

Strategy and Plan of Action on Strengthening the Health System to Address Violence Against Women

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Pan American
Health
Organization



World Health
Organization

REGIONAL OFFICE FOR THE Americas

Overview

1. What is PAHO's Directing Council and what is the purpose of documents it approves?
2. What led to the present Strategy and Plan of Action (PoA) and how is it linked to Global Plan of Action?
3. How was the Strategy and Plan of Action developed?
4. Overview of the Strategy and Plan of Action
5. What is PAHO/WHO doing to support countries' implementation of the Strategy and Plan of Action?

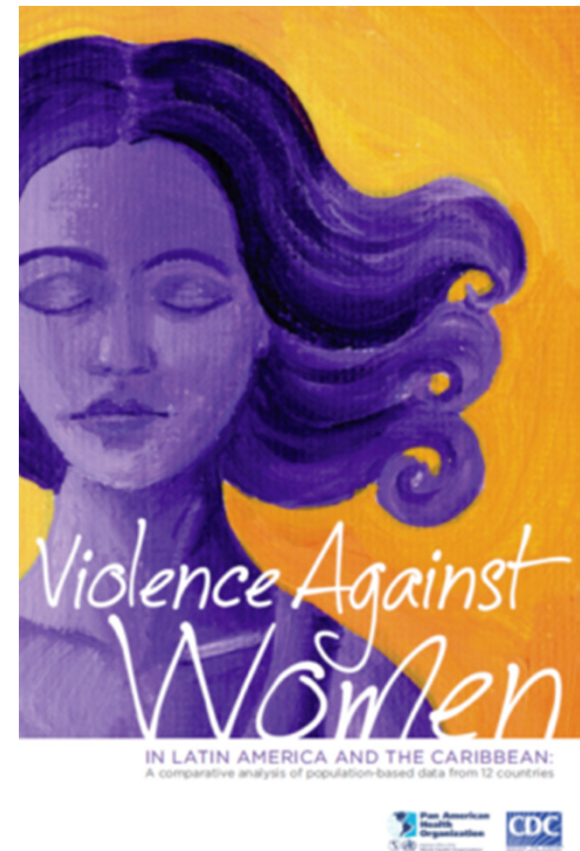


What are PAHO's Governing Bodies (GB) and GB documents?

- Composed of Ministries of Health from 38 Member States (regional equivalent to World Health Assembly)
- Highest regulatory and legislative authorities that chart the work of the Organization
- Meet once a year to discuss issues of public health priority
- Documents serve several purposes:
 - Facilitate discussion among Member States
 - Provide a framework for countries to establish policies, strategies within their borders
 - Guide the work of PAHO

What led to the development of this Regional Strategy and Plan of Action?

- 2012, PAHO/CDC's seminal report: *Violence against women in Latin America and the Caribbean: comparative analysis of population-based data from 12 countries*
- May 2014, WHA 67.15 resolution: *Strengthening the role of the health system in addressing violence, in particular against women and girls, and against children*
- Sept 2014, PAHO's 53rd Directing Council side event: *Addressing Violence Against Women: From Evidence to Action*
- 53rd Directing Council tasked the Secretariat with the development of the present Strategy and Plan of Action



How was the Strategy and Plan of Action developed?

- Advisory Group made up of 6 countries
- 2 internal inter-programmatic reviews
- 4 virtual consultations (in multiple languages)
- 1 in-person consultation
- Additional consultations with organizations representing indigenous and afrodescendant communities
- Inputs provided by experts from WHO Geneva
- In total, 100 colleagues from 19 countries participated (Governments, CSOs, academic institutions, multi-laterals, UN agencies)



How was the Strategy and Plan of Action received by countries?

- Unanimously approved with wide support at Directing Council
- 19 Member States took the floor to highlight that violence against women is an issue of key priority for their countries

"Worldwide, one in every three women will be raped, beaten, coerced into sex, or otherwise abused in her lifetime, usually by an intimate partner. This insidious violence crosses ethnicity, class, religion, socio-economic status, and race. It is one of the top human rights challenges of our time and we, the health sector, must respond."

Sylvia Burwell, US Secretary of Health and Human Services, Opening session of PAHO's Directing Council, 2015

Strategy and Plan of Action Overview

1. Introduction

- Purpose of the Strategy and Plan of Action

2. Background

- Brief history of VAW, prior resolutions/UN efforts

3. Situational Analysis

- Injuries and Disabilities
- Mental Health and Substance Use
- Sexual and Reproductive Health
- Maternal Mortality
- Non-Communicable Diseases and Risk Factors
- Intergenerational Effects

4. Proposal

5. Action by the Governing Body

6. References

7. Annexes



Overall Goal of the Plan of Action



Contribute to the reduction/eradication of violence against women by:

- Providing a roadmap to address the Region's priorities for preventing and responding to VAW
- Stepping up efforts by Member States, PAHO and other international organizations

Guiding Principles

- a) Universal access to health, health coverage and equity
- b) Human and civil rights
- c) Gender sensitivity and equality and cultural/ethnic diversities
- d) A multisectoral response
- e) Evidence-based practice
- f) Life-course approach
- g) A comprehensive response
- h) Community involvement
- i) Autonomy and empowerment
- j) Engaging men and boys



Strategic Lines of Action

1. Strengthen the **availability and use of evidence** about violence against women
2. Strengthen **political and financial commitment to addressing violence against women within health systems**
3. Strengthen the **capacity of health systems to provide effective care and support** to women who have experienced violence
4. Strengthen the role of the health system in **preventing violence against women**





Strategic Line of Action No. 1

Strengthen the availability and use of evidence
about violence against women

Objective 1.1: Increase the collection and availability of epidemiological and service-related data on violence against women

Indicator	Baseline (2015)	Target (2025)
1.1.1 Number of Member States that have carried out population-based, nationally representative studies on violence against women (or that have included a module on violence against women in other population-based demographic or health surveys) within the past five years	14	22
1.1.2 Number of Member States that have carried out population-based, nationally representative studies on violence against women within the past five years (or that have included a module on violence against women in other population-based demographic or health surveys) that include an analysis of prevalence of violence against women across different ethnic/racial groups	2	10
1.1.3 Number of Member States that are able to provide data on homicide, disaggregated by age, sex, and relationship of the victim to the perpetrator	9	15



Strategic Line of Action No. 2

Strengthen political and financial commitment
to addressing violence against women
within health systems

Objective 2.1: Strengthen national and subnational policies and plans to address violence against women within the health system

Indicator	Baseline (2015)	Target (2025)
2.1.1 Number of Member States that have included violence against women in their national health plans and/or policies	18	35
2.1.2 Number of Member States whose national health budget has one or more dedicated lines to support prevention and/or response to violence against women	4	10
2.1.3 Number of Member States that have established a unit (or units) or focal point(s) in the Ministry of Health responsible for violence against women	4	10

Objective 2.2: Increase the health system's participation in multisectoral plans, policies and coalitions to address violence against women

Indicator	Baseline (2015)	Target (2025)
2.2.1 Number of Member States that have a national or multisectoral plan addressing violence against women that includes the health system, according to the status of the plan: <ul style="list-style-type: none">▪ in development;▪ currently being implemented	13	20



Strategic Line of Action No. 3

Strengthen the capacity of health systems
to provide effective care and support to women
who have experienced violence

Objective 3.1: Strengthen national standard operating procedures (protocols, guidelines) for providing safe and effective care and support for women experiencing intimate partner violence and/or sexual violence

Indicator	Baseline (2015)	Target (2025)
3.1.1 Number of Member States that have national standard operating procedures/protocols/guidelines for the health system response to intimate partner violence, consistent with WHO guidelines	6	15
3.1.2 Number of Member States that provide comprehensive post-rape care services in emergency health services, consistent with WHO guidelines	2	15

Objective 3.2: Increase the capacity of health professionals to respond to violence against women

Indicator	Baseline (2015)	Target (2025)
3.2.1 Number of Member States that have included the issue of violence against women in their continuing education processes for health professionals	2	10



Strategic Line of Action No. 4

Strengthen the role of the health system in preventing violence against women

Objective 4.1: Strengthen the participation and commitment of the health system in efforts to prevent violence against women

Indicator	Baseline (2015)	Target (2025)
4.1.1 Number of Member States that have a multisectoral coalition/task force in place for coordinating efforts to prevent violence against women that includes the participation of Ministries of Health	3	10
4.1.2 Number of Member States that have a national or multisectoral plan addressing violence against women (that includes the health system) that proposes at least one strategy to prevent violence against women, by type of strategy: a) social and cultural norm change; b) social emotional learning approaches; and c) policy approaches (such as alcohol-related policies)	0	10

How is the Regional Strategy and Plan of Action aligned to the Global Plan of Action?

- May 2014, WHA 67.15: “Strengthening the role of the health system in addressing violence, in particular against women and girls, and against children” tasked WHO developing a Global Plan of Action to strengthen the role of the health sector
- Close coordination with WHO to ensure documents reinforce and support each other
- Content on violence against women, including indicators, aligned
- Joint regional consultations for both Regional and Global PoA (February 2015)
- Recognition of the progressive and more homogeneous stance of the Americas on certain issues



What is PAHO/WHO doing to support countries' implementation of Strategy and Plan of Action?

Evidence

- Updating epidemiological profile of violence against women data for LAC (with CDC)
- Systematic review on disrespect and abuse during obstetric care (with USP and INSP)

Services

- Developing training curricula for health care professionals on VAW (with WHO, Hopkins and U. Michigan)

Prevention

- Working with HQ to develop and test a parenting program to prevent child maltreatment

Policies

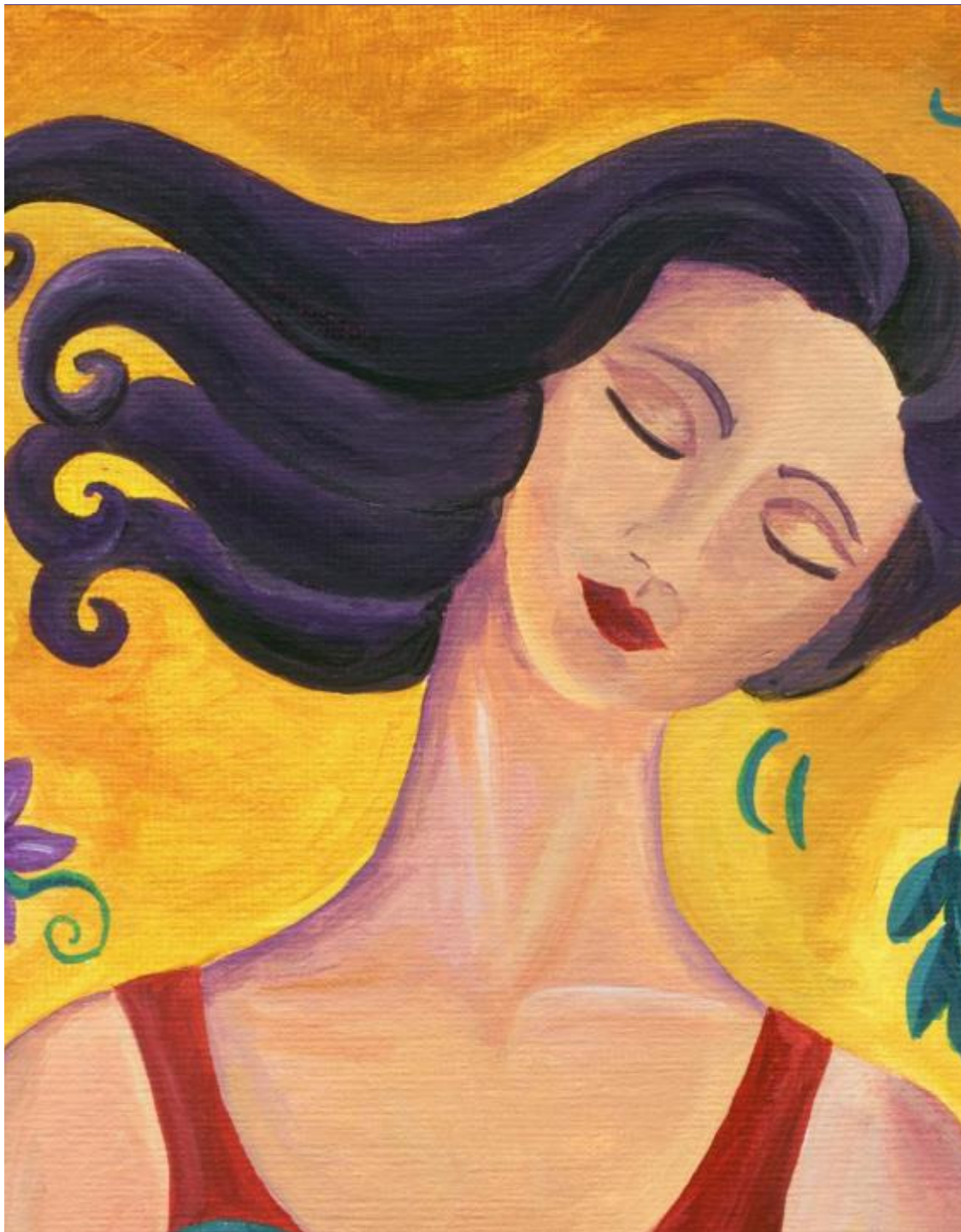
- Technical cooperation to multiple countries



How can the Strategy and Plan of Action be useful to you?

- Road map of health systems priorities the Region of the Americas
- Indicators to monitor progress
- Advocacy tool to track action
- Inspiration to other regions





**Thank you.
Gracias.
Obrigada.**

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