

Recommendations for the UPR of Jamaica- Gender- Based Violence

Abstract (video recording)

Violence against women and girls continues to be major challenge to Jamaica's ability to achieve gender equality as articulated in Goal 5 of the SDGs.

The JFPA commends the Government of Jamaica for actions taken to address GBV. The GOJ has implemented several laws and policies designed to address aspects of the problem of gender-based violence – they include inter alia: the Sexual Offences Act, Domestic Violence Act, and Child Care Protection Act – and has responded to the 2nd UPR Cycle call from France, Turkey, and Paraguay to implement a national response to gender-based violence. The December 2018 plan focuses on five key areas - protection, prevention, intervention, legal procedures and protocols for data collection that incorporate initiatives introduced by CSOs.

The COVID-19 pandemic has been linked to an increase in the number of reported cases of gender-based violence (between March and June 2020) and has highlighted many of the gaps in the national response - especially in relation to protection, prevention and legal procedures.

The JFPA is now calling on the GOJ to strengthen its response to GBV in three areas. By

1. Establishing clear definitions of domestic violence and other issues related to gender-based violence, especially in the Domestic Violence Act, 2004, to bring them in line with the WHO definitions.
2. Guaranteeing financial and institutional support and ensuring nation-wide implementation of the recently launched 10-year national strategic action plan to eliminate gender-based violence, including through training of security and judicial personnel to handle cases of gender-based violence, and through ensuring financial and human resources for domestic violence centres for women.
3. Assuring that the Health and Family Life Education Curriculum (HFLE) is aligned with UN technical guidelines on sexuality education (including gender-based violence, bodily integrity, consent, cultural and social norms) and providing on-going, regular training for teachers and providers to ensure content is delivered in a non-judgmental, evidence-based and non-biased manner that does not reinforce cultural, religious or gender stereotypes.

Statement

Introduction

Jamaica Family Planning Association (JFPA) is a non-government and non-profit organization that has served Jamaican women and their families since 1957. The Association operates within national policy guidelines to provide clinical and non-clinical family planning and reproductive health services to adolescents, men and women, in particular the underserved in rural and urban areas.

Additionally, outreach activities are conducted in communities identified as particularly vulnerable due to high rates of adolescent pregnancy, fertility, HIV/STI infection and maternal mortality and morbidity.

The commitment of the JFPA is to work in partnership with the Government of Jamaica and all interested non-governmental agencies to achieve a better quality of life for all Jamaicans but especially women and girls who represent 51 percent of the population of Jamaicaⁱ.

Women and girls face high rates of violence in circumstances such as intimate partner relations, economic and emotional violence and rape. Violence in its various forms is usually anchored in their daily lives, making it difficult for them to escape its grip. Gender-based violence, in particular, has implanted itself in the Jamaican culture and appears to have become normalized and accepted by many. Data from the Statistical Institute of Jamaica (STATIN, 2018) indicate that:

- 27.8% of ever-partnered women aged 15-49 years' experience intimate partner physical and/or sexual violence in their lifetime;
- 7 % of women 15-49 experienced physical and/or sexual intimate partner violence in the last 12 months;
- 23% lifetime prevalence of non-partner sexual violenceⁱⁱ

As many as 88% of the sexual abuse cases reported in 2017 were of girls and more than half of these were to children under 16 years. Sadly, as reported by the 2016 Women's Health Survey, "over one-third (39.1%) of the [abused] women who sought help indicated that they received no helpⁱⁱⁱ. These data are alarming as they highlight the dysfunctional status of the social services available to various vulnerable groups – in this case women and girls.

Government of Jamaica's response to previous UPR recommendations

The continued occurrence of gender-based violence vastly affects the country's ability to achieve gender equality (Goal 5 of the SDGs). The government of Jamaica has implemented laws and policies such as the Sexual Offences Act, Domestic Violence Act, Child Care Protection Act, and others, to provide coverage to individuals who are affected by gendered violence.

In the 2nd UPR Cycle, France, Turkey, and Paraguay called on the Jamaican government to implement a national response to gender-based violence^{iv}. In Dec 2018, Jamaica delivered and launched such a 10-year national strategic plan. Development of this plan was informed by the first national survey on gender-based violence conducted in Jamaica^v. The plan focuses on five key areas namely: protection, prevention, intervention, legal procedures and protocols for data collection incorporating initiatives introduced by CSOs, government agencies – for instance: The annual observance of IDEVAW on November 25; training provided by CSO's whose mandate focuses on sexual violence (gender-based violence); and training of police personnel facilitated by Caribbean Association for Feminist Research and Action (CAFRA) on how to handle cases of gender-based violence

The Jamaica Family Planning Association (JFPA) acknowledges the efforts made by the Jamaican government to prevent and mitigate incidents of gendered violence. These changes, notwithstanding, more needs to be done especially in achieving legislative clarity, in improving access to services for persons in need, assuring access to comprehensive sexuality education as a preventive strategy and access to safe spaces for victims.

The COVID-19 pandemic has been linked to increased violence against women and girls. The stay at home orders have prohibited movement of many victims who reside in the same environment as their perpetrator and, as predicted by the WHO (2006)^{vi} distancing measures put in place and xxx to encourage people to stay at home, the risk of intimate partner violence is likely to increase. This increase has highlighted the gaps and insufficiency of the response to partnered violence. With the uncertainty of an end date for the pandemic, strategies such as the development of other shelters must be introduced to mitigate the number of victims who may not have access to the shelter.

The need for Legislative clarity

Where legislation is not written in a clear, unambiguous and concise manner the likelihood of misinterpretation is increased. The Domestic Violence Act of 2004, the guideline used to prosecute perpetrators of domestic violence, is a case in point. The Act does not provide a clear definition for the term domestic violence. This lack of clarity permits individuals working in areas of redress and prosecution, for example, lawyers, judges, police officers, who seek guidance from the Act, to formulate their own meaning and understanding of the action.

Improving access to services for persons in need

Victims of gender-based violence still face limited access to services. Amnesty International reported (June 2006) that while the response from the Centre for the Investigation of Sexual Offences and Child Abuse (CISOCA) is generally positive, the service only operates during business hours while many sexual assault cases occur in the evening hours. Further, police officers who are specially trained to investigate sexual assault cases are not always the investigators of the crime. Usually, the investigating officer is a police officer from the region in which the crime was committed and who may not have received any training in sexual assault investigations^{vii}.



Importance of Comprehensive Sexuality Education

“Comprehensive Sexuality Education (CSE) which is both inclusive and non-stigmatizing, and promotes gender equality and the rights of young people, plays a key role in the battle against sexual and gender-based violence”^{viii}. Data from the Office of the Children’s Registry (OCR) indicate that in 2013, 3386 sexual abuse cases were reported. This was a 23% increase over the previous year. Of the reported cases, 92% were of girls; more than half (1,910) of all reported cases of sexual abuse were carnal abuse – that is sex with children under 16 years old - and there were 349 cases of child rape. These events were more than likely unprotected – a fact that would lead to pregnancy and HIV/STI infection. Between 18% and 20% of births in any year are to adolescents^{ix} and HIV infection rates for adolescents is high. UNICEF reports that adolescents are a high-risk group for HIV infection as almost 10 percent of all reported AIDS cases are among young people under age 19 years of age^x. This is compelling justification of the need for comprehensive sexuality education (CSE). CSE enables young people to protect their health, well-being and dignity^{xi}. The school system must be identified as a hub for prevention of gender-based violence through education and empowerment.

Access of Safe Spaces

Shelters represent an important institutional support for women and men who have been victimized. Carol Watson Williams (2016) observed that leaving an abusive relationship is complex and, in the case of some women victims, they leave and return multiple times before finally ending the relationship; others never leave. It is important, she argues for women to have a space where they (and their children) can get counselling on a consistent basis or can live, if necessary. The Woman Incorporated (Crisis Centre) is the only organization in Jamaica that operates a crisis centre that provides support and shelter for women affected by physical violence. Currently, there is only one official shelter for battered women. This shelter, located in the Kingston and St. Andrew Metropolitan area, reopened in 2017 and can only accommodate 12 women and their children.

Recommendations

1. Establish clear definitions of domestic violence and other issues related to gender-based violence, especially in the Domestic Violence Act, 2004, to bring them in line with the WHO definitions.
2. Guarantee financial and institutional support and ensure nation-wide implementation of the recently launched 10-year national strategic action plan to eliminate gender-based violence, including through training of security and judicial personnel to handle cases of gender-based violence, including for male victims, and through ensuring financial and human resources for domestic violence centres for women.
3. Assure that the Health and Family Life Education Curriculum (HFLE) is aligned with UN technical guidelines on sexuality education (including gender-based violence, bodily integrity, consent, cultural and social norms) and provide on-going, regular training for teachers and providers to ensure content is delivered in a non-judgmental, evidence-based and non-biased manner which does not reinforce negative cultural, religious or gender stereotypes.

ⁱ Carol Watson Williams. 2016. Women’s Health Survey Jamaica. UN Women, IDB, STATIN.

ⁱⁱ Statistical Institute of Jamaica (STATIN), UN Women and Inter-American Development Bank (IDB) 2018. Women’s Health Survey 2016 Jamaica. Kingston, Jamaica

ⁱⁱⁱ Women’s Health Survey 2016 Jamaica. Kingston, Jamaica

^{iv} <https://www.upr-info.org/database/>

^v Carol Watson Williams. 2016. Women’s Health Survey Jamaica. UN Women, IDB, STATIN.

^{vi} <https://www.who.int/reproductivehealth/publications/emergencies/COVID-19-VAW-full-text.pdf>

^{vii} Amnesty International, 2006. Sexual Violence against Women and Girls in Jamaica: "just a little sex"

^{viii} Comprehensive Sexuality Education combats violence against women and girls. Retrieved from <https://en.unesco.org/news/comprehensive-sexuality-education-combats-violence-against-women-and-girls>

^{ix} UNICEF (2017). Adolescent health. Retrieved from

<https://data.unicef.org/topic/maternal-health/adolescent-health/>

^x UNICEF. HIV/AIDS and young people in Jamaica. Retrieved October 1, 2019. Retrieved from

https://www.unicef.org/jamaica/hiv_aids_1989.html

^{xi} UNFPA. Retrieved from <https://www.unfpa.org/comprehensive-sexuality-education>