

27 March 2019 □ As part of its effort to address violence against women and girls, the WHO Regional Office for the Eastern Mediterranean is launching an Arabic version of the WHO package on health system response to violence against women and girls.

In releasing this evidence-based guidance, WHO seeks to ensure that preventing and responding to violence against women and girls is better prioritized by the health sector – in both development and emergency contexts – and that health partners are equipped with the technical knowledge needed to provide an appropriate response.

The launch will be held at the Regional Office in Cairo, Egypt, on Sunday 31 March 2019. The event will start at 11:30 a.m. and will include a musical performance by the gifted women of the Al-Nour Wal Amal orchestra.

Representatives of United Nations agencies, the League of Arab States, partners and development agencies are participating in the event in a demonstration of the importance of working together towards ensuring health and well-being for all by all.

The package includes clinical and policy guidelines, a clinical handbook for health care providers, and a manual for health managers. Translation and country adaptation of the documents into other local languages in the Region, including Dari, Pashto and Urdu, is also being undertaken to maximize their use by as many health providers as possible and ensure an effective health system response at country level.

Around one in three women across the world, including in WHO's Eastern Mediterranean Region, is exposed to a form of violence during their lifetime. As such, this issue requires more recognition and action at all levels.

“Violence against women and girls is a clear and grave violation of human rights, with serious implications for the health and well-being of survivors. The impact of this violence extends to their families, communities and society at large. No corner of the world is untouched by it,” notes Dr Ahmed Al-Mandhari, WHO Regional Director for the Eastern Mediterranean.

“This event is an opportunity to renew our joint commitment to continue our collective effort to ensure that women and girls have equitable access to all health services, including survivor-centred care, with full respect for their dignity and rights.”

Praising the ongoing efforts by Member States of the Region to address the issue, the Regional Director will highlight the steps taken by WHO in collaboration with countries to promote women’s health and reduce their exposure to violence and discrimination in both development and emergency contexts.

In 2016, the World Health Assembly, in resolution WHA69.5, committed WHO and its Member States to strengthening the role of the health system within a national multisectoral response to address interpersonal violence, in particular against women and girls and against children.

This commitment is reinforced by WHO’s new global strategy, the Thirteenth General Programme of Work, which includes an ambitious target to reduce violence against women and girls as one of the key determinants of healthier lives and better well-being for all.

It is also strongly reflected in the Region’s vision for public health, which calls for solidarity and action to achieve health for all by all and emphasizes inclusiveness and respect for diversity, equity and equality for all – men, women, girls and boys alike.

Notes for the editor

Violence against women and girls

Violence against women and girls is a violation of their human rights and a major public health concern. It takes many forms, including domestic violence (intimate partner violence in particular), sexual violence, rape, emotional/psychological violence, and violence related to harmful traditional practices and customary norms, including deprivation of basic needs.

Data on the prevalence of violence against women and girls are alarming. The Eastern Mediterranean Region has the second highest prevalence globally, with an estimated 37% of ever-partnered women who have experienced physical and/or sexual intimate partner violence at some point in their lives.

The high prevalence of violence against women and girls has its roots in structural systems that maintain gender inequalities and discrimination.

Violence against women and girls has important negative social and economic implications for national budgets and overall development. It results in a loss of human capital, productivity, quality of life, and citizen welfare, leading to overall economic loss for a country.

The role of the health system in preventing and responding to violence against women and girls

Violence against women and girls has grave physical, mental, sexual, and reproductive health implications. Most women and girls attend health services at some point, including those for sexual and reproductive health. Evidence shows that women who have experienced violence are more likely to seek health services, even if they do not disclose the associated violence. Health services are often the first point of contact that women survivors of gender-based violence have with professional services, and are a culturally and socially appropriate service-entry point for survivors. Health care providers are therefore ideally placed to identify and respond to women and girls subjected to violence.

Violence against women and girls in emergency situations

Violence against women and girls is exacerbated in emergency situations. In the Eastern Mediterranean Region, as of September 2018, there were 10 graded emergencies in eight countries, with over 71 million people in need of emergency health care, including 15 million internally displaced people. Humanitarian crises and socio-political and economic instability can bring new forms of violence due to the presence of armed actors, displacement, broken social and protective networks, and a lack of services.

While data on the prevalence of violence against women and girls in humanitarian contexts are limited, research suggests that approximately one in 5 refugee or displaced women in complex humanitarian settings have experienced sexual violence. Despite the underreporting, and the fragmentation and incompleteness of the data, the available information is sufficient to warrant urgent action. There is a clear need and increasing demand to address the whole spectrum of violence to which women and girls are exposed to in different emergency settings. The critical role of health professionals in this regard cannot be overstated.

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