

# arrow

*for change*

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## Violence against Women and Girls and Its Consequences on Sexual and Reproductive Health in Latin America and the Caribbean

championing  
women's sexual and  
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### Notes and References

<sup>1</sup> UNDP. "About Latin America and the Caribbean". Accessed September 22, 2015. <http://www.latinamerica.undp.org/content/rblac/en/home/regioninfo.html>

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The information was from the "Global Study on Homicide 2013" United Nations Office on Drugs and Crime which examined murder statistics from all over the world. The largest share of death resulting from intentional homicides was registered in the Americas (36%). The document explains that the increasing rates of homicides in Central America and the Caribbean are related to drug trafficking, gang violence and high levels of organised crime.

Gender equality and the ability to fully exercise the human rights of women and girls, including the power to make decisions regarding their own bodies and live a life free of violence, is still a pending debt for most women and girls in the Latin American and the Caribbean region.

Latin America and the Caribbean is the most unequal region in the world; ten of the 15 most unequal countries are part of this region<sup>1</sup> and it concentrates seven of 14 most violent countries.<sup>2</sup> The economic, political and social inequalities, as well as certain common factors across the region, such as poverty, marginalisation, generalised violence, displacement, armed conflicts, organised crime, drug and human trafficking, and high levels of impunity, reinforce gender inequalities and increase women's and girls' vulnerability to violence. In this context, the most vulnerable groups are those women who face multiple forms of discrimination on the basis of

their race, age, ethnic background, sexual orientation and gender identity, HIV status, and socio economic status, among others.

In the region, 32 of the 34 countries of the Organization of American States (OAS) have ratified the Inter-American Convention on the Prevention, Punishment and Eradication of Violence against Women or "Convention of Belém do Pará" (1994). However, only very few countries have included in their national legislations the sanction of all forms of gender-based violence established by this Convention. In those cases where legislation has advanced, it is not properly implemented and enforced.

Violence against women is an undeniable problem in the region. However, the lack of national statistics in most of the countries makes it difficult to know the exact number. According to the available data, increasing rates of all forms of gender-based violence

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have been registered in the region, particularly femicides. More than half of 25 countries with high femicide rates are in the Caribbean, Central America and South America.<sup>3</sup>

In 2011, 647 women were killed in El Salvador and 375 in Guatemala; femicide is considered to be the second leading cause of death of women of reproductive age in Honduras.<sup>4</sup> In Argentina, a woman is murdered every 30 minutes;<sup>5</sup> in Colombia, one woman is killed every two days;<sup>6</sup> and in Mexico, 529 women were murdered between January 2011 and June 2012.<sup>7</sup>

During the last few years, some countries have incorporated femicide in their criminal codes. However, the number of cases has increased, and impunity continues to occur. According to the document developed in 2013 by the Committee of NGOs from Latin America and the Caribbean on the CSW (CoNGO LAC CSW), which included the participation of more than 90 civil society organisations from the region, "Femicide prevention efforts across the region are often non-existent or ineffective. Public services in charge of providing orientation and information to victims or potential victims of VAWG often do not reach women, are few in number, and women resist resorting to such services for help."<sup>8</sup> The document also points out the weaknesses of the justice system, including the inadequate application and enforcement of protective orders, fewer cases of compulsory removal of the perpetrator from the home, slow investigations and trials and reductions in preventive prison sentences.<sup>9</sup> In Nicaragua, only a quarter of perpetrators in femicide cases are currently detained,<sup>10</sup> and in Guatemala, only 2% of cases involving the violent deaths of women have been resolved.<sup>11</sup>

Sexual violence is also a central and pervasive problem for the region. On a typical day in Latin America, 460 people are victims of sexual violence, usually women.<sup>12</sup> According to PAHO (2013), in all 12 Latin American and the Caribbean countries studied, the percentage of women who reported sexual violence ranged

from 10.3% in Paraguay (2008) to 27.2% in Haiti (2005/6).

The regional document "20 Years of Beijing Platform of Action: Strategic Goals and Areas of Concern,"<sup>13</sup> elaborated in 2015 by CoNGO LAC CSW, calls attention to the use of rape as a weapon of war, in armed conflict contexts, particularly against indigenous women. In Guatemala, 88.7% of female rapes were Mayan; in Peru, 75% were Quechua-speaking women. The document indicates that during the 20th century, armed conflicts took place in Colombia, El Salvador, Guatemala, Honduras and Nicaragua. Sexual violence also increases during internal displacement and contexts of humanitarian crises and natural disasters. In Colombia, women represent 75% of the displaced population as result of the internal armed conflict, and in Haiti, sexual violence cases increased after the devastating earthquake in 2010, particularly in refugee camps where women were, and still are, most at risk.<sup>14</sup> Gender-based violence must also be considered within the framework of post-conflict resolutions; the participation of women has been minimal in El Salvador, Honduras and now in Colombia. In Guatemala and Peru, legal entities to protect women were created.

Adolescent women and girls in the region are vulnerable to various forms of violence, including sexual abuse within the family, rape, early marriage, and human trafficking, among others. Peru is the country with the highest rate of sexual violence in South America, where 8 out of 10 victims are minors.<sup>15</sup> In Colombia, 11,333 cases of sexual violence against children and adolescents under 17 occurred between January and September 2013; of the total cases, 83% were girls.<sup>16</sup> In Haiti, even before the earthquake, 40% of 500 rape cases were among girls under the age of 18.<sup>17</sup>

Early forced marriage is a common practice in the region. Nearly 1 in 3 girls across Latin America are married off before the age of 18, and according to UNICEF (2014), it is the only

region of the world where child marriage has not declined. In Guatemala, 54% of the female population above 12 years old lives in union. In Guyana, marriages are frequently arranged for girls at the age of 12.<sup>19</sup>

The consequences of gender-based violence on the sexual and reproductive health and rights (SRHR) of women and girls are extensive and include: unwanted pregnancy, HIV and other STIs, genital lesions, unsafe abortions, and gynaecological problems, among others. Girls who are victims of early and forced marriage often have limited or no access to SRH services, including contraceptive methods, and information; they are more vulnerable to intimate partner violence and at greater risk of HIV infection. Sexual violence, as well as early marriage, may lead to early unwanted pregnancy, with consequences such as unsafe abortions and complications during pregnancy and labor. In Latin America, the risk of maternal death is four times higher among adolescents younger than 16 years than among women in their twenties.<sup>20</sup>

Women and girls usually face a second violation of their rights when they are forced to continue with a pregnancy as a result of a rape. In the region, 95% of women of childbearing age live in countries where the abortion law is highly restrictive.<sup>21</sup> Complications of unsafe abortions are among the leading causes of maternal death, representing 12% of maternal deaths in the region. It is the leading cause of death in Argentina, Jamaica and Trinidad and Tobago.<sup>22</sup> This situation is also aggravated by the resistance of many health care providers to practice safe abortions when permitted by laws due to religious or social beliefs. Women who arrive to health care facilities with complications due to unsafe abortions are often reported to authorities and many times have to endure verbal abuse and discrimination.

In the region, the lack of coordination between SRH and VAW programmes and services is one of the main concerning gaps of the

health sector response due to the fact that both are vertical programmes. Programmes to prevent and eradicate VAW do not often include information and access to SRH services,<sup>23</sup> which is key for women in abusive relationships to be able to make their own decisions. Furthermore, SRH services in the region do not screen for VAW, and health care providers, particularly from SRH services, are not properly trained as regards this issue and vice versa. In addition, the lack or failure in the implementation of sexual violence protocols, including Post-Exposure Prophylaxis, put women and girls at risk of unplanned pregnancies and HIV infection. Our region has registered an increase of women who live with HIV. In Latin America, adult women represent 31% of people living with HIV, and in the Caribbean it rises to 53%.<sup>24</sup> Despite these facts, violence against women, sexual and reproductive health, and the feminisation of HIV continued to be addressed as separate issues.

The lack of national laws in compliance with the Belem do Para Regional Convention and its delays in implementation, the poor access to justice, the absence of legal advice associated with the high levels of impunity, as well as partial and uncoordinated responses from the health sector, particularly VAW and SRH services, are issues that characterise the status of gender-based violence and its SRH consequences in the region. In this context, urgent measures must be taken by governments—including increased budgets, developed national data collection systems, proper implementation and enforcement of laws, and multi-sectorial, comprehensive and integrated preventive and programmatic interventions, with the participation of all relevant stakeholders specially women's groups—to effectively respond to this growing pandemic.

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