

GBV: Gender-Based Violence

Civil Society perspectives on Sexual and Reproductive Health, Rights and Justice in Latin America and the Caribbean.

FÒS FEMINISTA

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Acronyms

AFM: Articulación Feminista Marcosur ASIE: Integral Health Counseling in Secondary Schools, Argentina **CCSS:** Costa Rican Social Security Fund **CEPAM:** Centro de Estudios y Promoción de la Mujer, Ecuador CLADEM: Comité de América Latina y el Caribe para la Defensa de los Derechos de las Mujeres COEPSIDA: Committee of Educators in AIDS Prevention, Guatemala CSE: Comprehensive Sexuality Education **CSO:** Civil Society Organization **ECLAC/CEPAL:** Economic Commission for Latin America and the Caribbean **ECMIA:** The Continental Link of Indigenous Women of the Americas **ENADID:** National Demographic Dynamics Survey, Mexico **ENAPEA:** National Strategy for the Prevention of Adolescent Pregnancy, Mexico **ENDIREH:** National Survey on the Dynamics of Relationships in Households, Mexico FDA: Food and Drug Administration FOBAM: Fund for the Well-being and Advancement of Women, Mexico **FPATT:** Family Planning Association of Trinidad and Tobago FPC: Family Planning & Contraception **GBV:** Gender-Based Violence HFLE: Health and Family Life Education ICPD: International Conference on Population and Development ICW Latina: International Community of Women Living with HIV/AIDS **IHSS:** Honduran Social Security Institute **INFOD:** National Institute of Teacher Training, El Salvador INPI: National Institute of Indigenous Peoples, Mexico IVE: Voluntary Interruption of Pregnancy LAC: Latin America and the Caribbean **LARC:** Long-Acting Reversible Contraceptives LEIV: Special Comprehensive Law for a Life Free from Violence for Women, El Salvador LGAMVLV: Mexico's General Law on Women's Access to a Life Free of Violence LIE: Law on Equality, Equity and the Eradiation of Discrimination Against Women, El Salvador MC: Montevideo Consensus MQTM: Mira Que Te Miro OSAR: Observatory of Sexual and Reproductive Health, Guatemala PARE: Committee for Prevention, Support, Rescue, and Education on Gender Violence, Puerto Rico **PES:** The Sexual Education Program PIPASEVM: Program to Prevent, Address, Sanction, and Eradicate Violence Against Women, Mexico

PLANOVI: National Plan for the Prevention and Eradication of Violence Against Women, Guatemala

PROMSEX: Center for the Promotion and Defense of Sexual and Reproductive Rights, Peru

PNTE: National Plan for Educational Transformation, Paraguay

PNUD: United Nations Development Program

ADIDE: Disability Alliance for Our Rights, The Dominican Republic

Acronyms

RCPD: Regional Conference on Population and Development

Red-LAC: The Latin American and the Caribbean Network of Youth for Sexual and Reproductive Rights

RMAAD: Network of Afro-Latin America, Afro-Caribbean, and Diaspora Women

SAS: Safe Abortion Services

SDG: Sustainable Development Goals **SEC:** Systematically Excluded Communities **SEDESOL:** Ministry of Social Development, Honduras

SOGIE: Sexual Orientation, Gender Identity, and Expression SRHRJ: Sexual and Reproductive Health, Rights, and Justice

SRHS: Sexual and Reproductive Health Services

SVET: Unit for the Prevention and Care of Crimes of Sexual Violence, Exploitation & Trafficking

in Persons, Guatemala

TTPS: Trinidad and Tobago Police Service

YFS: Youth - Friendly Services

UNESCO: United Nations Educational, Scientific and Cultural Organization

UNFPA: United Nations Population Fund **WHO:** World Health Organization

1. Introduction

Sexual and Reproductive Health, Rights, and Justice (SRHRJ) are fundamental human rights essential for ensuring individuals' well-being and their ability to meaningfully participate in society.

SRHRJ encompass a broad spectrum of efforts aimed at eliminating preventable maternal and neonatal mortality and morbidity, eliminating unsafe abortion, ensuring the provision of high-quality Sexual and Reproductive Health Services (SRHS), including contraception and family planning, and addressing issues such as Sexually Transmitted Infections (STIs), cervical cancer, Gender-Based Violence (GBV), and the specific Sexual and Reproductive Health (SRH) needs of adolescents through Comprehensive Sexuality Education (CSE) and Youth -Friendly Services (YFS). Achieving universal access to SRHS is not only crucial for advancing sustainable development but also for meeting the diverse needs and aspirations of individuals worldwide, thus promoting the realization of their health and human rights.

Despite their well-documented significance, countries throughout Latin America and the Caribbean (LAC) face substantial challenges in upholding these essential rights, particularly for Systematically Excluded Communities (SEC), such as indigenous communities, Afro-descendant communities, LGBTIQ+ individuals, persons with disabilities youth, older adults, and migrants. iii These communities often encounter heightened levels of discrimination, coercion, and violence when seeking to access SRHRJ.

The Montevideo Consensus (MC), a political document of the Regional Conference on Population and Development, adopted by all Member States of the Latin American and Caribbean (LAC) Region in 2013, stands as a testament to the tireless efforts and dedication of feminist and social justice movements from LAC, built on years of advocacy. Civil society played an instrumental role in its inception, design, and the defined pathway for its execution. This emphasis is evident in the framework of the Consensus, which underscores the collaboration between governments and civil society for both its implementation and subsequent reviews.

This report is designed to serve as an advocacy tool, shedding light on the glaring disparities in SRHRJ implementation within the LAC region. It offers an analysis of the progress, challenges, and setbacks experienced over the past decade, as documented by the ECLAC and Civil Society Organizations (CSOs) with extensive experience in **SRHRJ** across the region.



Fós Feminista / Paola Luisi / Argentina 2022

The report navigates the nuanced landscape, sometimes contradictory due to political shifts, in advancing SRHRJ and underscores the limitations encountered in ensuring access. As the report highlights, access may be limited due to territorial inequalities, and policymakers and implementers must work to expand access to SEC, implement intercultural and intersectional approaches, ensure data accessibility, generation, and quality, and recognize the pivotal role of CSOs in shaping the SRHRJ legal, programmatic, and financial frameworks, as well as the implementation of these. The report aims to act as a catalyst, to recognize the challenges and take concrete actions to ensure these are tackled appropriately.

1.1 The Initiative

In commemoration of the **10th Anniversary** of the Montevideo Consensus (MC), Fòs Feminista supported 20 CSOs in the creation of national reports that document the progress, gaps, challenges, and best practices in delivering SRHRJ commitments for women, girls and gender-diverse individuals and their different intersections. Moreover, Fos supported five regional networks led by Afro-descendants, young people, women with disabilities, indigenous women, and transgender people.

Fòs identified five priority topics within SRHRJ: 1) Abortion, 2) Comprehensive Sexuality Education, 3) Gender-Based Violence, 4) Family Planning and Contraception and 5) Youth-Friendly Services. A report is available for each of these priority topics and a sixth report highlights the specific challenges faced by Systematically Excluded Communities (SEC) in the region. The report on SEC can be accessed by those seeking a more detailed analysis of the SRHRJ issues faced by SEC, than those outlined in this report. The analysis of each priority topic couers six major areas of assessment: 1) Legal Framework, 2) Financial Framework, 3) Programmatic Framework, 4) Territorial Inequalities, 5) Civil Society participation, and 6) Data Access, Generation and Quality. Each priority topic includes sections for Recommendations and the identification of Best Practices, from both CSOs and national governments. Designed to be adaptable, the framework recognizes the expertise of participating networks and the limitation of publicly available information. This flexibility allowed these networks to identify other priority issues and undertake political analyses tailored to the specific contexts they addressed. All of this is reflected in the reports that make up this series.

To facilitate the reporting process, a template featuring 47 open-ended orientation questions was provided. These questions aimed to elicit qualitative information on the implementation of the commitments made under the MC over the past decade. All data used in the subsequent sections originates from reports created by participating organizations and submitted to Fòs Feminista for analysis. Where necessary, this information is complemented by data from monitoring tools like Mira Que te Miro (MQMT) and ISO Quito, voluntary national reports submitted to ECLAC, as well as relevant reports from ECLAC, UNESCO, UNFPA, UN Women, and scientific literature on the subject.

It is important to highlight that participating CSOs and networks encountered challenges in obtaining data. This is due to a general lack of publicly available disaggregated. This underscores the pressing need for increased investment in producing quality, reliable, up-to-date data, and disaggregating it. This related to SRHRJ legal, financial, and programmatic frameworks, ultimately leading to improved implementation.

The reporting from CSOs and networks serves as a medium for engaging in dialogue, generating knowledge, and highlighting often overlooked interventions, deepening our understanding of challenges and ensuring no one is left behind in the process toward advancing SRHRJ in the LAC region and beyond.

2. The Reports

This series of reports presents the findings derived from compiled nationallevel data, offering a comprehensive analysis of Abortion, Comprehensive Sexuality Education (CSE), Gender-Based Violence (GBV), Family Planning and Contraception (FPC), and Youth-Friendly Services (YFS) across 20 countries in Latin America and the Caribbean (LAC). Beginning with an introduction to the social monitoring platform MQTM, the report proceeds with an overview of the geographical scope and the political dynamics influencing SRHRJ in the region. Despite a volatile political landscape at present, the MC emerges as a progressive framework with political commitments aimed at advancing SRHRJ in the region. The reports underscore the significance of this instrument and the crucial role it plays in advancing key SRHRJ objectives leading up to the **30th anniversary** of the International Conference on Population and Development (ICPD) in 2024. Each report in this series is organized into three main sections: the first analyzes key findings in both monitoring and implementation of the priority theme reported by sub-region. The second section provides recommendations, and the final section offers one concrete best practice identified in the region.

The initial section of each report serves to contextualize each sub-region (Central America, the Caribbean and South America) by presenting MQTM's compliance scores alongside insights from CSO reports. This section is divided into two sub-sections. The first sub-section analyzes the legal, programmatic, and financial frameworks, addressing the progress made, identifying existing gaps, and outlining barriers highlighted in the CSO reports. Meanwhile, the second sub-section delues into five major key themes: territorial inequalities, data access, generation and quality, engagement with SEC, adoption of intersectional and intercultural approaches, and the extent of CSOs' involvement in decision-making and policy implementation.

In the second section, the reports offer recommendations and one concrete example of a best practice from the region: Mexico stands out for its approach to abortion, Peru for CSE, Costa Rica for GBV prevention, Chile for FPC, and Bolivia for YFS. For each best practice, the reports contextualize the setting, identify the challenges faced, describe the specific initiatives undertaken, and delineate key takeaways for future endeavors.

1.3. Social Monitoring: Mira Que te Miro

Mira que te Miro v is a social monitoring initiative and platform dedicated to tracking the SRHRJ commitments outlined in the MC and led by Vecinas Feministas, Red Latinoamericana y del Caribe Católicas por el Derecho a Decidir, Fòs Feminista, Comité de América Latina y el Caribe para la Defensa de los Derechos de las Mujeres (CLADEM), Comunidad Internacional de Mujeres Viviendo con VIH/SIDA (ICW Latina) and the Latin American and Caribbean Women's Health Network (LACWHN). MQTM provides a vital platform for observing, analyzing, and comparing the progress made in legislation, policies, strategies, and programs across fourteen specific SRHRJ topics throughout the LAC region. This initiative stands as a testament to the commitment of CSOs working in the region to promote comprehensive SRHRJ. Its role in ensuring accountability and transparency in the implementation of the MC is pivotal, and its contribution to advancing these essential rights for all, especially for SEC, is undeniable.

This series of reports complements the MQTM initiative by offering qualitative insights into the challenges in the implementation of the MC. It serves to deepen our understanding of the complexity of SRHRJ issues in the region and to renew our commitment to a more equitable and rights-driven society. MQTM continues to be an invaluable tool in our pursuit of a more equitable and rightsdriven society.



1.4. Geographical Scope

The organizations contributing to this report are categorized into three subregions: Central America (including Mexico), the Caribbean, and South America. Within South America, a further distinction is commonly made between the Southern Cone and Andean Regions. The Southern Cone includes Brazil, Uruguay, Argentina, Chile, and Paraguay, whereas the Andean Region encompasses Bolivia, Colombia, Peru, Venezuela, and Ecuador. This demarcation, influenced by geographical, sociocultural, and historical factors, is occasionally employed in these reports to highlight distinct patterns, or discern trends.

There are noticeable trends in the region, with certain countries standing out and others lagging behind in establishing a sustainable SRHRJ landscape. In the Southern Cone, Argentina typically emerges as a frontrunner in the region concerning SRHRJ, while Paraguay faces significant challenges related to access. Similarly, in the **Andean** region, **Colombia** often leads the way, whereas Venezuela, amidst a humanitarian crisis, confronts substantial barriers to ensuring access to **SRHRJ**.

The Caribbean presents the most complex landscape within the region, with Puerto Rico demonstrating the most progress, while the rest of the countries contend with some of the most restrictive laws and policies. Central America closely mirrors this complexity. **Mexico** takes a leading role in this subregion, while Honduras, El Salvador, and Guatemala face the most challenges.



Figure 1. Countries covered in the initiative by sub-region

1.5. Political Dynamics

The LAC region is characterized by a dynamic political landscape, with frequent shifts between progressive political parties, often associated with progressive agendas, and conservative parties holding highly conservative ideologies. Recent developments in the region include the electoral victory of progressive political parties in Guatemala, contrasted by the rise of conservative leadership in El Salvador under Nayib Bukele and in Argentina with Javier Milei. Central American nations find themselves in a state of division, with Mexico, Guatemala, and Honduras now governed by progressive presidencies, yet encountering significant resistance from conservative factions within the government. Honduras, in particular, has faced challenges in advancing progressive legislation.

In the Caribbean, conservative resistance persists across all countries, albeit with variations influenced by British, American, and French colonial legacies. Puerto Rico continues to grapple with an annexationist regime from the United States, while Haiti currently lacks a legal government, and the **Dominican Republic** is under the governance of a conservative president. Notably, Antigua & Barbuda and Trinidad & Tobago have made significant strides by overturning archaic buggery laws that once criminalized same-sex relationships, relics of the British colonial era. vi

South America is currently divided, with five countries under progressive administrations, however with three of these challenged by majority conservative parliaments, remnants of previous regimes, namely in Chile, Brazil, and Colombia. Bolivia faces political instability within progressive circles, while **Venezuela** grapples with a deep humanitarian crisis. Conversely, Argentina, Uruguay, Paraguay, Peru, and Ecuador have conservative regimes in power. However, it is worth noting that in Argentina, the conservative party lacks a parliamentary majority.

Despite some political analysts heralding recent shifts in governance as a resurgence of progressive influence across Latin American countries, vii current progressive governments encounter major obstacles in advancing progressive agendas. Not only do conservative-leaning parliaments present concrete obstacles to passing progressive agendas, but the recent COVID-19 pandemic exacerbated socioeconomic instability across the region, with significant impacts on SRHRJ that were often sidelined due to a prioritization of other 'essential services' that directly tackled the ongoing public health emergency. viiiix

1.6. Central America

In Mexico, the government of López Obrador (2018-2024) has made significant progress in expanding access to universal health coverage for adolescents and providing support to keep them enrolled in the education system, as well as through the provision of quality medical care for pregnant youth. * Despite these achievements, challenges persist, including the disappearance of programs like the Childcare Centers Program and the absence of comprehensive feminist policies, as highlighted in the report from CSOs. Notably, in September 2023, Mexico's Supreme Court unanimously ruled that state laws prohibiting abortion are unconstitutional, marking a victory for SRHRJ activists across Latin America. xi



Fós Feminista / Abortion March. Mexico 2022.

Conversely, El Salvador has faced a series of challenges since March 2022 when President Nayib Bukele declared a state of emergency due to a surge in homicides, compromising citizens' fundamental rights. This state of emergency, which included the suspension of fundamental rights such as freedom of association and due process, has been continuously extended despite being put in place initially for a single month. xii Concerns have also been raised by CSOs regarding the announced territorial reconfiguration starting in 2024. which centralizes power in urban areas, leading to apprehensions about the potential spread of President Bukele's populist and authoritarian tactics to other countries in LAC. Bukele, who assumed office in 2019, has, at the beginning of 2024, been formally re-elected despite human rights concerns. xiii xiv

In Guatemala, the 2023 election marked a significant milestone with the election of President Bernardo Arévalo, hailed as the most progressive president in the past 40 years. ** President Arévalo has prioritized social justice and human rights, offering a promising opportunity to address the democratic crisis. <code>xvi</code> His commitment to these values raises hope for positive transformations in Guatemala's approach to SRHRJ, especially since SRHRJ have historically been treated as taboo and often depend on political will for consideration and resource allocation.

On the other hand, the current government in Costa Rica, led by President Rodrigo Chaves Robles, has aligned with evangelical pastors and anti-rights groups, undermining SRHRJ in the education system. CSO reports have identified this alliance as an attempt to roll back progress on CSE in schools. Additionally, the lack of political will means the country is being governed by outdated SRHRJ policies and those policies that are in place, lack comprehensive implementation. xuii

In Honduras, strong opposition from groups like "Generación Celeste" xuiii reflects the ideological divide that President Xiomara Castro faces. President Castro assumed office in 2022 as the first woman president of the country. Despite the expectations placed on her to advance gender-related bills as part of her Plan to Re-found Honduras (2022-2026), she has encountered significant opposition from conservative movements within the country. The CSO's report highlights the legislative progress made in terms of advocating for policies aimed at safeguarding individuals' SRHRJ, but also showcases how current authorities engage in ideological debates and power struggles, often at the expense of the health and well-being of children, adolescents, women and gender-diverse individuals.

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Fós Feminista / Jazmyn Henry, Honduras.

1.7. The Caribbean

In Antigua & Barbuda, reports from United Nations Educational, Scientific and Cultural Organization (UNESCO) xix and the World Health Organization (WHO) xx indicate that the government, led by Prime Minister Gaston Browne since 2014, has taken some steps to acknowledge the importance of CSE. While SRHRJ still have a long way to go, human rights organizations celebrated Antigua & Barbuda's Court decision to decriminalize same-sex intimacy in 2022.xxi

Haiti faces deeper challenges, reporting dysfunctions across the entire health system, as well as significant governance issues, including the absence of a legal government, raising concerns about the enforcement of any existing legal frameworks. The serious political, economic, humanitarian, and refugee crisis has led Human Rights Watch to deem it a "catastrophic situation." **ii

In Trinidad & Tobago, while the UN's Human Rights Committee commends women's representation in public bodies following the election of the second woman president Christine Kangaloo, conservative resistance, and the current refugee crisis due to the humanitarian crisis in neighboring Venezuela have led to complex challenges in upholding and advancing SRHRJ. xxiii

In the **Dominican Republic**, the current government, led by President Luis Abinader since 2020, has led to a conservative shift, with a targeting of the Haitian migrant population who are majority Afro-descendant, in particular pregnant women. **iv The country lacks official reliable data on the living conditions of its Afro-descendant population, a major barrier to ensuring inclusive, intersectional SRHRJ is upheld. Presidential elections are to be held this year, acting as an opportunity for a shift in government and a renewed focus on SRHRJ.

In Puerto Rico, the current governor Pedro Pierluisi, embraces an annexationist stance, denying Puerto Rico's status as a LAC country and insisting it is a US territory.xxv Consequently, the government rejects accountability or representation before UN bodies like ECLAC. Beyond this, Puerto Rico faces an unprecedented economic, social, and political crisis due to socio-natural disasters, the COVID-19 pandemic, and overwhelming government debt. The education and health systems are on the brink of collapse, prompting the government to attract foreign investors, leading to the displacement of vulnerable communities, particularly women. xxvi This dire situation makes **Puerto Rico** the most impoverished territory under **US** control.

1.8. South America

1.8.1 Southern Cone

The recent political landscape in Brazil has been marked by the challenging four years of former President Jair Bolsonaro (2019-2022) coupled with the aftereffects of the COVID-19 pandemic, both of which led to significant setbacks for gender equality in the country. *Bolsonaro's* election in 2018 symbolized a reversal and neglect of the advances made by gender equality activists in the decades before. Currently, the Brazilian congress is divided into five ideological groups, with conservatives holding most seats (40%), while feminists hold a mere 20%, posing significant obstacles to passing progressive reforms and legislation. xxvii However, despite these challenges, the inauguration of progressive President Lula da Silva in 2023 has set in motion positive developments, including efforts to revitalize **SRHRJ** initiatives. **xxviii**

Uruguay's legal frameworks reflect a commitment to SRHRJ, with these principles, aligned with international human rights standards, embedded into national laws during the "progressive cycle" of the previous government (2005-2019). xxix However, under the current government, which took power in 2020, President Lacalle Pou (2020-2025), has implemented cuts in funding, impacting the continuity and effectiveness of SRHRJ initiatives. ***

Four years after the social uprising in 2019 in Chile, President Gabriel Boric has faced a number of setbacks, led by conservative groups and conservative politicians, such as the rejection of a progressive constitutional project in 2021 and the drafting of a second project by a conservative majority in 2023. *** The rejection of both projects means that the constitution enacted by conservative dictator Augusto Pinochet in the 1980s, continues in place. xxxii

Conservative groups in Paraguay, supported by the US Christian advocacy group Alliance Defending Freedom, have actively lobbied for banning gender discussions in classrooms in the country. xxxiii The absence of specific laws, clear policies, and guidelines, coupled with a political landscape marked by mis- and disinformation, has led to the characterization of the country as an "anti-rights think tank". xxxiv

In Argentina, concerns have emerged regarding the potential impact on SRHRJ following the recent election of ultra-conservative President Javier Milei. Advocates in the country fear for a reversal of the progress made during the progressive administrations of the Kirchners (2003-2015). In fact, at the beginning of February 2024, Milei's party submitted a bill to Congress seeking to repeal abortion laws, even in cases of rape. xxxv While Milei's spokesperson has denied this bill as part of the broader governmental agenda, stating that the President is focused on more "urgent matters," alerts have been raised in the face of threats to **SRHRJ**, given the claims made by the new President. ******i

1.8.2 Andean Region

In Bolivia, the aftermath of the 2019 coup against Evo Morales, who governed the country for nearly 14 years, and the ongoing rivalry with current president Luis Arce, have cast doubts on the stability of progressive governance in the country. ***uii Despite modest progress on SRHRJ, concerns persist regarding the fragility of the State's systems, particularly in guaranteeing SRHRJ for adolescents, women and gender-diverse individuals in rural areas.

In Colombia, Gustavo Petro assumed office in 2022 with a progressive agenda that included a bill promoting CSE in all public and private institutions, **xxviii alongside other reforms and policies, including the establishment of the Ministry of Equality to safeguard **SRHRJ**. **xxxix** However, tensions in Congress, fueled by opposition from conservative, religious representatives labeling the reform as "gender ideology," have hindered the bill's approval. xl Lack of majority support, euen within his own party, has left President *Petro's* progressive agenda largely unfulfilled. xli

Peru has faced significant political fragmentation and turmoil since 2018 and its current President, Dina Boluarte, was put in place by Congress after the previous President *Pedro Castro* was removed in 2022. xiii The current majority in Congress leans towards the conservative and ultra-conservative, and Boluarte's government is perceived as conservative authoritarian. xliii The case of Mila, an 11-year-old girl who, from the age of six was systematically abused by her stepfather and found 13 weeks pregnant, has garnered international attention and condemnation by the UN for violating the rights of an abused child, prompting calls for increased protection for children and guaranteed access to comprehensive SRHRJ. xliv

Since 2016, Venezuela, led by President Nicolás Maduro who took power in 2013, has faced a deepening crisis marked by food scarcity, poverty, inequality, severe healthcare access issues, conflicts related to citizen insecurity, an increase in the informal economy, and significant emigration. This multifaceted crisis unfolded amidst deficiencies in state institutions, political polarization, unilateral coercive measures applied by the US, and widespread corruption. xlv

Recognizing the crisis as a complex humanitarian situation in 2018, the UN, in collaboration with President Maduro's government, and the Venezuelan government initiated humanitarian aid. The humanitarian crisis, exacerbated in 2020 by the COVID-19 pandemic, has severely impacted access to healthcare, including SRHRJ. xlvi

Currently facing a major security crisis, Ecuador, under President Gustavo Noboa's declaration of an "internal armed conflict" in January 2024, raises concerns about SRHRJ in the country, exacerbating already existent challenges. xluii Human Rights Watch has expressed concerns about the wave of violence faced by citizens of **Ecuador**, xlviii resulting in significant impacts on public services in education, health, social security, employment, SRHRJ and other essential areas.

SRHRJ in the Montevideo Consensus

The Montevideo Consensus (MC) agreed on by all governments of the LAC region in 2013 at the first Regional Conference on Population and Development (RCPD) stands as one of the most progressive intergovernmental agreements concerning SRHRJ. This agreement serves as a regional landmark dedicating an entire chapter to "Universal access to sexual and reproductive health services." Chapter D has 14 priority actions that include promoting policies that enable individuals to exercise their sexual rights freely and without coercion, reviewing legislation to ensure access to comprehensive SRHS, designing programs to eradicate discrimination based on sexual orientation gender identity, guaranteeing universal access to quality SRHS for all individuals, strengthening measures for HIV/AIDS prevention and treatment, eliminating preventable maternal morbidity and mortality, ensuring access to safe abortion services (SAS) where legal, promoting prevention and self-care programs for men's SRH, and guaranteeing effective access to comprehensive healthcare during the reproductive cycle. Additionally, these actions emphasize the need to allocate sufficient financial, human, and technological resources to ensure universal access to SRHS without discrimination.

This report delues into five priority topics outlined in Chapter D of the MC, each addressing crucial aspects of SRHRJ. Regarding abortion, priority actions 40 and 42 of the MC aim to reduce maternal morbidity and mortality by improving abortion services where legal or decriminalized. CSE is addressed in priority action 40, recognizing its role in preventing maternal morbidity and mortality. Gender-Based Violence (GBV) is emphasized in priority actions 33 and 34, aiming to ensure individuals' rights to a life free from discrimination and violence, enabling them to exercise their sexual rights without coercion or discrimination. Access to SRHS, especially family planning and contraception, is covered in priority actions 40, 43, and 44, striving to ensure access to culturally relevant and scientifically sound contraceptive including emergency methods, contraception, alongside counseling and comprehensive care, including maternal health services and compassionate obstetric care. Finally, Youth-Friendly Services (YFS) are addressed under priority action 35, aiming to expand access to SRHS, including comprehensive userfriendly services tailored to adolescents and youth.

1.9. Towards ICPD+30

The LAC region faces numerous challenges in realizing universal access to SRHRJ, exacerbated by the COVID-19 pandemic. Disruptions in services, including family planning, prenatal care, childbirth, abortion, and post-abortion care, have underscored the urgent need to address these issues. xlix Persistent obstacles such as financing constraints, unequal resource distribution, and variations in service quality persist across the region, further exacerbated by the COVID-19 pandemic. 1

Amidst these challenges, the significance of SRHRJ cannot be overstated, particularly in the context of the commemoration of the 30th anniversary of the International Conference on Population and Development (ICDP+30) in 2024 and the broader 2030 Agenda for Sustainable Development. SRHRJ are fundamental human rights, essential for individuals' well-being.

Despite the challenges posed by the pandemic, progress has been made in reducing adolescent fertility rates, highlighting the impact of commitments made in the MC. Ii However, disparities persist, particularly in the Caribbean subregion, where adolescent pregnancy negatively impacts the lives of young women and gender-diverse individuals, hindering their development and

The realization of SRHRJ is indispensable for advancing the Sustainable Development Goals (SDGs), notably SDG 3 (Good Health and Well-Being) and SDG 5 (Gender Equality). Target 3.7 of SDG 3 emphasizes the importance of ensuring universal access to SRHS, while Target 5.6 of SDG 5 highlights the imperative of upholding sexual and reproductive rights. Iiii

Upholding SRHRJ not only benefits individual health and well-being but also contributes to environmental, social, and economic development. Prioritizing SRHRJ within the agenda of ICPD+30 and the broader framework of the 2030 Agenda is imperative to ensure inclusivity and equitable progress towards the SDGs, leaving no one behind.



Fós Feminista / Martin Gutierrez, Buenos Aires.

2. GBV: Gender-Based Violence

Monitoring and Implementation Insights

MQTM's scores for GBV focus on compliance in terms of the provision of specialized care for victims of GBV and assesses legal and operational frameworks for health services for victims and survivors, institutional coordination between health and justice systems, and available resources.

The average compliance score for GBV increased by a noteworthy 11%, rising from 57% in 2017 to 68% in 2023 across the 24 countries monitored by MQTM. This marks the most substantial improvement among the 13 themes monitored by MQTM. This improvement is attributed to enhanced coordination systems, effective referral of cases to specialized services by the ministries of health, and protocol improvements facilitating processes for accessing care. liv

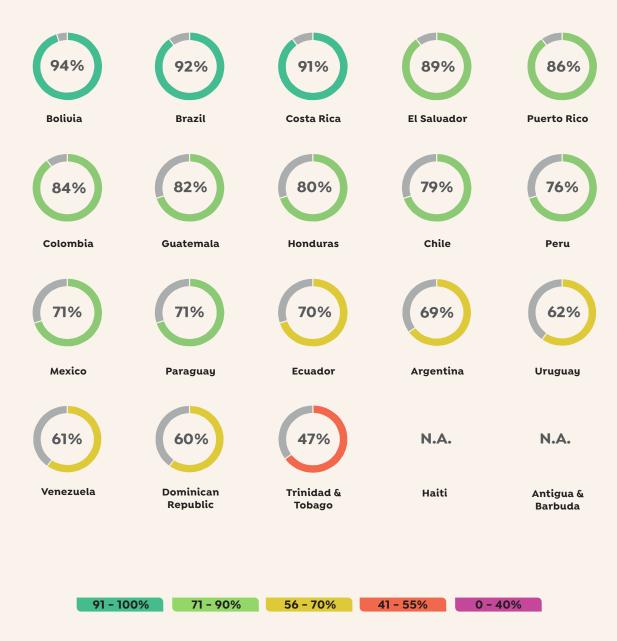
Across the 18 countries covered in this report, 67% have good and optimal compliance scores, with none falling into the deficient category. Trinidad & Tobago has the lowest score of 47%, facing resource shortages and a deficient legal framework. The average compliance score for the 18 countries included in this report is 76%, indicating an overall adherence to ensuring specialized care for victims of GBV.

Sub-regionally, the Caribbean shows the lowest compliance score, with both Trinidad & Tobago and the Dominican Republic exhibiting scores of 60% and below. Central America has good overall scores, with Costa Rica scoring highest at 91%. In South America, significant disparities exist, with Uruguay and Argentina falling into the "can improve" category. This is of note, since these countries generally score well on other SRHRJ indicators covered by MQTM. Ecuador and Venezuela face security and a humanitarian crises and are also classified as "can improve"



Fós Feminista / Kelly Castagnaro, Trinidad & Tobago.

Compliance Percentage



2.1. Central America

2.1.1 Legal, Programmatic and Financial Frameworks

A. Legal Frameworks



In Central America, support for victims of GBV is limited due to deficiencies in legal frameworks, as reported by MQTM. Notably, 80% of the countries in the sub-region score only 40%, with El Salvador being the sole exception, achieving a perfect score of 100%. This considerable gap in the legal infrastructure for GBV leaves the sub-region with an average score of 52%.

In Mexico, notable progress has been made in legal reforms aimed at addressing GBV since 2007 when the General Law on Women's Access to a Life Free from Violence lu was passed. This law mandates immediate medical care for victims of sexual violence, lui luii including comprehensive medical attention, injury treatment, psychological support, emergency contraception, HIV testing, safe abortion services, and ongoing specialized care. Iviii Victims also have the right to access abortion services without limits to gestational age, by submitting a sworn statement to any public health institution. lix Through the National Code of Criminal Procedure victim rights are protected, especially those of minors. Ix Police follow national protocols, Ixi and shelters provide confidential, highsecurity spaces with comprehensive care. Ixii

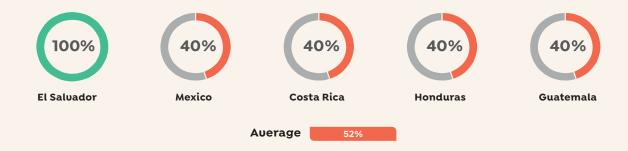
However, gaps persist, particularly regarding the revictimization of victims of GBV due to barriers in accessing justice, and the lack of alignment between government programs and feminist policies. Impunity within the justice system, and inadequate enforcement of laws remain significant barriers to tackling GBV in Mexico.

El Salvador, scoring highest on MQTM in the sub-region, shows significant progress in establishing foundational laws to address GBV. The "Ley de Igualdad, Equidad y Erradicación de la Discriminación contra las Mujeres" (LIE for its acronym in Spanish) passed in 2011 Ixiii and the "Ley Especial Integral para una Vida Libre de Violencia para las Mujeres" (LEIV for its acronym in Spanish) lxiv passed in 2012, along with numerous amendments since their passing, provide a comprehensive framework for prevention, protection, and sanctioning of GBV. However, gaps identified by CSOs include the exclusion of obstetric violence as a form of GBV in legislation and controversies surrounding revisions and reforms to existing laws by "Nuevas Ideas", the political party founded by current conservative president Nayib Bukele in 2017.

In Guatemala, the "Law Against Femicide and Other Forms of Violence Against Women" lxu was passed in 2008, and establishes femicide as a crime, lxui setting up specialized courts and tribunals to address these cases. Additionally, the "Law Against Sexual Violence, Exploitation, and Trafficking in Persons", passed in 2009, Ixuii the establishment of the "Secretariat Against Sexual Violence, Exploitation, and Trafficking in Persons" in 2009, *v and the national alerting systems "Alerta Alba-Keneth" from 2010 and Isabel-Claudina from 2016 lxix address the issue of missing children, girls, and women. These initiatives include specialized units for victim support, investigation, prosecution, and judicial proceedings. Yet, challenges persist, including the need for strengthening of support services, comprehensive victim assistance, and institutional reforms for effective law enforcement, as violent femicides continue to plague the country, characterized by patterns that exacerbate violence against the victims.

Costa Rica has passed 8 laws between 2009 and 2022 to address GBV prevention, including sexual harassment at work and school, abusive relationships with minors, street sexual harassment, obstetric violence, various forms of relationship violence, femicide, and political violence lxx lxxii lxxiii Ixxiv Ixxv Ixxvi Ixxvii However, gaps remain in the lack of restorative measures, unintended consequences of certain laws like further concealment of abusive relationships, institutional bias, insufficient preventive measures, and societal polarization preventing effective policy implementation.

In Honduras, recent milestones, such as the election of the first female president in 2022 show progress in advancing women's rights and SRHRJ. However, political polarization and ideological debates continue to hinder efforts to address GBV. Despite legal protections ensuring the right to access information and ensure transparency in public management of cases, policy reversals and stagnant initiatives to improve the functioning of databases within public institutions pose challenges to addressing the systemic issue of GBV. Ixxviii



B. Programmatic Frameworks



In Mexico, programs addressing GBV vary across states, with some placing the operational burden on state or municipal institutions dedicated to women. Ixxix Despite a state-mandated gender perspective across state institutions, comprehensive care and justice for GBV victims remain elusive. Resource shortages and misallocation of funds towards strategies lacking a gender perspective perpetuate harmful stereotypes, deepening the stigma experienced by victims. CSOs report gender inequality being embedded within institutions, which further hampers progress, hindering the effective implementation of GBV eradication initiatives. While mechanisms like Gender Alerts exist since 2007 to address and respond to high levels of GBV in specific regions of the country, Ixxx they struggle to address the complexity of GBV. The security crisis in the country, coupled with elevated levels of violence and exacerbated by gender inequality, leave women, girls and gender-diverse individuals vulnerable to severe violence with inadequate official responses.

In El Salvador, a lack of programs designed to address GBV, coupled with the impact of the COVID-19 pandemic have created a complex situation for victims of GBV. Limited funding for women's rights under President Bukele's administration indicates a concerning trend where women and genderdiverse individuals are deprioritized in public policies, exacerbating barriers to accessing support and justice for victims of GBV.

In Guatemala, the National Plan for the Prevention and Eradication of Violence Against Women (PLANOVI for its acronym in Spanish) was developed with input from CSOs in 2019. Ixxxi It aims to provide quality care to women in all their diversity, who are survivors of violence. CEDAW's Committee has advised allocating sufficient budgetary resources to implement this Plan in 2019, thereby ensuring access for systematically excluded communities. Ixxxii

Costa Rica's programmatic framework for eradicating GBV is comprehensive, addressing various aspects of prevention, victim protection, and perpetrator sanctions in its "Policy for the Attention and Prevention against Women of All Ages 2017-2032". Ixxxiii Programs include Service for the Attention and Protection of Victims and witnesses [xxxiv] and Specialized Centers for Care and Temporary Shelter for Women affected by Intimate Partner Violence. IXXXV The emphasis on reshaping societal norms and promoting positive masculinities reflects a proactive approach to addressing the root causes of violence. However, challenges remain in implementing and effectively monitoring advances, requiring ongoing evaluation, and adaptation, as well as resource allocation to ensure success.

In Honduras, the establishment of Specialized Comprehensive Care Modules in 2019 show promise in addressing GBV. Ixxxvi However, gaps such as limited availability of such modules (25 for the entire country) and the absence of shelters for victims of GBV, pose significant barriers to ensuring support and protection. Ixxxuii Inefficient state mechanisms for reporting and investigating violence further exacerbate the challenges faced by victims, highlighting the need for improved programmatic frameworks to address GBV effectively.

C. Financial Frameworks



According to MQTM, throughout Central America, the provision of Specialized Care for Victims of Gender Violence is effectively financed.

According to CSO-provided information for this report, in Mexico, despite a budgetary commitment to addressing GBV, there exists a significant gap between allocated funds and their effective utilization. The Program of Refuges, established in 1994 and with updated guidelines in 2023, lxxxviii is crucial for providing shelter and support to victims of GBV, but has experienced delays in budget allocation, affecting service-provision in various states.

CSOs report that El Salvador has witnessed substantial reductions in the budget allocated for programs dedicated to women's rights under President Bukele's administration. Budget cuts have affected critical initiatives such as Ciudad Mujer, established in 2011 through the Secretariat of Social Inclusion with the support of the Inter-American Development Bank to prevent violence against women. Ixxxix The overall budget for the implementation of the GBV Laws has dropped from approximately USD \$1.17 million in 2019 to USD \$1.15 million in 2022. xc Concerns about underspending of allocated budgets further exacerbate the issue, indicating a lack of effective financial management and potentially hindering the delivery of support to victims of GBV.

In Guatemala, the "Unit for the Prevention and Care of Crimes of Sexual Violence, Exploitation, and Trafficking in Persons" (SVET for its acronym in Spanish) has had an average annual budget of Q7,928,072.99 (around 1 million USD) over the last ten years (2013-2023) for GBV prevention and care, with an annual average execution rate of 68%. xci The SVET also allocates funds for services targeting girls, adolescents, and women victims of sexual violence, with annual average execution rates around 70%. Despite high execution rates of budgets, rates of GBV continue to increase, especially during the COVID-19 pandemic, indicating the urgent need for effective spending of allocated budgets.

Costa Rica allocates funds to various initiatives aimed at promoting gender equality and preventing GBV. These include dedicated budgets in 2023 for technical assistance, knowledge production, activities promoting equality and non-violence, training programs, direct assistance, information services, action plans, public officials training, inter-institutional mechanisms, normative proposals, and strengthening organizations, that amounts to 1,740,001,780 (\$3,479,616 USD). xcii However, the lack of involvement of civil society in determining budget priorities may limit the effectiveness of these initiatives.

Honduras spends significant amounts to combat security concerns, while dedicating 50 million lempiras (\$2,025,605 USD) in 2023 to GBV services such as survivor shelter resources and prevention initiatives. xciii While efforts to enhance security are crucial, the disparity in financial commitment raises concerns about the prioritization of GBV prevention and support for victims.



Fós Feminista / Erika Morillo, Guyana, 2013.



Key Themes

A. Territorial Inequalities



Mexico's 2020 Population and Housing Census highlights that 13.6 million women reside in rural areas, constituting 21.1% of the population of Mexican women and 10.8% of the total population in the country. xciv Data from the 2021 National Survey on Household Relationship Dynamics (ENDIREH for its acronym in Spanish) indicates that rural women in Mexico, particularly those living with their partners, face high levels of violence, with a lifetime prevalence of 38.7% and a prevalence of 20.5% within the last 12 months. xcv Among rural women, 17.7% are speakers of indigenous languages, contrasting with only 3.1% of non-rural women. Additionally, 2% of rural women identify as Afro-descendant, a proportion similar to that in urban areas. xcui The important proportion of rural women who are indigenous language speakers and Afrodescendants suggests that there are intersecting forms of discrimination that may exacerbate the vulnerability to GBV of these populations.

Similarly, in El Salvador a disproportionate number of violent deaths and feminicides occur in rural areas. According to data from the Ministry of Justice and Public Security released in 2021, of the 133 total violent deaths of women, 62 occurred in rural areas (47%), 11 in semi-rural regions (8%), 10 were not disclosed (7%) and 50 in urban zones (38%). In terms of the 80 registered feminicides, 38 took place in rural areas (47%), 32 in urban zones (40%), 3 in semi-rural areas (4%), and for 7 cases, the area of origin remained unknown (9%). *cuii This data also underscores the correlation between poverty and territorial disparities, with more women living in poverty in rural zones compared to urban areas in the country, xcviii suggesting that rural women may face unique challenges in accessing resources and support services, exacerbating their vulnerability to GBV.

In Guatemala, as of 2022, the Guatemala department, a regional subdivision, has registered the highest rates of GBV. xcix Furthermore, during the same year, there was an increase in the number of women victims of GBV in Alta Verapaz, a department characterized by a significant indigenous population and a high number of adolescent pregnancies. • This data reveals a consistent distribution of GBV across all regions, both urban and rural, with potential concentrated impacts observed in areas inhabited by indigenous communities.

Similarly, while Costa Rica aims to address territorial inequalities in its national policy framework for the attention and prevention of violence against women of all ages 2017-2032, ci there is a gap in implementing targeted measures to tackle these disparities. The temporary deactivation of five of 65 existing Municipal Women's Offices, entities that provide attention in rural and coastal

areas, and the appointment of gender-specialized professionals only to 13 offices due to budget constraints and lack of political will further widen the gap in service provision. cii This suggests that despite acknowledgment at the policy level, there are challenges in translating this recognition into concrete actions to support rural women and address territorial inequalities effectively.

In Honduras, the high prevalence of poverty among rural women (70%),ciii coupled with limited access to land ownership and financial services, underscores the systemic barriers hindering their economic empowerment. Additionally, challenges in accessing healthcare services further exacerbate their uulnerability to health-related issues. The data also highlights an alarming rise in GBV against rural women from older sons, partners, or employers, particularly during the COVID-19 pandemic, civ emphasizing the urgent need for targeted interventions.

B. Data Access, Generation, and Quality



In Mexico, GBV data generation and accessibility is robust, with periodic national surveys continuously collecting detailed information on various forms of GBV since 2003. Additionally, reported incidents resulting in criminal complaints are recorded by the Attorney General's Office and shared with national statistical agencies, ensuring reliable and up-to-date data for analysis. The latest ENDIREH survey from 2021 highlighted high rates of different types of GBV, with 70.1% of women reporting having experienced at least one form of psychological, physical, sexual, economic, patrimonial, and/or discriminatory violence during their lifetime. co

Conversely, El Salvador lacks recent available data, hindering efforts to understand the current landscape of GBV within the country. cvi The classification of data on feminicides and aggravated feminicides as confidential, limits public access and transparency. The decision to keep this information confidential has been justified by the National Civil Police as crucial for protecting national defense and public safety, however up-to-date information and timely and transparent data collection is important to inform policy and interventions.

In Guatemala, while up-to-date information on violent deaths of women is available through monthly reports by the National Institute of Forensic Sciences, and on **GBV** statistics by the Women's Observatory of the Public Ministry, cuit there is a need for disaggregation of data, particularly concerning complaints

and sentences related to GBV. From 2017 to 2022, the National Institute of Forensic Sciences conducted a total of 44,487 expert assessments related to sexual crimes against girls and women. cuiii

In Costa Rica, centralized, publicly available platforms offer detailed segmentation of GBV-related data, allowing for comprehensive analyses and informed policymaking. cix Information is categorized into groups such as femicide, domestic violence, and street harassment, allowing for in-depth insight into the type of GBV experienced. However, some datasets, such as those pertaining to offenses addressed by the Law against Street Harassment, remain outdated, with the last update dating back to 2021.

In Honduras, inadequate records and data management systems pose significant challenges in understanding the scope and severity of GBV. The lack of reliable databases impedes access to justice for victims and survivors, perpetuating a cycle of impunity. Urgent efforts are needed to establish trustworthy databases and improve data management practices.

C. Systematically Excluded Communities



Mexico's General Law on "Women's Access to a Life Free of Violence" (LGAMVLV for its acronym in Spanish) from 2007 and the "Comprehensive Program to Prevent, Address, Sanction, and Eradicate Violence Against Women 2021-2024" (PIPASEVM for its acronym in Spanish), ex both underscore the importance of strategies that are culturally apt and tailored to address Afro-Mexican and indigenous women's distinct needs. cxi Access to GBV services for transgender individuals in Mexico is largely provided by CSOs such as the Red Mexicana de Mujeres Trans and RedLac Trans, that help victims of GBV navigate the system. However, GBV services are centralized, meaning that trans individuals must trauel long distances for assistance, hindering their comprehensiue access. Similarly, in El Salvador the "Ley Especial Integral para una Vida Libre de Violencia para las Mujeres" (LEIV for its acronym in Spanish) makes explicit reference to GBV services for women with disabilities in Article 5, according to CSOs working in the country.

According to CSOs led by and working with indigenous women, it is difficult to find disaggregated official data that includes the ethnic or indigenous identity variable, making invisible the experiences and needs of indigenous women, girls and gender-diverse individuals in relation to GBV across the sub-region. However, some available data shows that in Mexico, indigenous women experience higher rates of physical and sexual violence than nonindigenous women, but a lower rate of emotional violence. cxii In El Salvador,

the prevalence of violence against indigenous women throughout their lives is **67.6%** compared to **67.2%** in the case of mestizo women. cxiii Additionally, in the Second Survey of Gender-based Violence against Indigenous Women in El Saluador, 41% of respondents reported having experienced violence at some point from their partners, mostly psychological and physical violence. cxii That same survey found that **24%** of surveyed Salvadoran indigenous women indicated experiencing obstetric violence by medical or nursing staff.

In Guatemala, some maternal health care centers, such as the Comprehensive Maternal and Childcare Center in San Cristóbal Verapaz, allow midwives to accompany women during labor and postpartum. Nevertheless, Guatemalan midwives interviewed in CSO's research have reported cases where they are not allowed to accompany women in labor in health centers both in Chimaltenango and in Santa Eulalia.

D. Intersectional and Intercultural Approach



Mexico's LGAMVLV and the PIPASEVM prioritize intersectional and intercultural approaches, recognizing the significance of culturally sensitive strategies to cater to the unique needs of diverse populations. However, it is evident across the subregion that significant investments are required to effectively implement these approaches within legal, programmatic, and financial frameworks.



Fós Feminista / Erika Morillo, Guyana, 2013.

E. CSO Participation



In Mexico, CSOs play a crucial role in addressing GBV by collaborating with state health departments to provide technical assistance in handling complex cases and conducting training and sensitization efforts within the healthcare sector. However, despite these initiatives, there is a notable gap in governmental efforts to involve civil society in designing budgetary and programmatic frameworks for addressing GBV, particularly during the current administration. Over the past five years, there has been a lack of horizontal dialogue, and negotiation between the government and CSOs, hindering collaboration.

In **El Saluador**, **CSOs** continuously advocate for improved and comprehensive services for victims of GBV, particularly as existing services become increasingly limited. Women's organizations and feminist groups consistently call out the dismantling of institutions supporting GBV victims. Government priorities, focused on the narrative of "war against violence," pose challenges for these organizations to influence a change in governmental priorities regarding GBV. In response to these challenges, CSOs are improving their capacities to offer comprehensive care programs for victims of GBV.

Guatemala's CSOs are actively involved in addressing intimate partner violence and GBV through mechanisms like the National Coordination for the Prevention of Domestic Violence (CONAPREVI for its acronym in Spanish), cxv which includes representatives from women's organizations specialized in eradicating GBV.

Costa Rica's CSOs play a pivotal role in addressing GBV, particularly in rural and coastal areas where state intervention is minimal. Organizations like "Asociación La Sala" provide essential support and accompaniment to sex workers, aiding them in reporting violence and accessing institutional services. Grassroots organizations in provinces like Guanacaste have emerged in response to a lack of awareness about reporting channels and police neglect, demonstrating the proactive role of civil society in addressing GBV. cxvi Feminist groups like ACCEDER have become go-to entities for information on how to report different forms of GBV. In Honduras, CSOs are actively engaged in raising awareness and preventing GBV.

3.1. The Caribbean

3.1.1 Legal, Programmatic and Financial Frameworks

A. Legal Frameworks



In the Caribbean, the legal frameworks for GBV services have an overall score of 80%, according to MQTM. Trinidad & Tobago faces deficiencies, whereas the Dominican Republic and Puerto Rico have optimal legal frameworks.

In Trinidad & Tobago, legislation from 1999 targeting domestic violence addresses both physical and sexual abuse, marking a crucial step forward. cxvii More recent developments include the establishment of "National Clinical and Policy Guidelines on Intimate Partner Violence and Sexual Violence" in 2022, emphasizing a holistic approach to survivors' needs. cxviii Moreover, the establishment of two sex offender registries, cxix alongside a policy to report workplace misconduct, cxx and the passing of the Sexual Offences (Amendment) Act in 2022, cxxi aimed at fortifying existing laws concerning sexual offenses, underscore the government's dedication to combatting GBV. Despite these strides, a notable gap remains with the absence of a National Policy on Gender and Development, which could serve as a foundational framework for systematically addressing GBV issues.

Antigua & Barbuda has made progress, passing GBV laws in 1995 exxii and 2015. exxiii However, gaps persist, with heteronormative language excluding nonbinary and gender-diverse individuals, and a lack of recognition of rape within marriage. Barriers to progress include insufficiently trained human resources, financial constraints, and a lack of political will.

In the **Dominican Republic**, the National Development Strategy, cxxiv incorporates a gender focus by aiming to empower women, and eradicate domestic violence and violence against women, children, and adolescents by 2030. The establishment of gender commissions at the municipal level underscores a commitment to address GBV comprehensively.

Puerto Rico has enacted laws to prevent and act on GBV with amendments in 2023, recognizing economic violence as form of GBV. cxxv Emergency measures and legislative actions demonstrate a commitment to address GBV, including the declaration of a state of emergency due to an increase in feminicides and trans-feminicides in 2021. cxxvi Additionally, protective measures have been put in place and CSOs can register to provide legal support to victims of GBV. cxxvii However, budgetary constraints and bureaucratic processes pose significant challenges, impacting the effective implementation of these laws.

Access to prevention programs and basic response services for survivors of GBV in Haiti faces severe limitations, with these services being underfunded and heavily dependent on external funding. cxxviii The availability of foreign assistance is primarily tied to humanitarian programs for areas affected by emergencies, creating significant gaps in coverage. cxxix Due to an increase in violence across the country, sexual violence against women and girls, particularly in **Port-au-Prince**, continues to escalate dramatically. cxxx

The United Nations has issued warnings, highlighting that sexual violence has reached alarming levels, with gangs employing rape as a form of terror and control. Furthermore, the absence of an effective government system complicates access to GBV services, especially legal support. Legislation addressing GBV remains pending in the Senate, while the national plan to combat GBV from 2017 to 2027 has yet to be implemented due to inadequate human, technical, and financial resources. cxxxi UN experts have expressed grave concerns about the escalating violence in Haiti, particularly sexual violence and exploitation perpetrated by gangs against women and children. They stress the challenge of accurately quantifying the extent of the problem, as many cases go unreported or are ignored, resulting in unreliable data. cxxxii



B. Programmatic Frameworks



In Trinidad & Tobago, significant progress has been made in establishing specialized units within the police service to handle GBV cases effectively. The launch of the GBV Unit in 2020 cxxxiii demonstrates a concerted effort to provide better leadership and management of GBV cases. Additionally, in 2022, a national task force against human trafficking exxxiv was commissioned to tackle the significant rise in sex and labor trafficking in the country, a form of GBV that particularly affects vulnerable migrants and refugees, especially amidst the humanitarian crisis in neighboring Venezuela. cxxxv However, gaps persist with a lack of adequate services for gender-diverse victims of GBV. The under-resourced community policing program faces staffing and training limitations, hindering its effectiveness in rural communities. The availability of shelters or transitional housing for victims of GBV is limited.

Antigua & Barbuda established a Support and Referral Center in 2017 to support victims of GBV. cxxxvi The Dominican Republic has implemented comprehensive strategic plans to address GBV cxxxviii cxxxviii cxxxix focusing on gender equality and equity. These plans focus on education, health, economic freedom, and digital empowerment for women. Additionally, in 2018, a 24/7 helpline operated by the Ministry of Women was set up to provide immediate support to GBV victims. cxl

Puerto Rico has made progress in addressing GBV since 2007, through the creation of Specialized Courts that handle both domestic and sexual violence cases. cxli

C. Financial Frameworks



Across the Caribbean, there is a need for improvement in the provision of financial resources for GBV services, as evidenced by the region's overall score of 67%, according to MQTM. Trinidad & Tobago stands out for its lack of funding for GBV, contrasting with the Dominican Republic and Puerto Rico, which have optimal financial frameworks, according to MQTM.

In Trinidad & Tobago, while funding for the GBV Unit is assumed to be covered under the overall police budget, there is no specific line item identifying the allocation for the Unit. cxlii This lack of clarity poses a significant gap in the implementation process, hindering effective resource management and accountability.

Antigua & Barbuda's Ministry of Social Transformation, Human Resource Development, Youth and Gender Affairs was allocated 22.1 million (approximately **USD\$**750,000) in 2021. cxliii According to Women Against Rape's report, an unspecified proportion of the budget designated for the Directorate of Gender is disbursed to address the needs of GBV survivors, especially internally displaced persons. Despite the availability of some funds, the budget is insufficient to meet critical areas, such as staffing, and space.

The Dominican Republic funds 23 priority SRHRJ programs including those focused on reducing gender-based and intra-family violence. However, challenges persist in relatively small allocations compared to the overall budget, indicating a gap in prioritizing initiatives aimed at tackling GBV.

In Puerto Rico, the Office of the Women's Advocate receives funding for GBV programs, yet according to CSOs this is insufficient to effectively address GBVrelated needs. cxliv

Key Themes

A. Territorial Inequalities



In Trinidad & Tobago, rural-urban disparities are particularly of note in relation to service provision and resource allocation. The population growth in rural communities outside the main cities of Port of Spain and San Fernando, has led to an increased demand for services in these rural areas. However, limited resources and infrastructure pose challenges in adequately addressing the needs of GBV survivors and providing support services. Additionally, the influx of migrants, particularly from neighboring Venezuela due to humanitarian and economic crises, further strains available resources, exacerbating the existing disparities. cxlv Despite these challenges, CSOs and the private sector have been instrumental in collaborating with the government to ensure basic needs are met.

Antigua & Barbuda also grapples with rural-urban disparities that impact the accessibility and adequacy of GBV services. Limited resources at government community clinics result in severe issues related to access and adequacy of goods and services, particularly for individuals in rural and suburban areas. According to CSOs, community clinics report periodic stockouts of essential products, further underscoring the challenges faced by rural communities in accessing vital GBV support services.

In **Puerto Rico**, municipalities with high rates of poverty, report elevated rates of intimate partner feminicides, exlui exluii underscoring the disproportionate burden of GBV for these communities. A neglect of rural, coastal, and mountainous areas in existent initiatives, underscores the urgent need for comprehensive and inclusive strategies in GBV prevention and response efforts.

B. Data Access, Generation, and Quality



In Trinidad & Tobago, the Crime and Problem Analysis Branch of the Trinidad and Tobago Police Service (TTPS) tracks crimes in the country yet lacks specific data on cases of GBV. cxlviii

Similarly, in Antigua & Barbuda, data accessibility and quality are limited, hindering efforts to adequately address GBV. In the Dominican Republic, efforts by the National Statistics Office to enhance data systems have resulted in improvements, allowing for a better understanding of GBV and its impact. Initiatives such as the biannual National Labor Force Survey provide data on GBV within workplace environments. exlix However, gaps persist in the availability of specific data on groups such as rural, migrant, disabled, and LGBTIQ+ individuals, highlighting the need for more targeted data collection efforts to address their unique challenges.

Puerto Rico faces challenges in data availability regarding GBV, with variations between government agencies and a reliance on third-sector organizations, particularly the Gender Equity Observatory, cl for comprehensive data on women's deaths.

C. Systematically Excluded Communities



In the **Dominican Republic**, there is an absence of programs to support victims and survivors left disabled after experiencing GBV, especially those with gunshot wounds or disfigured by acid attacks. Furthermore, no specific legislation is in place to protect Afro-descendant GBV victims.

In the wider Caribbean sub-region, a widespread lack of legal recognition for transgender individuals, severely impedes trans individuals' access to GBV services. Guyana and Trinidad & Tobago have made strides by integrating a gender-neutral rape definition into their Sexual Offences Acts, with Guyana repealing the cross-dressing law in 2018 and formally removing it from legal texts in 2021. cli However, these advancements do not automatically ensure the safety of trans or gender-diverse victims and survivors. Notably, dedicated funding to address GBV in the LGBTIQ+ community remains insufficient. clii

D. Intersectional and Intercultural Approach



Trinidad & Tobago, Haiti and the Dominican Republic lack publicly documented programs that incorporate intersectional and intercultural approaches in GBV programs. Antigua & Barbuda demonstrates some consideration of different cultural backgrounds in its approach to eradicating GBV, accommodating the diverse linguistic landscape of the country, by providing information in English and Spanish. Puerto Rico lacks intersectional and intercultural approaches to addressing GBV.

E. CSO Participation



In Trinidad & Tobago, CSOs combat GBV through advocacy, public awareness campaigns, education, and support services. This proactive engagement reflects a growing recognition of the need for coordinated efforts between CSOs and the government to effectively address GBV.

In Antigua & Barbuda, civil society plays a significant role in addressing GBV, particularly through its contribution to legislative processes. CSOs have provided valuable input and feedback on legislation such as the Domestic Violence Act, ensuring that laws are comprehensive and responsive to the needs of survivors.

In the **Dominican Republic, CSOs** produce important evidence on gender discrimination in emerging sectors, cliii vulnerabilities faced by domestic workers, cliv and the prevalence of Dominican women in low-skilled jobs, including global care chains and sex work. clu These studies underscore the multifaceted nature of GBV and the need for targeted interventions to address the diverse challenges faced by different groups.

In Puerto Rico, CSOs have played a significant role in legislative advocacy and activism, particularly in the creation and amendment of laws addressing GBV. Notably, individuals like Velda González de Modestti, a leader that promoted laws prohibiting intimate partner violence (Ley 54, 1989), clvi and feminist organizations have been instrumental in advancing legal reforms to eradicate GBV.

4.1. South America

4.1.1 Legal, Programmatic and Financial Frameworks

A. Legal Frameworks



In South America, half of the countries score either 40% or less in relation to legal frameworks on GBV. The other half registers perfect scores. This dichotomy underscores a significant disparity in the legal foundations underpinning access to services for victims of GBV in the sub-region. The sub-region's overall score is 66%.

While Chile lacks a mechanism to address GBV in the Penal Code, the country allocates resources, and has existing operational frameworks, indicating that measures beyond legal frameworks can provide support to victims of GBV.

In Brazil, a 2013 law mandates immediate attention be provided to victims of GBV without requiring a police report. cluit Additionally, laws from 2012 cluit and 2015 cui extend the statute of limitations for sexual abuse crimes and provide reconstructive plastic surgery to treat injuries resulting from acts of GBV. Three key Decrees from 2013 clx clxi and 2016 clxii have laid down essential guidelines for public security and healthcare professionals responding to cases of sexual violence. Additionally, they recognize diverse gender identities, thus fostering inclusivity. Furthermore, Resolutions from 2015 clxiii and 2016 clxiv clxv established registries to document domestic and interpersonal violence and mandated the creation of the Observatory of Women against Violence.

Uruguay's comprehensive law for a life free from GBV has been in place for five years. cxiii The law is inclusive, recognizing the rights of trans women and those with diverse sexual orientations. It sets guidelines for health policies and service providers, and mandates comprehensive service coverage to individuals who have experienced GBV and their children. Despite these positive strides, there is a notable gap in the implementation of the law, with deficiencies in its enforcement, awareness, and resource allocation.

In Argentina, laws from 2009 clxvii and 2018 clxviii clxix ensure economic compensation for children of women victimized by femicide or homicide related to intra-family violence or GBV, offer extensive protection against various forms of violence against women, including sexual violence and obstetric violence, and stress the importance of gender-focused training, highlighting the commitment to eradicating GBV across diverse sectors in Argentina. The National Action Plan for Gender-Based Violence (2022-2024) demonstrates the government's commitment to a holistic approach. clxx The Integrated System of Gender-Based Violence Cases oversees information pertaining to GBV incidents. clxxi

Chile's legal framework primarily addresses intrafamily violence and femicide, with a bill pending since 2017 on the right to a life free from violence. claxii Gaps in Chile's legal approach include a lack of regulation for referral of cases of GBV to health services or justice mechanisms, and insufficient coordination between public and private institutions for victim care. The implementation of penalties for street-level and workplace harassment is considered impractical. leading victims to hesitate reporting incidents due to the possible adverse effects on their employment. clxxiii

Paraguay has passed several laws since 2000 clxxiv clxxvi clxxvii to prevent and sanction human trafficking, to support victims of domestic violence, impose penalties for sexual harassment, and ensure protection for those experiencing GBV. Despite these legal measures, challenges persist in terms of implementation, judicial shortcomings, limited awareness, and resource allocation issues. Overcoming cultural barriers and meeting the distinct needs of SEC, including LGBTIQ+ individuals, pose challenges for victims of GBV accessing services.

Bolivia has passed laws since 2013 classifying 16 different types of violence, clxxviii and providing access to justice for victims by streamlining legal procedures. clxxix clxxx Bolivia is a pioneer in the region penalizing harassment and political violence against women. clxxxi However, challenges remain, including the absence of a centralized violence registry, hindering targeted policy formulation. Despite the existence of a victim care protocol, its effective implementation is limited due to a lack of knowledge and training for those providing care. Addressing cultural shifts is imperative, to tackle patriarchal norms within the judicial system and emerging forms of violence, including cyber violence.

Colombia passed several laws since 2008 with the aim of guaranteeing rights and eradicating GBV. clxxxii clxxxiii clxxxiii clxxxvii clxxxvii clxxxvii These laws provide various measures, including ensuring access to justice for victims of sexual violence, criminalizing feminicide, prioritizing housing subsidies for victims of GBV, setting up shelters, and penalizing acid attacks. However, challenges persist in their effective implementation, with high rates of feminicides, domestic violence, and sexual offenses. Resource and infrastructure limitations hinder support for victims, while comprehensive mechanisms for monitoring and evaluating the effectiveness of laws are lacking.

Peru's National Policy on Gender Equality from 2019 clxxxviii and a law from 2015 clxxxix are commendable steps, but intersectoral collaboration needs improvement. Robust public policies are required to address GBV comprehensively. For instance, although obstetric violence is acknowledged as a form of GBV, cxc the National Observatory on Gender Violence lacks comprehensive data on this issue. cxci Despite legislative advancements, obstacles persist in accessing justice, primarily due to gender biases within the legal system. Additionally, there is a lack of recognition of other forms of GBV.

Venezuela's Organic Law on Women's Right to a Life Free from Violence (2007) excii and subsequent expansions and reforms in 2014 and 2021 exciii are important steps in tackling GBV. These reforms introduced new forms of violence, increased penalties, and established a National Commission to guarantee women's right to a life free from violence. Additionally, a Clinical Protocol from 2020 aims to guide healthcare professionals in the care of sexual violence victims. <code>cxciv</code> In response to escalating GBV as an effect of the humanitarian crisis, particularly sexual abuse and exploitation, UNFPA, with support from various humanitarian agencies, developed Standard Operating Procedures in 2021, cxcv to enhance coordination and response efforts among actors in the humanitarian field to recognize and restore the rights of survivors. However, the 2021 reform cxcvi does not align with international conventions, according to CSO reports. Barriers involve the law's initial focus on violence against women, potential socio-cultural biases among police officers, and challenges in implementing the law due to the deinstitutionalization of the justice system.

Ecuador's constitutional advancements and legal reforms have been instrumental in securing gender parity in electoral representation and safeguarding the rights of victims of sexual offenses and GBV. Key developments include the inclusion of femicide in 2014 excuit and the enactment of the Law to Prevent and Eradicate Violence Against Women in 2018. excuiii However, the absence of a unified registry of cases of GBV limits efforts to fully understand the issue. Alarming statistics cxcix in Ecuador reveal the pervasive nature of the issue, impacting millions of women and gender-diverse individuals with significant social, economic, and personal costs.



B. Programmatic Frameworks



In Brazil, notable progress is observed with initiatives focusing on specialized care for victims of GBV and employing strategies such as education and advocacy campaigns. cc cci ccii However, increasing cases of GBV, particularly firearm-induced violence, ccili pose a significant concern. The emergent trend of political violence against women and gender-diverse individuals requires attention, cciu

Uruguay has implemented protocols and expanded services for victims of GBV, yet the lack of political prioritization and wide-spread budget cuts hinder effective implementation. Protocols are in place within the health sector to address domestic violence in adolescents and violence against children in primary schools. ccu ccuii ccuiii The National Institute for Women has expanded services, but demand remains high, with a particular increase in violence against adolescents. ccix Other challenges include a lack of compliance to policies, ensuring technical resources are available nationwide, and a monitoring of application mechanisms.

Argentina's initiatives focus on providing direct assistance, making available emergency hotlines, strengthening institutions, promoting economic independence, and facilitating access to rights for victims of GBV. ccx ccxi ccxii ccxiii ccxiu ccxu Additionally, awareness and training in the private sector, ccxui rural development, ccxvii support for victims of extreme GBV ccxviii and the inclusion of women and LGBTIQ+ individuals with disabilities ccxix in programs is prioritized.

Chile's commitment to addressing GBV is evident through its longterm national action plan spanning from 2021 to 2030, ccxx emphasizing a collaborative approach across government departments. Noteworthy programs implemented by the Ministry of Women include Women's Centers, Specialized Care Centers for survivors of sexual violence, Safe Houses, and Re-education Centers for perpetrators of violence. ccxxi The "Line of extreme" violence, femicides, and cases of public notoriety" involves 16 regional officials who process legal cases related to attempted and consummated femicides and those of public significance. However, the focus of these programs is primarily on individuals aged 14 to 29, potentially excluding other vulnerable age groups.

In Paraguay, the National Plan for the Prevention and Management of GBV (2020-2025), ccxxii and protocols that address GBV have been published since 2018 and focus on empowerment and eliminating discrimination, including in the workplace. ccxxiii ccxxiu ccxxu However, a judicial deficit and a lack of gender perspective in reporting remain significant barriers.



Fós Feminista / Giselle's visit to Bolivia

In Bolivia, national services work on GBV prevention and eradication. ccxxvi ccxxvii However, women remain underrepresented in decision-making roles, and gender biases and judicial delays in the investigation processes for cases of GBV, pose challenges. The absence of safeguards for LGBTIQ+ individuals and pending healthcare protocols present additional barriers to effective implementation of GBV-related policies and programs.

Colombia has developed comprehensive plans and applied intersectoral strategies for prevention and victim support, registering cases and setting up an early warning system. ccxxviii ccxxix ccxxx However, gaps include the absence of a specialized system for tracking violence and feminicides, and a lack of well-trained officials.

In Peru, awareness, dissemination, and prevention programs exist, however, comprehensive information regarding their implementation and progress remains scarce. Notable gaps include the absence of a specific care pathway to guide the treatment of sexual violence victims and deficiencies in training for healthcare personnel. Furthermore, victims often do not receive the full spectrum of essential services and materials, according to CSO reports.

Venezuela's GBV hotline ccxxxi and training programs ccxxxii are important services for GBV case management. In 2020, healthcare professionals were trained on the clinical management of sexual violence, ccxxxiii yet details about program implementation, reach, and quality is not readily available.

In Ecuador, sufficient resource allocation and awareness among the public and relevant sectors are crucial to ensure programs have a tangible impact on the ground. Issues that GBV programs face in effective implementation include a lack of trust in the justice system and a knowledge gap among beneficiaries in accessing protection measures, underscoring the importance of awareness and education initiatives.

C. Financial Frameworks



Financial frameworks for addressing GBV are present in 60% of the countries in the South American sub-region that are monitored by MQTM. Peru, Bolivia, and Venezuela, from the Andean sub-region, lack allocated budgets for providing specialized care to victims of GBV. The overall score for South America stands at 60%, indicating room for improvement in the implementation of financial mechanisms.

In Brazil, the assigned budget for addressing GBV has declined significantly since 2015, even though the overall budget for social protection increased over that period. ccxxxiv This discrepancy raises questions about the prioritization of GBV. Uruguay's budget covers the establishment of three specialized courts in the country, indicating resource constraints that affect the operationalization of comprehensive anti-GBV measures. Currently, only one court is operational. ccxxxu ccxxxui

In Argentina, the Ministry of Women, Gender, and Diversity utilized 32.9% of its 2023 budget to support victims of GBV and restore the rights of children and adolescent affected by violence. The judicial system's expenditure focused on strengthening its ability to provide legal support for children and adolescent victims of sexual abuse, using 24.6% of its budget in 2023. ccxxxvii

Chile's detailed budget allocation emphasizes support for comprehensive care, protection, reparation, and prevention programs. The budget for preventing violence supports programs for approximately 117,000 women through awareness and training initiatives. ccxxxviii

Paraguay allocated approximately 21.7 billion Guaraníes (around USD\$2.9 million) in 2023 for gender-related activities, including the prevention and support for women experiencing violence. ccxxxix However, detailed information on budget disbursement is lacking. According to the World Bank, only 0.03% of the total government budget in 2018 was dedicated to addressing violence against women, with a primary focus on victim care. ccxl The Ministry of Women and Public Prosecutor's Office received most of these funds.

Bolivia's financial investment in GBV programs is limited and varies between municipal departments. A 9.8% drop in the executed budget for GBV in 2021 signals potential challenges in planning and resource allocation. ccxli

The Colombian government allocated 500 billion pesos (around USD\$129 million) to establish a National Care System in 2023, which encompasses various programs and strategies, including those aimed at addressing GBV. ccxlii The total budget allocated to the Ministry of Women in 2023 amounts to 524,983,864 Bolivares (approximately **USD\$**16.9 million), **ccxliii** and is said to include provisions for comprehensive care, awareness, organization, training, and prevention actions to tackle GBV. However, it lacks specific details regarding the allocation for these activities.

In Ecuador, the budget allocated to address GBV decreased from USD\$18 million in 2019 to USD\$11 million in 2020, ccxliv highlighting a shift in prioritization for this issue.



Key Themes

A. Territorial Inequalities



In **Brazil,** the Southern regions of the North and Northeast of the country face escalating levels of GBV, driven by intersecting factors of sexism, racism, and economic deprivation. ccxlu The Northeast, despite grappling with acute public safety challenges, tends to be overshadowed in national discussions, raising concerns about unchecked police aggression. Sexual abuse is pronounced in the Southeast, Northeast, and Central West, home to Afro-descendants and indigenous populations. ccxlvi

In Chile, specialized care centers for women survivors of sexual violence have limited geographical coverage. Paraguay notes limited GBV program implementation in peripheral areas of the country and those with the highest needs, home to indigenous communities and rural farmers. Government facilities providing services are centralized in the capital. The Ministry of Women has a nationwide toll-free contact line, Línea 137, for victims of GBV, ccxlvii but it is not well-known in rural areas.

Specialized courts that address cases of GBV are in Bolivia's capital city, creating barriers for victims seeking justice in rural areas, ccxlviii home to Quechua, Aymara and other indigenous communities. Moreover, according to the Prevalence and Characteristics Survey of Violence Against Women, ccxlix the prevalence of violence from partners is notably higher in rural areas. In Colombia, areas facing the highest rates of GBV are mostly inhabited by numerous indigenous communities, including Tucano, Huitoto, and Sikuani, as well as Afro-Colombian communities like the Raizal people, and should be prioritized in governmental programs. ccl

In Venezuela, victims of GBV in hard-to-reach areas face challenges in reporting and receiving assistance, exacerbated by transportation issues due to gasoline scarcity and limited availability of resources, including postexposure prophylaxis kits in cases for sexual violence. Additionally, a significant proportion of the national territory lacks safe spaces for victims of GBV.

In **Ecuador**, data is scarce and makes a robust analysis of territorial inequalities difficult. Nonetheless, CSOs underscore a lack of awareness of the procedures and protocols required to access protection measures when experiencing GBV. Uruguay, Peru, and Argentina lack detailed information on GBV disparities across their respective countries.

B. Data Access, Generation, and Quality



In Brazil, a number of data sources for GBV exist, ccli cclii ccliii ccliii providing a robust overview of GBV cases, with a specific emphasis on feminicides and cases of sexual aggression. Feminicide declined by 2.4% between 2020 and 2021, yet sexual violence rose by **3.7%** during the same period. cclu Uruguay has a Gender Violence Observatory, cclvi however, the country faces challenges in centralizing information, hindering a comprehensive overview. Despite a high GBV prevalence, the lack of outcome data for program implementation and a discrepancy in the number of feminicides between CSOs and the Ministry's Observatory emphasize the need for a more cohesive data infrastructure.

In Argentina, a national tool which has been operational since 2020, ccluit systematizes and manages information related to cases, inquiries, and reports of GBV. Additionally, it complements the Femicide Registry of the Supreme Court of Justice of the Nation. ccluiii

In Chile, data on GBV is collected by the Subcommission of Gender Statistics, focusing on femicides, physical violence prevalence, and other related data. cclix The Survey on Violence against Women in the Context of Domestic Violence and in Other Spaces cclx and other Crime Statistics with a Gender Perspective ccviii by the Sub secretariat for Crime Prevention offer insights into GBV trends. Paraguay collects and shares data through two national platforms, cclxiii cclxiii highlighting a commitment to identifying and addressing gender disparities.

Bolivia's last national survey on the prevalence and characteristics of violence against women dates back to 2016. cclxiv Furthermore, there is a notable absence of national registries providing disaggregated data for the LGBTIQ+ community, with insights into violence against this community relying solely on reports from civil society or mainstream news.

Colombia's data on GBV is disaggregated by gender, age, and other variables, showing a governmental commitment to revealing disparities. cclxv

In Peru, CSOs gather and systematize information through public information requests and research initiatives, particularly focusing on marginalized groups, as available data remains scarce and incomplete. Data from 2017 indicates that sexual violence, especially against children and adolescents, is underreported, and cases of feminicide are concerning, cclxvi The pandemic worsened violence against children and adolescents, with many cases of rape perpetrated by family members. cclxvii

Venezuela has not updated data on GBV since 2016, cclxviii and CSOs rely on data from unofficial channels such as Twitter updates from the General Prosecutor and Human Rights Committees. The absence of disaggregated and standardized

data poses a significant challenge. CSOs are actively engaged in documenting feminicides and violence against women, yet disparities in methodological approaches may result in divergent findings and interpretations.

Ecuador's Violence Registry was set up in 2022 to comprehensively document and monitor violence against women, aligning with the objectives of the Law to Prevent and Eradicate Violence Against Women. cclxix However, the initiative faces resource constraints preventing its actual implementation.

C. Systematically Excluded Communities



In Southern Cone countries, programs designed to address language or cultural barriers for marginalized groups, such as indigenous, Afro-descendant, disabled, youth, adolescent, and transgender and gender-diverse populations is lacking. Only Argentina has programs in place, including a Ministry that recognizes Genders and Diversity (Ministerio de las Mujeres, Géneros y Diversidad), cclxx that cater to the GBV needs of LGBTIQ+ individuals. cclxxi

The **Bolivian** government acknowledges the need to address gender, race, and generational inequalities, specifically via the application of provisions from the World Conference against Racism. cclxxii This recognition is particularly significant for Afro-Bolivians, emphasizing the intersectionality of discrimination faced by women and young people within this demographic.

In Peru, accessibility issues persist for SEC in accessing GBV services, due to language barriers, mobility challenges, and poverty. This leads to underreporting of GBV, particularly among indigenous and Afro-Peruvian communities. Healthcare professionals often engage in obstetric violence, further endangering marginalized individuals.

In Venezuela, data suggests that specific communities, particularly Afrodescendant and indigenous populations, do not receive adequate attention in GBV services, which lack tailored approaches that address the unique needs of these populations.

CSO reports highlight the extensive challenges faced by indigenous women in the sub-region, in exercising their sexual and reproductive rights, including systemic institutional violence, sexual violence, obstetric violence, and domestic violence, rooted in societal racism and discrimination. Early and forced unions exacerbate the vulnerability of young indigenous girls.

D. Intersectional and Intercultural Approach



In Brazil, Uruguay, Argentina, Chile, Paraguay, Peru, and Ecuador intersectional and intercultural approaches in policies addressing GBV are absent.

Despite legal recognition of the rights of indigenous peoples, people with disabilities, and gender-diverse individuals in **Bolivia**, cclxxiii there are no specific policies addressing their needs in relation to GBV. Intersectionality criteria are not effectively integrated into violence prevention programs, highlighting a gap in addressing the multifaceted experiences of Bolivian women.

The Clinical Protocol in Venezuela lacks an intersectional approach, failing to address the diverse needs and experiences of individuals based on their intersecting identities. Colombia stands out in the Andean region for its commitment to an intersectional approach in addressing GBV. The Public Policy on Gender Equity explicitly incorporates intersectionality, recognizing and addressing the diverse needs of victims of violence based on their territorial, ethnic, economic, and social backgrounds. cclxxiv However, while the policy framework acknowledges intersectionality, concerns remain regarding the effective implementation and accessibility of programs for diverse populations.

E. CSO Participation



In Brazil, CSOs play a crucial role in addressing GBV, advocating for the provision of CSE to prevent GBV cclxxv and producing independent research, and data on violence against black women and transgender individuals. cclxxvii cclxxvii

Uruguay's CSOs focus on evidence systematization and awareness raising, as political advocacy strategies. Organizations like "Iniciativas Sanitarias" cclxxviii are actively involved in training healthcare personnel and addressing sexual and intimate partner violence, including programs targeting pregnancy in early childhood and the adaptation of the WHO-PAHO Clinical Manual on addressing sexual or partner violence against women. cclxxix CSOs in Uruguay actively engage in the monitoring and reporting of feminicides.

CSO's in Chile provide technical advice and follow-up on bills to address GBV. In Paraguay, CSOs carry out public hearings on femicides. cclxxx CSOs collaborate with the Ministry of Women to promote equal rights and prevent and intervene against GBV, including the creation of the National Action Plan for Lives Free from Gender Violence 2022-2030. cclxxxi

Bolivian CSOs actively participate in policy formulation cclxxxii map directories to identify rights defenders and set up gender-focused observatories to track GBV cases. Organizations engage in legislative and policy advocacy, contributing to compliance reports for international human rights committees and providing feedback on legislative initiatives. Many CSOs run communication campaigns aimed at preventing GBV and address related issues.

In Colombia, CSOs play a crucial role in raising social awareness and implementing grassroots initiatives aimed at combating GBV. These initiatives encompass territorial work, strategic litigation, and providing support to victims. This has been instrumental in enhancing visibility and denouncing GBV. cclxxxiii Collaborative efforts with the government involve inclusive planning, ensuring that gender-focused needs are prioritized in the National Development Plan and in the development of government pathways, programs, or strategies.

In Peru, CSOs play a leading role in driving demands to eradicate GBV, especially concerning the recognition of diverse forms of GBV. In response to the lack of comprehensive public information, CSOs actively collect and systematize relevant data, conduct exploratory studies, and research on SRH, with a particular focus on SEC such as Afro-Peruvians. Feminist movements have consistently emphasized that demands related to women's rights and other social, economic, and cultural rights must remain at the forefront of the public agenda and cannot be sidelined.

In Venezuela, the realm of GBV care and prevention is largely overseen by CSOs, which serve as implementing partners operating within the framework of the Humanitarian Response Plan for 2022-2023. Ecuador showcases civil society's active participation in shaping laws and policies related to femicide and GBV prevention.



Fós Feminista / Lemon Torre Recife, Brazil.

Recommendations



1. Unified Governance and Collective Planning:

- Develop comprehensive national and local action plans, fostering inclusion of government, civil society, media, and the private sector. Aim to advance human rights and eliminate violence against women and girls and genderdiverse individuals.
- Cultivate collaboration between organizations. collectives, advocates, and survivors at all government levels. This collective engagement seeks to proactively prevent. address, eliminate, and penalize GBV.

- Introduce compensation mechanisms for families affected by police brutality.
- Oblige states to provide psychosocial aid for families impacted by police violence, ensuring holistic recovery.
- Establish transparent procedures for victim support and rehabilitation.
- Strengthen training for personnel in prosecutorial law enforcement and agencies. extending beyond specialized units to prevent revictimization.
- Create comprehensive protection mechanisms for women and genderdiverse individuals throughout their lifecycle, integrating a generational perspective to address diverse needs.

3. Transformative **Reforms in Public** Security and Law **Enforcement:**

- Undertake justice system reengineering towards an integral, feminist, prompt, and efficient model.
- Re-envision public strategies, security prioritizing social justice ouer mere policing.
- Promote reforms ensuring public safety aligned with human rights.
- Ensure timely legal proceedings against police involved in violent crimes.
- Introduce protocols accounting for diverse experiences and vulnerabilities faced by different groups of victims GBV. emphasizing intersectionality.

4. Protection of Advocates and Addressing **Institutional Violence:**

- Ensure the safety of human rights defenders, considering intersections of race, gender, and territory.
- Develop protocols addressing institutional violence and tracking cases involving government officials.
- Ensure electoral equality with a 50% quota in upcoming elections and electoral reform laws against gender-based political violence.

5. Prioritized Funding for Impactful **Interventions:**

- Elevate funding for GBV prevention, holding health/public safety sectors accountable.
- Emphasize the importance of allocating adequate budgets for continuous shelter and reintegration strategies. ensuring sustained support for survivors of genderbased violence.

6. Data-Driven **Approaches to Eradicate GBV:**

- Enhance data transparency related to GBV, emphasizing monitoring. reporting. and user satisfaction metrics, with a focus on cases related to gender orientation, identity, and expression.
- Reinforce mechanisms for monitoring cases involving government officials allegedly violating the rights of women, girls and gender-diverse individualsduring their duties.
- Expand data collection on gender-based political violence with racial insights.

Best Practice



Costa Rica, a country in Central America, has been actively addressing the issue of GBV. The context is marked by efforts to enhance access to justice for victims, evident through the publication of statistics from the Gender Violence Observatory against Women and Access to Justice of the Judiciary. cclxxxiv Additionally. the establishment of the National System for the Attention and Prevention of Violence against Women and Intrafamily Violence underscores the commitment to address GBV comprehensively. CCLXXXV



Challenge

Despite these efforts, challenges persist, especially in the recognition and characterization of certain types of GBV. The existing legal framework had a restrictive definition of femicide, primarily regulating contexts within intimate relationships, ccxxxiii However, it became apparent that GBV is multifaceted and extends beyond partner contexts, even involving state agents.

Moreover, a significant weakness in the current legal framework on GBV lies in its exclusive focus on punitive measures, lacking the incorporation of restorative approaches. The emphasis is on the perpetrator rather than addressing the needs of the victim, survivor, or their family members.

The Initiatives

Broadened Definition of Femicide: To address the challenge of a restrictive definition, the Judiciary introduced the category of "broad or expanded femicide" in 2021. *cclxxxvii This innovation aims to capture the various forms of GBV, acknowledging that it can occur both within and outside intimate relationships. The initiative reflects a commitment to understanding the pervasive nature of GBV.

Protocols for Victim Care:

Protocols related to the care of victims of violence haue been established. showcasing the management model implemented the by National Patronage of Infancy (PANI for its acronym in Spanish). cclxxxviii These protocols spectrum couer а abuses, including physical, emotional, and sexual, as well as conflicts within families and cases of trafficking. Despite these protocols, challenges arose due to gaps in the application of regulations and processes within the institution.

Prosecutor's Office for Sexual Harassment:

2018. the State responded to the need for specialized attention sexual harassment cases by creating the Prosecutor's Office for the Prevention and Attention Sexual Harassment cclxxxix This Complaints. initiative demonstrates a proactive approach to addressing specific forms of GBV, aiming to prevent and appropriately respond to incidents of sexual harassment.

Key Takeaways



Holistic Approach:

The introduction of "broad or expanded femicide" recognizes the complexity of such violence and the need for a comprehensive legal framework.



Protocols and Implementation:

While protocols for victim care exist, the significance of continuous review and improvement in the application of regulations and processes is key in ensuring due diligence to prevent gaps that may endanger women and girls.



Specialized Prosecutor's Office:

The establishment of a specialized prosecutor's office illustrates the value of targeted initiatives. Addressing specific forms of GBV, such as sexual harassment, requires dedicated resources and expertise.

Costa Rica's initiatives showcase progress in recognizing and addressing GBV. By broadening definitions, implementing protocols, and creating specialized entities, the country strives to provide comprehensive and specialized care for victims. Continuous evaluation and adaptation of these initiatives remain essential for an effective response to the evolving challenges of GBV.

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cclxxii To learn more about this Conference, refer to: https://www.un.org/es/events/pastevents/cmcr/ durban_sp.pdf

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cclxxiv To consult the Policy, refer to: https://www.minsalud.gov.co/proteccionsocial/promocion-social/ Paginas/Politica-de-Equidad-de-Genero-para-las-Mujeres.aspx

cclxxu To consult the Organization, refer to: https://new.safemet.org.br/helpline?gclid=Cj0KCQiA5fetBh C9ARIsAP1UMgH_obP7uqYpZYQS5HtUKy_2excMUSX6_3rfI6aotCAXIQwXpQ9OQa0aAqB9EALw_wcB

cclxxui To learn about the Collective Agenda, refer to: https://amnb.org.br/marcodelutas/

cclxxviii To learn about the Campaign, refer to: https://institutoodara.org.br/conheca-a-campanhapretas-no-poder/

cclxxuiii To learn about "Iniciativas Sanitarias," refer to: https://www.iniciativas.org.uy/

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cclxxxi To consult the Plan, refer to: https://minmujeryeg.gob.cl/wp-content/uploads/2023/11/PLAN-VCM.pdf

cclxxxii To consult the Plan, refer to: https://faolex.fao.org/docs/pdf/bol134098.pdf

cclxxxiii To consult the Observatory, refer to: https://observatoriofeminicidioscolombia.org/

cclxxxiu To consult the Observatory, refer to: https://observatoriodegenero.poder-judicial.go.cr/

cclxxxv To consult the Observatory, refer to: https://observatoriodegenero.poder-judicial.go.cr/

cclxxxvi To consult the Law, refer to: https://www.acnur.org/fileadmin/Documentos/BDL/2007/5206. pdf?view%253s1#:~:text=La%20persona%20que%2C%20mediante%20el,seis%20meses%20a%20 tres%20años.

cclxxxuii To consult the Law, refer to: http://www.pgrweb.go.cr/scij/Busgueda/Normativa/Normas/ nrm_texto_completo.aspx?param1=NRTC&nValor1=1&nValor2=95013 44

cclxxxuiii Patronato Nacional de la Infancia. (2019). "Modelo de Gestión de los Procesos Atencionales del PANI." Gerencia Técnica. San José, Costa Rica.

cclxxxix To learn more about the establishment of the Specialized Prosecutor's Office: https://www.tec. ac.cr/fiscalia-hostigamiento-sexual

Fòs Feminista is an intersectional feminist organization centered on the rights and needs of women, girls, and genderdiverse people in the Global South. We recognize that the ability to make free and informed decisions about sexual and reproductive health, including the ability to access safe and legal abortion, is central to gender equity and to the fulfillment of the human rights of women, girls, and all people who can become pregnant.

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