



**Profamilia**

Inequalities in attention and prevention of sexual violence in Venezuelan migrant girls and women in Colombia: Qualitative analysis in an humanitarian crisis context.

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## Context

Sustainable development goals related with the research



**10.7** Facilitate orderly, safe, regular and responsible migration and mobility of people, including through the implementation of planned and well-managed migration policies.

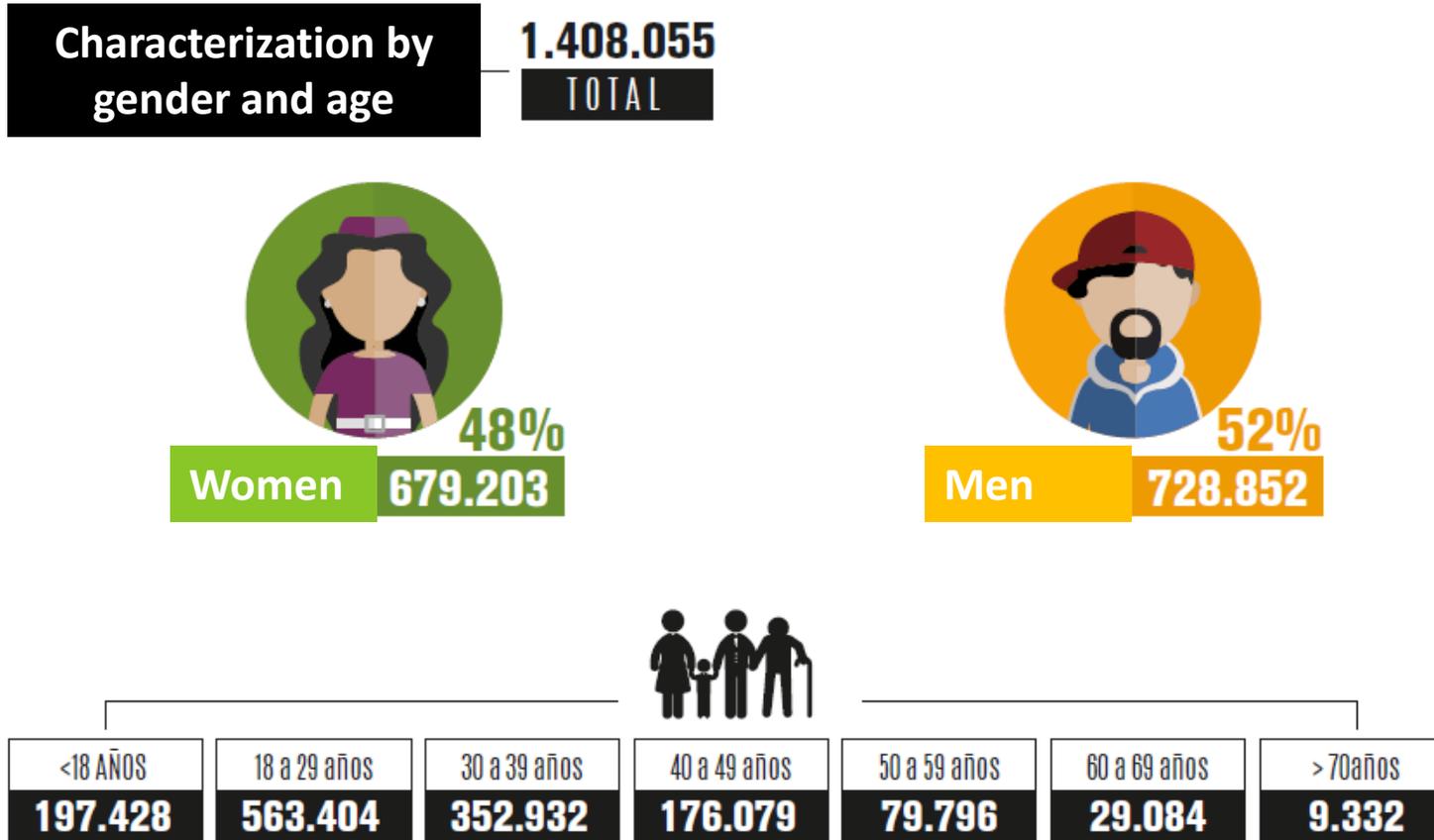


**5.2** Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation



**3.7** By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes

# Some notes on Venezuelan migratory phenomenon



•Colombia had not previously been a recipient country of foreign migration.

•Colombia is currently the second country in the world, that after Venezuela, hosts the largest number of Venezuelan population.

Source: Migración Colombia, Colombian government June 30, 2019

# Contexto: Violencia Basada en Género y Violencia sexual

Venezuelan migrant population arrive into the country with multiple sexual and reproductive health unmet needs and face access barriers to primary services due to their status as migrants, discrimination and misinformation



- In 2015, **1 out of each 50** ever-married Venezuelan women have suffered violence from their partner during lifetime. (PLAFAM, 2016).
- Around **7.6%** of Colombian ever-married women were survivors of **sexual violence by their partners.**
- Venezuelan survivors of gender violence seeking health care services in Colombia have increased significantly by **207%**, from 2017 to 2018 and by **37%** from 2018 to in 2019



## Methodology

Qualitative study that combined different tools

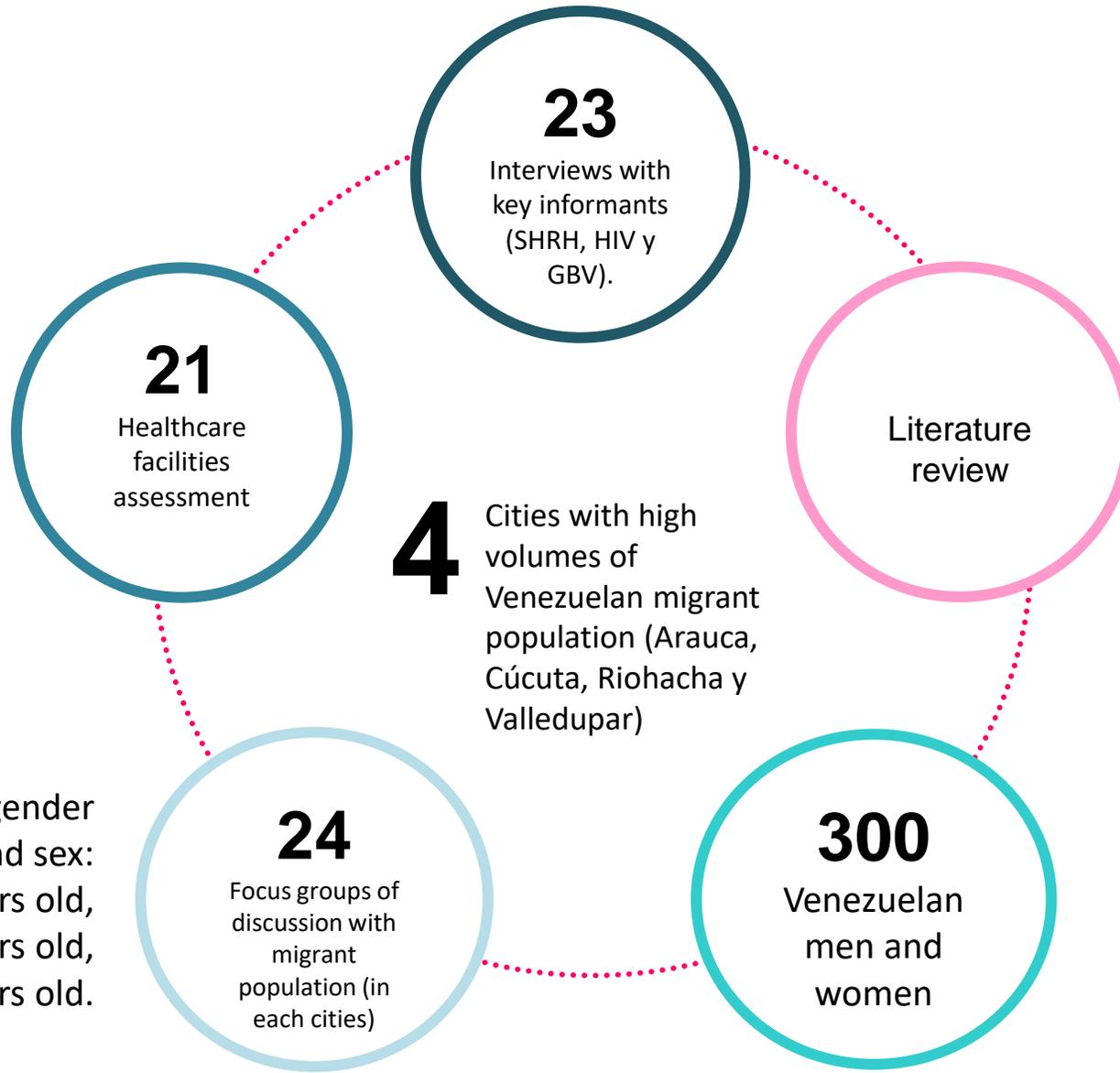
"(...) a female neighbor went with her and they gave her 12 condoms; later, her daughter passed by, asked for some and they said 'they're all gone, if you need more, come back tomorrow', and then another nurse who was there said: 'she's very ungrateful, she comes from Venezuela because she doesn't have them and complains'".

Male Venezuelan migrant

Focus Group: 25 to 49 years old

Cúcuta

-  2004
-  2005
-  2008
-  2011
-  2015
-  2018



The research purpose was to assess the implementation of the Minimal initial service package – MISP – for sexual and reproductive health in Colombia-Venezuela border scenario.

The assessment was based on the application of the toolkit developed by the Inter-Agency Working Group on Reproductive Health in Crises (IAWG), for the evaluation of the availability of the Minimum Initial Service Packages (MISP) for Reproductive Health in crisis situations



Ethical approval was granted by Profamilia Advisory Committee in Research Ethics on the 1st of November of 2018.



"(...) here, Colombians are saying that we, the women, are bringing infections, diseases from Venezuela, that we have HIV, AIDS, gonorrhea, this and that".

# Resultados

Findings are presented as follows:

1. Level of implementation and available services for survivors of sexual assault and violence.
2. Intersections and migrants' perceptions of sexual and gender-based violence.

## Level of implementation and attention of SGBV.

- People in charge of responses have heard of sexual violence and gender-based violence incidents against Venezuelan migrant population.
- One of the four assessed cities counts with none organization providing attention for migrants survivors.

## Services availability for survivors of sexual violence.

- Healthcare facilities does not count with comprehensive services for clinical management of sexual violence.
- Referral and counter-referral systems are not strong enough.
- Migrant do not know about the services that are available for survivors of sexual violence.

# Intersections and migrants' perceptions of sexual and gender-based violence.

- Migrant people do not usually recognize different expressions of sexual and gender-based violence.
- They often focus their strategies regarding this violence through legal actions instead of medical attention.
- Migrant people, specially girls and women, are exposed to different kinds of sexual and gender-based violence which get connected with previous experiences of violence – Violence continuum.
- Venezuelan migrants are aware that being a woman and being a women suppose a social position of vulnerability to Sexual and gender-based violence.

TOP 10	CUCUTA NORTE DE SANTANDER	RIOHACHA LA GUAJIRA	VALLEDUPAR CESAR	ARAUCA ARAUCA	
1	Access to contraceptive services			Safe abortion services and post-abortion care	Most urgent needs
2	Prevention of Sexual transmission of infections STI		Safe abortion services and post-abortion care	Access to contraceptive services	
3	Comprehensive sexuality education	Prevention of teenage pregnancy and youth friendly services	Prevention of Sexual Transmission Infections STI	Effective access to maternal and newborn health care services	
4	Safe abortion services and post-abortion care		Prevention of teenage pregnancy and youth friendly services		Urgent needs
5	Information and communication on offer and location of SRHS for migrants	Effective access to maternal and newborn health care services		Effective and comprehensive care of sexual violence	
6	Effective access to antiretroviral treatment	Effective and comprehensive care of sexual violence		Effective access to antiretroviral treatment	Other important needs
7	Information on services for survivors of sexual violence		Effective access to Sexual and Reproductive Health Care for migrants	Information and communication on offer and location of SRHS for migrants	
8	Protection and prevention of sexual exploitation				
9	Combined response in HIV management and care	Information and communication on offer and location of SRHS for migrants		Information on services for survivors of sexual violence	
10	Prevention of teenage pregnancy and youth friendly services	Combined response in HIV management and care	Funding for Sexual, Reproductive, Maternal and Child health.	Comprehensive sexuality education	



"I know a friend who was going to have a baby here but couldn't. She had to return to Venezuela because she was being charged with 1 million Colombian pesos to have her baby here (...)"

## Recommendations

In order to guarantee comprehensive care for sexual and gender-based violence survivors and strengthening the prevention during migration flows

1

Shared common objectives addressing SGBV

2

Intersectional approaches and smart gender capacity building to address migrant women and girls' needs within humanitarian crisis.

3

Expanding access to quality and essential SRHS is key for reducing SGBV.

4

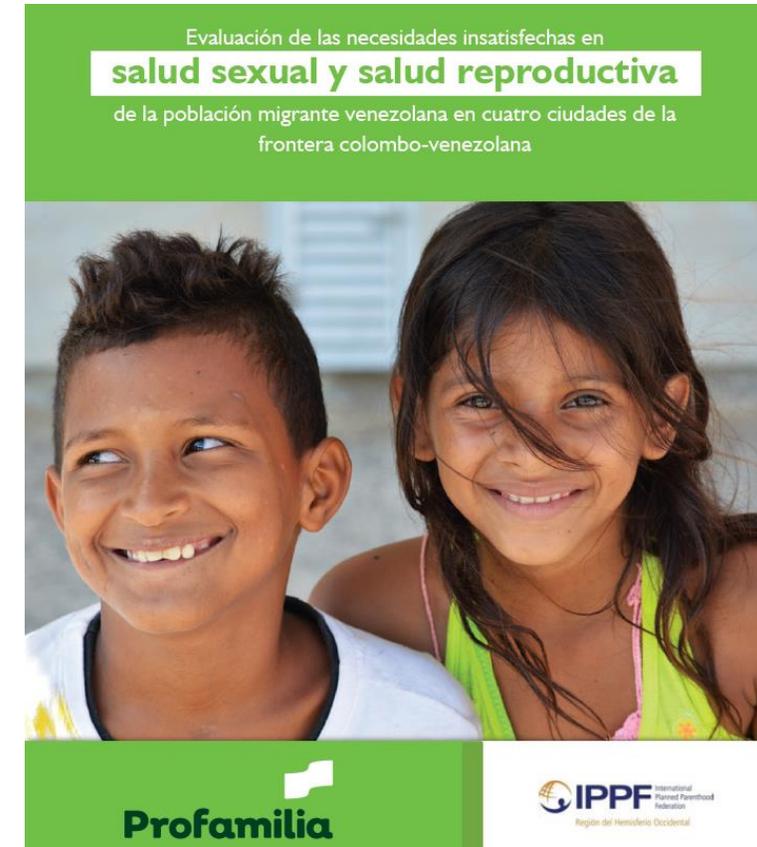
Private-sector engagement is key.

5

Data for decisions-making and to tackle misinformation

6

To engage receptor communities in led partnerships



Thank you!!

