

12 KEY MESSAGES

TO ERADICATE VIOLENCE AGAINST WOMEN AND GIRLS IN LATIN AMERICA AND THE CARIBBEAN



Launched by the UN Secretary General in 2008, UNITE to end violence against women aims to mobilize governments and the public opinion to prevent and eliminate violence against women and girls (VAWG) all over the world. The campaign, coordinated by UN Women, calls on all UN agencies, governments, civil society, women's organizations, the private sector, the media, men, young people and women and girls themselves to join the fight against this global pandemic.

THE CAMPAIGN HAS 3 ACTION PILLARS:



PILLAR 1.

No more impunity: Access to justice, laws and plans.



PILLAR 2.

No more victims: Statistics and support services, protection and restitution for survivors



PILLAR 3.

It is everybody's responsibility: Primary prevention, awareness raising and advocacy.



In recent years, there has been significant achievements in the adoption and implementation of VAWG laws and multi-sectoral national action plans in the Region, as well as progress in the areas of data collection and analysis and prevention strategies. Thanks to the joint efforts of governments, civil society, UN Agencies and other multilateral development organizations such as the IDB and the World Bank, the campaign has been able to document many of these achievements, generate and gather evidence and support the development of proposals for action in each of the three pillars.

Based on existing evidence and lessons learned so far, the different agencies participating in the campaign put forth 12 recommendations to strengthen efforts to prevent, and respond, to violence against women and girls in Latin America and the Caribbean.



PILLAR 1

MESSAGE 1: ERADICATING VAWG REQUIRES THE COMMITMENT OF STATES IN THE ADOPTION OF SPECIALIZED AND COMPREHENSIVE LEGISLATION.

Policy frameworks to promote gender equality and women's empowerment represent prevention and protection factors against violence towards women and girls. All the countries in the region already have legislation on domestic or intra-family violence. However, many countries still require a transition towards more comprehensive legal frameworks, the so-called "second generation laws". Said legislation should respond as well to manifestations of violence against women and girls in the streets, public transport, recreational and educational spaces, contexts of armed conflict, natural disasters and emergencies, migratory phenomena, asylum, forced displacement, statelessness, and new contexts of organized crime and, above all, recognize the State's responsibility for its action - or inaction - in response to situations of violence.

Twenty four (or 73%) of the 33 countries that make up Latin America and the Caribbean have laws that protect the rights of women and girls who have experienced domestic and/or intra-family violence, including all the Caribbean countries. Furthermore, 9 (or 27%) of the 33 countries in the region have passed comprehensive laws.¹ While most legislation focusses on prevention and support services, more emphasis should be placed on sanctions and restitution as elements of due diligence.² One aspect worth highlighting is the fact

that, in the last seven years, 16 countries in the region have passed legislation that penalizes gender-related killings of women (feminicide/femicide).³ However, national laws must be revised, evaluated and updated for the effective prevention of gender-related killings of women and, where applicable, those laws should establish specific crimes or aggravating circumstances. Also, those laws should be amended to ensure they do not include discriminatory provisions that make reference to factors such as "passion", "unbridled emotion", "honor" or "provocation", that allow the perpetrators of the crime to avoid criminal responsibility.⁴

MESSAGE 2: POLITICAL LEADERSHIP OF THE MECHANISMS FOR THE ADVANCEMENT OF WOMEN (MAWS), STATE POLICIES AND MORE RESOURCES: CRITICAL FACTORS FOR THE EFFECTIVE IMPLEMENTATION OF LAWS AND PLANS TO ADDRESS VIOLENCE AGAINST WOMEN AND GIRLS.

Legislative achievements in Latin America and the Caribbean suggest three key elements for the implementation of laws and policies:⁵

- **Strengthening the political leadership of the mechanisms for the advancement of women (MAWs) in countries in the region:** The responsibility for the effective implementation of VAWG legislation and policies should not be borne solely by this mechanism; however high-level institutional hierarchy of the MAWs will facilitate the coordination of sectoral responses in the field, which must be implemented by different institutions.
- **State Policies:** Weaknesses in the continuity of national policies and/or plans, as well as the existence of fragmented institutional responses, call for an in-depth debate on the social and parliamentary arenas so that the fight against violence towards women and girls is not only a policy under the current government or the MAWs, but a State policy with constitutional standing.⁶
- **Additional resources and increased accountability on those resources:** Information on public resources allocated to the implementation of national plans and/or policies to address the issue of VAWG is limited. Funding sources continue to be insufficient considering that, generally speaking, funding is limited to lead bodies (MAWs). It is necessary to ensure that plans and policies have the resources necessary for their execution.

MESSAGE 3: PROMISING PRACTICES IN THE FIELD OF ACCESS TO JUSTICE, BOTH ON THE NATIONAL AND REGIONAL LEVELS, MUST BE REPLICATED TO END IMPUNITY.

In Latin America and the Caribbean, violence against women and girls, and its most violent form of expression, the phenomenon of femicide/feminicide, constitute an alarming reality. Of the 25 countries with the highest femicide rates in the world, 14 are in Latin America and the Caribbean.⁷ Despite recent legal gains in the recognition of femicide, there are still serious obstacles that prevent women from gaining effective access to justice, the truth and restitution, as reflected in the high impunity rates associated with the violent deaths of women and girls (as well as other forms of violence against them).

In this regard, and with the aim of providing effective access to justice in response to acts of violence against women and girls, States must act with due diligence. This includes the obligation to make simple, expedited, suitable and impartial judicial resources available in a non discriminatory manner to allow for the investigation, sanctioning and restitution of such acts, as well as the prevention of impunity. It is also necessary to fight the lack of impartiality of justice operators, which is often associated with gender stereotypes and reinforces the social perception that violence is acceptable both during the investigation and prosecution of cases of violence against women.

A pioneer in the field of gender-based access to justice, today the Region has a series of tools that, if scaled up, could make a big difference and put an end to impunity and the tolerance of this phenomenon. One outstanding initiative is the creation of a jurisdiction specializing in femicide and other forms of violence against women in Guatemala that, according to available data, has observed an increasing number of verdicts each year (from 1,400 in 2014 to 1,725 in 2015).⁸ Recent experiences, such as the gender-based judicial decision-making protocol in Mexico,⁹ the resolution on Amparo lawsuit 554-2013, which states that all killings of women must be investigated based on the hypothesis of femicide/feminicide, several emblematic cases such as that of Sepur Zarco,¹⁰ and a series of rulings by Colombia's Constitutional Court, are all encouraging and promising initiatives.

On a regional level, another aspect worth highlighting, on the one hand, is the jurisprudence of the Inter American Human Rights System in cases such as the “Cotton Field” and, on the other, the Latin American Protocol for the Investigation of Femicide/Feminicide, based on human rights standards and with a gender perspective.}}



PILLAR 2

MESSAGE 4: INVESTING IN THE ETHICAL COLLECTION OF QUALITY DATA ON VIOLENCE AGAINST WOMEN AND GIRLS WILL IMPROVE COUNTRY RESPONSES.

Understanding the nature, scope, risk, protection factors and consequences of violence against women and girls, including indigenous women and girls, other women and girls at risk for racial and ethnic reasons, as well as the particular cases of girls under the age of 15, is the first step to preventing and addressing violence, because such understanding will lead to evidence-based policies and programs.¹¹

Periodic data collection also allows for the evaluation of policies and programs by measuring changes in levels of violence over time. Countries should conduct national population surveys every five years to measure the scope of VAWG, as well as its risk/protection factors and consequences.¹² However, only a limited number of countries in the region are doing so periodically.¹³ In addition to making efforts to improve data comparability between countries, it is essential to establish and apply ethical and methodological standards to measure VAWG. In this regard, surveys conducted must follow methodological and ethical recommendations such as those of the UN Statistical Commission¹⁴ and the World Health Organization (WHO), to ensure the quality of data generated and, hopefully, allow for data comparability between countries.¹⁵⁻¹⁶

Investments must also be made in rigorous research and evaluation of policies and programs, as well as the identification of effective initiatives to prevent and respond to VAWG that allow for the collection of evidence to improve prevention and responses. To this end, investments must be made to train staff to conduct research on VAWG.¹⁷

MESSAGE 5: THE AVAILABILITY OF COMPARABLE DATA ON FEMICIDES/FEMINICIDES IN THE REGION IS ESSENTIAL TO THE IMPLEMENTATION AND EVALUATION OF APPROPRIATE MEASURES.

Significant advances have been made in the production of data on femicide/feminicide in recent years. At the request of governments in the Region, the Gender Equality Observatory in Latin America and the Caribbean of the Economic Commission for Latin America and the Caribbean (ECLAC)

has been collecting, since 2009, data on intimate femicide.¹⁸ Today, the annual production of the femicide indicator is possible thanks to the fact that an increasing number of countries have classified femicide or femicide as a crime.¹⁹

As a result of the above, data on cases of femicide is available for 17 countries since 2014.²⁰ These national efforts to establish a distinction between gender-related killings of women and other types of homicides have increased the availability of data on this problem and, therefore, allow for the design of prevention strategies, evaluating the impact of these measures and to establish comparable data for the region.

This achievement, however, is not exempt from methodological problems that are related to the different data sources. Having a single registry of femicides is a task that has already been addressed in countries such as Peru and Argentina.²¹ Yet, having a single official figure on femicides, as well as the creation of specific registries to keep track of victims' characteristics (age, pregnancies, number of children), the type of relationship with the perpetrator, the characteristics of the latter and the actual facts, continue to pose a challenge in many countries. Therefore, interinstitutional coordination is fundamental as is the use of tools such as the Latin American Protocol for the Investigation of Femicide/Femicide by those institutions responsible for data production on homicides.

MESSAGE 6: HEALTH SERVICES REPRESENT A UNIQUE OPPORTUNITY TO DETECT AND ADDRESS SITUATIONS OF VIOLENCE AGAINST WOMEN AND GIRLS.

Women and girls living in situations of violence can experience serious physical and mental health problems. Evidence shows that women and girls exposed to violence tend to seek health services more often than those who have not experienced abuse, but they do not always reveal they were the victims of violence to health providers.²² In this regard, health services represent a unique opportunity for women and girls to gain access to violence prevention and support services. Each medical consultation is an opportunity to detect these situations, provide immediate support and refer women to other services or sectors, including legal and social services.

The region has made significant achievements in the development of laws, protocols and guidelines for the provision of services to address violence against women and girls.²³⁻²⁴ However, in most countries it is still necessary to strengthen these operational procedures and equip health professionals with the tools and training they need to identify women and

girls in situations of violence, provide appropriate clinical support and refer them to other services where required.²⁵⁻²⁶

Programs designed to address health issues associated with violence against women and girls, such as sexual and reproductive health; maternal, neonatal and child health; HIV prevention and mental health, as well as alcoholism and drug use prevention and treatment programs, must take into account the link between violence and these health conditions and integrate a response to violence into their services. It is also essential for university curricula, as well as ongoing education programs for health professionals, to include training on violence against women and girls.²⁷

MESSAGE 7: COORDINATED ACTIONS OF STATE SERVICES FACILITATES ACCESS TO SERVICES AND CAN MITIGATE CONSEQUENCES, FURTHER EMPOWER WOMEN AND ASSIST IN THE PROCESS OF PUTTING AN END TO VIOLENCE.

At present, different State sectors provide a series of services to address situations of violence experienced by women and girls. These services, regardless of where or by whom they are offered, must meet the following characteristics: availability, accessibility, adaptability, ownership, prioritization of safety, informed consent and confidentiality, effective communication, and participation of women and institutions in the design, implementation and evaluation of services, data collection and management and, finally, they must be linked to other sectors and agencies through coordination.²⁸

A coordinated response is important, as it can help keep violence survivors safe, as opposed to institutions acting individually. Coordinated and comprehensive support services place women at the center of the State response, provide them with appropriate information, identify their needs and support them by providing different services and referral networks. Sharing information between institutions can reduce the number of times these women will have to tell stories of violence, which will, in turn, reduce their re-victimization. These comprehensive service models help violence survivors receive more holistic support.

In recent years, the region has made advances in the proposal of different comprehensive care models, which must continue to be evaluated in terms of their efficacy and impact and clearly reflect country interest in coordinating support systems for victims of violence, especially in health and justice sectors. Traditionally, the provision of services for women facing situations of violence has been the responsibility of

health systems, considering they are a unique sector for the detection of these cases and the provision of corresponding support services. In this regard, training and the delivery of these services must be a priority at the primary care level.

Specialized centers (“one-stop shops”) that provide all the different services required by women have been opened recently. These centers seem more appropriate for high population density areas. The provision of integrated services in health facilities, on the other hand, can be more effective in rural areas due to their lower cost.²⁹

Among the multiple State interventions implemented, the creation of 24/7 emergency hotlines connected to health, police and welfare services are also noted.

Having government officials trained on support services in the area of violence against women and girls is essential. Providing training to police officials for families or women has a positive impact on the number of complaints filed by women and girls victims of violence if such training focuses on raising awareness of VAWG and the quality of such services.³⁰

The principle of due diligence requires States to prevent, investigate and prosecute cases involving violence. This response must be comprehensive, multidisciplinary, coordinated, systematic and sustained.³¹ An increasing number of countries is advancing in their implementation of comprehensive support systems, networks or models that seek interinstitutional coordination to better serve women and girls under international standards.

Intimate partner violence are significantly more likely than other children to receive physical punishment. However, there is no available data regarding who in the household administers such punishments. This association reflects the complexity of the cycle of violence and points to a dangerous process of naturalization of violence and to need for targeted actions for its prevention.

Intimate partner violence against women has also been associated with higher child mortality rates, especially in children under the age of 5.³³ Children’s exposure to intimate partner violence in their homes can lead to consequences similar to those produced by child abuse and abandonment³⁴ and increases the risk of transmission of intergenerational violence; children’s exposure to violence (either as a victim or witness) increases the risk of experiencing or perpetrating violence during adolescence and adulthood.³⁵

While girls and adolescent girls of all ages can be victims of violence, the youngest ones are the ones more likely to experience a lack of adequate care, negligence, severe lesions and even death. The consequences of violence in early childhood are permanent and lead to physical and mental health problems that affect their growth, self-esteem, security, learning and full development. In Latin America and the Caribbean, two out of three children ages 2 to 4 are the victims of violent forms of discipline in the household, and one in two children of the same age are the victims of corporal punishment.³⁶

Bearing in mind the different points of intersection, intergenerational impacts and the fact that violence against women and violence against children often concur, support, protection and restitution systems must make an effort to coordinate services targeted to women and children exposed to violence in a safe and ethical manner.³⁷



PILLAR 3

MESSAGE 8: VIOLENCE AGAINST WOMEN HAS INTERGENERATIONAL IMPACTS AND IS ASSOCIATED WITH VIOLENCE AGAINST CHILDREN.

Violence against women and violence against children have several points of intersection. Both manifestations of violence share common risk factors (including gender-related social norms that foster inequality, promote discrimination and perpetuate violence; unemployment; alcohol and drug abuse; family stress, etc.) and can take place at the same time. In other words, children living in families where couples exercise violence are more likely to become victims of child abuse and negligence. This is the so-called concurrence of violence against women and violence against children.

Children living in households where women had experienced

MESSAGE 9: SCHOOL IS A PRIVILEGED SPACE FOR THE LONG-TERM PREVENTION OF VIOLENCE AGAINST WOMEN, ADOLESCENTS AND CHILDREN.

School is a privileged space for the long-term prevention of all forms of violence against children, adolescents and women given its major role in the transformation of socialization processes around gender norms that legitimize and naturalize violence.

Violence in schools affects and limits access to classrooms and their surroundings; it is an obstacle to adolescents’ attendance and conditions the quality of the knowledge they gain, as pointed out by a study conducted by UNESCO in 15

countries in the region.³⁸ Situations such as natural disasters, emergencies, asylum, forced displacement, migration and statelessness, contribute to increase risks. Children and adolescents often feel insecure on their way to and from school: more than one fourth of girls (30%) and boys (28%) from 11 countries stated that girls “never” or “seldom” feel safe on their way to school compared to boys.³⁹ It is worth noting that the type of school violence experienced by girls and boys differs as a result of their gender.

A study conducted in 14 countries in Latin America and the Caribbean on promising practices for the prevention of violence against women and girls in school settings, shows that no coordination exists between national plans for the prevention of violence against women, education laws and national education plans. To prevent violence against girls, adolescent girls and women, national plans to fight violence must reinforce strategies to prevent this form of violence in school settings. The implementation of strategies for the prevention of violence against women and girls, on the other hand, must translate into actions, goals and objectives. Finally, national education plans must include gender equality components, and this issue must be a strategic area of education policies.

One example of the above is Amor, pero del Bueno (“Love, but the Good One”), a program for the middle-higher level of education implemented in Mexico City in 2014, to prevent dating violence among adolescents. This program achieved significant short-term results through a reduction of more than 50% in the number of cases of psychological violence perpetrated and experienced by male adolescents, an 8% reduction in the acceptance of sexist attitudes during dating and a 19% increase in students’ knowledge of existing support resources.⁴⁰

It is also necessary to promote the creation of institutional structures within Ministries of Education dedicated to mainstreaming gender and implementing policies, prevention and support services strategies or actions to address cases of violence against women and girls in the education system. Only five countries (Bolivia, Guatemala, Mexico, the Dominican Republic and Chile, although partially) have created specific gender departments within their Ministries of Education. Most school violence prevention strategies focus on information and awareness-raising campaigns, as well as its formal inclusion in the sexual education and education for living together curricula, which represents a major step. However, evidence suggests that the most effective programs require a comprehensive approach that must take into account the responsibilities of the different members of the school community to ensure all students have the opportunity to maximize their education experience.⁴¹

Despite multiple efforts, the commitment of the education system to educate on the prevention of violence against women and girls and support the construction of a culture of equality represents an outstanding debt in our region.

MESSAGE 10: THE PARTICIPATION OF MEN AND BOYS IN ACTIONS TO PREVENT VIOLENCE AGAINST WOMEN AND GIRLS IS KEY TO TRANSFORMING EXISTING GENDER NORMS.

Impact evaluations of 57 gender equality programs implemented with the participation of men in different parts of the world showed that the most promising and effective ones were those that included a transformative gender approach, a rigorous design, different tools, workshop sessions and campaigns.⁴² A series of interventions in school and community environments have shown an impact on changes in gender-related attitudes towards issues such as violence and homophobia, in addition to more responsible sexual behaviors. One example is the H Program, which has been implemented in more than 20 countries in the world, including Brazil, Chile, Mexico and Uruguay.

In recent years, several programs to end violence against women and girls implemented in the Region with the participation of men have achieved some level of success. However, evaluations are still limited and, in most cases, they measure changes in attitudes, but not changes in behavior. Still, they have had an impact on changes in attitudes, which identifies them as promising experiences that require further analysis.

We have also seen an increasing global trend in the number of programs working with male aggressors, but the impact evaluations of these programs have not produced conclusive results, which in many cases are contradicting or only show minimal impact or no impact at all. Evidence shows that these programs lead to a reduction in the severity, but not the frequency, of acts of violence against women, and can even produce unwanted effects, such as encouraging men to learn new discourses to justify the exercise of new forms of violence, especially psychological violence. Available evidence also suggests that these programs are more effective if they are part of a coordinated response that involves institutions (including the justice sector) and the community.

To advance the construction of non-violent masculinities, we need to shift from discourse to action by:⁴³

- Generating more data on gender-related attitudes among men and boys through additional research on masculinities and violence;

- Integrating this perspective into the formulation of laws and national plans to end violence against women and girls;
- Building capacities within institutions in different sectors so they can deal with this issue as part of their interventions in the areas of prevention, support and sanctioning of VAWG;
- Developing prevention strategies in schools with the participation of students, teachers and men, so that schools can become a space for the promotion of new masculinities;
- Increasing the quality and frequency of evaluation of these promising programs emerging in the region, while reducing investments in programs targeted at male perpetrators of violence, with a focus on prevention, and
- Promoting and encouraging parents' joint responsibility for child care and positive masculinities as a strategy to reduce the risk of domestic violence and violence against children.

MESSAGE 11: THE CONSTRUCTION OF NON-VIOLENT, INTIMATE RELATIONSHIPS FREE FROM ANY FORM OF COERCION LEADS TO A REDUCTION OF VIOLENCE AGAINST GIRLS AND ADOLESCENT GIRLS.

The levels of sexual violence against young women and girls in Latin America and the Caribbean are alarming. In those countries in the Region with comparable data on sexual violence, the prevalence of sexual violence among girls and adolescent girls aged 15 to 19 ranges from 2% (Paraguay) to 11% (Jamaica).⁴⁴ Evidence shows that, over the course of the last 12 months, the prevalence of intimate partner physical or sexual violence was higher among younger women (aged 15 to 19) in all the countries, except for Peru (2007-2008) and the Dominican Republic (2007), where a higher prevalence was found in the second youngest group of women (aged 20 to 24).⁴⁵

Violence against girls and adolescent girls has multiple consequences for their present and future development, including femicide⁴⁶, suicide, and the risk of reinforcing from an early age the naturalization of violence. In those countries where data on feminicide exist, the data are concerning: in Honduras (in the Central District municipality) 18% of the total number of femi-nicides corresponds to girls aged 0 to 19. Most of them (36%) correspond to women aged 24 to 34, followed by girls and women aged 15 to 24 (29%). Femicides caused by sexual violence account for 9% of the total number of feminicides and mainly affect young women and adoles-cent girls in the 15 to 24 age range.

Child marriage and early conjugal unions increase the likelihood of experiencing sexual violence, as well as physical and psychological violence. There is a strong

correlation between being a victim of sexual violence and early conjugal unions among women. The incidence of both phenomena in all the countries in the region is more prevalent among those women who lived in cohabitation prior to age 20. Between 4% (Paraguay) and 24% (Haiti) of girls and adolescent girls aged 15 to 19 report having experienced sexual violence by an intimate partner.⁴⁷

Sexual violence is also related to high adolescent pregnancy rates. One third of pregnancies in Latin America correspond to girls under the age of 18, and almost 20% to girls under the age of 15. While it is true that there is a significant data gap on pregnancies resulting from sexual violence, it is important to bear in mind that adolescent girls in this age range are highly vulnerable.⁴⁸

Delaying entering into unions, preventing teenage pregnancy and constructing non-violent relationships during dating are strategies that lead to a reduction of violence among adolescents and young people and lay the foundations for more egalitarian adult relationships. Prevention programs targeted to young people must adopt an ecological approach with a combination of community, collective and individual components to reduce the incidence of violence against young women.⁴⁹⁻⁵⁰ It is recommended that these youth programs adopt an ecological approach that promotes behavioral changes at multiple levels: intrapersonal, interpersonal, institutional, community and public policy⁵¹.

PILLARES 1, 2 AND 3

MESSAGE 12: THE JOINT PROMOTION OF THE PHYSICAL, POLITICAL AND ECONOMIC AUTONOMY OF WOMEN MUST GUIDE INTERVENTIONS TO END VIOLENCE AGAINST WOMEN AND GIRLS.

All countries in the Region implement actions in the areas of prevention, care and sanctioning of violence against women and girls (VAWG) and, to a lesser extent, in the area of restitution. Measures and interventions in the four areas, including those aimed at creating employment opportunities, are required to break the VAWG cycle.

The above-mentioned cycle is clearly the result of a fragmented view of the physical, political and economic autonomy of women that must be overcome to understand and act on the different overlapping mechanisms that generate or deepen gender inequality. VAWG affects the exercise of sexual and reproductive rights, but it also has effects on the economic autonomy of women, as well as economic and social costs for others: a lower income generating capacity, absenteeism in the workplace, low productivity, intergenerational

transmission of poverty, food insecurity, loss of assets, etc.

Evidence shows that integrated services designed to address VAWG that include interventions to promote economic empowerment, in combination with psychological support and health services, access to justice and/or education for prevention, put survivors in a better position to confront the consequences of violence. The results of an impact evaluation of the Intervention with Microfinance for AIDS and Gender Equity (IMAGE) show a 55% reduction in the incidence of intimate partner physical and sexual violence against the women who participated in it.⁵² An impact evaluation of the adaptation of this model for the Latin America region is currently underway in Peru.

LET US NOT FORGET

Women are not a homogenous population group. The multiple forms of violence and social injustice created by patriarchal structures do not affect all women equally. From an intersectional analysis standpoint, State public policies must consider the different forms of interaction of discrimination and highlight the differentiated impacts of violence against women and girls. In this regard, article 9 of the Belém do Pará Convention establishes that: “The States Parties shall take special account of the vulnerability of women to violence by reason of, among others, their race or ethnic background or their status as migrants, refugees or displaced persons. Similar consideration shall be given to women subjected to violence while pregnant⁵³ or who are disabled, of minor age, elderly, socioeconomically disadvantaged, affected by armed conflict or deprived of their freedom.” Therefore, the production of data and the formulation and implementation of public policies must take into consideration the multiple forms of discrimination that can increase the vulnerability of different women and girls.

ANNEX: COUNTRIES IN LATIN AMERICA (16) THAT CLASSIFY FEMICIDE/FEMINICIDE AND AGGRAVATED HOMICIDE BY REASON OF GENDER AS A CRIME, BY NAME OF LAW, YEAR AND DEFINITION UNDER CRIMINAL LAW.

Country	Name of the Law	Year	Criminal classification
Argentina	Law 26.791	2012	Aggravated homicide
Bolivia	Law 348	2013	Feminicide
Brasil	Law 13.104	2015	Feminicide
Chile	Law 20.480	2010	Femicide
Colombia	Rosa Elvira Cely Law	2015	Feminicide
Costa Rica	Law 8.589	2007	Feminicide
Ecuador	Integral Organic Penal Code (COIP)	2014	Femicide
El Salvador	Decree 520	2010	Feminicide
Guatemala	Decree 22-2008	2008	Femicide
Honduras	Decree 23-2013	2013	Femicide
México	Decree to reform and amend various provisions of the Federal Penal Code, the General Law on Women's Access to a Life Free of Violence, the Organic Law of the Public Federal Administration and the Organic Law of the Office of the Attorney General of the Republic	2012	Feminicide
Nicaragua	Law 779	2012	Femicide
Panamá	Law 82	2013	Femicide
Perú	Law 30.068	2013	Feminicide
Dominican Republic	Law 550/14 Article 100 Penal Code	2014	Femicide
Venezuela (Bolivarian Republic of)	Law to Amend the Organic Law on Women's Right to a Life Free of Violence	2014	Femicide

Source: Economic Commission for Latin America and the Caribbean (ECLAC). Gender Equality Observatory for Latin America and the Caribbean. Based on official data.

1. PNUD y ONU Mujeres (2016). Del compromiso a la acción: Políticas para erradicar la violencia contra las mujeres en América Latina y el Caribe.
2. UNDP and UN Women (2013). The Commitment of the States: Plans and policies to Eradicate Violence against Women in Latin America and the Caribbean. p. 24.
3. Brazil, Chile, Bolivia, Colombia, Ecuador, Peru, Costa Rica, El Salvador, Guatemala, Honduras, Mexico, Nicaragua, Panama and the Dominican Republic passed laws or amendments to their penal codes to classify femicide or feminicide as a crime. Argentina and Venezuela have legally classified "genderrelated aggravated homicide" as a crime.
4. Report of the Secretary General of June 16, 2015, on the Adoption of measures against gender-related killing of women and girls (A/70/93, para. 41 c).
5. Generally speaking, the region has good laws, but there are certain limitations to their implementation. However, 31 (or 94%) of the 33 countries in the region already have plans for the elimination of gender-based violence, of which only 15 address the issue of VAW specifically. Only 2 countries, both from the English-speaking Caribbean, still lack a national action plan. Public institutions, feminist and women's organizations are making serious efforts to overcome the challenges to the effective implementation of legislation and policies. UNDP and UN Women, 2016, op. cit.
6. Idem.
7. Global burden of armed violence. (2011). Geneva Declaration on Armed Violence and Development. Available at: http://www.genevadeclaration.org/fileadmin/docs/GBAV2/GBAV2011_CH4_rev.pdf
8. A/HRC/31/3/Add.1. Report of the United Nations High Commissioner for Human Rights on the activities of his office in Guatemala (par. 47).
9. Supreme Court of Justice of the Nation (2013). Judicial decision-making with a gender perspective. A protocol: Making equal rights a reality. Mexico City.
10. Office of the High Commissioner on Human Rights (2016). Guatemala: UN experts welcome judgment of two former military officials for crimes against humanity, press release.
11. Pan American Health Organization (2015). Strategy and plan of action on strengthening the health sector response to violence against women. Washington, D.C.: Pan American Health Organization.
12. World Health Organization (2015). Global plan of action to strengthen the role of the health system in addressing interpersonal violence, in particular against women and girls and against children. Geneva: World Health Organization.
13. Ecuador, Uruguay, Mexico, Bolivia and Costa Rica: Survey on gender-based violence/violence against women. Peru and Chile: Survey on domestic violence.
14. United Nations Organization (2011). Guidelines for Producing Statistics on Violence against Women: Statistical Surveys. New York: United Nations Organization.
15. World Health Organization and PATH (2007). Researching violence against women: A practical guide for researchers and activists. Geneva: World Health Organization.
16. World Health Organization and RIT International (2016). Ethical and safety recommendations for intervention research on violence against women. Geneva: World Health Organization.
17. García-Moreno, C., et al. (2015). "Addressing violence against women: A call to action". The Lancet, vol. 5, pp. 1-11.
18. Given the lack of a legal classification of the crime in most countries, in 2009 the different countries in the region asked ECLAC to produce the indicator Death of women by intimate partner or former intimate partner.
19. As of 2016, 16 countries in the region had amended their laws to classify it as a specific type of crime that involves the killing of women: Costa Rica (2007); Chile (2010); Ecuador (2014); Honduras (2013); Nicaragua (2012); Panama (2013); Venezuela (2014). The crime was identified as feminicide in Brazil (2015), the Plurinational State of Bolivia (2013); Colombia (2015); El Salvador (2012); Guatemala (2008); Mexico (2013), Peru (2013) and the Dominican Republic (2014). In Argentina (2012) it is classified as "aggravated homicide".
20. The data show the number of femicides/feminicides among women age 15 and the rate per 100,000 women. This includes the killings of women perpetrated by a current or former intimate partner.
21. Since 2009, Peru has had a Public Prosecutor's Registry of Femicides and Attempted Femicides. In 2015, Argentina created the Supreme Court's National Registry of Femicides, with data available since 2014. In the rest of the countries, progress has been made in the creation of technical working groups with the participation of those institutions responsible for keeping registries of homicides, feminicides and attempted feminicides.
22. García-Moreno, C. et al. (2015). "The Health systems response to violence against women". The Lancet, vol. 2, pp. 17-29.
23. Pan American Health Organization (2015). Strategy and plan of action on strengthening the health sector response to violence against women. Washington, D.C.: Pan American Health Organization.
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