

International Women's Health Coalition

Comments on the Draft update of General Recommendation No. 19 on Violence Against Women by Committee on the Elimination of All Forms of Discrimination against Women (CEDAW)

The International Women's Health Coalition (IWHC) welcomes the draft update to General Recommendation No. 19, and believes it contains both critical reaffirmations that gender-based violence constitutes a human rights violation and updates to reflect legal, social, and other changes since 1992. IWHC particularly supports recognition that gender-based violence against women is inextricably linked to patriarchal power dynamics, that it affects women and girls of all ages and that some women experience multiple and intersecting forms of violence and discrimination throughout their lives. Finally, IWHC welcomes the document's call to eliminate legislation criminalizing abortion, and for comprehensive sexuality education for girls and boys.

IWHC suggests strengthening the strategy in two critical ways:

1. Ensure access to comprehensive sexual and reproductive health services for survivors of violence; and
2. strengthen the focus on adolescents and utilizing comprehensive sexuality education as a prevention strategy.

Sexual and Reproductive Health Services for Survivors of Violence

Reproductive health is mentioned as a facet of a multi-sector approach, but sexual health is excluded. Gender-based violence is inextricably linked to women's and girls' sexuality. It is rooted in unequal power dynamics, is often an effort to control the sexuality of women and girls, undermines their autonomy and jeopardizes their ability to control their own reproduction. Simultaneously, studies have shown that GBV is often a key factor in creating sexual and reproductive vulnerabilities for women and girls: it increases the risk of forced sex, denying them their most basic sexual right; it serves as a barrier to condom and contraceptive use, preventing women from exercising their right to control their reproduction; and it increases their risk of HIV infection and their ability to access treatment.¹ GBV programming must acknowledge the clear links to sexual and reproductive health and rights, and, in addition to ensuring that women have access to needed health services, take steps to ensure that all women can enjoy their full sexual and reproductive rights, free from violence.

GBV responses must not only meet the basic physical and psychological needs of survivors, but also ensure that they are able to reclaim their sexual and reproductive health and autonomy. The same cultural norms and gender equalities that put women and girls at risk from GBV also create them persistent sexual and reproductive health vulnerabilities.

¹ For example, see <http://www.prb.org/Publications/Articles/2011/gender-based-violence-hiv.aspx> (PRB) or <http://www.unfpa.org/gender-based-violence> (UNFPA).

In the "Protection and Redress" section of recommendations, IWHC urges the Committee to include a specific call for timely and comprehensive sexual and reproductive health services, including access to safe abortion and the revision of laws and policies that impede access.

Strengthening the Focus on Adolescents

Adolescents and young women face a unique set of challenges, and they require programming designed specifically to meet their needs. As currently written, the general recommendation is inclusive of girls but falls short of calling for tailored interventions. While comprehensive sexuality education is mentioned in passing, the recommendation fails to highlight that studies have shown that most adolescents currently lack the knowledge to make decisions regarding their sexual and reproductive health in a responsible matter, leaving them vulnerable to coercion and violence, and that comprehensive sexuality programming that addresses power imbalances and gender norms can be extremely effective amongst adolescents, reducing unintended pregnancy, HIV transmission, and other negative reproductive health outcomes.²

IWHC encourages the Committee to recognize the importance of research and best practices around empowerment of girls and young women, and to highlight the ways that programming in these areas can help girls and women fully realize their rights. The "Protection and Redress" section should also specifically mention the importance of youth-centric health services that are able to meet the unique needs of adolescents and young people who are survivors of violence.

Additional Comments:

Para 10: The first line of this paragraph needs to be rephrased. While IWHC supports recognition of the links between gender-based violence against women and the subordination of women within society, violence is not the sole cause of societal inequality nor the only way in which gender roles are perpetuated. This sentence should be revised to recognize the link between patriarchal power dynamics and stereotypical gender norms and violence, but not to say that violence is the fundamental mechanism through which these are perpetuated.

Para 12: "Healthcare settings" should be added to the list of places where violence can occur. Women should have the fundamental right to access healthcare free from the threat of violence, and States have a responsibility to prevent and punish violence within healthcare settings and provide redress to those who have experienced it.

Para 15, Prevention (b): Strike "such as" and replace with "including." Women's groups provide invaluable insight into the lives of women, their unique needs, and their expertise and voice is

² Haberland, Nicole, "The case for addressing gender and power in sexuality and HIV education: a comprehensive review of evaluation studies," *International Perspectives on Sexual and Reproductive Health*, March 2015. Available at <http://www.popcouncil.org/research/the-case-for-addressing-gender-and-power-in-sexuality-and-hiv-education-a-c>

irreplaceable in the development of successful programming. Women's groups must be included in all aspects of policy design and implementation, particularly those that aim to address the social and societal underpinnings of violence.

Para 15, Protection and Redress: Include a statement on the importance of preventing child marriage through multiple means and sectors and providing services to already married adolescents. While the document currently calls for changes to laws that allow child marriage, child marriage often occurs in countries with poor rule of law and/or plural legal systems, as well as in countries where child marriage-related laws are up to international standards but are not being implemented. Beyond this, child marriage is perpetrated because of gender inequality and gender discrimination, which can only be addressed so far through legal action and which impact the lives of women and girls regardless of their age at marriage or marital status. This includes exposing them to unique threats within marriage, often the result of power imbalances within their marriage and marital homes leaving them particularly vulnerable to IPV and GBV. These root causes of child marriage must therefore be addressed in addition to laws prohibiting child marriage. Beyond legal change, policies and programs should aim to address the full range of factors that contribute to child marriage, as well as provide services to girls at risk of marriage and girls who have already been married. Legal change is only part of the solution.