

FIGO shouts 'No' To Violence Against Women

Today at FIGO World Congress in Rio de Janeiro, Brazil we launched the FIGO and World Health Organization Global Declaration on Violence Against Women

Background

Violence against women and girls is a major public health problem globally. WHO estimates that overall, 35% of women worldwide have experienced either physical and/or sexual intimate partner violence or non-partner sexual violence in their lifetime. While there are many other forms of violence that women may be exposed to, this already represents a large proportion of the world's women. Most of this violence is intimate partner violence. Worldwide, almost one third (30%) of all women who have been in a relationship have experienced physical and/or sexual violence by their intimate partner. In some regions, 38% of women have experienced intimate partner violence. Globally, as many as 38% of all murders of women are committed by intimate partners.

Crisis can exacerbate this violence or bring new forms of violence due to the presence of armed actors, displacement, broken social and protective networks and lack of services. While data on the prevalence of such violence in humanitarian contexts is limited, research suggests that approximately one in five refugee or displaced women in complex humanitarian settings have experienced sexual violence. A 2017 study from South Sudan, found that up to 65% of women report having experienced intimate partner and sexual violence, a rate double the global average.

This violence has many short- and long-term health impacts including unwanted pregnancy, injury, sexually transmitted infections and HIV, chronic pelvic pain, gynaecologic problems and fistula, among others. WHO estimated that women who have been physically or sexually abused by a partner are 16% more likely to have a low-birth-weight baby. They are more than twice as likely to have an abortion, almost twice as likely to experience depression, and, 1.5 times more likely to acquire an STI, and in some regions, HIV, as compared to women who have not experienced partner violence.

Health services are critical for supporting survivors to heal, recover and thrive. If accessed in time, health services can prevent unwanted pregnancies and the transmission of HIV, STIs, following rape. Unfortunately, these services are often not available and survivors lack access to basic, lifesaving care.

We the participants of the XXII FIGO World Congress of Obstetrics and Gynaecology held in Rio de Janeiro between 14th and 19th October 2018 are:

- **Determined** to promote women's health and uphold women's human rights, including their sexual and reproductive rights,
- **Alarmed** by the continuing high prevalence of violence against women worldwide,
- **Deeply concerned** that it is a global public health problem with serious impacts on the physical, mental, sexual and reproductive health of women, and when it occurs during pregnancy affects the health and wellbeing of women and their babies,

- **Deeply concerned** about its harms on the health of infants, children and adolescents (particularly when they are witnesses and /or victims),
- **Deeply concerned** about the high economic and social costs of violence against women for individuals, families, communities and societies,
- **Recognise** that it is a gross violation of women's human rights,
- **Recognise** that violence against women and against girls is highly prevalent and may be exacerbated in situations of crises such as conflict, displacement and among refugees,
- **Recognise** that it is deeply rooted in pervasive gender inequality, particularly discrimination against women and unequal gender norms,
- **Recognise** the need for a coordinated international prevention and response effort by all sectors and across all countries
- **Recognise** the need for national health systems to respond to, prevent and lead or support efforts to address violence against women,
- **Recognise** the need to develop the capacity of all health care providers with adequate support from their health systems, as well as to provide specialised care for meeting the health needs of women who suffer violence,
- **Recall** the 1993 United Nations Declaration on the Elimination of Violence Against Women, the 1994 International Conference on Population and Development Programme of Action, the 1995 Beijing Declaration and Platform for Action, and General Recommendation 19 of the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW),
- **Recall** also the 2016 World Health Organization Global Plan of Action on strengthening the role of the health system, within a multi-sectoral response, to address violence, in particular against women and girls and against children.

Hereby Agree to

- Undertake actions in our various individual and collective capacities to support efforts to address violence against women, and in particular recommend that FIGO Member Societies:
- Urge their governments to:
 - implement the recommendations made by the ICPD Programme of Action and the Beijing Declaration and Platform for Action, to ratify CEDAW if they have not already done so, and to ensure its implementation if they have already ratified it, and to take action to implement the WHO Global Plan of Action to strengthen health systems' response to violence against women and girls
 - adopt advocacy, legal, educational and other measures needed to make violence against women unacceptable to all individuals and groups in society
 - allocate sufficient budgets and resources to prevent and respond to violence against women and make services widely available and accessible to women subject to violence
 - develop and implement national guidelines or protocols for providing quality health care for women experiencing violence, in line with WHO guidelines
- Ensure that violence against women is included in the curricula of all health care providers, including reproductive health care providers, in the specialist training of obstetrician gynaecologists and in continuing education programmes for health providers.

- Enhance the capacity of health care providers to address intimate partner violence and comprehensive post-rape care in line with WHO guidelines, including through training for ob-gyns on identification and clinical care of survivors affected by violence, and advocate to include this in national health or sexual and reproductive health plans or policies.
- Strengthen the availability of and improve access to comprehensive sexual and reproductive health services that include care for survivors of intimate partner violence and post-rape care.
- Collaborate with national authorities, non-governmental and inter-governmental organisations, professional organisations, peers from other health disciplines, private sector providers, and the media to prevent and address the consequences of violence against women, and to communicate with the appropriate bodies to provide an effective safety net for women suffering from violence

We further recommend that obstetricians and gynaecologists:

- Advocate for strategies to address violence against women in their communities, towns, cities or countries and collaborate with civil society and voluntary organizations, particularly women's health and rights organizations, which advocate for women affected by violence
- Raise awareness about violence and its negative impacts on women's health and wellbeing and strategies to address this with their peers in other medical specialties, other health care providers and health policy makers and managers.
- Build capacity of health providers through the integration of violence against women in the curricula for OBGYN residents, nursing and midwifery students.
- Investigate and learn about the extent, types, risk factors, and adverse health consequences, when and how to identify, and how to provide first-line support and comprehensive health care, including for mental health, and appropriate referrals.
- Strengthen health systems in order to provide women-centered care and services to survivors of violence
- Ensure member societies include Violence Against Women as a regular item of their national congress, with involvement of policy makers and other relevant stakeholders
- Own and be accountable for their responsibility to identify and provide confidential, respectful and effective care for women who are experiencing violence, including providing first-line support and assisting women in the legal prosecution of cases of sexual abuse and rape, if they wish to pursue this, by careful and sensitive documentation of the evidence in line with national reporting requirements.
- Support their patients experiencing violence, including through active referrals to psychosocial support and legal services
- Ensure that their own work environment remains free of harassment and abuse.

Rio de Janeiro October 16th, 2018.