

## **IPPFWHR on promoting, protecting and fulfilling women's and girl's full enjoyment of human rights in humanitarian situations**

The 2021 Global Humanitarian Overview indicates that 235 million people will need humanitarian assistance and protection, which represents one in every 33 people in the world and marks an increase of 40% when compared to the previous year<sup>1</sup>. Women and girls are disproportionately affected by humanitarian crises; in the case of displacement because of climate change, 80% of those displaced are women<sup>2</sup>. Despite the effects women and girls face in emergencies, their voices are not regularly included in humanitarian efforts. A feminist response, focused on the needs of women and girls, is vital to address gaps and ensure their human rights.

There is an urgent need to guarantee SRHR in humanitarian settings, starting with the provision of international-standard services included in the Minimum Initial Service Package (MISP) for SRH, which aims to prevent the negative consequences of sexual violence and respond to the needs of survivors; prevent the transmission and morbidity and mortality of HIV and other STIs; prevent excess maternal and newborn morbidity and mortality; prevent unintended pregnancies; ensure that safe abortion is accessible to the full extent of the law; ensure that there is leadership for the implementation of the MISP at the onset of crises, and set a basis for the provision of comprehensive SRH care.

Women and girls face heightened risks of unwanted pregnancy, gender-based violence, sexual violence, maternal mortality, early and forced marriage, sexual exploitation, and trafficking, with constant unfulfillment of their sexual and reproductive health and rights (SRHR). The COVID-19 pandemic has deepened this gendered impact, as 70% of frontline health and social workers are women<sup>3</sup>. In addition, a widespread and rampant increase in the incidence of gender-based violence as lockdown measures forced women and girls to shelter in place with their aggressors.

In Latin America and the Caribbean, where IPPFWHR partners provide services, advocate for the advancement of SRHR, bring comprehensive sexuality education and youth friendly services to adolescents and young people, and provide much needed care in emergencies, the impact of COVID-19 has been palpable. Even though the region is home to only 8%<sup>4</sup> of the world's population, it has accounted for more than 25%<sup>5</sup> of all reported COVID-19 deaths. Nearly half a million<sup>6</sup> women and girls lost access to sexual and reproductive health care from our partner organizations due to lockdown closures, diminished availability of health providers, and clinic shutdowns because sexual and

<sup>1</sup> United Nations Office for the Coordination of Humanitarian Affairs (OCHA). Global Humanitarian Overview (2020), retrieved at <https://reliefweb.int/report/world/global-humanitarian-overview-2021-enarffres>

<sup>2</sup> United Nations Development Programme. Gender and Climate Change: Overview of Linkages Between Gender and Climate Change (2016), retrieved at <https://reliefweb.int/sites/reliefweb.int/files/resources/UNDP%20Linkages%20Gender%20and%20CC%20Policy%20Brief%201-WEB.pdf>

<sup>3</sup> United Nations Covid-19 Response. Gender Equality in the Time of COVID-19, retrieved at <https://www.un.org/en/un-coronavirus-communications-team/gender-equality-time-covid-19>.

<sup>4</sup> Worldometer (2021), retrieved at: <https://www.worldometers.info/world-population/>

<sup>5</sup> Statista. Number of novel coronavirus (COVID-19) deaths worldwide as of June 28, 2021, by country, retrieved at: <https://www.statista.com/statistics/1093256/novel-coronavirus-2019ncov-deaths-worldwide-by-country/>

<sup>6</sup> IPPFWHR Ecosystem Performance Report (2021). Based on IPPFWHR Service Statistics and Organizational Indicators.

reproductive services were not considered essential by governments. This meant that more than one and a half million essential, life-saving sexual and reproductive health services were lost.

As the Western Hemisphere Region continues to be one of the hardest-hit by the COVID-19 pandemic, the alarming death toll and severe economic crisis have worsened an already profound and pervasive inequality, which are reflected in the concentrated effects on women, girls, and vulnerable populations. Within the IPPFWHR ecosystem, access to contraceptive care dropped by 2.4 million services, while abortion services fell by 54%. In addition, almost 200 thousand young people lost access to comprehensive sexuality education, as the region continues to have the longest school closures from COVID-19.

In addition to the severe impact caused by the global pandemic, Latin America and the Caribbean has been facing one of the largest humanitarian and human mobility crises in the history of the region, with more than 5.4 million Venezuelan refugees and migrants living abroad, and 4.6 million in the region<sup>7</sup>. With factors that contribute to migration remaining the same in Venezuela, and while borders are closed to control the spread of COVID-19, risks have increased considerably for people migrating, and specially women and girls, as they are crossing borders through irregular paths, facing non-state armed groups, criminal organizations, sexual exploitation, and trafficking during transit. Moreover, violations of women and girls' rights have worsened because of xenophobia and the hyper sexualization of Venezuelan women and girls<sup>8</sup>.

Women and girls leave Venezuela having faced a critical lack of access to sexual and reproductive health service, as highlighted by the Inter-American Commission on Human Rights in a recent communiqué<sup>9</sup>, including lack of prenatal care and shortages of contraceptive methods. When they arrive to their destinations or while in transit, they also have difficulties accessing SRH care due to lack of resources and information, and in many cases, an irregular migratory status. IPPFWHR partners have also observed in other emergencies, such as hurricanes Eta and Iota in Guatemala, that women deprioritize their SRH care at the onset of crisis to provide food and basic needs for their families.

In light of the above, IPPFWHR and our ecosystem partners call for humanitarian responses that put women and girls at the center and for the universal provision of life-saving SRH services under the MISP during emergencies, as a fundamental human right.

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<sup>7</sup> Inter-Agency Coordination Platform for Refugees and Migrants from Venezuela – R4V. RMRP for Refugees and Migrants from Venezuela (2021), retrieved at: <https://rmp.r4v.info/>

<sup>8</sup> CARE. An Unequal Emergency: Gender Rapid Analysis on the Refugee and Migrant Crisis in Colombia, Ecuador, Peru and Venezuela (2020), retrieved at [https://www.care-international.org/files/files/RGA\\_ESP\\_Venezuela\\_final\\_compressed.pdf](https://www.care-international.org/files/files/RGA_ESP_Venezuela_final_compressed.pdf)

<sup>9</sup> OAS. IACHR Expresses Concern Over Lack of Access to Sexual and Reproductive Health Services in Venezuela (2021), retrieved at: [http://www.oas.org/en/iachr/jsForm/?File=/en/iachr/media\\_center/preleases/2021/085.asp](http://www.oas.org/en/iachr/jsForm/?File=/en/iachr/media_center/preleases/2021/085.asp)