**MINISTRY OF FOREIGN AFFAIRS, REGIONAL INTEGRATION AND INTERNATIONAL TRADE**

**(HUMAN RIGHTS DIVISION)**

**Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health**

**1.0 Introduction**

Health is a fundamental right indispensable for the exercise of other human rights. Every human being is entitled to the enjoyment of the highest attainable standard of health conducive to living a life in dignity.

Gender Based Violence (GBV) is a human rights violation that disproportionately affects women. Encompassing a range of behaviour including sexual, physical, mental and economic harm inflicted in public or in private, GBV also includes threats of violence, coercion and manipulation, and can take many forms, such as ‘*inter alia’*, intimate partner violence, sexual violence, and sexual assault.

GBV is not only a major human rights violation but also a severe public health problem in our country. Violence damages the health of the victims in many ways, some that are obvious and some that remain hidden. GBV includes sexual violence and rape, intimate partner violence, child marriages. GBV can cause a wide range of physical and mental as well as sexual and reproductive health problems. People who have been assaulted, abused and violated need proper care and support.

**2.0 Legal Measures**

The laws of Mauritius protect all against any form of discrimination and all individuals have access to health services free of charge at the public health institutions. While sex work and sodomy are criminalized, there is no barrier to access health services. There are HIV/STI prevention programmes (provision of condoms, BCC/IEC materials) targeting female sex workers, Men who have Sex with Men, Transgender persons, etc. carried out by the Ministry of Health and Wellness.

In 1997, the Government of Mauritius passed the **Protection from Domestic Violence Act 1997 (PDVA)** to protect spouses from domestic violence.

The Act provides for the issue of:

1. **Protection Order** which restrains the abuser from further acts of violence and ordering the latter to be of good conduct. The Order can last for a period not exceeding 2 years.
2. **Occupation Order** which grants exclusive rights to the victim to live in the residence which may belong to the victim, the abuser or both.
3. **Tenancy Order** which gives the victim exclusive right to occupy a rented house and the spouse who rented the house would continue to pay the rent.

Subsequent amendments were brought to the PDVA in 2004, 2007, 2011 and 2016 so as to provide protection to all family members living under the same roof, harsher penalties for breach of Orders of the Court, provision of counselling to perpetrators and enlarging powers of Enforcement Officers.

In view of reinforcing the protection of women victims of violence, the Ministry of Gender Equality and Family Welfare (MGEFW) is in the process of amending the Protection from Domestic Act in order to reinforce the protective legal framework and make perpetrators accountable of their acts through the Perpetrator`s Rehabilitation Programme.

Moreover, the State of Mauritius is fully committed to, and is continuously progressing towards, an inclusive society where the rights of persons with disabilities are respected and protected.

There are no specific laws that seek to punish criminal acts that specifically target persons with disabilities. A draft “Disability Bill” is currently under preparation and this may cater for the abuse against persons with disabilities.

With a view to improving the services for persons with disabilities and enhancing their protection and promotion of rights, the Ministry of Social Integration, Social Security and National Solidarity is soliciting technical assistance for consultancy services through the European Union (EU) to SOCIEUX+, an EU expert facility on social protection, labour and employment, for the conduct of:

1. overall assessment of the disability sector in the State of Mauritius; and
2. elaboration of an action plan on disability and setting up of a Monitoring and Evaluation Mechanism

Furthermore, the Children’s Act 2020, the Children’s Court Act 2020 and the Child Sex Offender Register Act 2020 were passed in the National Assembly in December 2020 with a view to harmonizing all laws relating to children. However, these Acts have been voted but not yet promulgated and it is expected that same will be effected shortly.

The lockdowns periods during the COVID-19 pandemic have resulted in increased risks to women and girls in different forms like sexual exploitation and abuse at homes; exposure to domestic violence, neglect; increase anxiety and stress resulting in psychological distress and reduced access to vital family and care services.

With the closure of child day care services during the lockdowns, parents and more particularly women are exposed to greater responsibilities and challenges. Children are left either unattended or at a relative’s place which are sometimes not an appropriate setting for the small children. The lockdown measures may expose children to a range of risks when not properly supervised. As per the UNICEF, several factors related to confinement measures are likely to result in heightened tensions in the household, added stressors placed on caregivers, economic uncertainty, job loss or disruption to livelihoods, and social isolation.

It has been noted in Mauritius that most of the times Lesbians, Gays, Bisexuals, Transgender, Queer and Intersex (LGBTQI) people do not report cases of abuse. Even if they go to the police, they do not disclose their sexual orientation. Specific rights of LGBTQIs are not specified in domestic law but the legislations afford the same protection to all individual irrespective of their gender identity of sexual orientation.

**3.0 Statistics on GBV**

**Number of cases of domestic violence and other forms of violence reported at the MGEFW through the Family Support Bureaux (FSBx) are as follows:**

**Gender-based violence against women**

|  |  |  |
| --- | --- | --- |
|  | **2020** | **2021 as at October** |
| Female | 2,116 | 1,506 |

**Gender-based violence against men**

|  |  |  |
| --- | --- | --- |
|  | **2020** | **2021 as at October** |
| Male | 309 | 213 |

**Conflict gender-based violence, including sexual violence**

|  |  |  |  |
| --- | --- | --- | --- |
| **Year** | **Male** | **Female** | **Total** |
| 2020 | 0 | 20 | 20 |
| Jan to June 2021 | 0 | 15 | 15 |

**Violence and abuse against persons with disabilities**

|  |  |  |  |
| --- | --- | --- | --- |
| **Year** | **Male** | **Female** | **Total** |
| 2020 | 1 | 4 | 5 |
| 2021  (Jan to Oct) | 2 | 8 | 10 |

**Gender-based violence and other forms of violence against children**



*Integrated Biological and Behavioral Surveillance Survey (IBBS) 2017 among Transgender Persons (TG)* indicated that 55% of the participants reported having a very supportive community regarding their transgender identity. 3% reported having been denied HIV-related services.

30% of the TG participants perceived themselves to have been physically abused because of the Transgender identity.

21% of TG people perceived themselves to have been sexually abused because of transgender identity.

*Integrated Biological and Behavioral Surveillance Survey (IBBS) 2015 among Men who have Sex with Men* indicated that 39.4% of Men who have Sex with Men reported being stigmatized because of being a MSM out of whom 8.7% reported having been assaulted because of their sexual orientation. Among those who have been stigmatized, the majority (80.5 %) reported to have been verbally insulted while 32.3% stated to have undergone discrimination at events because of being a MSM.

*Integrated Biological and Behavioral Surveillance Survey (IBBS) 2015 among Female Sex Workers (FSW*) reported that75% of Female Sex Workers reported they have ever had problems of stigmatization related to sex work. The frequent problems encountered by FSW were; verbal insult, 63.1% of them; 16.7% have been forced to have sexual intercourse in the last 12 months preceding the 2015 FSW survey, mainly by sex clients; 16.1% have been assaulted because of sex work.

Very few reported they had been refused health services due to sex work, 1.0%, while 5.3% reported they had been refused police assistance because of their sex work status.

Furthermore, according to The Socio-Economic Impact Assessment of COVID-19 in Mauritius carried out by the UNDP and released in March 2021, there was an increase in incidents of domestic violence by 33%, with 93% of the cases perpetuated against women. Unfortunately, most of these cases were not reported to authorities, with 37.5% of victims having kept it to themselves and 62.5% preferring to confide in other people. Among the poorest of the poor, the incidence of domestic violence was 9% being twice as high as among the respondents in the National Household Survey.

**4.0 Budget allocated to address GBV**

Government spending on health has increased from Rs 7.56 billion in 2010 to reach Rs 14.5 billion in the financial 2021/2022, representing an increase of 91.8 %. This allocation to the Ministry of Health and Wellness (MOHW) also includes financial coverage for provision of services to those affected by gender based violence. A budget of Rs 200,000 has been earmarked for the MOHW for Gender Mainstreaming activities, such as the Virtual training on Gender Based Violence planned for January to June 2022.

The budget allocated to the MGEFW to address GBV for financial year 2021/2022 is as follows:

|  |  |  |
| --- | --- | --- |
| **Sn** | **Description** | **Amount** |
| 1 | Access to sexual and reproductive health and reproductive rights | Rs 800,000 under UNFPA |
| 2 | Violence against women and girls |  |
|  | a. Review of the National Policy Paper on Family | Rs 300,000 |
|  | b. Assistance to Victims of Domestic Violence | Rs 3Million |
|  | c. Gender-Based Violence Observatory | Rs 1Million |
|  | d. Empowerment of Victims of Domestic Violence | Rs 1Million |
|  | e. Domestic Violence Information System (DOVIS) | Rs 1.8Million |
|  | f. Integrated Support Centre | Rs 1Million |
|  | g. Information Education Communication Campaign | Rs 1Million |
|  | h. Implementation of Action Plan on Intimate Partner Violence | Rs 400,000 |
|  | i. Mobile Application LESPWAR | Rs 600,000 |
|  | j. National Strategy and Action Plan on GBV | Rs 3.5Million |
|  | k. Accompagnement des Familles Programme | Rs 500,000 |

An **Observatory on GBV** will be set up to strengthen the data capture on GBV in Mauritius. The setting up of such an Observatory will lead to harmonised data collection for informed policy making and monitoring and evaluation of initiatives on GBV. This platform will enable the setting up of a holistic and transparent mechanism to strengthen collaboration and understanding of the actions carried out in matters related to care for victims; evolution of gender based violence in Mauritius and subsequently, elaboration of future public policies to eradicate this serious social problem which constitutes the worst example of the inequality suffered by women.

The MGEFW signed a memorandum of understanding for the operationalization of the Observatory on GBV with the Mauritius Research and Innovation Council on 23 December 2021.

**5.0 Examples of good practices and multi-sectoral efforts by the State**

5.1 National Strategy and Action Plan 2020-2024

The National Strategy Document and its accompanying Action Plan present the new strategic direction of the Government of Mauritius to eliminate GBV in Mauritius. It reflects stakeholder engagement and has been drafted in a participatory manner to capture the current specificities of the Republic of Mauritius.

It is further informed by international best practices and frameworks to address the root cause of gender inequality and is survivor-focused. The key elements of the National Strategy revolve around having a shared understanding of the nature and extent of GBV in Mauritius, the commitment of multiple stakeholders, the need to strengthen existing legislative and policy framework, capacity building of stakeholders; and a strong monitoring and evaluation mechanism.

In order to ensure the successful implementation of the National Strategy and its accompanying Action Plan, Government has set up the following Monitoring and Evaluation mechanisms:

1. A High Level Committee under the chair of the Hon. Prime Minister to monitor and evaluate the progress made on the implementation of the National Strategy and Action Plan on a half yearly basis.
2. A National Steering Committee on GBV chaired by the Hon Minister of Gender Equality and Family Welfare meet on a quarterly basis.
3. Four Technical Working Groups to ensure the implementation of the activities falling under each of the following sub strategies:
   1. Change societal norms and beliefs that are against principles of gender equality and equity;
   2. Priority support services for survivors while holding perpetrators accountable;
   3. Identify and redress discriminatory practices that perpetuate gender-based violence; and
   4. Coordinated Monitoring and Evaluation.

Each Technical Working Group meet on a monthly basis and report to the National Steering Committee.

The National Strategy and Action Plan 2020-2024 of the High-Level Committee on the Elimination of GBV was launched on 25 November 2020 on the occasion of the International Day of Elimination of Violence Against Women. Same is mainly geared towards the elimination of GBV wherein a strategic and a multi-sectoral approach has been adopted therein.

The commitment of all stakeholders, including Government, civil society, development partners and the private sector and adequate financing is crucial to ensure that GVB remains as a priority issue on the national agenda.

To this end, the key recommendations supporting the National Strategy that are responsive to the present country context are as follows:

* 1. the adoption of a systems-thinking approach in responding to matters of GBV and domestic violence to ensure implementation of the National Strategy through a collaborative effort and shared understanding of GBV;
  2. a stronger commitment of all stakeholders to data collection, analysis, monitoring and evaluation; and
  3. a paradigm shift towards capacity building of the Lead Agency to provide strategic direction to all stakeholders to effectively implement the National Strategy and Action Plan.

The Action Plan of the Technical Working Group on Monitoring and Evaluation in relation to the Observatory on GBV and femicide can be found at Annex A.

On 1st December 2021, the Australian Consultant, Mr Jason Mayer, met the Hon. Prime Minister, Mr Pravind Kumar Jugnauth, to, among others, provide the latter with updates regarding the implementation of the National Strategy and Action Plan on the elimination of GBV. The aim of the meeting was also to find solutions to bottlenecks preventing the proper implementation of the strategies therein.

The Consultant accordingly had working sessions/meetings with the four Technical Working Groups, working on the National Strategy and Action Plan on Elimination of GBV in Mauritius so as to identify and address some of the issues they might currently be experiencing, that is the impact of the COVID-19 pandemic had on any particular form of GBV.

Thereafter, the Prime Minister was apprised on the progress being made and the way various Ministries were working together and achieving the targets set.

It was noted that perpetrators, or the survivors, were not able to leave their homes and the stakeholders were doing their best, through different initiatives, to support survivors of GBV.

Despite the COVID-19 pandemic, all stakeholders engaged in the fight against GBV have ensured, that 69.8% of the output indicators are in progress and 28.9% have been completed out of the total target of 149 output indicators.

5.2 Family Welfare and Protection Unit (FWPU)

The Family Welfare and Protection Unit (FWPU) was set up under the aegis of the MGEFW to implement policies and programmes in favour of families and to address the problem of GBV.

The FWPU adopts well-defined strategies to address GBV, and these include:

1. Intervention
2. Prevention
3. Rehabilitation
4. Harmonisation and Data Collection.

The FWPU offers its services to victims and perpetrators of GBV through the FSBx. Currently, there are six FSBx scattered around the island, namely at Goodlands, Flacq, Phoenix, Bambous, Souillac and Port Louis. A list of the services offered free of charge by the FSBx is as follows:

1. First-Hand Counselling, whereby Family Counselling Officers and Family Welfare and Protection Officers provide victims and perpetrators of domestic violence with counselling with a view to build a rapport with the victims and perpetrators that may ultimately help the latter to voice out their problems;
2. Legal Advice/ Assistance at Court, whereby Legal Resource Persons provide victims of domestic violence with services such as legal advice and legal representations at Court;
3. Psychological Counselling provided to victims and perpetrators in strict confidentiality by Psychologists posted at the level of FSBx. Advice is also given to support women victims of domestic violence and their children;
4. Assistance to victims of domestic violence with regards to their application for a Protection Order, Occupation Order and Tenancy Order under the Protection from Domestic Violence Act;
5. Provision of psycho-social support as a follow-up following provision of Court Orders under the Protection from Domestic Violence Act;
6. Referral to other institutions as appropriate;
7. Provision of Shelter, whereby victims of domestic violence and their children are provided with round the clock secured housing on a temporary basis pending court orders; and
8. Counselling services to perpetrator, whereby psychological Counselling is provided to perpetrators to bring a change in their mind-set and help in reducing violence. According to the Protection from Domestic Violence (Amendment) Act 2007, District Magistrate can also refer perpetrators of domestic violence for Psychological Counselling upon consent of both parties to the FSBx, amongst others.

5.3 Drop-in-Centre

A Drop-in-Centre has been set up, since December 2003, to cater for the rehabilitative needs of children victims of CSEC and sexual abuse. The Centre is being run and managed by the Mauritius Family Planning and Welfare Association and is being monitored by the Child Development Unit.

All reported cases of sale and sexual exploitation of children are evaluated or assessed on an individual/case to case basis, wherein the right approaches, interventions and follow-ups are undertaken to tackle the cases, using a rights-based approach. Remedial and recovery services are provided, taking into account the victim’s personalised care plan. Moreover, adequate measures are taken throughout the process to avoid further victimisation and distress of the children.

5.4 Alternative Care Unit

An Alternative Care Unitwas set up to provide sustained continuum of care, service provision and avoiding the issue of overcrowding of Centres catering for children victims of abuse/violence. The Unit’s aims at designing and implementing policies and programmes that gear towards rehabilitating children in places of safety and providing them with a substitute family, through the Foster Care Programme and assisting those with mild behavioural problems through Child Mentoring Programme.

Children’s victims of violence are accommodated in 3 Government-owned shelters and 14 Residential Care Institutions managed by NGO’s.

L’Oasis Residential Care at Grand River North West is operational since May 2016 and caters for victims of sexual abuse and commercial sexual exploitation of children including Child Trafficking. The setting up of the above Centre is in line with the recommendations made by the United Nations Committee on the Rights of the Child with a view to strengthening policies and programmes for the prevention, recovery, rehabilitation and reintegration of children victims of CSEC.

Additionally, various services are provided at the centre which comprise the following:

1. first hand counselling;
2. psychological counselling by the MGEFW’s psychologist;
3. indoor and outdoor sports, leisure and recreational activities;
4. follow-up by Brigade pour La Protection des Mineurs ;
5. information Education Communication Campaigns on issues related to children; and
6. creativity Classes; Embroidery, painting and flower-making.

**6.0 Other Measures**

6.1 Victim Empowerment and Abuser Rehabilitation Policy

The Victim Empowerment and Abuser Rehabilitation Policy (VEARP) was adopted in 2013 as a workplace initiative in both public and private sectors to address the scourge of GBV, particularly domestic violence. The initial purpose was to enhance the knowledge of the Human Resource cadre of both sectors on GBV so that basic assistance could be provided to victims working thereat whenever required.

Through the awareness sessions, employers and employees are made aware of the basic assistance offered to victims of domestic violence so that they are empowered to report cases of domestic violence. Employers and employees are also informed on services available for the rehabilitation of perpetrators such as counselling sessions with Psychologist amongst others.

Ongoing awareness sessions on VEARP are conducted in both the private and public sectors.

6.2 Domestic Violence Information System

Domestic Violence Information System (DOVIS), a computerized system for the registration of reported cases of domestic violence is used as a case management tool since November 2016 to monitor, record and generate specific reports on such cases dealt at the FSBx.

6.3 Integrated Support Centre

An Integrated Support Centre was launched on 08 March 2019 by the Hon. Prime Minister to ensure prompt intervention in cases of domestic violence. Through the, hotline 139 for domestic violence is now being attended to through four parallel digital phone lines. Moreover, the system is connected to the DOVIS, which is an informative platform for monitoring cases of domestic violence as well as a repository for all data pertaining to cases of domestic violence.

6.4 Information, Education and Communication Campaigns

As part of preventive measures, the Government of Mauritius introduced Information, Education and Communicationcampaigns that are conducted to sensitise the public at large on issues pertaining to GBV and the welfare of the family. The Government has ramped up its effort to address the issue of GBV through the following projects and programmes:

1. Men as Caring Partners which address the problem of domestic violence and promote greater involvement of men in family responsibilities with a view to:
2. Enhance the understanding and importance of gender equality to men;
3. Ensure the effective participation and involvement of men in family wellbeing;
4. Promote equal opportunities to men and women in the development process; and
5. Ensure that men become caring partners through the implementation of Male Responsibility and Family Well-Being.
6. Pre-marital Counselling Programme which is an opportunity for engaged couples and future married couples to learn about each other and oneself in depth while paving the way for an enduring, harmonious, successful satisfying and happy marriage.
7. Marriage Enrichment Programme which helps couples to strengthen their relationship and be better prepared to face the challenges of married life and develop the ability to resolve conflict.
8. Inter-Generation Relationship Programme which helps the three generations on the importance of inter-generation relationships. It aims at strengthening ties within the family and promote family values among the three generations that is youth/parents and grandparents.
9. Strengthening Values for Family Life Programme which aims at building positive parenting and family bonding through the inculcation of good values for family life. It also serves as an essential requisite for married and engaged couples to lead a successful married life.

**7.0 Programmes for survivors of domestic violence**

7.1 Health Services

Mauritius is a welfare state where all citizens including victims of violence have access to health services including management of both short and long-term post-trauma health complications i.e physical injuries, psychological and mental health trauma, sexual assault as well as its direct and indirect consequences. First aid for survivors, admission in health settings, access to support services including socioeconomic and legal aid are available and accessible according to protocols.

7.2 Economic Empowerment Programme

An Economic Empowerment Programme for survivors of domestic violence is being implemented since February 2018 to help survivors establish the financial stability and independence they need to move forward.

Furthermore, to assist survivors of domestic violence for them to establish financial autonomy, 25 companies, including private firms under the aegis of Manufacturing Sector Workers Welfare Fund, Hotels, Recruiting Agencies and other stakeholders, were contacted. Out of which, 12 companies informed that they would consider employing survivors subject to them fulfilling their criteria. Moreover, in January 2019, a list of 32 victims was sent to Natec Company for possible consideration for recruitment. Also, a Training Programme for 70 victims was conducted in 2019 in collaboration with Mauritius Institute for Training Development.

7.3 Accompagnement des Familles

On 08 December 2020, the “*Accompagnement des Familles*” programme was launched at Panchavati, Rivière du Rempart with the aim of enhancing family values, improve ethics and equipping individuals with the appropriate tools to improve communication and human relationships. The MGEFW solicited the collaboration of Gordon Training (Mauritius) for the conduct of well-designed Training/Capacity Programme on effective parenting.

7.4 Interfaith Forum

The MGEFW is collaborating with Religious Bodies for positive social change through the Interfaith Forum. Victims and survivors of domestic violence very often turn to religious leaders for spiritual guidance and support. Religious Leaders play an essential role in the response to and elimination of domestic violence, as they carry the responsibility to protect and nurture the spiritual wellbeing of the community as a whole and its individual members.

7.5 Mobile App Project

In the Context of the International Day for the Elimination of Violence Against Women 2020, the Mobile App for victims of GBV was launched by the Prime Minister’s Office in collaboration with the MGEFW and the UNDP on 25 November 2020.

In the Mobile App “LESPWAR”, a panic button enables a victim of GBV to rapidly connect with the Police Main Command and Control Centre. The application can be downloaded on a smart phone and clear instructions are provided for registration and use of the panic button. Since the launching ceremony in November 2020, personnel of PFPU are being placed on 1st and 2nd shift duty daily to respond to the alert signal.

**8.0 Challenges**

The MGEFW has embarked on two major studies: Study on the prevalence of GBV in the Republic of Mauritius and the Feasibility Study, for the setting up of an Integrated Shelter of GBV in Mauritius so as to gather more information on characteristics, profile and needs of victims of GBV. Due to the COVID-19 pandemic, the data collection process was delayed. In regard to the Feasibility Study, the report was submitted by the International Consultant in October 2021.

As per the National Strategy and Action Plan to eliminate GBV, the impact of COVID-19 pandemic and subsequent decision to require citizens to practice self-isolation and lockdown had an unintended consequence of increasing the risk of incidents of domestic violence. In Mauritius, the challenges presented by the two COVID-19 pandemic confinement periods in Mauritius (March-end April 2020 and March-end April 2021). As a result of the increased numbers of help-seeking during COVID-19 pandemic lockdown, shelters were underprepared with limited infrastructure to follow social distancing and provide quarantine facilities if required.

**19.01.2022**