prevention, primarily through continuous monitoring of information sources, planning, and fostering cohesion within the reception facilities.

Moreover, the centres serve as accommodation facilities for foreigners who may be victims of human trafficking while they decide whether to cooperate with law enforcement.¹⁵⁵

Following the recent amendments, the Lithuanian reception system has become more centralised, with service provision standardised.

Pursuant to Article 67(1) of the Law on the Legal Status of Foreigners, asylum applications are submitted to the first-contact authorities: the Migration Department and the State Border Guard Service, both operating under the Ministry of the Interior of the Republic of Lithuania. The Migration Department and the State Border Guard Service conduct initial registration interviews with asylum seekers, which include preliminary vulnerability assessments.¹⁵⁶ Data from these assessments are uploaded into the MIGRIS system.¹⁵⁷ Since the RIA has been granted access to the MIGRIS system, it may be an important source of information for the agency when conducting vulnerability assessments based on Article 67 (5) of the Law on the Legal Status of Foreigners.

The Migration Department is responsible for examining asylum applications and issuing decisions.¹⁵⁸ It also considers applications for temporary protection¹⁵⁹ and national visas on humanitarian grounds.¹⁶⁰

The State Border Guard Service is responsible for requesting the court to issue a detention order or impose an alternative to detention on foreign nationals where the conditions for detention, as set out in Article 113 of the LSF, are satisfied.¹⁶¹

The 'Description of the Procedure for Granting and Revoking Asylum in the Republic of Lithuania' states that one of the procedural guarantees for vulnerable asylum seekers provided by the Migration Department is the possibility to apply to the State Border Guard Service or the Refugee Reception Centre for a comprehensive vulnerability assessment.¹⁶² Although the Refugee Reception Centre no longer exists, this provision applies *mutatis mutandis* to the transmission of information to the Reception and Integration Agency (RIA).

3.1.1 ASYLUM SEEKERS

Based on the type and place of accommodation, asylum seekers can be categorised into three groups: a) detained asylum seekers; b) asylum seekers accommodated at RIA facilities; and c) asylum seekers residing at an address of their choosing. The type of accommodation plays a crucial role in determining access to services.

¹⁵⁵ Government of the Republic of Lithuania, Decree On the Approval of the Description of the Procedure for the Granting of a Period of Decision Within Which a Foreigner, as a Victim or Former Victim of Human Trafficking Crimes, Must Decide Whether to Cooperate With the Pre-trial Investigation Body or the Court., 18 April 2012, No 430, Vilnius, <https://www.e-tar.lt/portal/lt/legalAct/TAR.4679FA574882>; Minister of Social Security and Labour of the Republic of Lithuania, Order on the Approval of the Description of the Procedure for the Placement of Foreigners Who are or Have Been Victims of Crimes Related to Human Trafficking in the Refugee Reception Centre During the Period of Their Self-determination, 10 August 2015, No A1-461, Vilnius, <https://www.e-tar.lt/portal/lt/legalAct/6aed8d903f6811e58568ed613eb39a73>.

¹⁵⁶ Point 22 and 25.5.3 of the Minister of Interior of the Republic of Lithuania, Order on the Approval of the Description of the Procedure for Granting and Revoking Asylum in the Republic of Lithuania, 24 February 2016, No 1V-131, Vilnius, <https://www.e-tar.lt/portal/lt/legalAct/ebc768d0dad-d1fe583a295d9366c7ab3/asr> (hereinafter the Description of the Procedure for Granting and Revoking Asylum in the Republic of Lithuania).

¹⁵⁷ Point 24 of the Description of the Procedure for Granting and Revoking Asylum in the Republic of Lithuania.

¹⁵⁸ Article 76 of the Law on the Legal Status of Foreigners.

¹⁵⁹ Point 2.3 of the Government of the Republic of Lithuania, Decree On Granting Temporary Protection to Foreigners in the Republic of Lithuania, 16 March, 2022, No 224, Vilnius, <https://www.e-tar.lt/portal/lt/legalAct/168d5e60a54611ec8d9390588bf2de65/asr> and Article 93 (3) of the Law on the Legal Status of Foreigners.

¹⁶⁰ Article 21 (2) of the Law on the Legal Status of Foreigners.

¹⁶¹ Article 116 of the Law on the Legal Status of Foreigners.

¹⁶² Point 7 of the Annex No 3 of the Description of the Procedure for Granting and Revoking Asylum in the Republic of Lithuania.

A | DETAINED ASYLUM SEEKERS

Detained asylum seekers are placed in the Foreigners Registration Centre (FRC), the sole detention facility in Lithuania. Vulnerable asylum seekers have the right to benefit from reception conditions adapted to their specific needs.¹⁶³ At the FRC, detained asylum seekers are entitled to

1. Medical, psychological, social, and translation services, which are the responsibility of the RIA.¹⁶⁴ The scope and content of these services are not differentiated from those provided to non-detained asylum seekers. When a service must be provided outside the detention facility, the State Border Guard Service (SBGS) and RIA organise an escort.
2. The FRC does not offer legal counselling services. Its internal regulations impose restrictive rules on detainees' meetings with attorneys. Detainees may meet with an attorney for no longer than two hours during working days between 08:00 and 17:00.¹⁶⁵ However, detainees retain the unrestricted right to communicate with their attorney.¹⁶⁶ Asylum seekers in detention are entitled to state-guaranteed legal aid, which covers asylum and detention procedures exclusively. In addition, a Lithuanian Red Cross lawyer regularly visits the FRC to provide free legal counselling on asylum and detention matters based on the agreement concluded between the State Border Guard Service and the Lithuanian Red Cross.

In cases of emergency or exceptional circumstances preventing normal service provision, services may be delivered remotely.¹⁶⁷ Such legislation ensures continuity of services, although it does not specify which services are covered. Therefore, when making decisions, the benefit of direct contact between the service provider and the victim of gender-based violence should be taken into account.

Asylum-seekers in detention are not allowed to use their mobile phones for longer than one hour every second day (or more frequently depending on demand).¹⁶⁸ This rule restricts access to assistance, including urgent support.

B | ASYLUM SEEKERS ACCOMMODATED AT RIA FACILITIES

Accommodation standards and conditions are standardised across all RIA facilities, including the Pabradė Reception Centre (PRC), Rukla Reception Centre (RRC) with its Girionys unit, and Vilnius Reception Centre (VRC). Men and women who are not family members are accommodated separately.¹⁶⁹ Vulnerable foreigners and their family members are housed in a manner that accommodates their special needs.¹⁷⁰ In RIA facilities, asylum seekers are entitled to the following services and benefits:

1. Upon admittance, within no more than ten days, they receive information in a language they understand regarding their rights and obligations, healthcare services, cash benefits and allowances paid, services available on site, and the institutions, bodies, organisations, and volunteers providing legal and other assistance.¹⁷¹

¹⁶³ Point 14.15 of the Minister of the Interior of the Republic of Lithuania, Order on the Approval of the Description of the Conditions and Procedure for Holding Detained Foreigners in the State Border Guard Service under the Ministry of the Interior of the Republic of Lithuania, 4 October 2007, No 1V-340, Vilnius, <https://www.e-tar.lt/portal/lt/legalActEditions/TAR.416A9F142BD3> (hereinafter the Description of the Conditions and Procedure for Holding Detained Foreigners in the State Border Guard Service under the Ministry of the Interior of the Republic of Lithuania).

¹⁶⁴ Points 6.6 and 6.4 of the Minister of Social Security and Labour and Minister of Interior of the Republic of Lithuania, Order on the Approval of the Description of the Conditions of the Reception Provided by the Reception and Integration Agency for Detained Foreigners, 27 December 2024, No A1-935, Vilnius, <https://www.e-tar.lt/portal/lt/legalAct/a9b97cd6c45311efa5ddd96c482819f5>.

¹⁶⁵ Points 34 and 36 of the Description of the Conditions and Procedure for Holding Detained Foreigners in the State Border Guard Service under the Ministry of the Interior of the Republic of Lithuania.

¹⁶⁶ Point 35 of the Description of the Conditions and Procedure for Holding Detained Foreigners in the State Border Guard Service under the Ministry of the Interior of the Republic of Lithuania.

¹⁶⁷ Point 16 of the Description of the Conditions and Procedure for Holding Detained Foreigners in the State Border Guard Service under the Ministry of the Interior of the Republic of Lithuania.

¹⁶⁸ Point 46 of the Description of the Conditions and Procedure for Holding Detained Foreigners in the State Border Guard Service under the Ministry of the Interior of the Republic of Lithuania.

¹⁶⁹ Point 11.2. of the Description of the Procedure for the Conditions and Procedures for the Accommodation of Foreigners in Temporary Accommodation Places and for the Temporary Departure from Temporary Accommodation Places.

¹⁷⁰ Point 11.6 of the Description of the Procedure for the Conditions and Procedures for the Accommodation of Foreigners in Temporary Accommodation Places and for the Temporary Departure from Temporary Accommodation Places.

¹⁷¹ Point 9 of the Description of the Procedure for the Conditions and Procedures for the Accommodation of Foreigners in Temporary Accommodation Places and for the Temporary Departure from Temporary Accommodation Places.

2. Provision of belongings and basic material assistance, including hygiene items, clothing, and essential personal effects.¹⁷²
3. Medical services and essential healthcare.¹⁷³ All RIA facilities have established medical offices where essential healthcare can be delivered. If essential healthcare services cannot be provided at the medical office, social workers refer asylum seekers to other healthcare facilities for such services.
4. Psychological assistance is available, although the nature and scope of this assistance are not specified.¹⁷⁴
5. Social services and activities are organised according to a monthly plan.¹⁷⁵
6. Asylum seekers are entitled to state-guaranteed legal aid, which covers only asylum and detention procedures. In addition, a Lithuanian Red Cross lawyer regularly visits RIA facilities to provide free legal counselling on asylum matters based on the agreement concluded between the RIA and the Lithuanian Red Cross.
7. They have the right to access translation and interpretation services.¹⁷⁶ However, the scope of translation and interpretation services provided by the RIA is not specified.
8. They may obtain representation or mediation services from the RIA to facilitate access to other services provided by external institutions or organisations.¹⁷⁷

Additionally, specialised services for victims of gender-based violence may be provided based on vulnerability assessments, which may include referrals to mainstream services (see Annex IV).

C | ASYLUM SEEKERS LIVING OUTSIDE RECEPTION CENTRES

Following the amendments of 1 January 2025, asylum seekers residing at a location of their choice have improved access to services and support. They may benefit from the general vulnerability identification procedure. This means that if a victim of gender-based violence is identified, the responsible person will develop a plan and refer them to appropriate services, such as psychological, medical, and social assistance.

Under the Law on Health Insurance, asylum seekers are entitled to emergency medical care and other necessary personal healthcare services, the denial of which could lead to deterioration in health necessitating emergency intervention.¹⁷⁸ However, asylum seekers living at a place of their choice may encounter practical difficulties in exercising this right.

In practice, asylum seekers residing independently often face additional challenges compared to those accommodated in authority-designated sites. For example, the right of asylum seekers to receive necessary medical assistance and essential healthcare services is at least partially ensured in reception centres that have medical facilities or family doctor offices. Where medical services are required at municipal or state health facilities, centre staff often accompany individuals and mediate access to services. Healthcare providers near reception centres regularly treat asylum seekers, and their legal status does not typically present obstacles.

In practice, however, asylum seekers living at a place of their choosing may experience difficulties obtaining necessary healthcare. They must register with healthcare facilities independently and be recognised as entitled to state-guaranteed healthcare. Some identifiers commonly used in healthcare information systems are either unavailable to asylum seekers, such as a personal identification code, or unknown to them because

¹⁷² Points 13 and 15.7 of the Description of the Procedure for the Conditions and Procedures for the Accommodation of Foreigners in Temporary Accommodation Places and for the Temporary Departure from Temporary Accommodation Places.

¹⁷³ Point 25 of the Description of the Procedure for the Conditions and Procedures for the Accommodation of Foreigners in Temporary Accommodation Places and for the Temporary Departure from Temporary Accommodation Places.

¹⁷⁴ Point 15.5 of the Description of the Procedure for the Conditions and Procedures for the Accommodation of Foreigners in Temporary Accommodation Places and for the Temporary Departure from Temporary Accommodation Places.

¹⁷⁵ Point 36 of the Description of the Procedure for the Conditions and Procedures for the Accommodation of Foreigners in Temporary Accommodation Places and for the Temporary Departure from Temporary Accommodation Places.

¹⁷⁶ Point 15.4 of the Description of the Procedure for the Conditions and Procedures for the Accommodation of Foreigners in Temporary Accommodation Places and for the Temporary Departure from Temporary Accommodation Places.

¹⁷⁷ Point 15.14 of the Description of the Procedure for the Conditions and Procedures for the Accommodation of Foreigners in Temporary Accommodation Places and for the Temporary Departure from Temporary Accommodation Places.

¹⁷⁸ Article 6 (5) (3) of the Law on Health Insurance.



they are not specified in their documents, such as the Insured Identification Code (IIC), or are not integrated into most information systems, for example, the code for Foreigners with Interests in Lithuania. As a result, access to services is often challenging and requires additional efforts, such as contacting the National Health Insurance Fund (NHIF) to ascertain one's Insured Identification Code (IIC).¹⁷⁹

3.1.2 REFUGEES AND BENEFICIARIES OF SUBSIDIARY PROTECTION DURING THE SOCIAL INTEGRATION PERIOD

Persons granted refugee status or subsidiary protection have the right to participate in the integration support programme. This change in legal status significantly influences the range of available assistance and support. The integration support programme is divided into two parts: the first, initial integration support, is provided at RIA facilities, while the second is offered in municipalities and organised by an appointed institution, typically a non-governmental organisation (NGO).¹⁸⁰ Depending on their needs, beneficiaries of international protection may choose to participate in one or both parts of the social integration programme.

A | INTEGRATION SUPPORT AT RIA FACILITIES

Initial integration support is provided at RIA facilities for up to three months, with a maximum duration of six months, except for unaccompanied children who may benefit from the initial integration support at RIA facilities until the age of majority taking account of their best interests.¹⁸¹ Refugees and beneficiaries of subsidiary protection are accommodated at one of the RIA facilities for the duration of the support, and a social worker is assigned to develop and oversee the initial integration plan.¹⁸² Beneficiaries of international protection are entitled to:

1. Social services in the form of integration case management;
2. Lithuanian language courses at the RIA facility;
3. Monthly allowance for food and minor expenses;
4. Social benefits;
5. And legal services.¹⁸³ The scope of legal services provided is not specified.
6. Refugees and beneficiaries of subsidiary protection at the RIA are eligible for health services within the facility.
7. Psychological services are also available.¹⁸⁴

Although interpretation and translation services are not explicitly provided for in the legal acts regulating integration, foreigners accommodated at the RIA have the right to use translation services.¹⁸⁵ However, the scope of these translation services is not defined.

Furthermore, if these foreigners were accommodated at the reception centre free of charge and, after the accommodation period, are unable to secure housing, they may request to remain at the reception centre at their own expense for an additional three months.¹⁸⁶

¹⁷⁹ Lithuanian Red Cross Society, Challenges of Asylum Seekers Living in the Places of their Choice While Waiting for Decisions in Asylum, November 2023, p. 4, available at: <https://redcross.lt/wp-content/uploads/2024/10/ASYLUM-SEEKERS-LIVING-IN-THE-PLACE-OF-RESIDENCE-OF-THEIR-CHOICE.pdf>.

¹⁸⁰ Point 11 of the Decree on the Approval of the Conditions and Procedure for Providing State Support for the Integration of Foreigners in Lithuania.

¹⁸¹ Point 8 of the Government of the Republic of Lithuania, Decree on the Approval of the Conditions and Procedure for Providing State Support for the Integration of Foreigners in Lithuania, 5 October 2016, No 998, Vilnius, <https://www.e-tar.lt/portal/lt/legalActEditions/5c01c030913d11e69ad-4c8713b612d0f> (hereinafter the Decree on the Approval of the Conditions and Procedure for Providing State Support for the Integration of Foreigners in Lithuania).

¹⁸² Point 3.6. of the Description of the Procedure for the Conditions and Procedures for the Accommodation of Foreigners in Temporary Accommodation Places and for the Temporary Departure from Temporary Accommodation Places.

¹⁸³ Point 3.6.3 of the Decree on the Approval of the Conditions and Procedure for Providing State Support for the Integration of Foreigners in Lithuania.

¹⁸⁴ Points 3.6.2 and 23.2 of the Decree on the Approval of the Conditions and Procedure for Providing State Support for the Integration of Foreigners in Lithuania.

¹⁸⁵ Point 15.4 of the Description of the Procedure for the Conditions and Procedures for the Accommodation of Foreigners in Temporary Accommodation Places and for the Temporary Departure from Temporary Accommodation Places.

¹⁸⁶ Point 4.1 of the Decree on the Approval of the Conditions and Procedure for Providing State Support for the Integration of Foreigners in Lithuania.



Thus, although no specialised or explicit gender-based violence (GBV) services are envisaged in the integration support legislation, victims may approach the appointed social worker for assistance. The social worker, based on the vulnerability assessment procedure, will initiate an assistance plan that includes a course of action and provision of necessary services. This may also include referral to mainstream services.

B | INTEGRATION SUPPORT IN MUNICIPALITIES

Integration support within municipalities may commence immediately after asylum is granted, without the initial integration period, provided certain criteria are met.¹⁸⁷ Municipal integration support lasts for twelve months.¹⁸⁸ In total, integration support, including the initial phase, may not exceed thirty-six months.¹⁸⁹ The refugee or beneficiary of subsidiary protection is assigned to an institution responsible for integration, typically an NGO.¹⁹⁰ During municipal integration support, the responsible institution is entitled to:

1. Prepare, monitor and renew individual integration plan.¹⁹¹
2. Help find accommodation.¹⁹²
3. Pay a one-time settlement allowance.¹⁹³
4. Pay the monthly benefit.¹⁹⁴
5. Organise and provide legal counselling.¹⁹⁵ It does not specify the amount or scope of the legal counselling available.
6. Be responsible for organising Lithuanian language and cultural integration courses.¹⁹⁶
7. Assist with labour market integration, including job placement and qualification recognition.¹⁹⁷
8. Facilitate access to social, healthcare, and other essential services.¹⁹⁸

In cases of gender-based violence, the role of the institution appointed to provide integration support becomes particularly significant. It can update the individual integration plan and facilitate access to necessary services, including specialised assistance for victims of GBV.

3.1.3 BENEFICIARIES OF TEMPORARY PROTECTION AND INDIVIDUALS IN REFUGEE-LIKE SITUATIONS

Beneficiaries of temporary protection and foreigners in refugee-like situations may be categorised into two groups: those accommodated at a location of their choice and those accommodated at RIA facilities. Those accommodated at their chosen location may access mainstream services for GBV. By contrast, those accommodated at RIA facilities are entitled to the services provided by RIA centres (as described in section 3.1.1 (b)).

Beneficiaries of temporary protection have the right to reside in RIA facilities for up to six months from the registration of their application for temporary protection.¹⁹⁹ If beneficiaries of temporary protection, whose initial support has ended, suddenly lose their accommodation due to a natural disaster or circumstances beyond their control, and their income is below the state-supported threshold, they may be accommodated for

¹⁸⁷ Point 5 of the Decree on the Approval of the Conditions and Procedure for Providing State Support for the Integration of Foreigners in Lithuania.

¹⁸⁸ Point 11 of the Decree on the Approval of the Conditions and Procedure for Providing State Support for the Integration of Foreigners in Lithuania.

¹⁸⁹ Point 18 of the Decree on the Approval of the Conditions and Procedure for Providing State Support for the Integration of Foreigners in Lithuania.

¹⁹⁰ Point 11 of the Decree on the Approval of the Conditions and Procedure for Providing State Support for the Integration of Foreigners in Lithuania.

¹⁹¹ Point 3.8.3 of the Decree on the Approval of the Conditions and Procedure for Providing State Support for the Integration of Foreigners in Lithuania.

¹⁹² Point 15 of the Decree on the Approval of the Conditions and Procedure for Providing State Support for the Integration of Foreigners in Lithuania.

¹⁹³ Point 24.1 of the Decree on the Approval of the Conditions and Procedure for Providing State Support for the Integration of Foreigners in Lithuania.

¹⁹⁴ Point 24.2 of the Decree on the Approval of the Conditions and Procedure for Providing State Support for the Integration of Foreigners in Lithuania.

¹⁹⁵ Point 3.6.2, point 3.8.8, and point 23.3 of the Decree on the Approval of the Conditions and Procedure for Providing State Support for the Integration of Foreigners in Lithuania.

¹⁹⁶ Point 30.1 and 30.2 of the Decree on the Approval of the Conditions and Procedure for Providing State Support for the Integration of Foreigners in Lithuania.

¹⁹⁷ Point 36 of the Decree on the Approval of the Conditions and Procedure for Providing State Support for the Integration of Foreigners in Lithuania.

¹⁹⁸ Point 3.8.8 of the Decree on the Approval of the Conditions and Procedure for Providing State Support for the Integration of Foreigners in Lithuania.

¹⁹⁹ Article 94 (1) (2) of the Law on the Legal Status of Foreigners.



one month.²⁰⁰ If the foreigner is deemed vulnerable, accommodation may be extended for up to three months. Additionally, beneficiaries of temporary protection may request accommodation at RIA facilities at their own expense for up to three months.²⁰¹ The cost of accommodation is calculated according to an established formula.²⁰²

Certain groups in refugee-like situations may be accommodated at RIA facilities free of charge. Firstly, if a foreigner's asylum request is denied but they are issued a humanitarian residence permit while at the centre, accommodation may be provided for up to three months.²⁰³ Secondly, if a foreigner's refugee status is revoked and they are issued a humanitarian residence permit, accommodation may be provided for up to three months where the individual has no alternative housing and their income is below the state-supported level.²⁰⁴ Thirdly, if a foreigner holding a humanitarian residence permit suddenly loses accommodation due to a natural disaster or causes beyond their control, and their income is below the state-supported level, they may be accommodated for up to one month.²⁰⁵ If the foreigner is deemed vulnerable, accommodation may be extended for up to three months.

3.2 NON-GOVERNMENTAL ORGANISATIONS ASSISTING MIGRANTS AND REFUGEES

Migrant and refugee-assisting NGOs play a vital role in addressing gaps in service provision and supporting the integration of refugees, asylum seekers, beneficiaries of temporary protection, and persons in refugee-like situations. Within Lithuania's refugee integration framework, NGOs are principal actors in delivering personalised, needs-based case management. Allocated case managers assist beneficiaries of international protection in securing housing, accessing healthcare and education, enrolling in Lithuanian language courses, and integrating into the labour market (see also Section 3.1.2).²⁰⁶ This process is guided by individual integration plans, developed collaboratively with beneficiaries and periodically revised to reflect their evolving needs.²⁰⁷ As refugees often rely on social services and other forms of state or municipal support during integration, NGOs act as key intermediaries between beneficiaries and public institutions. They support refugees in navigating regulatory frameworks, understanding their rights, and applying for available support, including vocational training, social benefits, and housing assistance.²⁰⁸ Following the increase in arrivals from Ukraine in late 2022, the personalised integration approach initially developed for beneficiaries of international protection has been extended to ensure comprehensive assistance for some groups of beneficiaries of temporary protection.²⁰⁹

In addition to personalised support available to persons granted international protection and temporary protection, NGOs also provide *ad hoc*, generally project-based assistance to other foreign nationals. These

²⁰⁰ Point 2.1.5. of the Description of the Procedure for the Conditions and Procedures for the Accommodation of Foreigners in Temporary Accommodation Places and for the Temporary Departure from Temporary Accommodation Places.

²⁰¹ Point 4 of the Description of the Procedure for the Conditions and Procedures for the Accommodation of Foreigners in Temporary Accommodation Places and for the Temporary Departure from Temporary Accommodation Places.

²⁰² Points 5-17 of the Minister of Social Security and Labour of the Republic of Lithuania, Order on the Approval of the Description of the Procedure for Payment for Living in the Temporary Accommodation Places, 3 January 2025, No A1-2, Vilnius.

²⁰³ Point 2.1.1. of the Description of the Procedure for the Conditions and Procedures for the Accommodation of Foreigners in Temporary Accommodation Places and for the Temporary Departure from Temporary Accommodation Places.

²⁰⁴ Article 71 (7) of the Law on the Legal Status of Foreigners stipulates that an asylum seeker's income from employment in the Republic of Lithuania, which is less than 3 times the state-supported income, is not considered to be an improvement in the financial situation. From 2025 state sponsored amount is 221 EUR.

²⁰⁵ Point 2.1.6. of the Government of the Republic of Lithuania, Decree on the Granting of Authorization and the Determination of the Cases in which Foreigners shall be Allowed to Stay in Temporary Accommodation Places without Payment. 30 December 2024, No 1094, Vilnius, <https://www.e-tar.lt/portal/lt/legalAct/17dec4b2c6aa11efa5ddd96c482819f5> (hereinafter the Decree on the Granting of Authorisation and the Determination of the Cases in which Foreigners shall be Allowed to Stay in Temporary Accommodation Places without Payment).

²⁰⁶ Decree on the Approval of the Conditions and Procedure for Providing State Support for the Integration of Foreigners in Lithuania.

²⁰⁷ Decree on the Approval of the Conditions and Procedure for Providing State Support for the Integration of Foreigners in Lithuania.

²⁰⁸ Insight shared by a representative of one of the migrant and refugee-assisting NGOs during a focus group (FGD4).

²⁰⁹ Initially, the case management approach was applied primarily to the most vulnerable beneficiaries of temporary protection. See: the Ministry of Social Security and Labour, presentation titled 'Reception and Early Integration of Refugees from Ukraine', 2024.



include asylum seekers and persons in refugee-like situations. They offer legal aid, psychosocial counselling, mediation, and employment support to asylum seekers and other foreign nationals seeking assistance. However, assistance for non-refugee groups is often less comprehensive and may be constrained by limited resources or the availability of trained staff, with volunteers frequently supporting service delivery in areas such as employment counselling.²¹⁰ Some NGOs, such as Artscape, contribute by offering cultural programmes that promote the mental and social well-being of foreign nationals, particularly the target group, and lead community-building initiatives.²¹¹

Collectively, these organisations aim to ensure that both beneficiaries of protection and foreign nationals more broadly receive not only immediate and urgent assistance but also access to the tools and opportunities necessary to establish themselves in Lithuania and achieve self-reliance. However, access to assistance provided by NGOs may be limited for some members of the target group. Firstly, NGOs operate centres only in the largest cities of Lithuania. Moreover, while some assistance provided by NGOs, such as legal counselling, is organised within centres under the Reception or Integration Agency or the State Border Guard Service,²¹² full in-person access to services is generally limited, particularly for persons whose movement is restricted or who live outside major urban areas. Some assistance, including legal counselling, employment advice, or psychological support, can be delivered remotely, and NGOs are generally flexible in adapting to these circumstances. Nevertheless, this approach presents challenges in ensuring ongoing and comprehensive support, as well as in building rapport with beneficiaries.²¹³

Currently, migrant and refugee-assisting NGOs in Lithuania are not formally required by law to inform GBV survivors about available assistance. However, in line with humanitarian principles, NGOs are expected to ensure that survivors have access to timely, confidential, and appropriate support services to protect their rights, dignity, and well-being. Some organizations may have already developed standard operating procedures to guide this response. While NGOs may choose to implement such measures, doing so remains at their discretion and often depends on their staff's capacity to identify GBV cases and their knowledge of appropriate referral pathways. At the same time, these NGOs serve as key points of contact for refugees, asylum seekers, temporary protection holders, and others in refugee-like situations, positioning them well to refer GBV survivors within the target group for specialised assistance.

3.3 INTER-INSTITUTIONAL COORDINATION MECHANISMS AT THE LOCAL (MUNICIPAL) LEVEL

In Lithuania, inter-institutional coordination mechanisms for GBV response exist not only at the national level (discussed in Section 1) but also at the local (municipality) level. Coordination mechanisms at the local level are most advanced in responding to domestic violence. Since 2023, pursuant to Article 7 of the Law on Protection against Domestic Violence, each municipality is required to establish a Commission for the Prevention of Domestic Violence. The Commission should comprise representatives from law enforcement, municipal administration, social and specialised support services, child protection, crisis centres, and relevant NGOs involved in domestic violence prevention.²¹⁴ These commissions typically concentrate on developing and refining response protocols, addressing identified deficiencies, and enhancing overall coordination, rather than discussing individual cases. Until now, institutions and NGOs working with refugee and asylum-seeking populations have not been included in inter-institutional coordination mechanisms at both the national and local levels.


²¹⁰ See, for example, Lithuanian Red Cross (LRK) [Annual Report 2023](#); Caritas [Annual Report 2023](#).

²¹¹ Artscape, www.artscape.lt, 2025.

²¹² Lithuanian Red Cross (LRK) [Annual Report 2023](#).

²¹³ Insight shared by a representative of one of the migrant and refugee-assisting NGOs during a focus group (FGD4).

²¹⁴ Minister of Social Security and Labour of the Republic of Lithuania, Order on the Approval of the Model Regulations for the Activities of the Commission for the Prevention of Domestic Violence and the Recommended Composition of the Commission for the Prevention of Domestic Violence, 16 September 2022, No A1-607, Vilnius, <https://www.e-tar.lt/portal/lt/legalActEditions/5f947e3035c511edb4cae1b158f98ea5> (as amended).



The Child Welfare Commissions of the Municipal Administrations exist under the Law on Minimum and Average Care for Children.²¹⁵ Although the law primarily targets assistance for children exhibiting disruptive behaviour and, thus, it is not directly applicable to survivors of gender-based violence (GBV). Nonetheless, it can serve as a tool to coordinate responses aimed at protecting children's rights. The Commission's objective is to promote the well-being of children residing within the municipal area, in collaboration with schools.

Other coordination mechanisms are less common and are typically established at the initiative of specific municipalities, as there is no statutory requirement to do so. Examples include commissions tasked with coordinating responses to human trafficking.

While no specific response mechanism currently exists for GBV cases among refugee and asylum-seeking populations, it would be advantageous to adapt existing mainstream response mechanisms rather than creating new ones. In Lithuania, various actors – including NGOs, the police, and assistance providers – have developed and employ specific response mechanisms for GBV. These mechanisms are widely applied in cases of domestic violence, sexual violence, violations of children's rights, and human trafficking. Involving institutions that work with refugees and asylum seekers in existing inter-institutional commissions would help ensure that GBV responses for the target group of this study are tailored, coordinated, and effective.

²¹⁵ Article 30 of the Republic of Lithuania Law on Minimum and Average Care for Children, 28 June 2007, No X-1238, Vilnius, <https://www.e-tar.lt/portal/lt/legalActEditions/TAR.90D8CF4E3E9F> (as amended).

4. AVAILABILITY AND ACCESSIBILITY OF GENDER-BASED VIOLENCE RESPONSE SERVICES FOR REFUGEES, ASYLUM-SEEKERS, BENEFICIARIES OF TEMPORARY PROTECTION, AND PERSONS IN REFUGEE-LIKE SITUATIONS

4.1 METHODOLOGY AND SCOPE OF THE STUDY

The primary aim of this empirical study is to assess the availability and accessibility of services and assistance for GBV survivors who are refugees, asylum seekers, beneficiaries of temporary protection, and persons in refugee-like situations.²¹⁶ Specifically, the focus is on understanding how services and assistance are provided to these target groups in practice, as well as identifying good practices and existing gaps. While survivors' perspectives are undeniably important, due to the sensitive nature of the topic, the significant risk of re-traumatisation,²¹⁷ and practical constraints relating to timeline and logistics, the study relied on insights from key stakeholders working closely with the aforementioned target groups.

This approach is widely used in service availability assessment studies involving vulnerable groups, wherein insights from key institutional actors are utilised to map available assistance and identify systemic and structural barriers to access.²¹⁸ Research in migration and GBV contexts has demonstrated that engaging service providers facilitates a broader understanding of institutional challenges, policy constraints, and gaps in assistance or service delivery, which may not be fully captured through direct survivor participation alone.²¹⁹ To validate key findings, the methodology incorporated triangulation of perspectives from different stakeholders.

²¹⁶ The term survivor is employed in this section on field findings to emphasise the agency and recovery of individuals experiencing GBV, aligning with trauma-informed and empowerment-based approaches (UN Women, 2012). In contrast, victim is used when referring to specific regulations and legal frameworks that adopt this terminology.

²¹⁷ Ellsberg, M., & Heise, L. (2005). Researching violence against women: A practical guide for researchers and activists. WHO.

²¹⁸ See, for example, Belen, K. (2020). GBV Service Assessment Methodology. A Guide on How to Assess the Essential Services for Women and Girls who Have Experienced GBV. UN Women, 2020.

²¹⁹ Rodella Sapia, M.D., Wangmo, T., Dagron, S. et al. (2020). Understanding access to professional healthcare among asylum seekers facing gender-based violence: a qualitative study from a stakeholder perspective. BMC Int Health Hum Rights 20, 25 (2020).



The methodology for this study was refined in consultation with focal points at UNHCR and employed two primary methods for data collection:

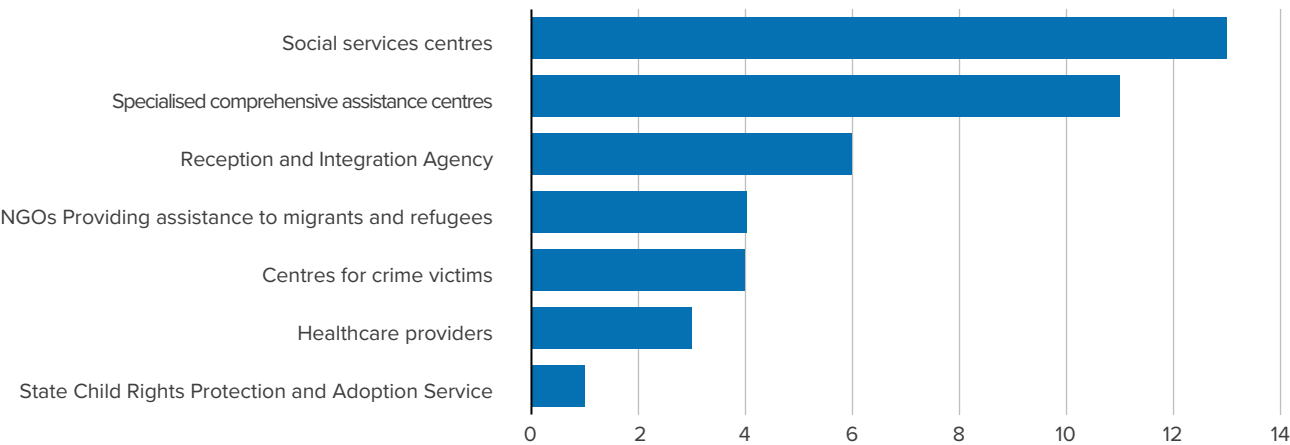
- **An online survey** targeting key survivor-centred specialised assistance and general service providers, designed to gather initial insights into organisations’ experiences and practices in addressing GBV cases involving refugees, asylum seekers, beneficiaries of temporary protection, and persons in refugee-like situations.
- **Focus group discussions and individual interviews** with stakeholders representing survivor-centred assistance providers, migrant and refugee-assisting NGOs (including those working with the target group), and key governmental institutions. This approach facilitated a more in-depth exploration of service accessibility according to target groups and service type.

ONLINE SURVEY

To collect insights on the experiences of institutions and organisations responding to GBV cases involving refugees, asylum seekers, beneficiaries of temporary protection, and persons in refugee-like situations, an online survey was developed and disseminated to key stakeholders engaged in GBV prevention and response mechanisms. These stakeholders included Specialised Comprehensive Assistance Centres, accredited Centres for Crime Survivors, the State Child Rights Protection and Adoption Service, healthcare providers supporting GBV survivors, NGOs assisting refugees and migrants, the Reception and Integration Agency, and Social Services Centres across Lithuanian municipalities.

Approximately 100 institutions were invited to participate in the survey. Responses were received from 38 stakeholders representing 32 distinct institutions. Most respondents represented Social Services Centres (n=13), Specialised Comprehensive Assistance Centres (n=11), followed by representatives from the Reception and Integration Agency (n=6), NGOs, and Centres for Crime Victims (n=4). The distribution of survey participants by institution type is illustrated in **Figure 1**.

FIGURE 1. Number of respondents, by type of institution represented (online survey)



Respondents completed a questionnaire comprising both closed and open-ended questions, addressing their experiences in assisting GBV survivors who are foreign nationals, inter-institutional coordination, practical challenges, and institutional barriers in organising or providing GBV-related assistance. The survey also solicited recommendations for improving coordination mechanisms at local and national levels. Responses presented in this study are anonymised, with only the type of institution disclosed to contextualise the role and thereby the perspective of respective organisations.



REPRESENTATION

The findings from the online survey are not fully representative of all stakeholders involved in response mechanisms due to limited participation rates. Nonetheless, they offer a valuable snapshot of common experiences, challenges, perceived gaps, and stakeholder needs across diverse roles within existing frameworks for providing and coordinating assistance to migrant and stateless GBV survivors.

FOCUS GROUP DISCUSSIONS AND INDIVIDUAL INTERVIEWS

To gather further insights into the experiences, practices, needs, and challenges associated with providing or organising assistance for GBV survivors – particularly refugees, asylum seekers, beneficiaries of temporary protection, and persons in refugee-like situations – four focus group discussions and eleven additional interviews were conducted with representatives of institutions involved in response mechanisms. In total, twenty-eight stakeholders were interviewed. Among them, four were from accommodation centres under the Reception and Integration Agency, representing different locations and/or roles; four represented Social Services Centres; ten were from NGOs assisting migrants and refugees; two were from the State Child Rights Protection and Adoption Service; one participant was from a healthcare institution providing assistance to survivors of sexual violence; and the remaining participants represented Specialised Comprehensive Assistance Centres and Centres for Victims of Crime.

To complement the survey findings, qualitative research participants were asked about the mechanisms through which they become aware of GBV cases involving the study's target groups, the impact of foreigners' legal status on their capacity to provide or organise assistance, and the coordination procedures guiding collaboration between institutions and organisations. Discussions also explored reasons why certain GBV cases may not reach assistance providers, existing service gaps and barriers, the quality of inter-institutional coordination, and key needs and recommendations for improving available assistance and public services for the target groups.

LIMITATIONS OF THE STUDY

Firstly, reliance on stakeholder perspectives rather than direct survivor testimonies do not fully capture the lived experiences of GBV survivors. Secondly, less than half of interviewed stakeholders had encountered persons from the study's target groups, namely refugees, asylum seekers, beneficiaries of temporary protection, and persons in refugee-like situations. Consequently, some were unaware of challenges specific to these groups and related limitations in assistance or service provision. Furthermore, given the complexity of legal GBV protection and assistance frameworks and their variable interpretation in practice, some stakeholders provided conflicting assessments of assistance or service accessibility, necessitating cross-validation. Finally, time and logistical constraints limited the scope of data collection. Thus, discussions of specific access issues capture the most prominent gaps encountered but do not encompass all issues that may arise in addressing more nuanced GBV cases involving refugees, asylum seekers, beneficiaries of temporary protection, or persons in refugee-like situations.

4.2 PROVISION OF ASSISTANCE TO REFUGEE, ASYLUM-SEEKING, AND DISPLACED SURVIVORS OF GBV: SERVICE PROVIDERS' PRACTICES

4.2.1 AVAILABLE SUPPORT SERVICES IN GBV CASES

The study findings reveal that, although a support system exists for Lithuanian GBV survivors, it is insufficiently tailored to meet the needs of refugees, asylum seekers, beneficiaries of temporary protection, and others in refugee-like situations. As a result, these groups often lack access to comprehensive, culturally, and linguistically sensitive assistance. Assistance is frequently provided in an *ad hoc* manner, lacking consistency and coordination. Organisations involved in supporting these target groups include Specialised Comprehensive Assistance Centres for domestic violence victims, Centres for Victims of Crime, and those assisting victims of human trafficking (see Section 2). Furthermore, focus group participants confirmed that assistance providers **do not differentiate treatment based on individuals' legal status**, meaning they offer support to all individuals who seek assistance or are referred by the police or other institutions. These organisations possess the flexibility to apply a survivor-centred approach when determining eligibility for assistance. In practice, however, **resource constraints and competency gaps** may limit both the extent and quality of assistance available to the target group. Assistance to GBV victims who are refugees, asylum seekers, beneficiaries of temporary protection, and persons in refugee-like situations is tailored in **an ad hoc manner**, as no established methodology exists for delivering services to these specific groups, either at the organisational or cross-organisational level.

Concurrently, the state regulates, and municipalities provide, **general services** relevant to GBV victims, including safe housing (accommodation), individualised social support, material assistance, and healthcare. However, as discussed in the legal analysis and confirmed by stakeholder accounts, access to these services – except for emergency care – is subject to specific eligibility criteria often linked to **residency status, municipal registration, or social guarantees**. Refugees and beneficiaries of temporary protection generally enjoy the same rights as Lithuanian citizens with respect to accessing healthcare and social services. In contrast, asylum seekers and persons in refugee-like situations are more likely to face legal restrictions limiting their access to these basic services. Consequently, many GBV survivors within these groups may receive immediate assistance but lack access to broader social and healthcare services essential for those experiencing trauma and compounded vulnerabilities. These broad differences in accessibility between survivor-centred assistance and general services are summarised in Table 1, while both overarching and specific challenges associated with these support systems are analysed in greater detail in Section 4.3.

TABLE 1. Differences between survivor-centred assistance and general services

	SCOPE OF ASSISTANCE / SERVICES	DIFFERENCES IN ACCESSIBILITY
SURVIVOR-CENTRED ASSISTANCE	Provided by Specialised Comprehensive Assistance Centres for domestic violence survivors, Centres for Victims of Crime, and organisations assisting human trafficking survivors.	The legal status of individuals is not a determining factor; however, practical challenges – including limited resources, language barriers, and lack of cultural competencies – affect access to quality services for refugees, asylum seekers, and other displaced GBV survivors alike.



GENERAL SERVICES

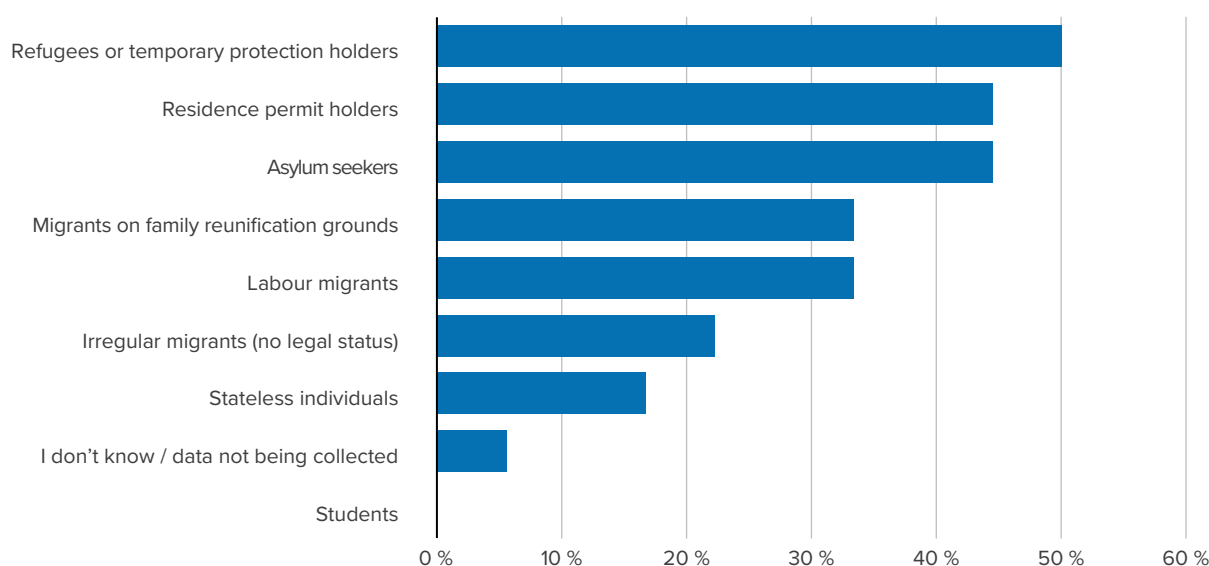
- Relevant social services (e.g., safe housing, material assistance).
- Healthcare (e.g., non-emergency healthcare provision).
- Law enforcement.

The legal status of individuals is not a determining factor; however, practical challenges – including limited resources, language barriers, and lack of cultural competencies – affect access to quality services for refugees, asylum seekers, and other displaced GBV survivors alike.

4.2.2 ORGANISATIONS' EXPERIENCES AND RESPONSES TO GBV CASES

A survey of survivor-centred assistance providers and relevant public service institutions for GBV survivors revealed that most sampled organisations involved in Lithuania's assistance mechanisms, particularly those based in larger municipalities, have encountered cases involving refugee, asylum-seeking, or displaced GBV survivors. **Approximately 47 per cent reported that their institutions provide GBV assistance to foreign nationals, including members of the target group.** Most assisted cases known to respondents primarily involved individuals receiving integration services in municipalities or residing in accommodation centres under the Reception and Integration Agency, such as refugees and persons in refugee-like situations (see Figure 2).

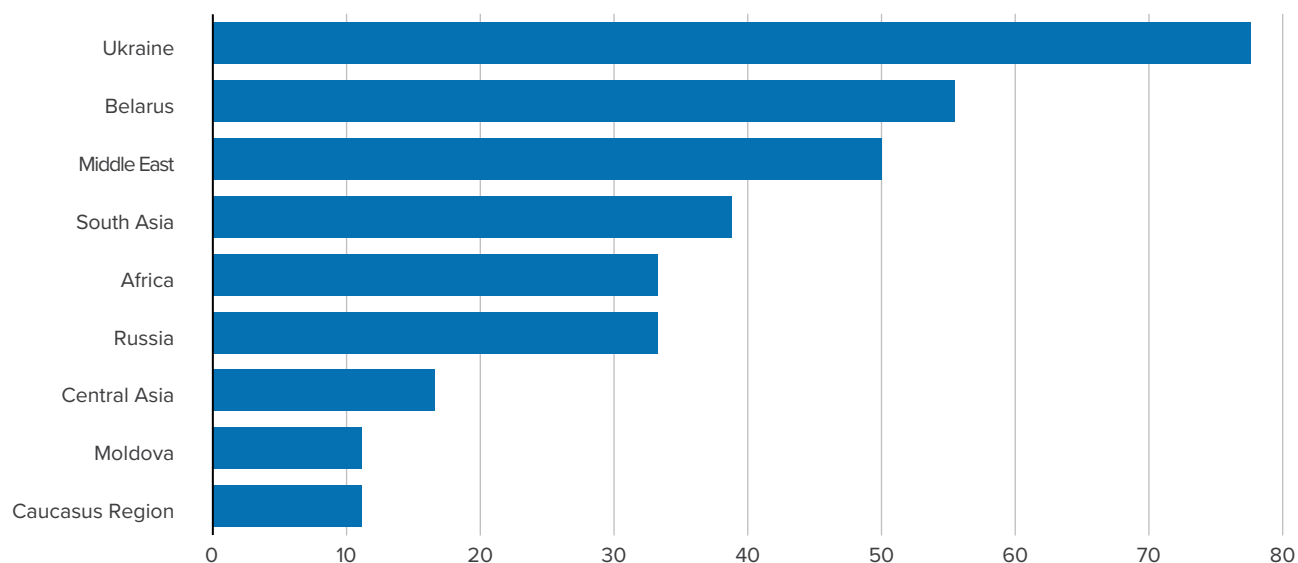
FIGURE 2. Groups of individuals assisted by legal status: percentage of surveyed assistance and service providers reporting support to each group



The diverse regions of origin of assisted migrants and stateless persons broadly reflect national migration trends, demonstrating that GBV support services reach individuals from various countries. The majority of GBV survivors assisted were from Ukraine (78%), followed by Belarus (56%) and Russia (33%). Other reported regions of origin included Africa (33%), the Middle East (50%), Central Asia (17%), South Asia (11%), and the Caucasus (11%) (see Figure 3).



FIGURE 3. Countries or regions of origin of assisted GBV survivors: percentage of surveyed assistance and service providers reporting support to each group.



Regarding gender, **most sampled organisations assisted female GBV survivors (94%), while 39% also assisted male survivors**, likely reflecting the general pattern that women and girls are disproportionately affected by GBV.²²⁰ Most survey participants reported that violence was experienced primarily from intimate partners and within the home environment (89%). However, more than half (56%) indicated that survivors faced violence in other settings, such as public spaces or from individuals outside the household.

Representatives of governmental and non-governmental organisations in larger municipalities reported encountering GBV cases involving refugees, asylum seekers, beneficiaries of temporary protection, and persons in refugee-like situations more frequently than their counterparts in smaller municipalities.

This trend aligns with broader migration dynamics in Lithuania, as foreign nationals are predominantly concentrated in urban centres rather than rural areas.²²¹ Consequently, smaller municipalities have less experience assisting foreign national GBV survivors, contributing to disparities between urban and regional municipalities in service providers' capacity to draw on prior cases and adapt to the specific needs of these groups. Smaller towns and rural areas often lack NGOs supporting refugees, which in larger cities frequently bridge gaps in public service provision by offering mediation and on-demand interpretation services (see Section 4.3.2.2 for further details on language barrier issues).



A significant concentration of support services is available in larger cities, particularly Vilnius, where many NGOs operate. However, in Kaunas, cooperation with the municipality is noticeably weaker, and access to support for survivors of violence declines further in rural areas and regions (Representative of Specialised Comprehensive Assistance Centre).

This disparity is influenced by the social and economic status of the area, low levels of emigration and immigration, and the under-identification of GBV cases involving migrants and stateless persons (Representative of Social Services Centre).

²²⁰ UNHCR, 2020, Policy on the Prevention, Risk Mitigation and Response to Gender-based Violence, <https://www.unhcr.org/media/unhcr-policy-prevention-risk-mitigation-and-response-gender-based-violence-2020> (p. 4).

²²¹ Migration Yearbook, 2023, Migration Department under the Ministry of the Interior of the Republic of Lithuania, <https://migracija.lrv.lt/media/viesa/saugykla/2024/5/xtUeX75YEX8.pdf> (p. 12).

4.2.3 INTER-INSTITUTIONAL COORDINATION

In the absence of formal inter-institutional coordination mechanisms, some Specialised Comprehensive Assistance Centres have established **informal partnerships with NGOs assisting migrants and refugees, as well as with the Reception and Integration Agency**. Such cooperation primarily involves joint training sessions on identifying cases of human trafficking, understanding the rights and services available to GBV survivors – including those in the target group of this study – and collaborating to secure safe housing for refugee GBV survivors.



At our centre, we have worked closely with migrant and refugee-assisting NGOs. Our collaboration has generally proceeded smoothly, including in instances where individuals were assessed as vulnerable or identified as victims of human trafficking. Cooperation has been effective and well-organised (Representative of Reception and Integration Agency).

Recognising the increasing demand for interpretation services, a representative of a Specialised Comprehensive Assistance Centre highlighted the rising number of GBV cases involving foreign nationals. They reported maintaining direct contact with a migrant and refugee-assisting NGO that provides mediation support during key interactions with public institution representatives, including police officers, court officials, and healthcare providers. This NGO offers interpretation services alongside culturally sensitive psychologists and social workers. While such collaborations help to address existing service gaps, they also place **additional strain on migrant and refugee-assisting NGOs**, which frequently operate on an *ad hoc* basis with already overstretched resources.



No institutions have dedicated interpreters – neither municipal crisis centres, hospitals, nor the police. If specialists speak Russian or English and the survivor understands, that facilitates communication; otherwise, no support is available. We always have to bring our own interpreter, but our budget is limited, and we cannot provide interpreters for all institutions (Representative of a migrant and refugee-assisting NGO).

4.3 EXISTING GAPS

The findings of the study indicate that many challenges faced by the target groups in accessing both general services and survivor-centred assistance are cross-cutting in nature. These barriers were observed across various institutions and organisations, regardless of the specific service type or the legal status of the individuals concerned. Instead, they reflect broader systemic issues, particularly a lack of adaptation to the needs of survivors who are not Lithuanian speakers and may come from diverse cultural backgrounds. These overarching challenges – most notably gaps in information provision, institutional competencies, and access to interpretation – are further examined in Section 4.3.1. Conversely, the study also identified practical barriers specific to certain services or institutions, which are discussed in greater detail in Section 4.3.2.

4.3.1 OVERARCHING CHALLENGES

The results of the online survey and expert focus groups indicate that refugees, asylum seekers, beneficiaries of temporary protection, and persons in refugee-like situations in Lithuania face common challenges irrespective of their precise legal status. These challenges include: (1) a lack of information about their rights in Lithuania and the availability of services for GBV survivors; (2) language barriers when communicating with institutions and organisations providing both survivor-centred assistance and general services; and (3) a deficiency of cultural sensitivity in the provision of assistance and services for GBV survivors. These issues are elaborated upon below.

4.3.1.1. LACK OF AWARENESS AND ACCESSIBLE INFORMATION

One of the principal challenges confronting the target group – irrespective of legal status – is a **general lack of awareness and limited accessibility of information regarding available support systems for gender-based violence (GBV), alongside insufficient knowledge of a broader range of rights within the host country.**

This lack of awareness manifests in multiple ways. It includes a limited understanding of the various forms of GBV as well as a reluctance to identify as, or assume the social role of, a victim. Certain forms of violence – such as the economic subjugation of women or sexual violence – may be normalised or justified within the social and cultural contexts of countries of origin, where such behaviour is not necessarily regarded as violence. Additionally, experiences of GBV may go unreported due to feelings of shame or fear of stigmatisation. The 2024 Socio-Economic Insights Survey, which included Ukrainian nationals residing in Lithuania, highlights these challenges. When asked about the main barriers to accessing GBV-related services, the most frequently cited reason was a lack of awareness (30%), followed by stigma and shame (23%).²²²

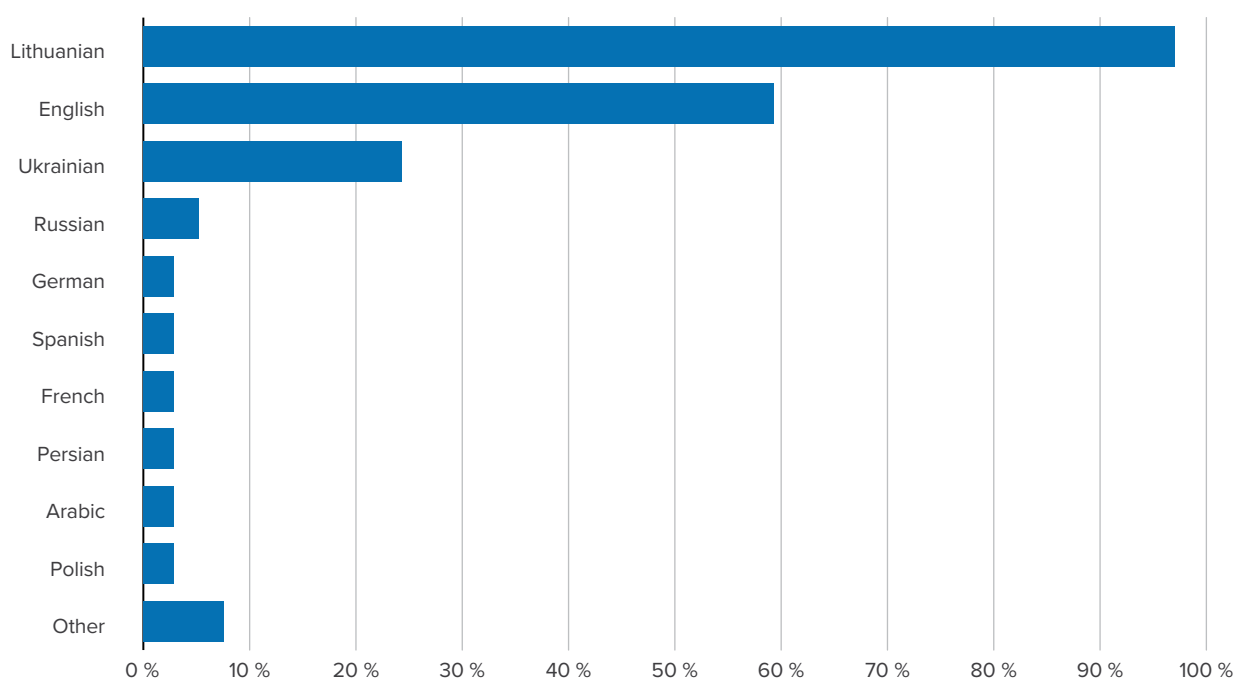
Another pressing issue is the limited availability of information regarding GBV-related support and protection systems in Lithuania. A review conducted by the research team of publicly available materials and state services reveals that information about available assistance in foreign languages – including widely spoken ones such as English, Ukrainian, Russian, or Polish – is scarce.

This scarcity is confirmed by the survey findings: slightly more than half (58%) of surveyed organisation representatives reported that their services are communicated in English. Only around a quarter (24%) provide information in Ukrainian, despite the increasing need to support Ukrainian-speaking refugees. Support in Russian is available in just 13% of cases. Only 2 out of 31 representatives indicated that their organisation provides – or could provide – information in other relevant languages such as Arabic, Pashto, Dari, or Farsi.

²²² UNHCR, 2025, Socio-Economic Insights Survey (SEIS) Lithuania 2024, <https://data.unhcr.org/en/documents/details/114716> (p. 16).



FIGURE 4. In which languages is information about the assistance provided by your organisation publicly available?



Furthermore, the information about available support is insufficiently tailored to the target group, meaning that GBV survivors who are refugees, asylum seekers, beneficiaries of temporary protection, and people in refugee-like situations are often uncertain about their rights, even if they find general information about available assistance online. Experts explained that many individuals in the target group hesitate to seek support when exposed to GBV because they are unaware of their rights in Lithuania. These information gaps include the absence of clear explanations of the cultural and legal norms in the country, including that domestic violence survivors can expect help from law enforcement institutions, and that assistance is available to all GBV survivors irrespective of their legal status.



Individuals do not seek help because they are unaware of the existing system in Lithuania (Representative of Specialised Comprehensive Assistance Centre).

It was observed that the main information package lacks explicit information stating, bluntly, that it is not permitted to be beaten in Lithuania, that a formal complaint is not required to receive help, that law enforcement officers do not abuse individuals but are present to assist, that support channels are available, that the support is free of charge, and so on (Representative of Specialised Comprehensive Assistance Centre).

Interviewed experts concur on the need for clear, consistent, and targeted information provision for the target group. Information should be disseminated proactively rather than reactively and should reach these groups within their everyday environments. Experts proposed national prevention campaigns incorporating video and printed materials (posters, leaflets), which should be accessible, tailored to the target group, and distributed in locations frequently visited by them, such as community centres, educational institutions, or healthcare facilities.



Some representatives noted that refugees, asylum seekers, beneficiaries of temporary protection, and people in refugee-like situations receive some general information about their rights. However, these efforts are often project-based initiatives lacking sustainability. Consequently, the dissemination of information regarding their rights, including the right to support as GBV survivors, remains inconsistent and irregular.

4.3.1.2. LANGUAGE BARRIER

The study revealed that the target group encounters significant language barriers when interacting with assistance providers and public service institutions. There is no systematic provision of adequate interpretation for non-Lithuanian speakers when accessing services, including for GBV survivors. As noted above (Section 4.2.3), migrant and refugee-assisting organisations may be approached by specialised assistance centres to fill this gap but often lack the resources to meet the full demand. As a result, language support remains *ad hoc*, dependent on the competencies, language skills, and willingness of public service providers or mediating organisations to assist.

The absence of available interpretation services results in situations where members of the target group or their assisting organisations approach first-contact institutions (e.g., the police), but staff are unable, or sometimes refuse, to provide the required services due to the language barrier.



We called the police for one [refugee – author's comment] woman at the hotel where she was staying that night. Although the police were informed that she was a foreign woman who did not speak Lithuanian, the officers who arrived did not speak English – they outright refused to communicate with her and only spoke to the case manager (Representative of migrant and refugee-assisting NGO).

In the case of an Eritrean woman, both the Child Rights Protection Services and the municipal Social Services Centre workers became involved, and the woman with her children was accommodated in one of the centre's facilities. However, after three days, municipal social services centre workers needed to reassess the need and extend the accommodation service, but they refused to do so because they could not communicate with the woman. We provided our interpreter for the family review, but ultimately, the woman returned to her abusive husband, pressured by the Social Services Centre. The situation ended with the woman leaving the country with her children to stay with relatives abroad (Representative of migrant and refugee-assisting NGO).

The study findings highlight differences between reception centres and migrant and refugee-assisting NGOs, on the one hand, and Specialised Comprehensive Assistance Centres and support centres for victims of crime, on the other. The latter group of organisations was found to have fewer resources to employ interpreters. Similarly, public service providers lack a systematic approach to ensuring adequate interpretation services for these groups. Consequently, assistance to foreigners within mainstream support systems, whether survivor-centred or general services, risks being insufficient.

4.3.1.3. LACK OF CULTURALLY SENSITIVE ASSISTANCE AND SERVICES

The analysis of the collected data also revealed a persistent lack of preparedness to deliver assistance and services in a culturally adapted and sensitive manner for members of the target group. This deficiency contributes to the reluctance among GBV survivors to approach specialists or maintain engagement with assistance and public service providers. According to interviewed representatives, only a small proportion of specialists in Lithuania possess sufficient knowledge to provide psychological counselling to GBV survivors in a culturally appropriate manner or to discuss topics such as gender relations in ways that resonate with diverse cultural perspectives.



Only organisations specialising in work with foreigners are adequately prepared to do so. Municipalities are demonstrably unprepared to provide comprehensive support to foreign victims of violence. Regarding perpetrators, there is scarcely any discussion (Representative of migrant and refugee-assisting NGO).

Cultural sensitivity is crucial not only in assistance and service provision but also in encouraging survivors to disclose specific forms of violence, such as female genital mutilation (FGM). FGM cases have occurred in Lithuania, as confirmed by a healthcare specialist and midwife who participated in this study. She reported that, during a medical examination, she and her colleagues identified a case of female genital mutilation. However, the interviewee acknowledged that there is currently no formalised pathway to address the medical and psychological needs of FGM survivors in Lithuania, and such cases are managed on an *ad hoc* basis by the attending physician. She emphasised the necessity of training medical care providers on this subject. The lack of competencies among psychologists, social workers, and healthcare providers in recognising and addressing the needs of FGM survivors, and thus the requirement for specialised training, was also highlighted by representatives working in a reception centre under the Reception and Integration Agency, who have encountered FGM survivors on multiple occasions.

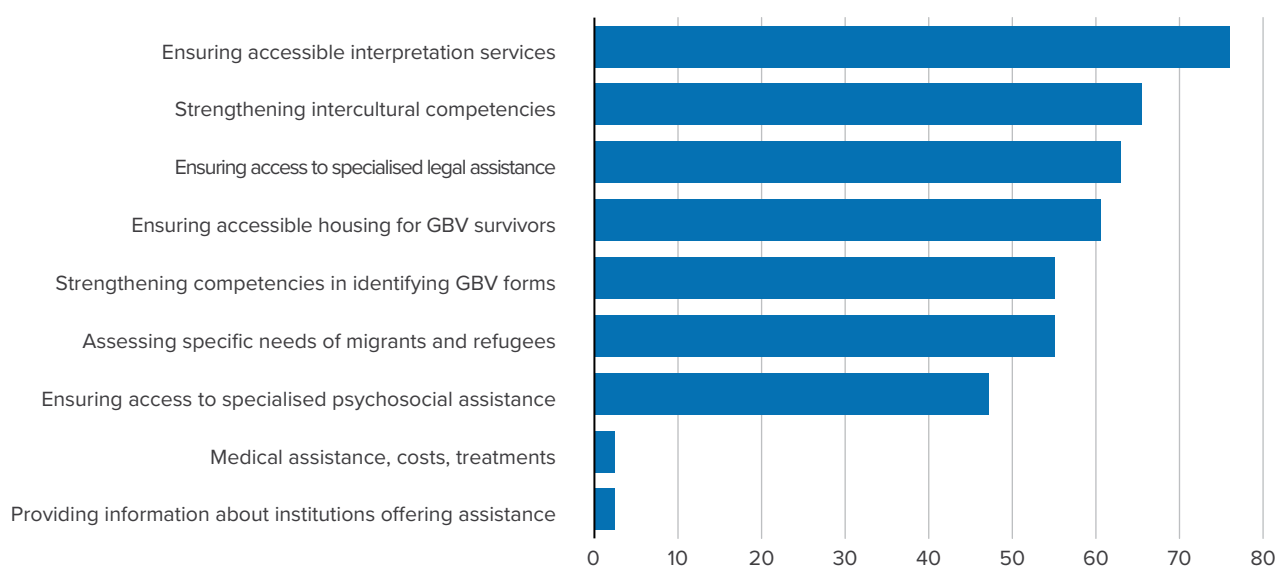


Another point I would like to emphasise <...> is the difficulty of accessing high-quality professional training on specific topics, such as violence or, particularly, <...> female genital mutilation and handling such cases. Based on my experience, such training is not readily accessible, and not all European countries have well-prepared specialists for these cases. Our team has basic knowledge, but we believe that much more training and resources are needed. (Representative of a reception centre under the Reception and Integration Agency)

The existing need to mainstream cultural sensitivity into assistance and relevant services provision is further supported by the results of the online survey. Approximately two-thirds (66%) of respondents identified the need to strengthen intercultural competencies, 47% called for improved psychosocial support, and 55% emphasised the necessity for more thorough assessments of the specific needs of migrants and refugees.



FIGURE 5. Respondents (%) who selected the following measures as relevant to improve staff assistance provision and coordination for foreign GBV survivors, including the target group



A notable good practice example is the model applied by the Jonava Social Services Centre, which could be recommended for implementation in other Lithuanian municipalities. In Jonava Social Services Centre's case, cultural mediators assist social workers and psychologists in establishing connections with individuals from the target group, including those affected by GBV (also see Section 2). Existing standards and norms regulate the prevention of and response to gender-based violence in Lithuania. Cultural mediators play a central role in bridging the gap between the target group and mainstream assistance mechanisms and services for GBV survivors. Their presence helps to ensure that individuals can access the support and resources they require.



We apply a culturally sensitive approach. This entails considering social roles, religious beliefs, and other cultural differences and perspectives when addressing relationships, for example, between men and women. Both psychological and social work consultations are conducted with the mediation of a cultural mediator to clearly convey what is acceptable and what is not in Lithuania overall (Representative of Jonava Social Services Centre).

Beyond the lack of preparedness and competencies, societal prejudices also contribute to an unwillingness to assist the target group. Some focus group participants reported reluctance among public service providers to offer comprehensive support to the target group. Some recalled instances where victim-blaming attitudes were observed, attributing responsibility for violent circumstances to survivors within the target group. Others noted examples where the needs and narratives of Lithuanian perpetrator spouses were prioritised over those of GBV survivors who are foreign nationals. These insights reveal that institutional representatives are embedded within broader Lithuanian society, where, according to public opinion surveys, victim-blaming and xenophobic attitudes remain prevalent: 30% of respondents in Lithuania believe that women often fabricate or exaggerate claims of violence or rape,²²³ 46% of residents would not want to have Muslims as neighbours, and 22% would not want to have foreign nationals who do not speak Lithuanian as neighbours.²²⁴

²²³ European Commission. (2025). Europeans' opinions about the European Union's priorities: Eurobarometer report. Publications Office of the European Union. <https://europa.eu/eurobarometer/surveys/detail/3252>.

²²⁴ LSMC Sociologijos Institutas, Diversity Development Group, Visuomenės nuostatų tyrimas (2023 m.), <https://www.diversitygroup.lt/wp-content/uploads/2024/03/Visuomene%CC%87s-nuostatos-2023.pdf>.



Well, for example, the case with a Vietnamese woman. <...> As it later transpired, she was a victim of human trafficking. <...> A Lithuanian man in America purchased her, brought her to Lithuania, and ostensibly formed a family. A child was born, and then that child was, in the full sense of the word, taken away from the woman. <...> Even the Child Rights Protection Service was very biased. As it later transpired, the woman was completely ignored by them in various ways. (Representative of Specialised Comprehensive Assistance Centre)

4.3.2. SPECIFIC CHALLENGES

In addition to overarching challenges, GBV survivors who are refugees, asylum seekers, beneficiaries of temporary protection, and people in refugee-like situations face specific legal and service-related barriers in accessing comprehensive, tailored, and quality support. This section discusses issues related to the crisis management protocols of the Reception and Integration Agency, challenges in accessing safe housing, as well as barriers to obtaining medical healthcare and other social services.

4.3.2.1. SELF-CONTAINED RECEPTION AND INTEGRATION AGENCY CRISIS MANAGEMENT SYSTEM

The Reception and Integration Agency operates its own internal procedure for supporting migrants who have survived GBV or are identified as at risk. As outlined in Section 3.1, GBV cases within these centres are currently handled through an internal crisis response mechanism. However, unlike the standard procedures followed outside accommodation centres, there is no unequivocal obligation to report GBV cases to the police or Specialised Comprehensive Assistance Centres.

This **discretionary approach means that the decision to report a GBV case to external stakeholders ultimately rests with accommodation centre staff**. While this internal mechanism may permit a culturally tailored, individualised approach and specialised external services are generally engaged when staff identify a need, it also raises potential risks. If a centre lacks trained specialists to manage more complex GBV cases and is not obliged to seek external assistance, survivors may not receive the specialised support they require. Furthermore, the absence of a mandatory reporting obligation creates a **potential risk of cases being mishandled**, particularly where a staff member or members are implicated as perpetrators. In such instances, the lack of external oversight could compromise the safety and wellbeing of survivors. This calls for a revision of internal protocols to incorporate external accountability mechanisms.



In each case, the situation is assessed individually, and comprehensive support is provided accordingly. If we determine that our competencies are insufficient – for example, in particularly severe cases requiring highly specialised psychological or medical assistance – we take appropriate action to ensure that the necessary support is provided. In the case that first came to mind, our internal expertise was sufficient to address the situation without external intervention (Representative of Reception and Integration Agency).

4.3.2.2. ACCESS TO SAFE HOUSING

Another practical issue identified during this study is the lack of access to safe housing within Lithuania's mainstream assistance and protection system. Generally, there are no dedicated shelters for survivors of gender-based violence in Lithuania, and existing crisis centres do not necessarily provide safe accommodation. This limitation affects both Lithuanian citizens and foreign nationals, including refugees, asylum seekers, beneficiaries of temporary protection, and people in refugee-like situations. However, the target group is particularly vulnerable, as many lack extended family or a social network in Lithuania that could bridge this gap by providing accommodation in cases of intimate partner violence.



In our county, there is a shortage of accommodation not only for foreigners but also for women who have experienced violence in general. If you do not have children, no one will provide you with housing. At best, we can accommodate her in a hotel using our own resources, but only for a limited time. <...> When they are not accepted, we ask, 'Do you have any relatives?' and then refer them to stay with their relatives (Representative of Social Services Centre).

Within the mainstream system, accommodation for survivors of human trafficking or domestic violence is typically organised by organisations assisting these individuals. These organisations usually house survivors in their own facilities, although in rare cases, due to limited capacity, accommodation is arranged in rented hotels or apartments. They also collaborate with municipal Social Service Centres and/or crisis centres. This is illustrated by a statement from a focus group participant:



So, first and foremost, what do we do? We assess the need for safety and offer temporary accommodation in a municipal crisis centre. If there is a risk to life or health, this is the first step we must ensure. Our priority is to determine the need for temporary safe housing, which most often applies to women with children. Only then do we proceed with organising psychological support <...> (Representative of Specialised Comprehensive Assistance Centre).

However, several specific challenges remain. Firstly, several experts participating in focus groups highlighted that, at the municipal level, accommodation services are often only available to individuals registered in the respective municipality. In practice, this means that only members of the target group holding residence permits and a declared address in that municipality can access the system, while asylum seekers are excluded. To address this challenge, specific measures are sometimes adopted. Some municipalities have inter-municipal agreements allowing the prompt arrangement of accommodation in partner municipalities; however, not all municipalities have such agreements.



In Lithuania, there is also a practice whereby municipalities purchase services from one another. This form of cooperation occurs, for example, when the Social Services Centre in Vilnius purchases services from the Social Services Department in Telšiai. However, this largely depends on goodwill and arises only in specific cases <...> (Representative of Specialised Comprehensive Assistance Centre).



Secondly, refugees living in municipalities may face accommodation challenges due to the limited physical capacity of these facilities. This shortage is particularly acute when GBV survivors, especially those without dependents, are placed in shelters (e.g., Lith. *nakvynės namai*) alongside individuals experiencing various social challenges such as substance dependence or social marginalisation. This arrangement fails to ensure security for GBV survivors or to provide longer-term safe housing that would minimise psychological distress and the risk of re-traumatisation.

It is important to note that this challenge for refugees, asylum seekers, beneficiaries of temporary protection, and people in refugee-like situations is addressed by removing them from the mainstream assistance system. Due to the general lack of safe housing, the accommodation needs of the target group are often met by referral to the Reception and Integration Agency.

While this practice addresses the mainstream accommodation gap for the target group in practice, it is important to recognise that this option operates outside the mainstream system and that no established referral mechanism exists between the Agency and GBV-specific, survivor-centred assistance and/or services. The Reception and Integration Agency can provide accommodation only to a limited number of survivors, who are also required to temporarily relocate to another municipality where an accommodation centre is available. Moreover, the Agency generally operates as a self-contained centre, providing the majority of support independently, with services largely restricted to those available within the facility. This approach risks failing to comprehensively address the specific support and assistance needs of GBV survivors.

4.3.2.3. ACCESS TO NON-EMERGENCY HEALTHCARE

Comprehensive access to healthcare services is crucial in addressing GBV. As discussed in the legal analysis section, these services in Lithuania are classified into immediate emergency medical assistance and ongoing non-emergency healthcare provision. Both components play an important role in meeting the needs of different GBV survivors, as some physical or psychological traumas can have long-term effects.

In this regard, the scope of healthcare provision for GBV survivors largely depends on their legal status. Non-emergency healthcare for refugees and subsidiary protection holders is generally covered under the Compulsory Health Insurance (CHI) system, allowing them to access these services without charge. Asylum seekers may not be insured and must cover the costs of non-emergency medical care, unless the services are deemed necessary to prevent deterioration of health that could require emergency medical care.²²⁵ While asylum seekers staying at RIA facilities may benefit from on-site medical services and access mainstream healthcare institutions based on RIA referrals, those staying outside reception centres face additional obstacles (for more detailed analysis see Section 3.1c). Other groups, including some temporary protection beneficiaries and individuals in refugee-like situations are not covered by CHI unless they meet eligibility criteria (discussed in detail in Section 2.2). As a result, **some GBV survivors from the target group fall through gaps, as they are uninsured and may be unable to afford non-emergency healthcare.**

As discussed in the legal analysis (Section 2.2), emergency medical treatment must be provided to all individuals in critical condition posing a serious threat to life or health. However, what constitutes a life-threatening condition is subject to the discretion of medical staff. This leads to situations where, in practice, target groups not covered by CHI are denied assistance even in cases that could be considered life-threatening. For example, a representative of a migrant and refugee-assisting NGO shared a case involving an uninsured member of the target group living with HIV who was refused care by multiple clinics. This issue is not exclusive to GBV-related cases but may also include medical conditions resulting from GBV.

²²⁵ Article 6 (5) (3) of the Law on Health Insurance.



We had a man who had HIV. We approached outpatient and inpatient clinics for treatment, but they said this is a non-emergency case and therefore they could not assist unless the person paid. But not providing assistance could have had life-threatening consequences for him. We then approached the National Health Insurance Fund [which clarified that HIV treatment must be provided to all patients. Following this clarification, the explanation letter was presented to the clinic, after which the individual received the necessary medical assistance] (Representative of migrant and refugee-assisting NGO).

In such cases, NGO representatives assisting migrants and refugees, or other mediators, may challenge decisions classifying certain procedures or medications as non-emergency by appealing to the National Health Insurance Fund under the Ministry of Health or the aforementioned Ministry. These decisions can be overturned with institutional backing. However, not all GBV survivors within the target group have access to mediators who can advocate on their behalf, and the existing system remains lengthy and inefficient in addressing the needs of GBV survivors not covered by CHI.

5. REFERRAL PATHWAYS

The analysis of legal norms and standards shows that victims and survivors of GBV in Lithuania have access to comprehensive and specialised support services, including healthcare, legal and social counselling, and emotional support. However, the study identified that the mainstream system providing assistance to GBV victims who are asylum seekers, refugees, beneficiaries of temporary protection, and persons in refugee-like situations is often fragmented and challenging for both survivors and assistance and service providers. This chapter briefly outlines the complex landscape of referral pathways available to refugees, beneficiaries of temporary protection, asylum seekers, and foreigners in refugee-like situations who are survivors of GBV in Lithuania, highlighting existing services and their limitations, and ultimately aiming to clarify how survivors can best access the assistance they require with proposed improvements. These referral pathways are also illustrated in Annex III.

5.1 INSTITUTIONAL SYSTEM

In Lithuania, GBV survivors can receive support from various institutions depending on the nature of the incident they have experienced. Law enforcement are the primary responders to criminal acts of GBV. They conduct investigations, collect evidence, ensure immediate protection, and provide information about rights and assistance.

For healthcare needs, five hospitals provide specialised services for sexual violence survivors. These services include forensic examinations (if a legal investigation is pursued), medical treatment, sexually transmitted infections prevention, psychological assessments, and referrals. Healthcare provision beyond specialised services for sexual violence survivors, including emergency and non-emergency care, is provided in other healthcare institutions. These include both in-patient and out-patient clinics.

Specialised Comprehensive Assistance Centres offer comprehensive support to victims of domestic violence, including information, consultation, psychological, and legal counselling. The National Information on Sexual Abuse Centre provides information and guidance to victims of sexual violence. Member organisations of the National Association against Trafficking in Human Beings assist in cases of human trafficking.

More general assistance can be accessed via victim support centres that aid victims of any crime committed in the EU. They provide information about legal procedures, organise essential services such as accommodation and legal aid, and offer emotional support. Depending on individuals' place of residence, social services are provided at the local municipality and/or at the reception centre under the Reception and Integration Agency. These services address basic needs such as shelter, food, and clothing.

Child rights violations must be reported to the State Child Rights Protection and Adoption Service, which will initiate an investigation into the alleged abuse. The Service provides specialised assistance to child survivors of sexual violence.

Emotional support helplines are also available, offering help to various target groups including youth, women, men, parents, and elderly people. Migrant and refugee-assisting NGOs provide general advice and integration support for foreign nationals, including those within the target group.

5.1.1 IDENTIFICATION

The identification of GBV is crucial as it determines the trajectory of the survivor's interaction with the support system. The core objectives include proactive early identification, ensuring immediate safety and wellbeing, establishing a trusting and supportive environment for disclosure, empowering informed decision-making, and preventing further harm.

Entry points and subsequent assistance vary depending on the restrictions on freedom of movement experienced by members of the target group. Three groups can be distinguished:

1. Members detained at the Foreigners Registration Centre under the State Border Guard Service.
2. Members residing in reception centres of the Reception and Integration Agency who are not detained but may face limitations on freedom of movement.
3. Members living outside reception centres, in municipalities.

For the first two groups, GBV identification usually occurs within the reception centres. In this context, the competencies of centre staff are fundamental to effective identification. Trained personnel are better equipped to recognise subtle indicators of abuse, understand the unique vulnerabilities of the target group, and navigate cultural sensitivities, thereby creating a safe and trusting environment where survivors feel comfortable disclosing their experiences. Without these competencies, potential GBV cases may remain undetected, leaving survivors without the necessary assistance and protection.

Members of the target group living in municipalities (group three) rely on mainstream identification mechanisms available to all residents of Lithuania (see Section 2 for detailed information). These mechanisms include police, prosecutors, healthcare, educational and social service institutions, NGOs, and other actors. These actors are obliged, or able, to refer GBV survivors for specialised assistance (see Section 5.3), except for institutions working within the migration field. Currently, frontline institutions working with refugee, asylum-seeking, and migrant populations – such as the Migration Department or the State Border Guard Service – are not mandated to refer GBV survivors for specialised assistance.

For all groups, information should be accessible and user-friendly to ensure that potential GBV victims are well informed about available avenues for assistance and encouraged to report possible instances of GBV.

5.1.2 INITIAL RESPONSE

A prompt and effective initial response is required at the reception and registration centres to immediately address the safety and wellbeing of GBV victims. This includes providing a secure environment, emotional support, clear information about rights and available assistance in a language the survivor understands, and facilitating access to emergency healthcare and/or safe accommodation when necessary (see Section 3 for detailed information).

It is therefore essential that the reception and registration centres are equipped not only to provide immediate assistance but also to implement institutional GBV identification and referral mechanisms for subsequent support. Accordingly, centre staff should be adequately trained to recognise and respond to cases of GBV. Migrant and refugee-assisting NGO staff must always inform GBV survivors about available assistance and, upon obtaining informed consent, refer them to appropriate services. NGO staff should likewise receive adequate training to identify and respond to cases of GBV.

Reception and registration centres, along with migrant and refugee-assisting NGOs, should develop standardized operational procedures tailored to address various types of GBV incidents. These procedures must prioritize the safety and well-being of survivors while ensuring compliance with legal obligations. Where national law requires the reporting of GBV incidents, the police or other relevant law enforcement authorities must be promptly notified.

5.2 GAPS IN REFERRAL PATHWAYS FOR SPECIALISED ASSISTANCE

Although GBV survivors from the target group are formally entitled to access specialized assistance, the report highlights persistent gaps in practice.

5.2.1 DETAINEES

For group 1 (detained members of the target group), no substantive specialised assistance can be provided as they are not permitted to leave the Centre or use electronic communication devices.

Given this, the needs of detained members must be taken into account, and Centres should ensure that GBV survivors have the opportunity to meet specialised assistance providers and/or receive support via electronic communication, with confidentiality safeguarded.

5.2.2 MEMBERS OF THE TARGET GROUP WITH LIMITED FREEDOM OF MOVEMENT

Certain members of group 2, who experience restricted freedom of movement, have limited ability to receive specialised assistance in person, as they require permission from the head of the Centre or an authorised person to leave. However, they are able to use phones and the internet.

Given this, the needs of these individuals must be considered, and Centres should ensure that GBV survivors can either meet specialised assistance providers in person or receive support via electronic communication, with confidentiality assured.

5.2.3 LINGUISTIC AND INTERCULTURAL BARRIERS

Language barriers and a lack of intercultural competence among specialised assistance providers may impede effective support for GBV survivors within the target group. Communication difficulties can prevent survivors from fully disclosing their experiences and accessing essential information about their rights and available assistance. Concurrently, a lack of cultural sensitivity among assistance and service providers can lead to misinterpretations, inappropriate advice, and ultimately deter survivors from engaging with the support system.

To ensure that specialised assistance providers possess adequate skills to support GBV survivors from the target group, the Reception and Integration Agency could serve as a central hub for interpretation services, both in person and remotely, by implementing a standardised protocol that offers immediate access to professional interpreters in GBV cases.

5.3 REFERRALS TO SPECIALISED SERVICES

Specialised assistance providers act as case managers, delivering certain services themselves – typically information provision, psychological counselling, and legal advice – and subsequently directing survivors to further support based on individual needs.

This may include healthcare services, social services, state-guaranteed legal aid, and others. It is therefore important that such services are not only theoretically available to the target group but are also accessible in practice.



Considering the characteristics of the target group and the broader integration system for foreigners, the Reception and Integration Agency, along with migrant and refugee-assisting NGOs, are uniquely positioned to support and facilitate access to mainstream GBV assistance mechanisms. Having established trust, familiarity, and the necessary resources, the Agency could coordinate access to interpretation services for the target group when seeking further help and act as a liaison to secure safe accommodation.

5.4 PROPOSAL FOR IMPROVEMENTS

Annex III provides developed suggestions for referral pathways to improve access to needed assistance. A GBV Specialized Service Assistance Directory for Standard Operational Procedures in Annex IV has been drafted to assist non-governmental organisations in ensuring effective referrals in their daily work.

6. CONCLUSIONS

This study highlights that progress has been made in developing legislation and policies addressing various forms of GBV. Although the GBV concept is not explicitly recognised, the Lithuanian government has enacted a specific law on the Protection against Domestic Violence and invested in strengthening the protection system for domestic violence cases in particular. Resources have been allocated to establish specialised comprehensive assistance services, and the Ministry of Social Security and Labour has been assigned to coordinate government, municipal, and non-governmental institutions in implementing the Law on Protection against Domestic Violence. A referral mechanism for victims of domestic violence has been established, with the Specialised Comprehensive Assistance Centres at its core. These Centres receive information about domestic violence victims from the police, prosecutors' offices, healthcare institutions, educational institutions, and social service providers, and subsequently reach out to offer support. If a victim of domestic violence has children, the first-contact institution reports the case to the State Child Rights Protection and Adoption Service, which assesses the child's situation.

Analysis of the legal norms and standards demonstrates that the mainstream system is in place to respond to domestic violence, crimes of human trafficking, sexual violence, and violence against children by ensuring victims' immediate safety, assessing risks, and implementing necessary legal and protective measures. Assistance and support services, including healthcare, counselling, and legal aid, have also become accessible to victims of domestic violence, human trafficking, sexual violence, and violence against children.


However, the study's findings indicate that current GBV assistance and protection mechanisms in Lithuania are primarily designed around the needs of Lithuanian nationals. Although survivor-centred assistance is available to refugees, asylum-seekers, beneficiaries of temporary protection, and individuals in refugee-like situations, it is neither tailored nor fully responsive to the specific needs of these groups. Consequently, significant structural barriers limit their capacity to receive comprehensive, quality support.

Legal frameworks remain limited in explicitly addressing the particular vulnerabilities faced by the target group of this study. For instance, criminal law does not currently criminalise 'honour crimes' or female genital mutilation, issues pertinent to the target group. State-guaranteed legal aid in cases of gender-based violence is available but contingent upon an individual's legal status.

The availability and accessibility of comprehensive healthcare services may also be constrained by legal status. Emergency healthcare is universally available, regardless of compulsory health insurance (CHI) status, ensuring immediate medical needs are met. However, access to non-emergency healthcare services is restricted to those covered by CHI. Asylum-seekers and certain beneficiaries of temporary protection and persons in refugee-like situations are excluded from the CHI system and thus are not entitled to comprehensive healthcare services. This exclusion may adversely affect their ability to obtain necessary medical assistance for GBV, particularly concerning rehabilitation and long-term support.

General assistance for victims of crime is accessible to the target group; however, this assistance applies only to crimes committed within the EU, and in some cases outside the EU if legal proceedings occur in Lithuania. Therefore, individuals may be ineligible for support if the incident occurred prior to entry into the EU.

Specialised comprehensive assistance – including psychological, legal, and social counselling and support – within systems addressing domestic violence, sexual violence, children's rights violations, and human trafficking is also available, as entry into these systems does not require proof of legal status. Nonetheless, sociological research reveals gaps in the provision of support tailored to victims' specific needs. Firstly, the



target group faces difficulties accessing comprehensive assistance due to language barriers. Interpretation support is inconsistently available, and accessible information about GBV-related assistance tailored to the target group and provided in multiple languages remains limited. Secondly, limited awareness of various forms of GBV, insufficient understanding of rights, and available assistance in Lithuania contribute to a broader reluctance within the target group to seek help. Thirdly, staff providing GBV-related assistance or other essential services, including healthcare and law enforcement personnel, frequently lack adequate cultural sensitivity and awareness to ensure quality provision of necessary support.


Although some promising practices demonstrate coordination between institutions to overcome barriers and provide survivor-tailored assistance, these efforts remain fragmented and unsystematic. Migrant and refugee-assisting NGO workers often play a key role in detecting GBV cases and providing interpretation services, acting as cultural mediators and intermediaries for verbal and written communication in GBV cases involving the target group. However, these organisations are not integrated into the mainstream GBV protection and assistance system, and their role remains undefined within Lithuania's overall GBV support framework. Furthermore, migrant and refugee-assisting NGOs are frequently underfunded and understaffed, limiting their capacity to meet the demand for assistance.

Currently, the Reception and Integration Agency occasionally addresses gaps in the state's provision of safe housing for GBV survivors within the target group. However, the Agency is not integrated into the existing GBV response mechanism in Lithuania. It manages GBV cases according to an internal protocol and is not mandated to report cases to the police or Specialised Comprehensive Assistance Centres. In practice, this results in refugees, asylum-seekers, beneficiaries of temporary protection, and individuals in refugee-like situations being excluded from the mainstream assistance system. No established referral mechanism exists between the Reception and Integration Agency, the State Border Guard Service, the Migration Department, and GBV-specific, victim-centred assistance or service providers. Consequently, these stakeholders do not function as first-contact institutions that provide victims with information about specialised assistance and do not facilitate safe and confidential referrals.

In light of the study's findings, there is an urgent need to integrate the needs of refugees, asylum-seekers, beneficiaries of temporary protection, and individuals in refugee-like situations into national GBV prevention and response frameworks. This should include ensuring equal access to victim-centred assistance and relevant general services, such as safe housing and comprehensive healthcare, regardless of legal status, and strengthening institutional capacities to deliver culturally competent and linguistically accessible support. Furthermore, awareness-raising campaigns and accessible information about GBV, survivors' rights, and available services should be developed in languages and formats tailored to the diverse backgrounds of the target groups.

7. RECOMMENDATIONS

1. Ratify the Istanbul Convention to enhance systematic and comprehensive preventive and protective mechanisms against GBV, utilising the reporting and recommendations mechanism available under it through the Group of Experts on Action against Violence against Women and Domestic Violence (GREVIO).
2. Criminalise crimes of genital mutilation and ‘honour crimes’ to ensure that all forms of such GBV are covered by criminal law and that assistance is available to victims of these crimes.
3. Revise the Law on Assistance to Victims of Crime to designate the Reception and Integration Agency, the Migration Department, and the State Border Guard Service as first-contact institutions obligated to inform GBV victims about available assistance. Consideration should be given to expanding the system of assistance for victims of crime to encompass crimes committed outside the EU, from which members of the target group continue to suffer consequences.
4. Review the Law on Social Services with a view to ensuring that all children, irrespective of their legal status, have access to social services, including case management, in line with their best interests where such services are required to respond to a GBV incident.
5. Review applicable legislation with a view to ensuring that all asylum seekers, beneficiaries of temporary protection, and persons in refugee like situations who are victims of GBV have access to necessary healthcare services tailored to their needs.
6. Amend relevant strategic documents — including national and municipal action plans for preventing domestic violence or combating trafficking in human beings — to ensure they incorporate gender-sensitive measures that address the needs of GBV victims who are asylum seekers, refugees, beneficiaries of subsidiary protection, beneficiaries of temporary protection, and individuals in refugee-like situations.
7. Develop standard operational procedures for the prevention of and response to gender-based violence providing clear guidance to all personnel and stakeholders working with asylum seekers, refugees, beneficiaries of subsidiary protection, beneficiaries of temporary protection, and persons in refugee-like situations. The Reception and Integration Agency should take the lead in developing these procedures. Ensure that these procedures promote a victim-centred, rights-based, and consistent approach to addressing gender-based violence, while facilitating safe, confidential referrals to specialized services for GBV survivors. Apply the victim-centred approach consistently, grounding it in voluntary and informed consent, while taking into account the cultural, religious and diverse backgrounds of the persons concerned.
8. Adopt standard operating procedures within the Migration Department and the State Border Guard Service to ensure the prompt identification of GBV victims, the provision of clear information about available support services, and safe and confidential referrals.
9. Amend Paragraphs 3 and 4 of the Order on the Procedure for Determining the Vulnerability of Foreigners to broaden the scope of individuals eligible for vulnerability assessment, explicitly including refugees, beneficiaries of subsidiary protection, and beneficiaries of temporary protection. Ensure that this expansion guarantees that all members of the target group who may have been subjected to gender-based violence – whether in their country of origin, during transit, or after arrival in Lithuania – receive an individualised vulnerability assessment and access to appropriate protection services.

- 
10. Amend Paragraph 3 of the Order on the Procedures for Providing State-Guaranteed Legal Aid to Foreigners to extend eligibility for legal aid beyond asylum-related or detention cases. Specifically, the amendment should encompass recognised refugees, beneficiaries of subsidiary protection, and beneficiaries of temporary protection who have undergone a vulnerability assessment and been identified as victims of gender-based violence. The revised regulation should provide for state-guaranteed legal aid for these individuals in any legal proceedings related to their experience of GBV, irrespective of their legal status or the nature of the legal case. To proceed with the revision of the Order on the Procedures for Providing State-Guaranteed Legal Aid to Foreigners, as outlined above, amendments to the Law on State Guaranteed Legal Aid and the Law on the Legal Status of Foreigners may also be necessary.
 11. Amend Article 71(1)(6) of the Law on the Legal Status of Foreigners to extend the right to free interpretation services beyond asylum procedures. This provision should be expanded to include recognised refugees, beneficiaries of subsidiary protection, and beneficiaries of temporary protection who have been identified as victims of GBV, ensuring their effective access to GBV-related support services.
 12. Amend the referral pathways for accessing assistance services for victims of GBV within the mainstream system by involving government institutions such as the Migration Department, the Reception and Integration Agency, and the State Border Guard Service, as well as non-governmental organisations interacting daily with asylum seekers, refugees, beneficiaries of temporary and subsidiary protection, and persons in refugee-like situations. These stakeholders should be well informed about their roles in the GBV protection system, have established procedures to refer victims for specialised assistance, and be allocated sufficient resources to implement those procedures effectively.
 13. Organise and maintain continuous training and professional development programmes for all personnel working with asylum seekers, refugees, beneficiaries of temporary and subsidiary protection, and persons in refugee-like situations – including staff of state institutions, NGOs, GBV assistance providers, Specialised Comprehensive Assistance Centres, Centres for Victims of Crime, and organisations assisting victims of human trafficking. These programmes should focus on recognising gender-based violence within the target group, identifying indicators of experienced or potential GBV cases, and developing cultural competency to ensure sensitive, informed, and effective support.
 14. Raise awareness and widely disseminate information among asylum seekers, refugees, beneficiaries of temporary protection, and persons in refugee-like situations about GBV and the related legal provisions in Lithuania, emphasising that many forms of GBV are criminalised under national law.
 15. Raise awareness and widely disseminate information among the target group regarding available services, referral mechanisms, and key stakeholders providing specialised assistance for GBV victims. These initiatives should not only focus on improving access to information but also address sociocultural barriers, such as stigma, cultural differences, and fear of retaliation. Utilise diverse communication channels – such as social media, targeted awareness campaigns, and printed materials (leaflets, posters, handouts) – coordinating dissemination through relevant institutions, including the Migration Department, Reception and Integration Agency, State Border Guard Service, NGOs, Employment Agency, and educational and healthcare providers. All information should be made available in the languages spoken by the target groups to ensure accessibility and comprehension.
 16. Consult asylum-seekers and refugees regarding the risks they face in relation to GBV and how to effectively mitigate and respond to these. Ensure information provision on rights and services available to survivors of GBV through multiple channels in languages and formats which can be understood. Awareness-raising initiatives on GBV should be designed in child-friendly and accessible formats to ensure that children and persons with physical impairments can understand, engage with, and act on the information provided.



ANNEX I

INFORMATION ON COMPULSORY HEALTH INSURANCE (CHI)


The following groups may be insured under the Compulsory Health Insurance (CHI) according to the Law on Health Insurance and are relevant for the target group:

1. Foreign nationals permanently residing in the Republic of Lithuania;
2. Foreign nationals holding a temporary residence permit in the Republic of Lithuania (except those to whom the Law on Health Insurance must apply under European Union social security regulations), who work or have worked in Lithuania for at least six months and are registered as unemployed with territorial employment services, including minors of their families;
3. Spouses of the persons referred to above, or persons with whom a registered partnership agreement has been concluded, and/or their minor family members holding a temporary residence permit in the Republic of Lithuania;
4. Persons temporarily residing in Lithuania who receive any type of pension under international agreements to which Lithuania is a party and who are covered by Lithuanian health insurance legislation pursuant to these agreements;
5. Unaccompanied minor foreigners;
6. Foreign nationals granted subsidiary protection in Lithuania;
7. Displaced persons – defined as citizens of the Republic of Lithuania, persons of Lithuanian origin, persons entitled to regain Lithuanian citizenship and their family members, or any other persons specified in the Law on Resettlement of Persons to the Republic of Lithuania²²⁶ – who permanently reside abroad but are resettled to Lithuania following a humanitarian crisis; who is resettled to the Republic of Lithuania after being granted the status of a person to be resettled and included in the list of persons to be resettled);
8. Foreigners granted temporary protection in Lithuania who are under the age of 18, or who receive a retirement pension, incapacity for work pension, or social disability pension, including those receiving social security compensation after reaching retirement age, are covered. This also includes individuals recognised as having a loss of 60 per cent or more of their capacity to participate in the labour market (by 31 December 2023, this threshold applies to those with a 60 per cent or greater loss of work capacity), as well as those entitled to old-age or disability pensions under the legislation of the country from which they have been displaced. Additionally, it encompasses persons recognised as disabled according to procedures established by the legislation of Lithuania or that of the country from which temporary protection was granted.

Certain categories of persons are insured by state funds, excluding employed persons who are obliged to pay CHI contributions; these categories are relevant to the target group:

1. Persons receiving any type of pension or social assistance compensation established by Lithuanian law;
2. Unemployed persons registered with territorial employment services and individuals participating in vocational training programmes organised by these services, provided they do not hold employment contracts;
3. Persons of working age who do not meet the required length of service for state social pension insurance to qualify for the state social insurance old-age pension;
4. Persons under the age of 18;

²²⁶ Republic of Lithuania Law on Resettlement of Persons to the Republic of Lithuania, 26 April 2019, No XIII-2077, Vilnius (as amended).

- 
5. Persons deprived of liberty who receive social benefits;
 6. Persons recognised as disabled in accordance with legally established procedures;
 7. Unaccompanied minor foreigners;
 8. Displaced persons (as previously defined);
 9. Persons permanently or temporarily residing in Lithuania who receive any type of pension under international agreements to which Lithuania is a party, and for whom the application of Lithuanian health insurance legislation is stipulated by those agreements;
 10. Foreigners granted temporary protection in Lithuania who are under the age of 18, or who receive a retirement pension, incapacity for work pension, or social disability pension, including those receiving social security compensation after reaching retirement age, are covered. This also includes individuals recognised as having a loss of 60 per cent or more of their capacity to participate in the labour market (by 31 December 2023, this threshold applies to those with a 60 per cent or greater loss of work capacity), as well as those entitled to old-age or disability pensions under the legislation of the country from which they have been displaced. Additionally, it encompasses persons recognised as disabled according to procedures established by the legislation of Lithuania or that of the country from which temporary protection was granted.

ANNEX II

CATALOGUE OF MAINSTREAM SOCIAL SERVICES AND ASSISTANCE

NAME	ASSISTANCE, SERVICES OR PREVENTION	DESCRIPTION	PROVIDER	TARGET GROUP	LEGAL BASIS	CONDITIONS TO APPLY
1. SOCIAL SERVICES						
1.1. PREVENTIVE SOCIAL SERVICES	Prevention (through services)	<p>Preventive social services are provided to all individuals, families, and/or communities who wish to strengthen their ability to manage their own lives, promote participation in society, foster community social activism and inclusion, and enhance knowledge and skills in order to prevent the emergence of potential social problems and risks in the future.</p> <p>Preventive social services include the identification of potential social service recipients, comprehensive family services, community work, information provision, socio-cultural activities, and others.</p>	Municipalities and their social service institutions, non-governmental organisations	<p>1. Citizens of Lithuania;</p> <p>2. Foreigners, including stateless persons, who hold a permanent or temporary residence permit in Lithuania;</p> <p>3. Other persons in cases provided for in Lithuania's international treaties.</p>	<p>Law on Social Services (Art. 5, 8, 14, 17, 21, 35-37); Description of the Procedure for organisation and provision of preventive social services (2022-11-23 order of the Minister of Social Security and Labour No. A1-776); Description of the Procedure for identification, allocation and organisation of a person's or family's need for social services (2006-04-05 order of the Minister of Social Security and Labour No. A1-94); Catalogue of Social Services (2006-04-05 order of the Minister of Social Security and Labour No. A1-93); Methodological Recommendations for Planning of Social Services (2024-11-22 order of the Minister of Social Security and Labour No. A1-795); List of Standards for the Development of Social Services (2014-01-20 order of the Minister of Social Security and Labour No. A1-23); other local legal acts of each municipality.</p>	<p>Applications for social services must be submitted to the municipality or a social service institution. Information about the applicant and their place of residence must be provided.</p> <p>In exceptional cases, where a person or family is experiencing violence or there is a threat to their physical, mental, or emotional safety, the applicant or one of the adult family members, or their foster parent, guardian, caregiver, or provider may apply to the municipality administration of a location other than the person's or family's place of residence.</p> <p>Notifications for the provision of social services may also be submitted by members of the community or other stakeholders, stating the reasons why the applicant or their guardian, carer, or provider is unable to apply themselves.</p> <p>For general and specialised social services, social workers appointed by the municipality assess the applicant's need for social services. This assessment of needs includes evaluation of family members' abilities, capacities,</p>

NAME	ASSISTANCE, SERVICES OR PREVENTION	DESCRIPTION	PROVIDER	TARGET GROUP	LEGAL BASIS	CONDITIONS TO APPLY
1.1.1. Finding potential beneficiaries of social services		Finding, relating to, supporting and/or involving people who are experiencing various difficulties.		Individuals and families.	Catalogue of Social Services (2006-04-05 order of the Minister of Social Security and Labour No. A1-93).	and motivation to address their social problems, maintain societal contact, and the potential to develop or compensate for these through social services.
1.1.2. Comprehensive family services		Services are designed to strengthen the capacity of a person or family experiencing difficulties to cope independently with their problems, thereby preventing potential serious social problems and/or social risks in the future.		Individuals and families.		Decisions on the provision of social services are made by the social worker who has conducted the needs assessment, following procedures established by the municipal authority. Applicants usually complete a form requesting social services. They must provide proof of income and/or property unless such information can be obtained from state registers or systems.
1.1.3. Work with the community		Focuses on developing and reinforcing the capacities, skills, and motivation of individuals, families, groups, and communities to address communal problems and to foster a socially safe environment.		This work engages individuals, families, and communities.		Payment for social services is determined by local municipal acts; however, the Ministry of Social Security and Labour recommends that, in crisis situations – where a person or family has experienced physical or psychological violence or faces a threat to their physical or emotional safety, health, or life – they should be exempt from payment for social care services for the first seven days.
1.1.4. Family conference		Aim to empower and reconcile the family and child or children by identifying support resources within the extended family and/or other persons significant to the family, with the intention of involving the child, the child's family, and the extended family in decision-making processes to improve the family and broader environment. One family conference may last up to 35 hours and may be held no more than twice per calendar year.		Children and their families.		

NAME	ASSISTANCE, SERVICES OR PREVENTION	DESCRIPTION	PROVIDER	TARGET GROUP	LEGAL BASIS	CONDITIONS TO APPLY
1.1.5. Information		Provision of the person/family with the information they need on social assistance.		Individuals and families.		
1.2. GENERAL SOCIAL SERVICES	Services	General social services are provided to persons or families whose capacity to manage their own lives and participate in society can be developed or compensated through specific services delivered without the need for regular specialist support. These services include counselling, mediation and representation, transport organisation, meal provision, supply of essential clothing and footwear, among others.		1. Citizens of Lithuania; 2. Foreigners, including stateless persons who hold permanent or temporary residence permits in Lithuania; 3. Other persons in cases provided for in Lithuania's international treaties.	Law on Social Services (Art. 5, 9, 14, 18-21, 35-37); Description of the Procedure for identification, allocation and organisation of a person's or family's need for social services (2006-04-05 order of the Minister of Social Security and Labour No. A1-94); Description of the procedure for payment for social services (2024-06-11 order of the Minister of Social Security and Labour No. A1-397); Catalogue of Social Services (2006-04-05 order of the Minister of Social Security and Labour No. A1-93); Methodological Recommendations for Planning of Social Services (2024-11-22 order of the Minister of Social Security and Labour No. A1-795); List of Standards for the Development of Social Services (2014-01-20 order of the Minister of Social Security and Labour No. A1-23); other local legal acts of each municipality.	
1.2.1. Consultation		Involves working with the person to analyse their or their family's problems and to identify effective solutions.		Individuals and families.	Catalogue of Social Services (2006-04-05 order of the Minister of Social Security and Labour No. A1-93).	
1.2.2. Mediation and representation		Assist persons or families in resolving various issues – legal, health-related, economic, or household – including managing paperwork, paying taxes, registering with specialists, organising household tasks, accompanying and mediating with institutions, specialists, or other individuals.		Individuals and families.		

NAME	ASSISTANCE, SERVICES OR PREVENTION	DESCRIPTION	PROVIDER	TARGET GROUP	LEGAL BASIS	CONDITIONS TO APPLY
1.2.3. Catering organisation		Supports individuals or families unable to feed themselves due to lack of independence or insufficient income. Meals may be provided via home delivery of hot meals or food products, free meals in canteens, community facilities, or other refreshment venues, and through the organisation and provision of food assistance.		Individuals and families.		
1.2.4. Provision of essential clothing and footwear		Supply of necessary apparel and other items.		Individuals and families.		
1.2.5. Organisation of personal hygiene and care services		Assistance to persons or families unable to maintain hygiene due to insufficient income, including the provision of bath, shower, or laundry services.		Individuals and families.		
1.3. SPECIAL SOCIAL SERVICES		Provided to persons or families whose capacity to care for their own lives and participate in society is insufficient to be developed or compensated through preventive and/or general social services. The aim of special social services is to enhance social inclusion, to develop the social skills and capacities of the person or family to care for themselves, or, with ongoing professional support, to maintain vital functions and/or foster independence, or to provide respite for those caring for the person or family.		Individuals and families.	Law on Social Services (Art. 5, 10, 14, 18-21, 35, 36, 38); Description of the Procedure for identification, allocation and organisation of a person's or family's need for social services (2006-04-05 order of the Minister of Social Security and Labour No. A1-94); Description of the procedure for payment for social services (2024-06-11 order of the Minister of Social Security and Labour No. A1-397); Catalogue of Social Services (2006-04-05 order of the Minister of Social Security and Labour No. A1-93); Methodological Recommendations for Planning of Social Services (2024-11-22 order of the Minister of Social Security and Labour No. A1-795); List of Standards for the Development of Social Services (2014-01-20 order of the Minister of Social Security and Labour No. A1-23); other local legal acts of each municipality.	

NAME	ASSISTANCE, SERVICES OR PREVENTION	DESCRIPTION	PROVIDER	TARGET GROUP	LEGAL BASIS	CONDITIONS TO APPLY
1.3.1. Home help		<p>Provided in the individual's home to assist with managing household, personal, and social life. Up to 10 hours per week.</p> <p>Organising meals (if food is delivered), assisting with food preparation, purchasing and delivering groceries and household items, supporting daily personal hygiene and care, helping with household and domestic chores, escorting to various institutions, organising additional assistance during illness exacerbations or crises, and other necessary services to enable the person to live independently in their own home.</p>		Families at social risk and other persons or families temporarily deprived of their independence due to illness or other reasons.	Catalogue of Social Services (2006-04-05 order of the Minister of Social Security and Labour No. A1-93).	
1.3.2. Developing, maintaining, and restoration of social skills		<p>Services are aimed at strengthening communication abilities (such as help-seeking, adapting to new situations, social participation, and maintaining contact with relatives).</p> <p>Developing, maintaining, or restoration of daily living skills such as money management, shopping, tax payments, planning household tasks, communication, cooperation, decision-making, and meal organisation.</p>		Families and individuals at social risk.		



NAME	ASSISTANCE, SERVICES OR PREVENTION	DESCRIPTION	PROVIDER	TARGET GROUP	LEGAL BASIS	CONDITIONS TO APPLY
1.3.3. Social care for families		<p>Services are directed towards families experiencing difficulties or expecting children, including crises, lack of social skills, addictions, domestic violence, and child neglect.), to empower families to care for their children independently and appropriately, to resolve problems autonomously, to ensure emotional and psychological wellbeing, to maintain close ties with the social environment, and to strengthen the family's capacity to nurture, positively raise, and educate children from birth. Support also helps families create an environment conducive to child development and to avoid social exclusion.</p> <p>Services include developing communication, cooperation, and decision-making skills, motivating positive family life changes, and organising additional assistance tailored to family members' needs, such as psychosocial or intensive crisis intervention, psychological counselling, social day-care for children, financial support, employment assistance, healthcare, education, social housing, and other individualised support measures. Families also receive assistance in caring for young children and children with disabilities, ensuring safety, skill development, and age-appropriate care, as well as the organisation of specialist services (psychologist, dietician, doctor, physiotherapist) according to needs.</p>		Families at social risk and their children.		

NAME	ASSISTANCE, SERVICES OR PREVENTION	DESCRIPTION	PROVIDER	TARGET GROUP	LEGAL BASIS	CONDITIONS TO APPLY
1.3.4. Temporary accommodation		Provision of housing and essential support (personal hygiene, household services) to persons who are homeless, at risk of perpetrating domestic violence, under the influence of alcohol, drugs, psychotropic, or toxic substances, or experiencing a crisis, when their health or life would be threatened without such support. Up to 7 days, extending to 15 days for those at risk of domestic violence.		Adults and families at social risk, and individuals at risk of perpetrating domestic violence.		
1.3.5. Intensive crisis intervention		<p>Training in communication, cooperation, and decision-making skills; provision of assistance; temporary accommodation when the person or family cannot use their own residence due to violence, abuse, identified child protection needs, or other reasons; and other essential services such as personal hygiene and household support. This intervention also includes the provision and/or organisation of other emergency services aimed at helping the person or family overcome the crisis, mitigate its consequences, reduce its impact on their lives, regain independence, restore social ties, and facilitate social integration.</p> <p>Domestic violence survivors, persons at risk of domestic violence, victims of trafficking in human beings, and persons at risk of perpetrating domestic violence cannot be accommodated in the same crisis centre.</p>		Children under temporary care, children at social risk and their families, adults at social risk, families at social risk, individuals at risk of perpetrating domestic violence, and other persons (e.g., survivors of violence, persons at risk of domestic violence, their children) are supported.		



NAME	ASSISTANCE, SERVICES OR PREVENTION	DESCRIPTION	PROVIDER	TARGET GROUP	LEGAL BASIS	CONDITIONS TO APPLY
1.3.6. Psychosocial support		Assistance – social, psychological, and pastoral – provided to individuals in crisis or experiencing severe emotional distress (including serious illness, bereavement, divorce, or psychological, moral, physical, or sexual violence), as well as to their families and relatives.		Extended to children under temporary care and other children within their families together with their legal representatives, families and family members experiencing crises (such as divorce, job loss, or bereavement), children and families who are experiencing or at social risk, adults and their families facing social risks, persons at risk of perpetrating domestic violence, and other individuals and their families.		
1.3.7. Accommodation in shelters (<i>Lith. nakvynės namuose</i>)		Temporary provision of housing, development of communication, cooperation, and decision-making skills, and other essential services (including personal hygiene and household support) to persons without housing or otherwise unable to use their home. The aim is to assist individuals in regaining independence, restoring social ties, and facilitating integration into society. Up to 12 months or longer.		Adults and other persons at social risk.		



NAME	ASSISTANCE, SERVICES OR PREVENTION	DESCRIPTION	PROVIDER	TARGET GROUP	LEGAL BASIS	CONDITIONS TO APPLY
------	------------------------------------	-------------	----------	--------------	-------------	---------------------

2. VICTIMS OF CRIME

Assistance for victims of crime	Assistance	<p>Assistance provided to victims of crime, considering their individual needs, needs resulting from the offence and the nature of the offence.</p> <p>Such assistance includes the provision of information, emotional and/or psychological support, organisation of temporary accommodation, and coordination of accompaniment to other institutions and organisations.</p> <p>If the offence for which the victim seeks assistance occurred outside the territory of the European Union and no criminal proceedings have been initiated in Lithuania concerning that offence, the victim is informed of their rights and of possible steps to initiate criminal proceedings in Lithuania, enabling the service to organise and provide appropriate assistance.</p> <p>Assistance is delivered in a language comprehensible to the victim, through methods and means agreed upon between the victim and the service, taking into account the victim's individual needs for interpreting, translation, and sign language services.</p>	Centres for victims of crimes	<p>1. Assist natural persons who have suffered physical, material, and/or non-material harm as a direct consequence of an offence;</p> <p>2. They also assist family members or close relatives of a natural person who died as a direct result of a criminal offence, where such relatives have suffered physical, material, and/or non-material harm due to the death.</p> <p>The law applies solely to victims of criminal offences committed within the territory of the European Union before, during, and, if necessary, after criminal proceedings. It also applies in all cases where criminal proceedings have not been initiated, or where the criminal offence occurred outside the territory of the European Union but criminal proceedings are conducted in Lithuania, providing assistance to victims while they are within Lithuanian territory.</p> <p>No restrictions apply regarding the citizenship or legal status of a foreigner.</p>	Law on Assistance to Victims of Crime (Art. 1-3, 6-10, 12); Description of the procedure for the provision of accredited assistance to victims of crime (2021-07-19 order of the Minister of Social Security and Labour No. A1-528).	<p>Assistance is provided when:</p> <p>1) A person contacts the service directly;</p> <p>2) The first-contact authority contacts the service with the victim's consent;</p> <p>3) Or, at the victim's request, the service is contacted by another person.</p> <p>If the victim is a child, the service must notify the State Child Rights Protection and Adoption Service.</p>
--	------------	---	-------------------------------	--	--	---



NAME	ASSISTANCE, SERVICES OR PREVENTION	DESCRIPTION	PROVIDER	TARGET GROUP	LEGAL BASIS	CONDITIONS TO APPLY
------	------------------------------------	-------------	----------	--------------	-------------	---------------------

3. SEXUAL VIOLENCE

Assistance for victims of sexual violence	Assistance	Counselling survivors, persons at risk of sexual violence, or other applicants on how to access help, as well as providing emotional support.	<p>A selected NGO is appointed for this purpose for the specified period.</p> <p>2023 and 2025: Klaipėda Social and Psychological Assistance Centre (VšĮ Klaipėdos socialinės ir psichologinės pagalbos centras).</p> <p>2024: Lithuanian Women's Lobby organisation (<i>Lietuvos moterų lobistinė organizacija</i>).</p>	<p>Adult persons who have experienced sexual violence and adults at risk of sexual violence are eligible for assistance.</p> <p>The term "survivor of sexual violence" refers to an adult who has been subjected to sexual violence.</p> <p>The term "person at risk of sexual violence" denotes an adult against whom there is reasonable suspicion that sexual violence may be committed.</p> <p>No restrictions apply regarding the citizenship or legal status of a foreigner.</p>	Regulations governing the organisation of a call for proposals for the provision of methodological support and the coordination of activities aimed at preventing sexual violence apply for the period 2025–2026 (2024-09-18 order of the Minister of Social Security and Labour No. A1-618).	<p>Victims should apply directly to the NGO. Assistance is provided via telephone or live chat.</p> <p>The website prabilk.lt is available for informational purposes.</p>
Health care services for victims of sexual violence	Services	<p>Health care services for victims of sexual violence are delivered by specialists such as obstetricians/ gynaecologists, emergency medicine doctors, paediatricians trained in assisting victims of sexual violence, and other relevant medical professionals depending on the nature of the injury. These may include forensic doctors, medical psychologists, social workers, psychiatrists, child and adolescent psychiatrists, and general nurses. Emergency services are provided if the incident occurred within the previous 72 hours, while non-emergency services are available if the patient presents after this period.</p> <p>The specific services depend on the individual case but typically include the collection of biological samples, blood and/or urine tests to assess alcohol levels and detect drugs or psychoactive substances. Patients undergo examination and testing for related health conditions and pregnancy, including HIV, hepatitis B and C, syphilis, and other sexually transmitted infections; emergency contraception is also offered. These services continue for up to eight months to allow for additional testing.</p>	Five major regional hospitals in Vilnius, Kaunas, Klaipėda, Šiauliai, and Panevėžys provide these services.	<p>Both adult and underage patients who are victims of sexual violence are eligible.</p> <p>No restrictions apply regarding the citizenship or legal status of a foreigner.</p> <p>Emergency services must be provided regardless of whether the individual has compulsory health insurance. Non-emergency services may require payment if the individual lacks health insurance.</p>	Description of the provision of personal health care services to female survivors of possible sexual violence (2021-07-30 order of the Minister of Health No. V-1765).	<p>The services are provided either when the victim applies directly or is transported to the hospital.</p> <p>If the victim initially presents at another hospital, transportation is arranged to one of the five regional hospitals.</p>



NAME	ASSISTANCE, SERVICES OR PREVENTION	DESCRIPTION	PROVIDER	TARGET GROUP	LEGAL BASIS	CONDITIONS TO APPLY
------	------------------------------------	-------------	----------	--------------	-------------	---------------------

4. DOMESTIC VIOLENCE

Specialised comprehensive assistance	Assistance	<p>Specialised assistance includes the provision of information; specialised psychological and legal support; and arrangements for the person to be escorted to other institutions and/or organisations.</p> <p>Information support involves providing details on the provisions of the Law on Protection against Domestic Violence, the rights of persons at risk of domestic violence and of those who have experienced domestic violence, and the possibilities for self-protection against domestic and/or gender-based violence. It also covers the option to contact the general helpline at any time in case of danger, the working practices and duties of law enforcement and other state institutions and bodies, the assistance provided by the centres, and the possibility to receive free emotional support by telephone 24/7 or other assistance tailored to the needs of these individuals.</p> <p>Counselling support encompasses identifying the problems, discussing risk factors, supporting, motivating, and empowering victims or persons at risk to manage domestic and/or gender-based violence, referring them to specialised psychological and/or legal support at the centre, planning and organising assistance based on individual needs, and recognising the need for mediation with other institutions.</p> <p>Mediation assistance involves contacting, discussing the situation with, and cooperating with state and/or municipal authorities and bodies, as well as other institutions and organisations providing assistance, and with individuals, in addressing domestic and/or gender-based violence and representing the victim's interests.</p> <p>Specialists may accompany persons to the police station, the prosecutor's office, the court, other state and/or municipal institutions and bodies, and institutions and organisations providing assistance.</p>	<p>Specialised comprehensive assistance centres cover all 60 municipalities.</p> <p>These centres may be operated by NGOs or by state (municipality) authorities.</p>	<p>Adult victims of domestic violence and those at risk are eligible for assistance.</p> <p>No restrictions apply regarding the citizenship or legal status of foreigners.</p>	<p>Law on Protection from Domestic Violence (Art. 2, 12-14); Description of the procedure for the provision of specialised comprehensive assistance to persons at risk of domestic violence or victims of domestic violence and for the expert assessment of the decision to grant or refrain from granting an emergency barring order (2023-05-09 order of the Minister of Social Security and Labour No. A1-296).</p>	<p>Victims or persons at risk may apply directly to the centres.</p> <p>If the police, prosecutor, healthcare, social services, or an educational institution identify victims of domestic violence and/or persons at risk, they must notify the centres without requiring the person's consent. The centres then contact the person and offer assistance, which is provided upon consent.</p>
---	------------	--	---	--	---	--

NAME	ASSISTANCE, SERVICES OR PREVENTION	DESCRIPTION	PROVIDER	TARGET GROUP	LEGAL BASIS	CONDITIONS TO APPLY
Emergency barring order	Prevention	<p>A 15-day order is issued by a police officer when a report of possible domestic violence is received and, following a risk assessment, a risk of domestic violence is identified. The police officer must decide to grant or refuse protection without delay, and no later than 12 hours after receiving the report.</p> <p>The person posing a risk of domestic violence is obliged, for a period of 15 days, to:</p> <ol style="list-style-type: none"> 1. Temporarily vacate the place of residence if living with the person at risk of domestic violence, regardless of ownership of the dwelling; 2. Not to visit the place of residence of the person at risk of domestic violence, regardless of whether the person lives there with the individual at risk; 3. Not to approach within the distance specified in the order the person exposed to the risk of domestic violence and the adults and/or children living with them; 4. Not to communicate with or seek contact with the person at risk of domestic violence and the adults and/or children residing with them. 	Police	<p>People at risk of domestic violence.</p> <p>No restrictions apply regarding the citizenship or legal status of a foreigner.</p>	<p>Law on Protection from Domestic Violence (Art. 2, 8-9); Criteria for assessing the risk of domestic violence (2023-03-29 order of the Minister of Interior No. 1V-171); Description of the procedure for police response to reports of domestic violence and the adoption, execution, and control of decisions on protection orders against domestic violence (2023-06-20 order of the Commissioner General of the Lithuanian Police No. 5-V-506); Description of the procedure for the provision of specialised comprehensive assistance to persons at risk of domestic violence or victims of domestic violence and for the expert assessment of the decision to grant or refrain from granting an emergency barring order (2023-05-09 order of the Minister of Social Security and Labour No. A1-296).</p>	<p>The person at risk should contact the police (which can be done via the emergency line 112), who will evaluate the situation and may issue an emergency barring order.</p> <p>The police will ask questions according to the criteria for assessing the risk of domestic violence, including observations of the emotional state of the person at risk, the economic situation, and other relevant factors.</p>

NAME	ASSISTANCE, SERVICES OR PREVENTION	DESCRIPTION	PROVIDER	TARGET GROUP	LEGAL BASIS	CONDITIONS TO APPLY
5. HUMAN TRAFFICKING						
Assistance for victims of human trafficking	Assistance	<p>The following forms of assistance may be financed:</p> <ol style="list-style-type: none"> 1. Information and counselling; 2. Provision of essential items, such as clothing, footwear, and personal hygiene products; 3. Temporary accommodation and meals (provided only to officially recognised victims); 4. Psychological support; 5. Legal assistance; 6. Mediation for medical and health care services; 7. Development and maintenance of social skills; 8. Assistance with personal documentation; 9. Mediation for vocational training and general education; 10. Mediation regarding job search and job placement; 11. Assistance with integration into society and the labour market; 12. Mediation and representation of the project target group representative for the provision of other assistance according to individual needs. <p>However, the selected NGO must choose no fewer than five activities from the above list; consequently, not all forms of assistance are guaranteed to be available.</p> <p>Some of these forms are detailed in the Methodology for the Provision of Assistance by the National Association against Human Trafficking. https://drive.google.com/file/d/1-bruhw3Wp252B5Gd0t1D8apnknDTK74/view</p>	<p>The selected NGO for the period is usually an umbrella organisation.</p> <p>For 2024-2025: National Association against Human Trafficking (<i>Nacionalinė asociacija prieš prekybą žmonėmis</i>).</p>	<ol style="list-style-type: none"> 1. Victims of the criminal act of trafficking in human beings who have been recognised as victims by a pre-trial investigation officer, prosecutor's decision, or court ruling, and who have suffered physical, material, and/or non-material damage as a result of this criminal act; 2. Individuals who may have been victims of a criminal act of trafficking in human beings in Lithuania or another state, based on information received (whether self-reported or reported by other natural or legal persons), regardless of whether the person wishes to be formally recognised as a victim or to cooperate with law enforcement. <p>Where possible, assistance should also be extended to the families of the victims (p. 40.3 of the Guidelines).</p> <p>No restrictions apply regarding the citizenship or legal status of a foreigner.</p>	<p>Guidelines for the identification, pre-trial investigation, and inter-agency cooperation regarding victims of trafficking in human beings (2015-12-17 order No. I-327/IV-1015/A1-758); Regulations for the organisation of a call for proposals to establish a project providing social assistance to victims and potential victims of trafficking in human beings for the period 2024–2025 (2023-10-17 order of the Minister of Social Security and Labour No. A1-683).</p>	<p>Assistance is also provided via a free telephone helpline available 24/7.</p> <p>Individuals may apply to NGOs listed on the website of the Ministry of Social Security and Labour.</p> <p>When identifying a victim of trafficking in human beings, an employee of the responsible institution, body, or organisation completes the Identification Card. Its purpose is to summarise the characteristics of the individual to assist an official in properly identifying a victim. The information is transferred to the assistance provider with the victim's consent.</p>

NAME	ASSISTANCE, SERVICES OR PREVENTION	DESCRIPTION	PROVIDER	TARGET GROUP	LEGAL BASIS	CONDITIONS TO APPLY
------	------------------------------------	-------------	----------	--------------	-------------	---------------------

6. PROTECTION OF CHILD RIGHTS

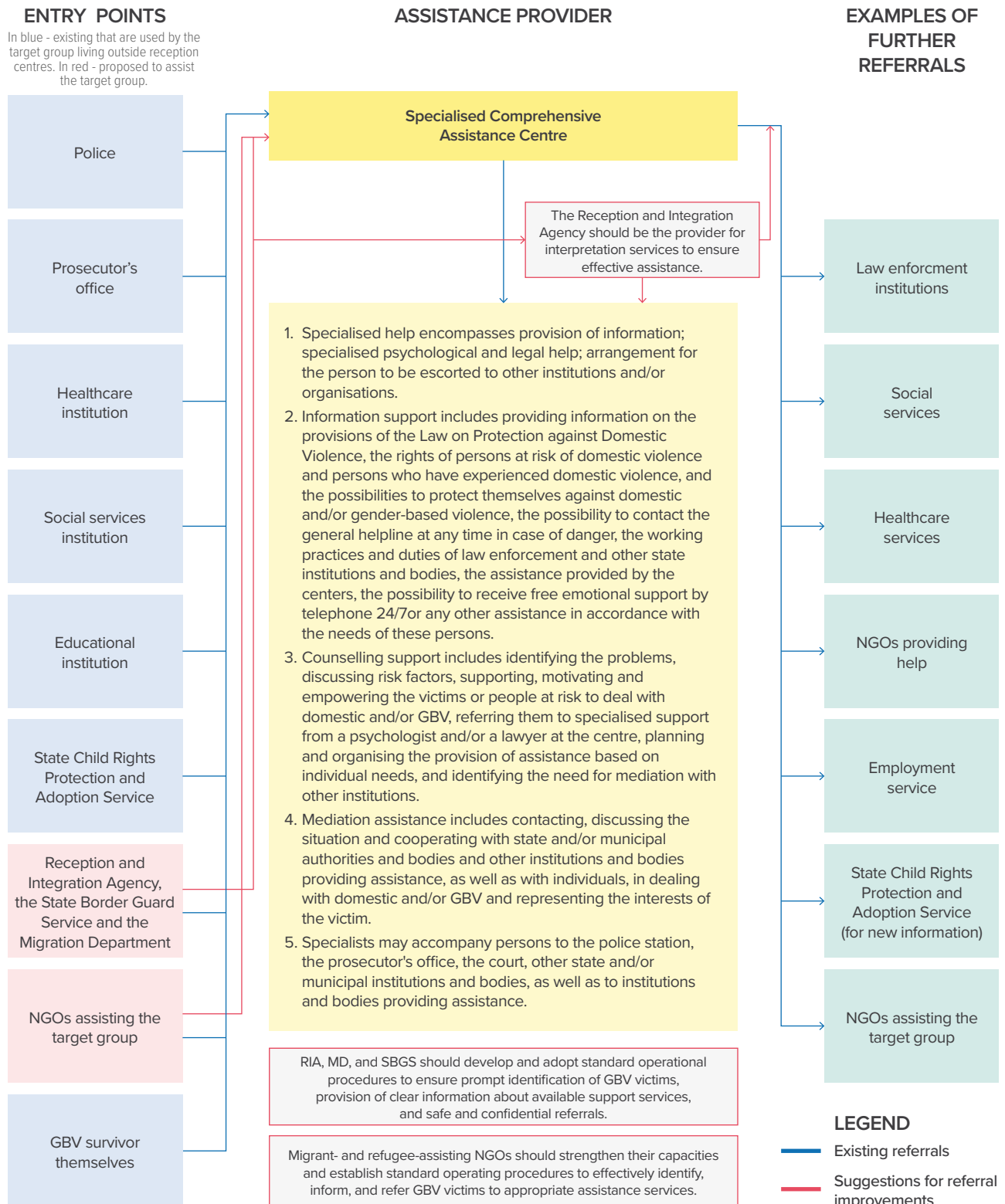
Case management	Services (prevention of further rights violations)	<p>Case management constitutes comprehensive assistance to the child and their legal representatives, coordinated by a case manager, aimed at helping them overcome social difficulties. Successful resolution of these difficulties is intended to prevent possible violations of the child's rights and enable independent safeguarding of the child's rights and legitimate interests.</p> <p>The services proposed and provided under case management depend on the needs of the child and their legal representative, as well as the availability of services within the specific municipality.</p> <p>In cases of sexual violence, the assistance plan must include recommendations for the provision of long-term comprehensive support to the child who has potentially experienced sexual violence.</p>	<p>Case management is usually provided by a social services institution within each municipality.</p> <p>Priority is expected to be given to NGOs.</p>	<p>Families and children who are either at risk of violence or in situations where violations of a child's rights have been identified.</p> <p>No restrictions apply regarding the citizenship or legal status of a foreigner.</p>	<p>Law on Fundamentals of Protection of the Rights of the Child (Art. 2, 3, 20, 22, 29, 36-41); Description of case management (2018-03-29 order of the Minister of Social Security and Labour No. A1-141).</p>	<p>Case management is initiated by the State Child Rights Protection and Adoption Service. The Service notifies a social service institution of the need for case management.</p> <p>The case management process may also be initiated at the request of the child's legal representatives and/or institutions and organisations responsible for providing assistance to children and/or families. In such cases, the State Child Rights Protection and Adoption Service does not participate.</p> <p>When a case is referred, the case manager evaluates the situation of the child, gathers the necessary information (from educational, health, law enforcement, social services institutions, local communities, and NGOs), and organises a case management meeting.</p> <p>Attendance of the meeting for case management: State Child Rights Protection and Adoption Service and social workers. Other possible attendees include specialists from care centres, health care professionals, representatives of educational institutions, police officers, and other experts who can provide relevant information about the child and/or family.</p> <p>The case manager drafts an intervention plan, which is then implemented and monitored. The objective is to conclude case management once the family is capable of independently safeguarding the child's rights and legitimate interests and adequately meeting the child's needs without external support.</p> <p>In cases where legal representatives do not cooperate, the State Child Rights Protection and Adoption Service may take measures to protect the interests of the child, such as placing the child in a safe environment.</p>
------------------------	--	--	--	--	---	--

NAME	ASSISTANCE, SERVICES OR PREVENTION	DESCRIPTION	PROVIDER	TARGET GROUP	LEGAL BASIS	CONDITIONS TO APPLY
Specialised assistance for children who may have been sexually abused	Assistance	<p>The State Child Rights Protection and Adoption Service provides the following forms of assistance:</p> <ol style="list-style-type: none"> 1. Social services: information, advice, mediation or representation, catering, and accommodation, provided alongside other services listed below; 2. Personal health services: expert services delivered by the State Forensic Medical Service; 3. Psychological support services: psychological assessment of the child; psychological counselling for the child and their legal representatives; psychological assistance during the pre-trial investigation; 4. Ensuring a child-friendly physical environment for interviewing the child during the pre-trial investigation; 5. Preparing the child for the interview during the pre-trial investigation and/or for examination by experts of the State Forensic Medical Service; 6. Emotional support for the child and their legal representatives; 7. Crisis intervention for the child and their legal representatives. <p>These specialised services typically conclude with recommendations for long-term support, including psychological, social, medical, and legal interventions and services for the child, their legal representatives, and, where appropriate, other family members, as well as coping strategies. Long-term services should subsequently be provided through case management or other local mechanisms within municipalities.</p>	State Child Rights Protection and Adoption Service	<p>Children who may have been sexually abused.</p> <p>No restrictions apply regarding the citizenship or legal status of a foreigner.</p>	Law on Fundamentals of Protection of the Rights of the Child (Art. 2, 3, 20, 22, 29, 36-366); Description of the assessment of need and provision of specialised assistance to children who may have been sexually abused (2024-10-31 order of the Minister of Social Security and Labour No. A1-732).	<p>Assistance may be provided when a child is referred to the Service. Referrals may arise through various channels, including general reports of child rights violations or referrals from law enforcement and healthcare institutions.</p> <p>Upon receipt of a report indicating possible sexual violence against a child, the Service evaluates the child's situation and determines the necessity for specialised assistance.</p> <p>If specialised assistance is deemed necessary, the Service assesses whether it must be provided immediately or within a maximum period of 60 days. If immediate assistance is required, services are provided no later than the next working day.</p> <p>Assistance can be delivered on the Service's premises or organised as a mobile service near the child's place of residence. Counselling services are provided directly at the Service by professionals such as psychologists, social workers, and lawyers; after the child leaves the Service, counselling may continue remotely via telephone or other communication methods.</p>

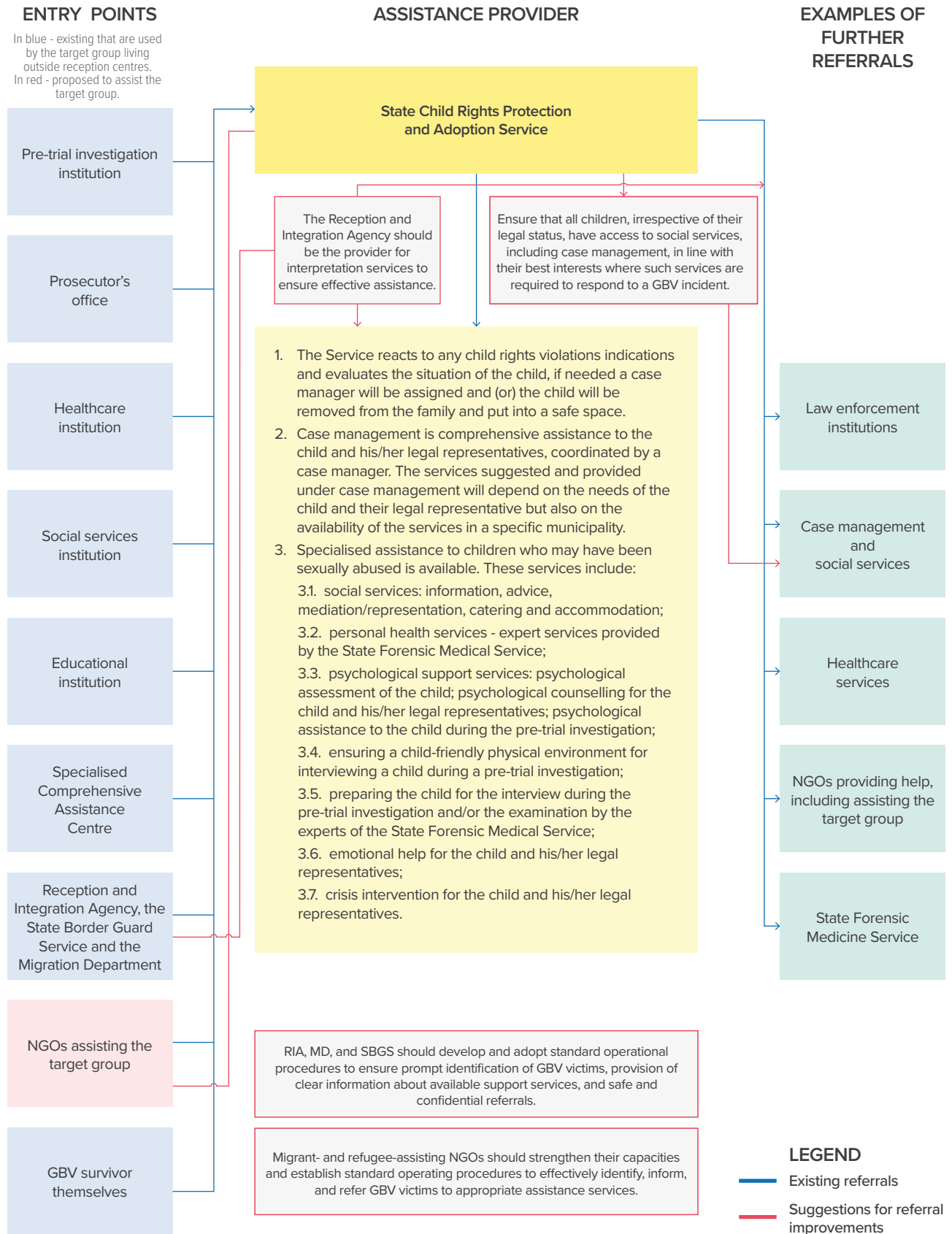
ANNEX III

INFOGRAPHICS FOR GBV REFERRAL PATHWAYS

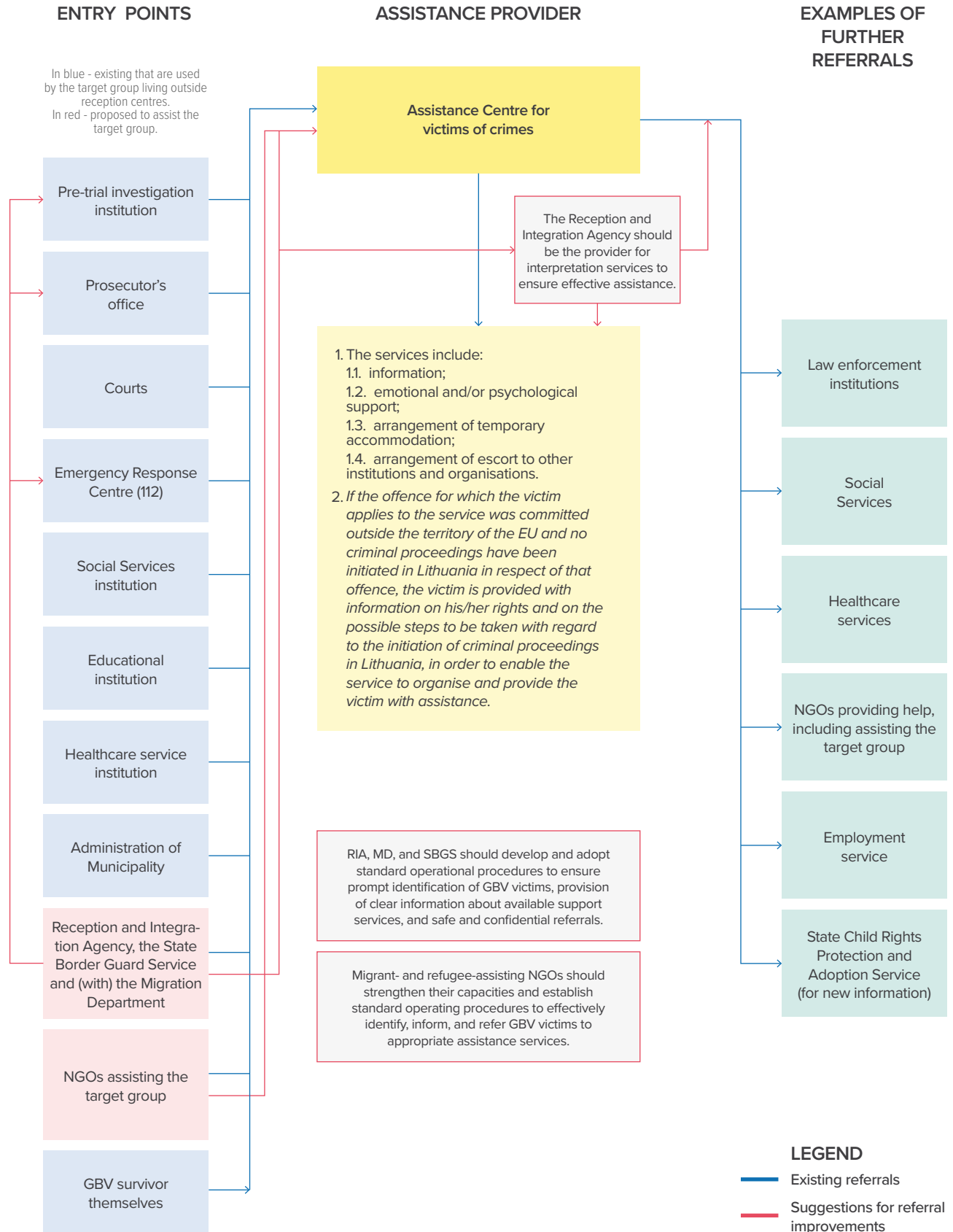
DOMESTIC VIOLENCE



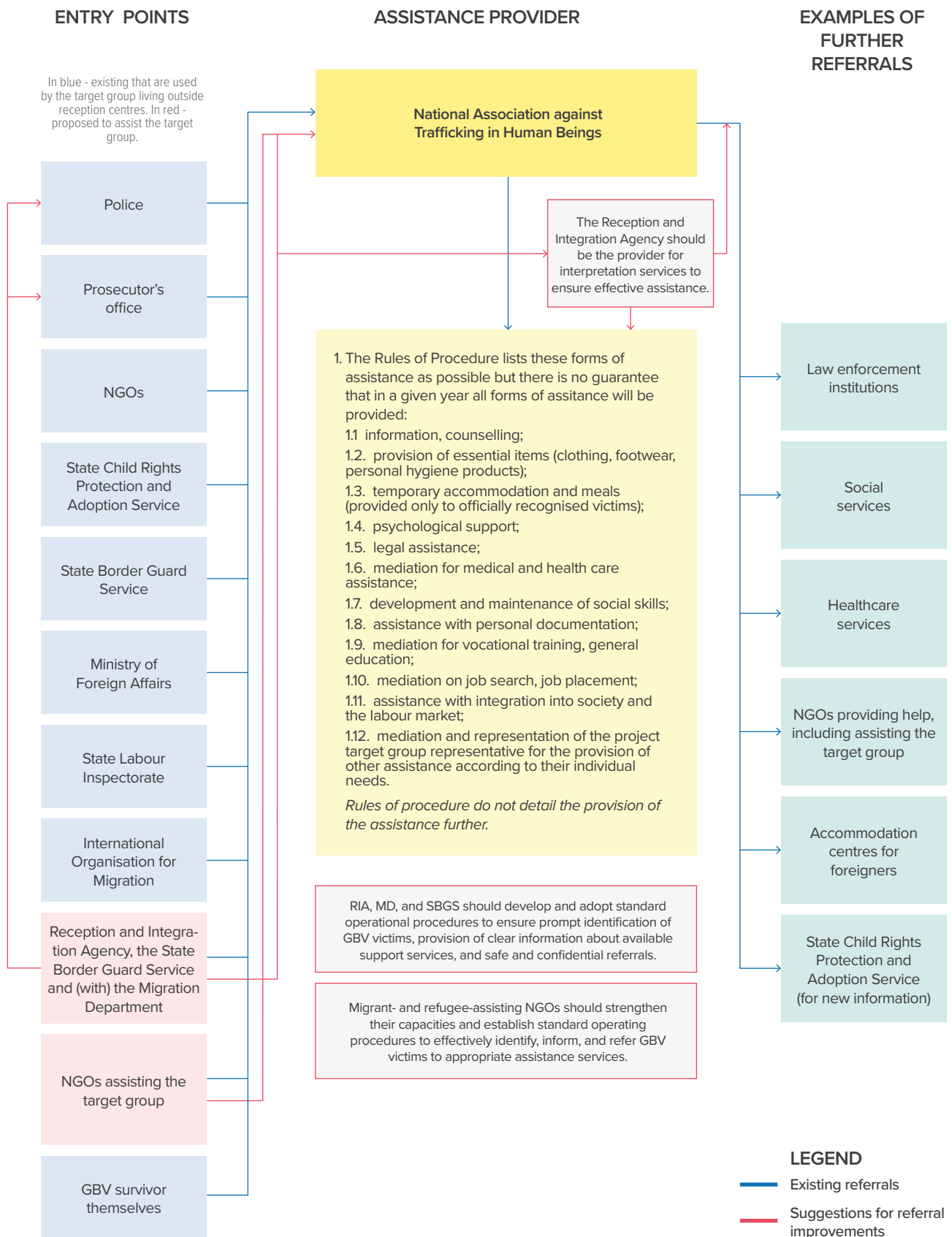
CHILD PROTECTION



CRIMES



HUMAN TRAFFICKING





ANNEX IV

GBV SPECIALIZED SERVICE ASSISTANCE DIRECTORY FOR STANDARD OPERATIONAL PROCEDURES

INTRODUCTION

This document presents the GBV Specialised Service Assistance Directory, developed through the systematic compilation and validation of available services across sectors. It was prepared in response to a request to develop Standard Operating Procedures (SOPs) for GBV prevention and response. The directory maps the availability, scope, and coverage of specialised GBV services and serves as a foundational resource to support the development of effective SOPs and referral pathways.

As such, this directory constitutes a critical building block for SOP development. It is recommended that this document be used as a reference point in multi-sectoral stakeholder consultations to draft or revise SOPs tailored to the local context at national and municipal levels.

When using the document, it is important to note that in Lithuania, existing GBV response protocols are complex and not uniformly coordinated, even for citizens. The same challenges apply to GBV survivors from the target group. For the most part, necessary services are available; however, a thorough assessment of the GBV survivor's needs and situation must first be conducted to ensure appropriate referral to the relevant service provider.

While generally there are no legal obstacles to accessing specialised GBV services for refugees, asylum seekers, temporary protection beneficiaries, and people in refugee-like situations, *practical barriers* remain. Language and cultural differences have been identified as the primary practical barriers to receiving necessary support, alongside a lack of awareness about the GBV prevention and response system in Lithuania.

When referring individuals to specialised GBV services, it is important to note that interpretation services are currently unavailable for survivors. This limitation may restrict access for individuals who speak less commonly used languages in Lithuania, such as Arabic, French, Farsi, Dari, or Urdu. Furthermore, cultural considerations play a significant role. Experiences of gender-based violence, particularly sexual violence, are often shaped by stigma and silence within certain communities, which may affect survivors' willingness to disclose abuse or seek support in unfamiliar environments. In the absence of trauma-informed and culturally responsive approaches, survivors may not feel safe or understood. Currently, professionals' experience in addressing the specific needs of refugees varies across services.

It is also important to note that many individuals within the target group lack awareness of the GBV response and prevention system in Lithuania, possess insufficient information about specialised services available, or do not understand how their legal status influences their access. This lack of knowledge can hinder their ability to seek help, comprehend their rights, or navigate the support system.

GBV SPECIALISED SERVICE PROVIDERS

The following sections explain the role, function, and services provided by each GBV specialised service provider within the referral pathway of the setting.

1. EMERGENCY SERVICES

Assistance via the 112 number is available 24/7 in Lithuanian, English, Russian, and Polish.

When calling 112, four emergency services may respond depending on the nature of the incident: the police, fire and rescue service, emergency medical service, and environmental protection service.

Calls to 112 are free of charge, even from phones without a SIM card. If speaking is not possible due to disability or other reasons, a text message containing the caller's name, address, and a brief description of the incident can be sent.

The 112 app can be downloaded on a phone to communicate with emergency services using Lithuanian sign language. Sign language interpreters are available 24/7.

2. GBV HELPLINES

The following helplines offer confidential support, information, and referrals for survivors of GBV. Trained staff provide assistance and can guide callers to relevant medical, legal, psychological, and protection services.

- **Domestic violence:** +370 700 55516 | www.specializuotospagalboscentras.lt
- **Sexual violence:** +370 661 69 990 | www.prabilk.lt
- **Child rights:** +370 800 10800 | www.vaikoteises.lrv.lt
- **Human trafficking:** +370 800 91119 | www.stop-trafficking.lt
- **Victims of crimes:** socmins.lrv.lt

3. HEALTH CARE FOR GBV SURVIVORS

Everyone residing in Lithuania is entitled to medical care. The type and scope of health care services available depend on an individual's current legal status in the country.

ASYLUM-SEEKERS

Asylum seekers, including children, in Lithuania are entitled to a limited range of medical and dental care services provided free of charge: emergency medical care. A doctor's referral is not required to access emergency medical care. Medical treatment is also provided for conditions that could develop into emergencies if left untreated. The assessment of whether a condition may become an emergency is made by a family doctor.

If medical needs fall outside the scope of free emergency care, additional services may be accessed at the individual's own expense. These services can be obtained through public or private medical institutions.

Unaccompanied and separated children are entitled to the same medical and dental care as other children and young people in Lithuania, and medical care is usually free of charge.



REFUGEES

Refugees issued with a permanent residence permit have the same right to health care as all other residents of Lithuania.

Free medical care is available to all residents insured under the Compulsory Health Insurance (CHI/PSD) system, regardless of citizenship. Individuals holding a permanent residence permit are included in the CHI system from the date their permit becomes valid and are required to pay monthly CHI contributions, similarly to Lithuanian citizens. Certain categories, such as children, are covered by state-supported CHI and can access free medical care in Lithuania on the same terms as other insured individuals.

Health care services in Lithuania are accessible through both public and private clinics and hospitals.

TEMPORARY PROTECTION BENEFICIARIES

Refugees from Ukraine who have registered for temporary protection in Lithuania are eligible for a limited range of medical care services provided free of charge, including emergency medical and dental care. A doctor's referral is not required to access emergency medical care. Medical treatment is also provided for conditions that could develop into emergencies if left untreated. The assessment of whether a condition may become an emergency is made by a family doctor.

Following the issuance of a residence permit, beneficiaries of temporary protection may be insured under the Compulsory Health Insurance (CHI) system if employed in Lithuania. CHI provides access to a broad spectrum of healthcare services, including primary and specialist medical care, hospital treatment, and reimbursable medications. Children (under 18 years), old-age pensioners, and persons with disabilities who are temporary protection beneficiaries are covered by state-supported CHI and can access free medical care on the same terms as other insured individuals.

Temporary protection beneficiaries not insured under the CHI system (i.e., unemployed persons, students, or those not covered by the state) are not entitled to full healthcare coverage. However, they may access emergency medical care free of charge and may seek additional medical services at their own expense.

HEALTH CARE FOR VICTIMS OF SEXUAL VIOLENCE

Health care services for victims of sexual violence are available 24/7. Both emergency services (for patients seeking care within 72 hours of the incident) and non-emergency services (for those presenting after 72 hours) are provided. These services are offered at five major regional hospitals:

- **Public Institution Vilnius University Hospital Santaros Klinikos** (Santariškių g. 2 (Building B), LT-08661 Vilnius)
- **Hospital of the Lithuanian University of Health Sciences Kauno Klinikos** (Eivenių g. 2, LT-50161 Kaunas)
- **Public Institution Klaipėda University Hospital** (Liepojos g. 41, LT-92288 Klaipėda)
- **Public Institution Republican Šiauliai Hospital** (V. Kudirkos g. 99, LT-76231 Šiauliai)
- **Public Institution Republican Panevėžys Hospital** (Smėlynės g. 25, LT-35144 Panevėžys).

If initial care is provided at another health facility, patients are referred and transported to one of these hospitals for access to specialised services.

4. SPECIALISED SUPPORT FOR SURVIVORS OF DIFFERENT FORMS OF GBV

In Lithuania, specialised comprehensive assistance is available for victims of crimes, survivors of domestic violence, survivors of sexual crimes, victims of trafficking in human beings, and children subjected to any violation of child rights. Survivors of GBV falling into any of these categories should be referred for specialised assistance.

4.1 VICTIMS OF CRIMES

In Lithuania, victims of crime, including criminalised forms of gender-based violence, are entitled to receive assistance. The established system currently provides support to victims of crimes committed within the European Union and, in certain cases, outside the European Union, provided that legal proceedings are ongoing in Lithuania. This assistance may encompass information about legal procedures as well as emotional or psychological support. Support is available before, during, and after criminal proceedings, even if the individual elects not to file a formal complaint. Victims of any crime may choose to contact any of the eighteen available centres that provide assistance. These centres offer support without legal restrictions to refugees, asylum seekers, beneficiaries of temporary protection, and persons in refugee-like situations.

Support is provided by Assistance Centres for victims of crimes:

- These centres provide information about the rights of victims and the institutions responsible for safeguarding those rights, including the State Child Rights Protection and Adoption Service when the survivor is a child.
- They also offer information about institutions and organisations providing social services.
- Provides or arranges emotional and/or psychological support.
- Organises temporary safe accommodation for victims in need, available immediately at any time of day.
- Informs victims about available health care services.
- Coordinates accompaniment of victims to other institutions and organisations upon request.
- Advises victims who directly contact the service on how to file complaints against perpetrators during criminal proceedings, including providing contact details of competent institutions.
- Provides information about competent institutions involved in criminal proceedings and the assistance they offer.

The Centres for Victims of Crimes provide assistance both in person and remotely. Contact information for the Centres for Victims of Crimes can be found https://socmin.lrv.lt/public/canonical/1744001621/4623/2025%2004%2007_SADM_PT%20sarasas.pdf.

4.2 DOMESTIC VIOLENCE

If a person experiences domestic violence or is at risk of such violence, they may seek help from the Specialised Comprehensive Assistance Centres (SCAC). These Centres offer counselling, legal assistance, and referrals to other services, such as healthcare and social support. The police are mandated to intervene in domestic violence cases, conduct risk assessments, and may issue emergency barring orders for 15 days, requiring perpetrators to leave the residence and restricting contact with the victim. Police responding to domestic violence incidents automatically transmit relevant data to the Specialized Comprehensive Assistance Centres; alternatively, victims may contact these Centres independently. The Centres provide assistance without legal restrictions to refugees, asylum seekers, beneficiaries of temporary protection, and persons in refugee-like situations.

**Support provided by SCAC to victims of domestic violence:**

- During the initial meeting or call, the SCAC counsellor listens, assesses the situation, and suggests possible solutions and interventions.
- Subsequent conversations provide comprehensive information necessary to address domestic violence issues.
- The counsellor collaborates with the survivor to identify their needs, assess risks, and develop an individualised support and action plan.
- If psychological or legal support is required, free consultations are scheduled accordingly.
- Assistance with accessing other institutions (e.g., shelters, healthcare, social services) is facilitated by SCAC.
- The SCAC counsellor provides continuous support and guidance throughout the implementation of the action plan.

Specialised Comprehensive Assistance Centres offer free and confidential support throughout Lithuania and are available in every municipality. They can be reached:

- Online: live consultation (chat) <https://www.specializuotospagalboscentras.lt>, available Mondays to Fridays, 08:00–17:00.
- Tel.: +370 700 55516, available Mondays to Fridays, 08:00–17:00.
- In person: addresses of SCAC are available <https://socmin.lrv.lt/lt/veiklos-sritys/seima-ir-vaikai/seimos-politika/smurto-artimoje-aplinkoje-prevencija/nukentejusiems/>.

4.3 ASSISTANCE FOR VICTIMS OF SEXUAL VIOLENCE

Medical care and support are available to persons who have experienced sexual violence in Lithuania. Specialised medical care is provided 24/7 in five major regional hospitals (see above under Health Care Services). Emergency care is accessible regardless of health insurance status, whereas non-emergency care may require payment if insurance is absent. The National Information Centre on Sexual Violence offers counselling, emotional support, and legal consultations via telephone, email, or online chat. This support is accessible to both survivors and those at risk, irrespective of status, including refugees, asylum-seekers, beneficiaries of temporary protection, and persons in refugee-like situations.

Support provided by the National Information Centre on Sexual Violence to victims of sexual violence:

- Emotional support: active listening, empathy, and guidance to help individuals manage crisis situations.
- Information: an overview of available solutions, legal procedures, and access to free psychological, legal, and medical support services.
- Referral and mediation: connection to relevant organisations and institutions providing assistance to survivors of sexual violence.

The National Information Centre on Sexual Violence offers free and confidential assistance. It can be reached:

- Online: live consultation (chat) at <https://prabilk.lt> and by phone at available Mondays to Fridays, 13:00:00–17:00.
- Tel.: +370 661 69990, available Mondays to Fridays, 13:00–17:00.
- Email: pagalba@prabilk.lt

4.4 ASSISTANCE FOR VICTIMS OF HUMAN TRAFFICKING

Victims of human trafficking can obtain assistance from non-governmental organisations implementing government-funded programmes. Support is provided regardless of whether individuals are formally recognised as victims in criminal proceedings. Services are typically offered for up to twelve months or until the conclusion of criminal proceedings. Referrals to these services may originate from various sources, including law enforcement agencies, border guards, labour inspectors, and international organisations. These



organisations collaborate with other service providers across Lithuania to deliver comprehensive assistance, including information, counselling, essential items, and legal and psychological support. Assistance is provided without any legal limitations to refugees, asylum-seekers, beneficiaries of temporary protection, and persons in refugee-like situations.

National Association against Trafficking in Persons (*Nacionalinė asociacija prieš prekybą žmonėmis*), an umbrella NGO uniting organisations providing assistance to victims of trafficking, serves as the focal point for initial contact when identifying and supporting potential victims. The association operates a national helpline where victims can receive support in Lithuanian, English, and Russian. The helpline operates twenty-four hours a day. The organisation coordinates with other NGOs located in Vilnius, Kaunas, Klaipėda, Šiauliai, Panevėžys, Marijampolė, and Tauragė.

The National Association against Trafficking in Persons offers free and confidential assistance. It can be reached at

- Tel.: 0 800 91 119 / +370 616 91 119, available 24/7.

Contacts of NGOs providing assistance can be found <https://socmin.lrv.lt/lt/veiklos-sritys/socialine-integracija/pagalba-prekybos-zmonemis-nusikaltimu-aukoms/>.

4.5 CHILD RIGHTS


The State Child Rights Protection and Adoption Service (hereafter referred to as the Service) manages reports concerning violations of child rights. Any person who becomes aware of a child experiencing violence or rights violations is obligated to report this to the police and/or the Service. The Service evaluates the child's circumstances and may implement measures to ensure their immediate safety. A family may be assigned a case manager responsible for coordinating services and devising an assistance plan encompassing social, psychological, and healthcare support. Specialised assistance for child victims of sexual violence is available, predominantly in Vilnius, with some services offered through mobile units. Although infrequent, child marriage remains legally permissible in Lithuania through court-approved exceptions. Children facing forced marriage or other forms of gender-based violence can access support through the child protection system. The Service provides assistance to all children within Lithuania's territory, including refugees, asylum-seekers, beneficiaries of temporary protection, and persons in refugee-like situations.

Reporting a Possible Violation of Children's Rights:

- If a child is in immediate danger, experiencing violence, or at risk to their health or life, emergency services should be contacted immediately by calling 112.
- For non-urgent cases, there are several ways to report a possible violation of children's rights:
 - Tel.: toll-free number 0 800 10 800 (available Mondays–Thursdays from 08:00 to 19:00, and Fridays from 08:00 to 18:00);
 - Online: live consultation (chat) on the <https://vaikoteises.lrv.lt>;
 - Online: filling out the report form accessible via the banner “Report a Possible Violation of Children's Rights” on the <https://vaikoteises.lrv.lt>;
 - In person: calling or visiting the territorial office of the State Child Rights Protection and Adoption Service corresponding to the individual's place of residence.
- Child protection authorities respond within six hours to reports of possible violence, or within three business days for all other concerns.

4.6 SOCIAL SERVICES

Social services play a crucial role for survivors of gender-based violence, particularly when specialised services are unavailable or provided only in response to emergencies. In many instances, survivors may be referred to social services for long-term support by other providers of assistance. Although social services are not specifically designed for survivors of gender-based violence, their broad remit encompasses relevant



forms of support, including temporary accommodation and social counselling for access to social benefits. Members of the target group are entitled to receive social services; however, the availability of these services depends on: 1) whether the individual holds a permanent or temporary residence permit in the Republic of Lithuania; 2) social services offered by the municipalities; 3) social services provided at reception centres to those without a residence permit. Members of the target group without permanent or temporary residence permits, including all asylum-seekers, will rely on the limited services provided at reception centres, unless a municipality elects to provide such services at its own discretion. Since municipalities are responsible for social service provision, geographical disparities in access are likely to occur.

Information about social services can be found on the websites of the respective municipalities. For the largest cities:

- Vilnius – www.vilnius.lt
- Kaunas – www.kaunas.lt
- Klaipėda – www.klaipeda.lt
- Šiauliai – www.siauliai.lt
- Panevėžys – www.panevezys.lt



UNHCR
The UN Refugee Agency

