

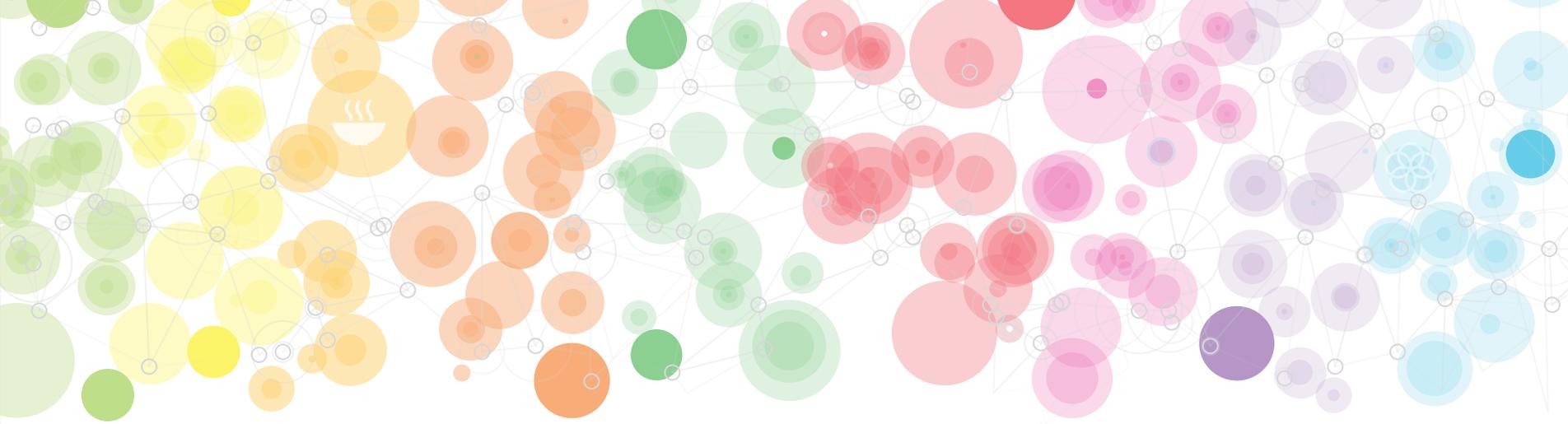


Chapter 8

Human Rights of Women and Girls

Violence against women and girls continues to be an issue, and child marriage remains a widely ignored form of violence. Pregnancy and childbirth complications are the leading cause of death among 15 to 19 year-old girls. In all countries, adolescent birth rates were higher among uneducated and poorest girls.

The harmful practice of FGM impacts women and girls' health and wellbeing, and can result in death. FGM remains a significant problem in some countries, with the poorest girls and those living in rural areas at higher risk.



Human Rights of Women and Girls

Violence against women and girls (VAW/G) is a major human rights and gender issue with significant costs. Research suggests that it has risen since 2011 because of protracted conflict, wars, precarious security condition, and the economic downturn affecting some countries in the region. The impact of violence on the physical and mental health of women and girls can range from broken bones to pregnancy-related complications, unwanted pregnancies, sexually transmitted infections, mental problems, low birth weight babies and impaired social functioning.

Violence against women includes domestic violence, honour killings, child marriage, forced prostitution and trafficking (sexual slavery), sexual harassment and rape. Female genital mutilation remains a serious problem in some Arab countries, particularly Egypt, Mauritania, Somalia and the Sudan. Child marriage exists in all Arab countries, but its prevalence was highest in the poorest countries and in conflict areas.

Violence against women

In 1993, the
UN General Assembly
**Declaration on the
Elimination of Violence
against Women**
provided a framework
for action.



But more than 20 years later,
**1 in 3 women still
experience physical or
sexual violence,**
mostly by an
intimate partner



A. Enabling environment

A new awakening swept the Arab region after 2010 as seven countries enacted long-awaited laws to end violence against women and girls. Jordan rid itself of its infamous “rape law,” where a rapist could

avoid punishment by marrying his victim. Lebanon quickly followed suit, abolishing a similar statute. Tunisia and Morocco passed their first comprehensive national laws to combat violence against women.¹

Table 10 lists the laws issued by some countries criminalizing violence against

Table 10. National laws on violence against women

Country	Population and Housing Census
2011 Kurdistan, Iraq	Law on domestic violence (2011/8)
2014 Lebanon	Law on protection of women and family members against domestic violence (2014/293)
2015 Algeria	Law on Domestic Violence (2015/15-19)
2015 Bahrain	Law on protection from domestic violence (2015/17)
2017 Jordan	Law on protection from domestic violence (2017/15)
2017 Tunisia	Law on elimination of violence against women (2017/58)
2018 Morocco	Law on violence against women (2018/103-13)

women/domestic violence. Algeria, Egypt, Iraq, Mauritania, the State of Palestine and Yemen are also in the process of drafting or have submitted a draft law.

Women and girls also bear the consequences of conflict in many countries of the region. In 2014, the Algerian authorities published a decree to provide financial compensation for

women victims of sexual violence by armed groups during the 1990s internal conflict that engulfed the country, a long overdue step to address sexual and gender-based violence.

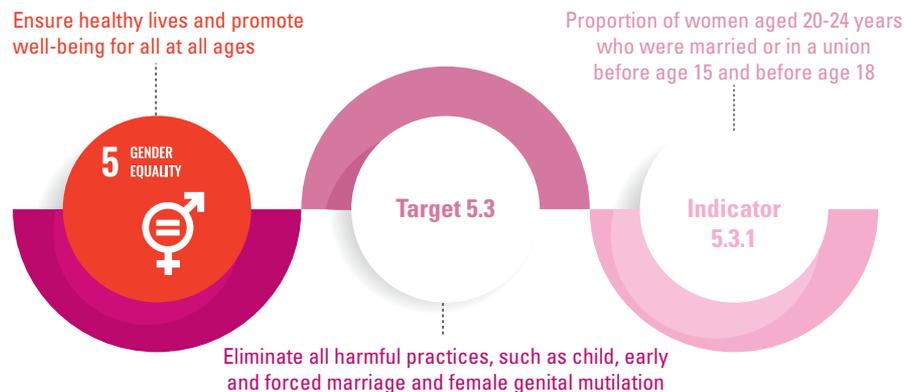
B. Child marriage

Child marriage a major concern for some parts of the region

SDG 5 includes the elimination of harmful practices against women and girls, such as early marriage. Child marriage, meaning before the age of 18 years, has significant impacts on girls' lives. Often encouraged as a way to alleviate poverty, early marriage puts young women at risk of health complications from teenage pregnancy and typically puts an end to their education, limiting their opportunities for the future.²

Only five Arab States have signed the Convention on consent to marriage, the minimum age for marriage and registration of marriages, namely Jordan (1992), Libya (2005), the State of Palestine (2019), Tunisia (1968) and Yemen (1987).

Child marriage has significant impact on girls' lives: it puts young women at risk of health complications and puts an end to their education. Only four Arab States have signed the Convention on consent to marriage, the minimum age for marriage and registration of marriages, and 9 countries still allow girls to marry before the age of 18.



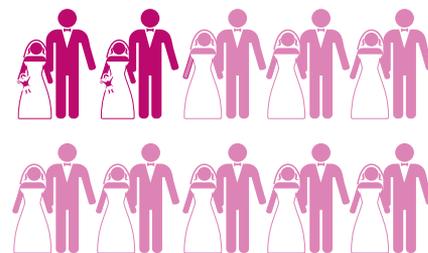
Most countries around the world have laws that set a minimum age of marriage, usually at age 18. However, many countries provide exceptions to the minimum age upon parental consent or authorization of the court. Other exceptions allow customary or religious laws that set lower minimum ages of marriage to take precedence over national law. Such exceptions undermine the efficacy of legal protections against child marriage.

According to latest data from Arab States on the minimum age of marriage laws, nine countries, namely Bahrain, Kuwait, Lebanon, Qatar, Saudi Arabia, Somalia, the Sudan, the Syrian Arab Republic and Yemen, legally allowed girls to marry before the age of 18 with parental consent. Legal frameworks can reinforce, rather than challenge, gender inequalities.

Five countries that allow girls to marry between one and three years younger than boys are Kuwait, Qatar, Bahrain, the Syrian Arab Republic, and Somalia.

The SDG framework includes a measure on early marriage – the proportion of women aged 20–24 years who were married or in a union before age 15 and before age 18 (SDG indicator 5.3.1).³ Among the countries of the region that

CHILD MARRIAGE remains a widely ignored form of violence against young women and girls

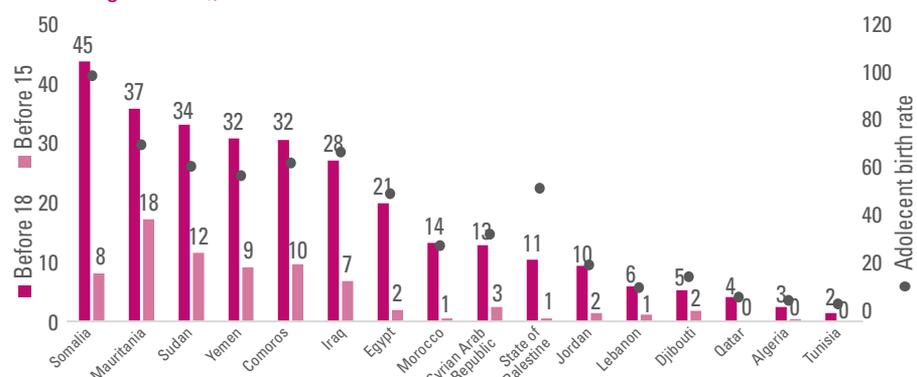


2 out of 10 marriages are of girls below the age of 18 years

have data available in the Global SDG Database, it is clear that child marriage remains an issue in Somalia, Mauritania, the Sudan, Yemen and Comoros, where more than third of girls were married before age 18 and around one in ten before age 15. Rates were also alarmingly high in Iraq **Figure 116**.

There is a clear association between early marriage and adolescent birth rate. Early marriage before age 18 and teenage motherhood were the highest in Somalia. In 2015-2020, the rate in Somalia was estimated at 100 births per 1,000 women aged 15-19 where 45 per cent of girls married before age 18. Tunisia had the lowest rate for early marriage before age 18 at 2 per cent; it also had the lowest

Figure 116. Proportion of women aged 20-24 years who were married or in union before age 15 and before age 18 (percentage) and adolescent birth rate (birth per 1,000 women aged 15-19), latest available data



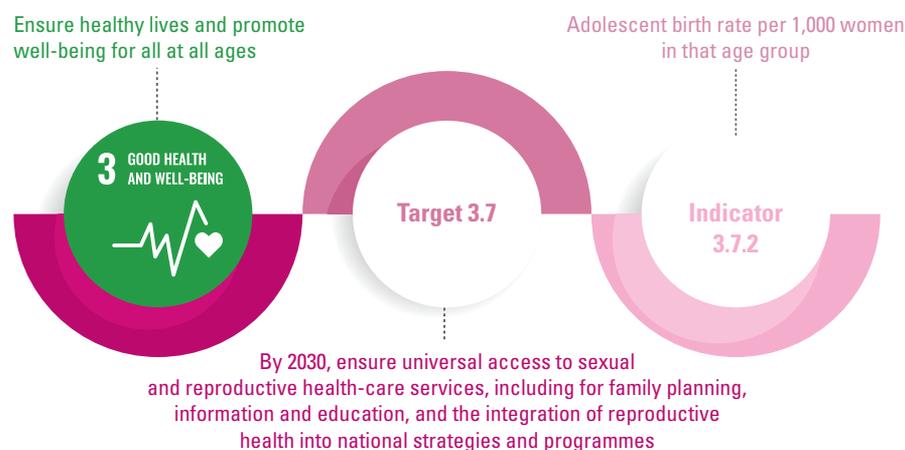
Source: Latest DHS and MICS surveys (see Annex- Marriage and Family) (early marriage); and DESA, *World Population Prospects 2019* (New York, 2019) (adolescent birth rate).

adolescent birth rate in the region at 8 births per 1,000 women aged 15-19. In some refugee camps in the Middle East girls and young women

have been “married off” without their consent and subjected to sexual exploitation in neighbouring countries.⁴

C. Adolescent pregnancies

Adolescent pregnancies are a global problem which occur in high, middle, and low-income countries. Around the world, adolescent pregnancies are more likely to occur in marginalized communities, commonly driven by poverty and lack of education and employment opportunities. Every year, an estimated 21 million girls aged 15 - 19 years and 2 million girls aged under 15 years become pregnant in developing regions. Approximately 16 million girls aged 15 - 19 years and 2.5 million girls under age 16 years give birth in developing regions.⁵ The global adolescent birth rate has declined from 65 births per 1,000 women in 1990 to 43 births per 1,000 women in 2015.



Adolescent pregnancy has negative social and economic effects on girls, their families and communities. Moreover, adolescent pregnancy remains a major contributor to maternal and child mortality, and to intergenerational cycles of

ill-health and poverty. Pregnancy and childbirth complications are the leading cause of death among 15 to 19-year-old girls globally, with low- and middle-income countries accounting for 99 per cent of global maternal deaths of women ages 15 to 49 years.⁶

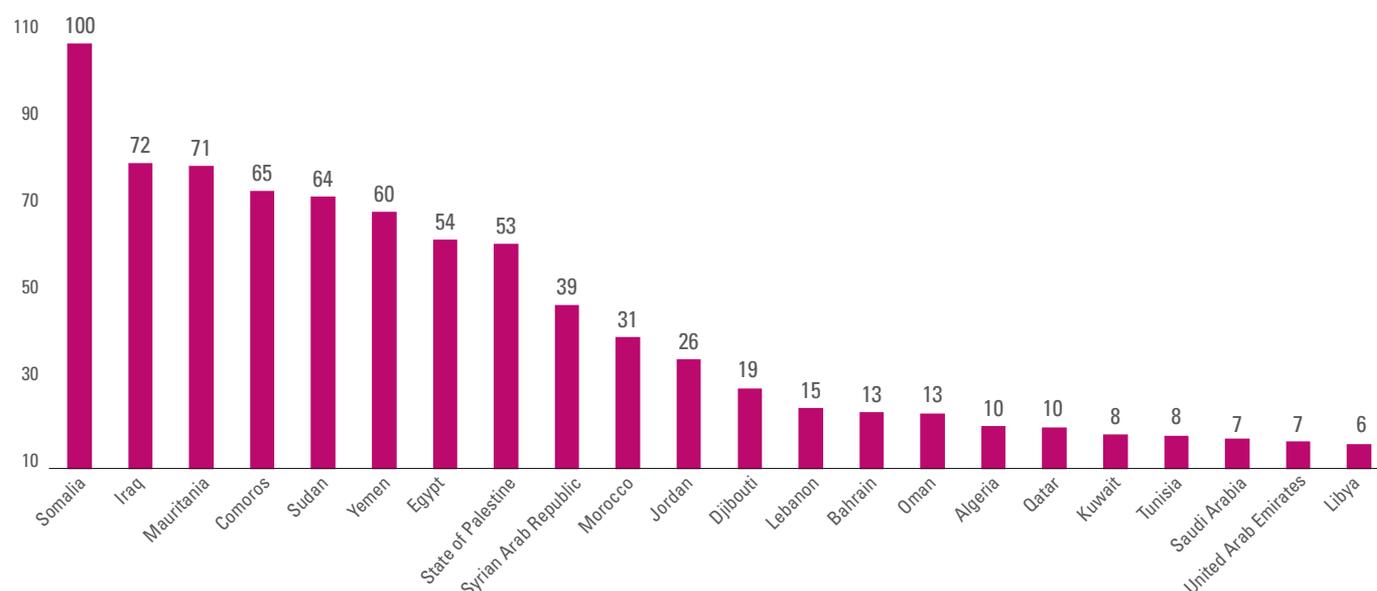
In the Arab region, teenage motherhood was highest in Somalia at a rate of 100 births per 1,000 women aged 15-19, followed by Iraq at a rate of 72 births per 1,000 women aged 15-19. Adolescent birth rates were also high in Mauritania, Comoros, the Sudan and Yemen. Libya had the

lowest adolescent birth rate in the region followed by the United Arab Emirates, Saudi Arabia and Tunisia **Figure 117**.

There is a clear association between the educational attainment of the mother and wealth and adolescent birth rate.

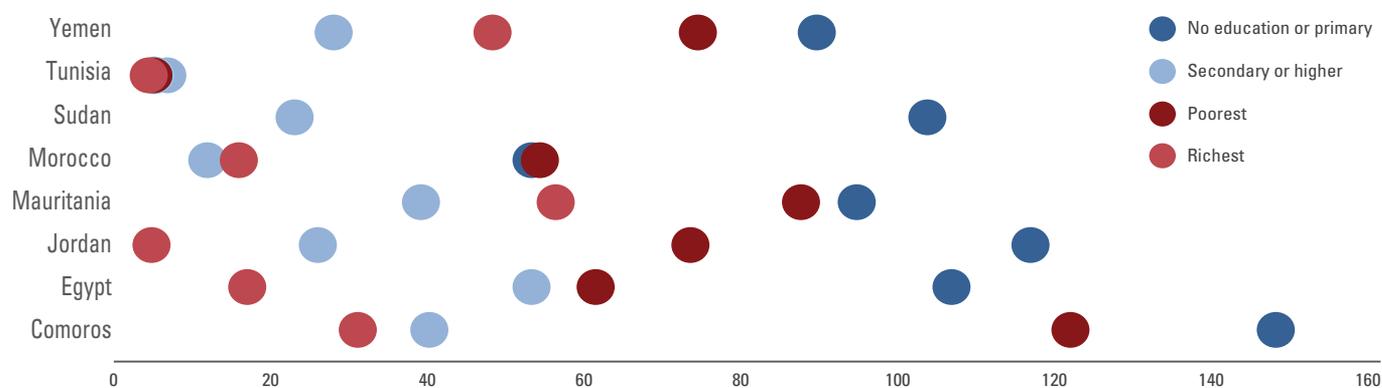
Early birth by young women, as a result of early marriage, increases in poor families and is higher among girls with less educational attainment, as shown in **Figure 118**. In all the countries with available data, adolescent birth rates were higher among uneducated and poorest girls **Figure 118**.

Figure 117. Adolescent birth rate (births per 1,000 women), 2015-2020



Source: DESA, *World Population Prospects 2019* (New York, 2019).

Figure 118. Adolescent birth rate (births per 1,000 women) by education and wealth, latest available data



Source: ICF 2015, The DHS Program STATcompiler.

D. Female genital mutilation

All women and girls have the right to the highest attainable standard of health. Those who are subjected to FGM have this fundamental right denied them, along with the range of other human rights that FGM violates.⁷ Countries where FGM is a common practice have demographic characteristics in common, including relatively young population, high fertility, high mortality and lower urbanization.⁸ FGM impact women and girls' well-being in many ways, including severe emotional and physical trauma, potential health risks, including reproductive and sexual health complications, and possible death through loss of blood or sepsis.

Statistics on FGM are typically based on data gathered through the Demographic and Health Survey (DHS), Multiple Indicator Cluster Survey (MICS) or other health-related household surveys. Few of the Arab States countries have produced statistics on this issue with data currently only available for Djibouti, Egypt, Iraq, Mauritania, Somalia, the Sudan and Yemen.

In the 29 countries in the MENA region where of FGM is most common, 133 million girls and women who have undergone the harmful practice. FGM rates in the Arab region run as high as 97.9 per cent in Somalia (2006), 93.1 per cent in Djibouti (2006), 87.2 per cent in Egypt (2015), 86.6 per cent in the Sudan (2014). In Mauritania two thirds of women have underwent FGM in 2015.

Achieve gender equality and empower all women and girls



Data by age show the practice is in decline, albeit slowly **Figure 119**. In Egypt, where average rates were among the highest in the region, almost all women aged 45-49 reported having undergone mutilation, whereas the proportion of adolescent girls (age 15-19) was lower at 70 per cent. The age at which cutting occurs varies across the region but is usually between 4 to 12 years old.⁹

In all countries the practice of FGM is more prevalent in rural areas than urban. Data from Iraq show the importance of subnational disaggregation on such issues. While the national average was 5 per cent of adolescent girls and 10 per cent of women aged 45-49 years, rates were much higher in the Erbil region where FGM/C was most prevalent. The practice is apparently based more on tradition than religion and it thought to be for safeguarding a girls' chastity. It is, however, a brutal infringement of human rights and, in recognition of this, is now outlawed in Djibouti, Egypt, Iraq, Mauritania, Somalia, the Sudan, and Yemen, although enforcing these laws remains a challenge¹⁰ **Figure 120**.

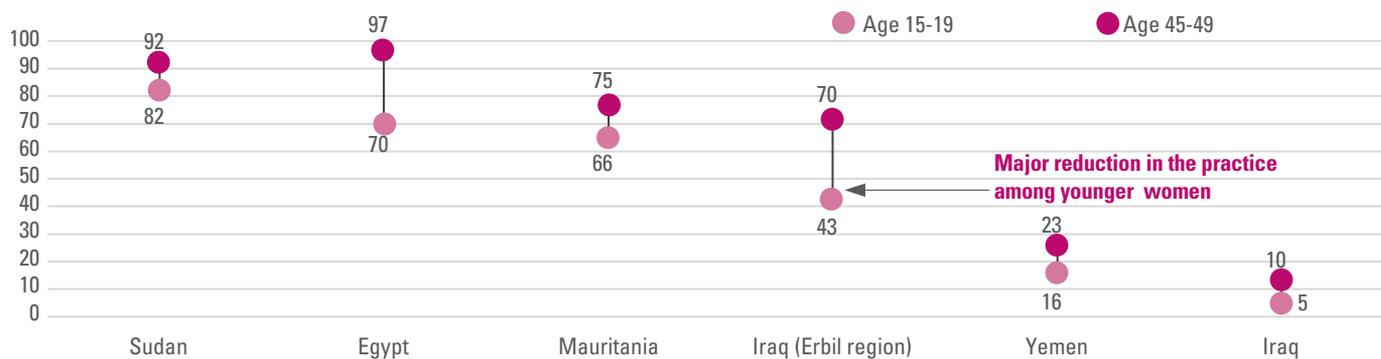
Data on FGM by wealth quintile show a further disparity between poorest and richest population in all the Arab States with available data; poorest girls are at a higher risk of undergoing FGM than richer girls. In Mauritania, for example, there was a gap of 55 percentage points between the richest and poorest girls (poorest 92% and richest 37%). In Egypt the gap between richest and poorest girls undergoing FGM was at 25 percentage points (poorest 94% and richest 70%) **Figure 121**.

Female Genital Mutilation
133 million girls and women have experienced **female genital mutilation** in the 29 countries in Africa and the Middle East where the harmful practice is most common

Impact
Severe emotional and physical trauma, potential health risks, including reproductive and sexual health complications, and possible death through loss of blood or sepsis.

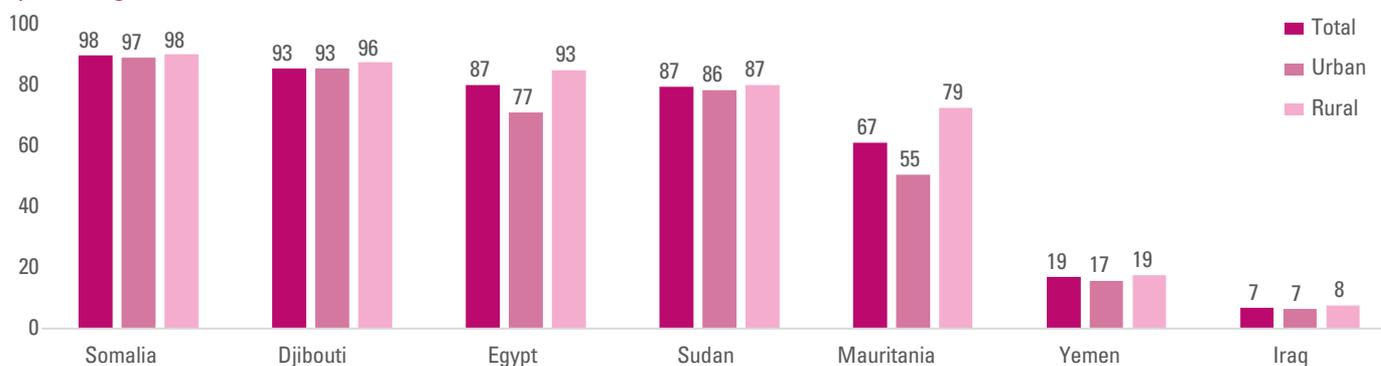


Figure 119. Proportion of girls aged 15-19 years and women aged 45-49 years who have undergone female genital mutilation/cutting, latest available data (percentage)



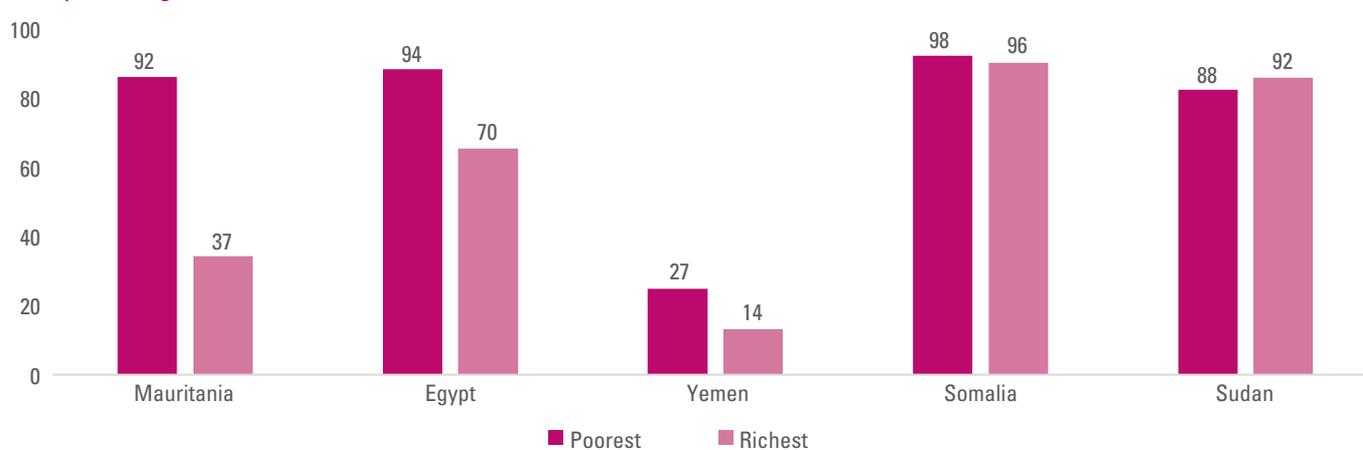
Source: UNICEF, "Female Genital Mutilation Country Profiles".

Figure 120. Proportion of women and girls who have undergone female genital mutilation by location, latest available data (percentage)



Source: UNICEF global databases 2018, based on DHS, MICS and other nationally representative surveys (last updated on October 2018).

Figure 121. Proportion of women and girls who have undergone female genital mutilation by wealth quintile, latest available data (percentage)



Source: UNICEF global databases 2018, based on DHS, MICS and other nationally representative surveys (last updated on October 2018).

E. Spousal violence

Spousal or intimate partner violence is one of the most widespread forms of violence against women. Globally, it is estimated that one in every three women have been physically and/or sexually assaulted by a current or former husband or boyfriend at some point in their lives. For many women, such violence occurs regularly and, as it occurs behind closed doors, they may be coping with it alone.

Nine Arab states have conducted stand-alone household surveys on violence against women or have included a module in a health survey like the DHS and MICS. The latest VAW or DHS or other health surveys that included VAW were implemented in: Comoros (DHS 2012), Egypt (VAW survey 2015 and 2019, DHS 2014), Iraq (IWISH 2011), Jordan (DHS 2017), Mauritania (VAW survey 2011), Morocco (VAW survey 2019, DHS 2018), the State of Palestine (VAW survey 2015 and 2019), Somalia (DHS 2019) and Tunisia (VAW survey 2011).

Data on women who have experienced spousal or intimate partner violence during their lifetime are displayed below in **Figure 122**. In the State of Palestine, 31 per cent of women reported being subject to physical violence, followed by Egypt (25%), Tunisia (20%), Jordan (18%), Comoros (6%) and Mauritania (1%). Even though women in all six countries except Mauritania experienced less sexual violence than physical violence, data from the State of Palestine showed a high rate of women reported experiencing sexual violence at 14.6 per cent,

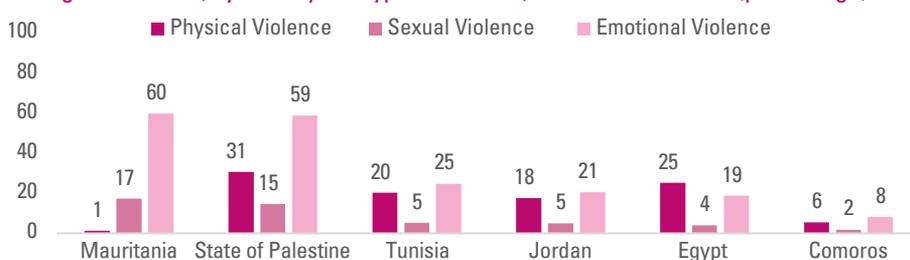


followed by Tunisia (5%), Jordan (5%), Egypt (4%) and Comoros (2%).

Out of the three forms of violence, emotional violence was the highest in all countries except Egypt. Mauritania reported highest emotional violence (60%) in the region, followed by the State of Palestine (59%), Tunisia (25%) and Jordan (21%). In Egypt, however, emotional violence was the second most common form of violence that women experienced at 19 per cent. One can observe a pattern in the countries that when sexual violence was reported in high rates so was emotional violence **Figure 122**.

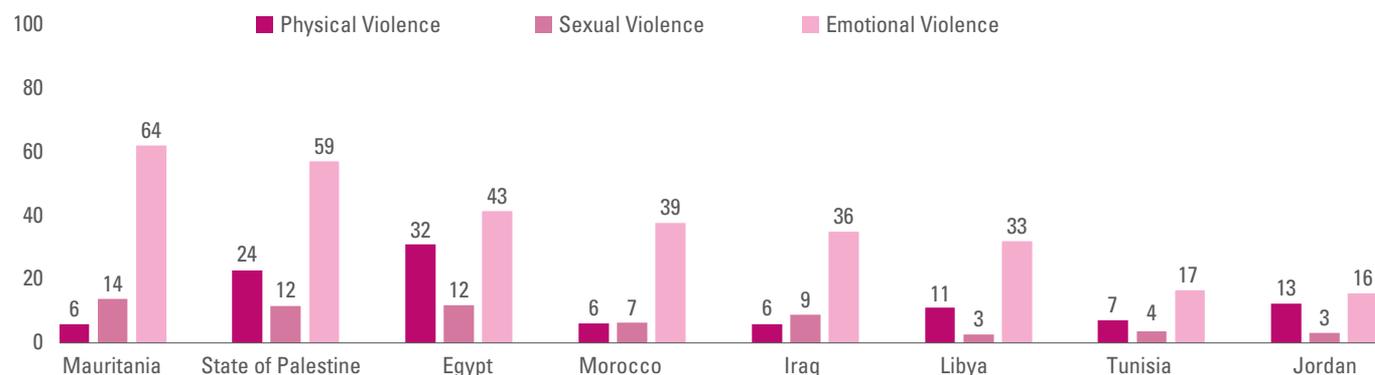
Figure 123 shows the proportion of women who have experienced spousal violence in the last 12 months. Physical violence was highest in Egypt at 32 per cent, followed by the State of Palestine (24%), Jordan (13%), Libya (11%), Tunisia (7%), Iraq, Morocco and Mauritania (6%). Sexual violence was most prevalent in Mauritania (14%) then Egypt and the State of Palestine (12%), Iraq (9%), Morocco (7%), Tunisia (4%) and Libya and Jordan (3%). Although physical violence was lowest in Mauritania, emotional violence was the highest at 64 per cent, followed by the State of Palestine (59%), Egypt (43%), Morocco (39%), Iraq (36%), Libya (33%), Tunisia (17%) and Jordan (16%).

Figure 122. Proportion of ever-partnered women who have experienced spousal violence during their lifetime, by country and type of violence, latest available data (percentage)



Source: Latest DHS and VAW surveys.

Figure 123. Proportion of ever-partnered women who have experienced spousal violence in the last 12 months, by country and type of violence, latest available data (percentage)



Source: Latest DHS and VAW surveys.

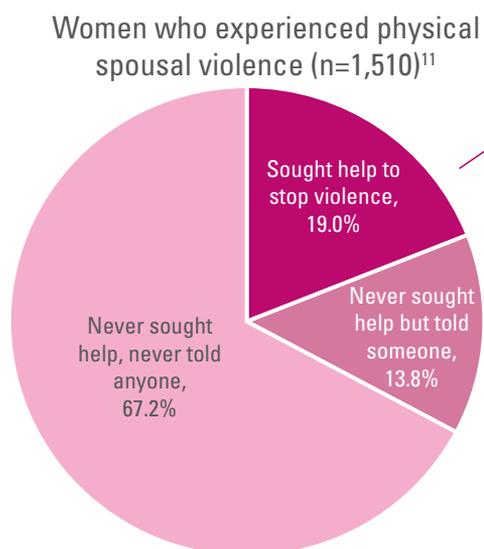
How women cope with spousal violence?

Women who experience spousal violence are unlikely to seek help from anyone or from authorities unless the violence has become intolerable. A study on domestic violence in Jordan showed that 67 per cent of the women who had experienced physical

spousal violence never told anyone and never sought help, compared to 19 per cent of women who did seek help **Figure 124**. Almost all of these women turned to family (77%), friends or neighbours for help. Only 2 per cent of women who sought help went to the police and around 3 per cent turned to a social service organization **Figure 125**.

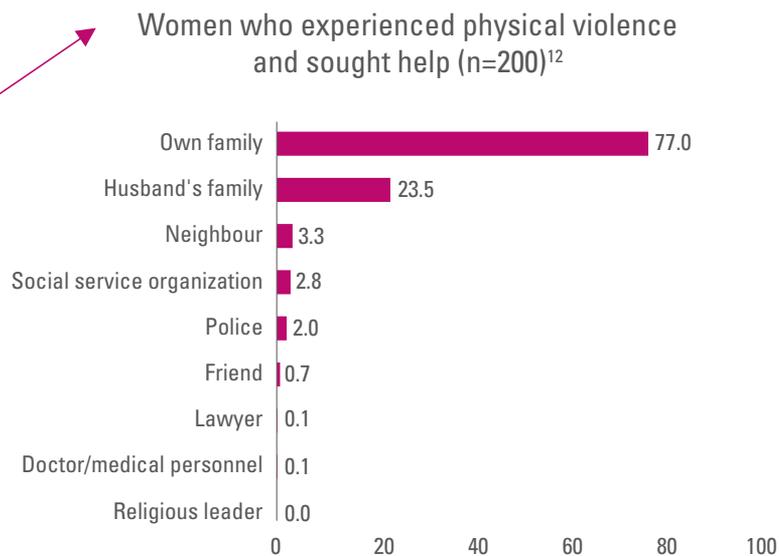
Violence against women and girls is a major human rights and a gender issue with significant costs. Only seven countries enacted laws to end violence against women and girls in the Arab States. Women who experience spousal violence are unlikely to seek help from anyone or from authorities.

Figure 124. Help seeking to stop violence, Jordan, 2017-2018



Sources: Jordan DHS 2017-2018.

Figure 125. Source of help to stop violence, Jordan, 2017-2018



Sources: Jordan DHS 2017-2018.

Figure 126. Help seeking to stop violence, Egypt, 2014



Source: Egypt DHS 2014.

Figure 127. Source of help to stop violence, Egypt, 2014



Source: Egypt DHS 2014.

The Egypt 2014 Demographic and Health Survey (DHS) shows similar results to Jordan. Almost half of the women (49%) who had experienced physical spousal

violence never told anyone and never sought help, compared to 33 per cent of women who sought help **Figure 126**. The main sources for help were own family

(79%) and less than 1 per cent resorted to the police, a lawyer or a religious leader. None resorted to social service organizations **Figure 127**.

F. Trafficking

The Middle East record sizable shares of adult forced labour as the main form of victims trafficked from other regions

According to the definition given in the United Nations protocol, trafficking in persons has three constituent elements: the act (recruitment, transportation, transfer, harbouring or receipt of persons), the means (threat or use of force, coercion, abduction, fraud, deception, abuse of power or of a position of vulnerability, or giving payments or benefits to a person in control over another person), and the purpose (at minimum exploiting

Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels



the prostitution of others, sexual exploitation, forced labour, slavery or similar practices and the removal of organs).¹³

The definition implies that the exploitation does not need to be in place, as the

intention by traffickers to exploit the victim is sufficient to define a trafficking offence. Furthermore, the list of exploitative forms is not limited, which means that other forms of exploitation may emerge, and they could be considered as additional forms of trafficking offences.

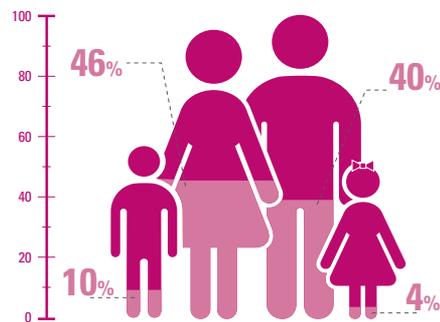
In terms of shares of detected victims of trafficking persons globally in 2016, nearly half were women (49%) and one fifth were men (21%), and there were more girls than boys at 23 per cent and 7 per cent, respectively.

In the MENA region,¹⁴ however, the vast majority of the detected victims with slightly more women (46%) than men (40%). Relatively few child victims were detected contrary to many other regions, boys (10%) more than girls (4%) **Figure 128**.

Trafficking for the purpose of forced labour was more than half (55%) of the detected victims in the MENA region. Trafficking for sexual exploitation constituted 36 per cent for sexual exploitation, and some 9 per cent for 'other' forms of exploitation, during the reporting period of 2014-2016 **Figure 129**.

Abduction of women and girls for sexual slavery had also been reported in conflict areas and trafficked women and girls are forced to marry in the Middle East. Recruitment of children for use as armed combatants is widely documented in many of the conflict areas including the Middle East.¹⁵

Figure 128. Shares of detected victims of trafficking in MENA, by age group and sex, 2016



Source: United Nations Office on Drugs and Crime (UNODC), *Global Report on Trafficking in Persons 2018* (New York, 2018).

Enhanced country-level anti-trafficking measures have not only led to increasing numbers of detected victims **Figure 130**, but also to more trafficking convictions. MENA countries went from no convictions to a handful of convictions per year in recent years. While these countries register an increasing trend, the total numbers remain very low. MENA shares of traffickers convicted in their country of citizenship is 10 per cent, the lowest recorded rates among other regions.¹⁶ The share of females convicted of trafficking in persons are estimated at 22 per cent in comparison to males.¹⁷

Figure 129. Share of detected victims of trafficking in MENA, by forms of exploitation, 2016

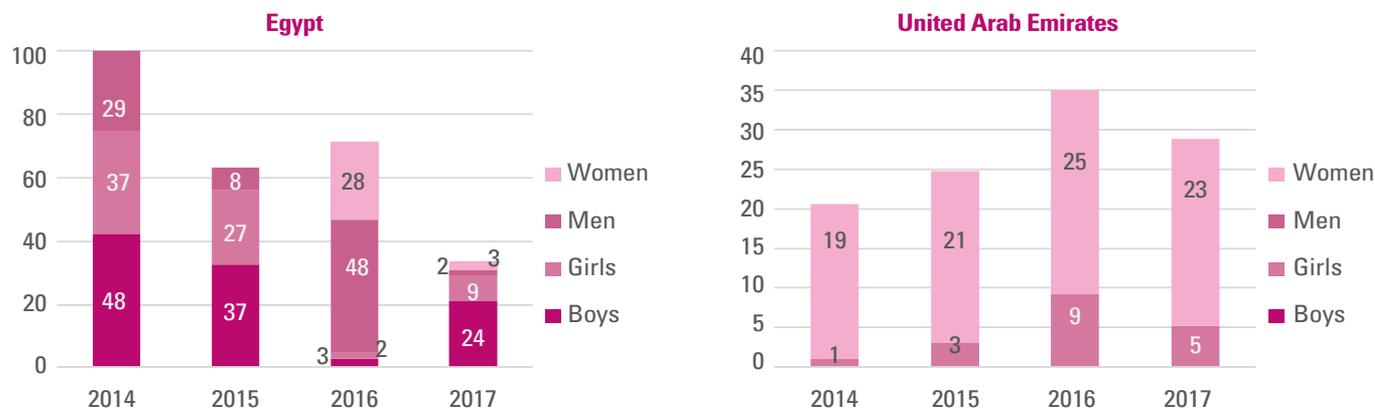


Source: UNODC, *Global Report on Trafficking in Persons 2018* (New York, 2018).

Rapid improvements took place in the last few years as a number of countries amended their criminal codes to introduce a trafficking offence in line with the United Nations Trafficking in Persons Protocol definition. In the MENA region, only a couple of countries have not yet introduced specific trafficking legislation.¹⁸

Abduction of women and girls for sexual slavery and recruitment of children for use as armed combatants is widely documented in many of the conflict areas.

Figure 130. Number of victims of trafficking in persons detected, by age and sex, 2014 – 2017, in Egypt and the United Arab Emirates (percentage)



Source: UNODC, *Global Report on Trafficking in Persons 2018* (New York, 2018).

G. Child labour

Far too many children in the world remain trapped in child labour, compromising their individual futures. According to the latest ILO global estimates, about 168 million children worldwide are child labourers, accounting for almost 11 per cent of the child population. These stark figures underscore the need for accelerated progress against child labour in the lead up to the 2025 target date to end child labour in all its forms, and the accompanying need for child labour statistics to monitor and guide efforts in this regard.¹⁹

Figure 131 below shows that male children were more likely to engage in economic activity than female children in the Arab region. One fifth of the children aged 5 to 14 years old in Comoros were engaged in economic

Promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all

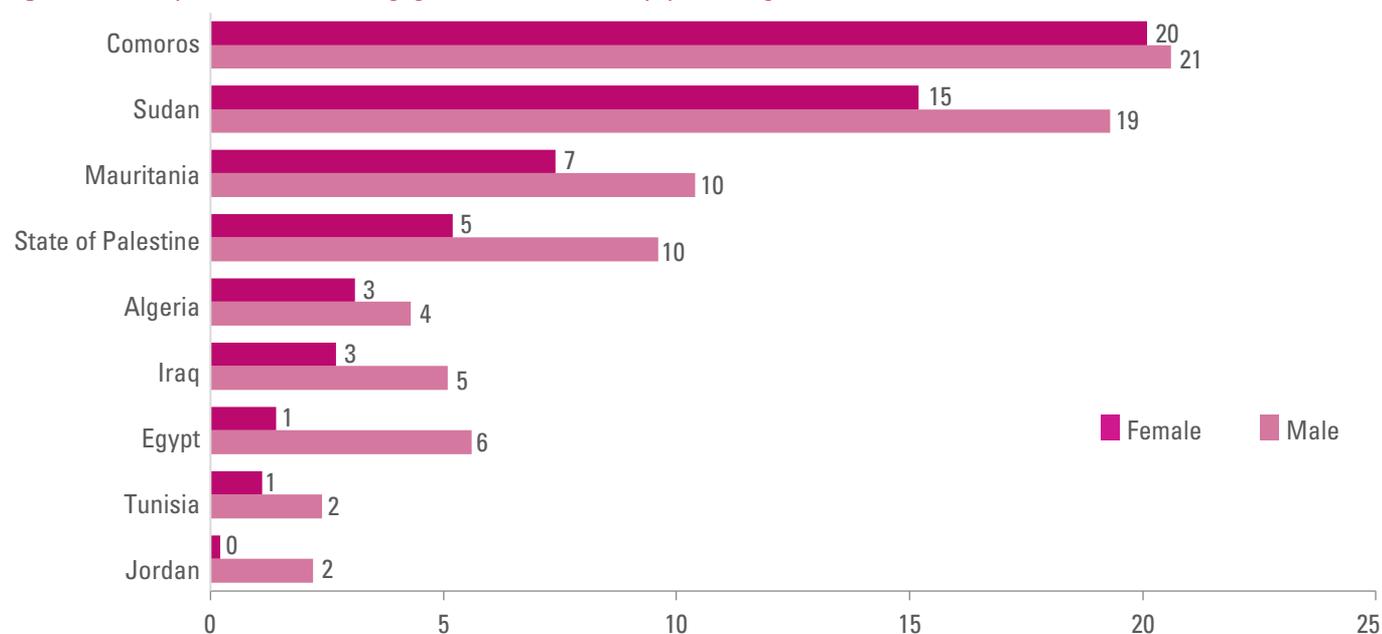


activity. The Sudan also employed high numbers of children in economic activity. There was around one in every seven female children engaged in economic activity in comparison to two in every 10 male children in the Sudan.

The largest gender gaps were in favour of males were witnessed in

Egypt, the State of Palestine and the Sudan around 4 percentage points, followed by Mauritania at 3 percentage points. In the remaining countries, namely Algeria, Comoros, Iraq, Jordan, and Tunisia, the gender gap was less than 2 percentage points.

Figure 131. Proportion of children engaged in economic activity (percentage)



Source: UNSD, "SDG indicators", Global SDG Indicators database.