

# State of African Women Report

## Fact Sheet

August 21, 2018

### Background & Overview

The *State of African Women Report* is published as part of the State of African Women Campaign project. This project seeks to contribute to securing, realising and extending women's rights enshrined in African Union policies in African countries. The project is being implemented by a consortium of eight organisations, under the lead of the International Planned Parenthood Federation Africa Region (IPPFAR) and funded by the European Union. Within this consortium, KIT Royal Tropical Institute has led and worked with a team of African women researchers to develop the *State of African Women Report*.

The *State of African Women Report* provides an evidence base for the Right By Her campaign, which aims to further strengthen civil society's contribution to implementation of the African commitments on women and girls' rights in sexual and reproductive health and rights (SRHR). The *State of African Women Report* focuses in particular on implementation of the AU's Maputo Protocol on the rights of women in Africa and the Maputo Plan of Action (MPoA), which is the implementation framework for the Continental Policy Framework on SRHR. The campaign seeks to accelerate implementation of the Maputo Protocol and the MPoA by strengthening civil society organisations (CSOs) in two aspects: in terms of knowledge on women and girls' rights in SRHR and in terms of advocacy strategies and capacity to meaningfully participate in decision-making processes.

#### The *State of African Women Report* has four main objectives:

1. To *raise awareness* about the Maputo Protocol and PoA as continental commitments for women's and girls' rights in SRHR
2. To *review the status and implementation* of the Maputo Protocol and PoA, with specific focus on women's and girls' rights in SRHR
3. To provide and strengthen a *gender and rights perspective* on the implementation of these continental commitments, and to strengthen understanding of women and girls' realities and of how women's and girls' rights can be secured, realised and extended
4. To *inform and strengthen effective advocacy efforts and strategies* of CSOs and African multipliers and opinion-formers towards implementation of the Maputo Protocol and Plan of Action and the realisation of women and girls' rights in SRHR

#### The report focuses in particular on four specific rights areas:

1. Gender-based violence against women (GVAW)
2. Harmful practices (in particular child marriage and female genital mutilation, FGM)
3. Reproductive rights and sexual and reproductive health (SRH)
4. HIV and AIDS

### CORE RIGHTS



### CROSS-CUTTING ISSUES



Alongside the four rights areas, this report takes into account four cross-cutting issues: peace and security; education and training; participation of women in political and decision-making processes; and marginalised and vulnerable groups of women and girls.

## Key Findings

This year marks the fifteenth anniversary of the Maputo Protocol and the upcoming 25-year review of the International Conference on Population and Development. These milestones offer an excellent opportunity to take stock of gaps and contestations around the realisation of women and girls' rights, and to identify where progress for SRHR needs to be accelerated.

### Implementation of the Maputo Protocol

The Maputo Protocol is a ground-breaking protocol on women and girls' human rights, both within Africa and beyond. This Protocol compensates for shortcomings in the African Charter (1981) and includes 32 articles on women and girls' rights. It also provides an explicit definition of discrimination against women, which was missing in the African Charter. The progressive and innovative character of the Maputo Protocol lies in, among other things, the legal prohibition of FGM and the prohibition of forced marriage and marriage of girls under 18. It also provides for the eradication of all forms of GVAW, in public and private spheres, and for the legal protection of adolescent girls from abuse and sexual harassment. The Maputo Protocol articulates women and girls' right to health, including sexual and reproductive health, and their reproductive rights. It is the first protocol to recognise women and girls' access to safe abortion under specific conditions as a human right. It is also the first international human rights instrument to refer to HIV and AIDS explicitly. The protocol's value also lies in its explicit references to vulnerable and marginalised groups, including adolescents, widows, elderly women, women with disabilities, poor women and migrant and refugee women.

Fifty-two countries have signed the Maputo Protocol. Forty-one of these have ratified it. Seven countries have ratified with reservations, often concerning women and girls' rights on SRHR issues, especially in relation to marriage or access to safe abortion. Implementation of the Maputo Protocol has been affected by low awareness and knowledge of the Protocol, as well as limited state reporting. It is further affected by continued contestations related to women and girls' rights and culture and patriarchal norms and structures, which are frequently invoked to justify violations of women and girls' rights.

### Gender-based violence against women (GVAW)

GVAW means any act of violence that is directed against a woman or girl because of her gender, in both public and private spheres, and including the threat to undertake such acts. GVAW is an expression of and perpetuates gender inequalities and male domination. State parties have an obligation to:

1. PROHIBIT all forms of violence against ALL women and girls
2. PREVENT, PUNISH & ERADICATE violence against women and girls
3. SUPPORT women and girl victims of violence with gender-sensitive legal and medical services
4. PROTECT women and girls from abuse, sexual harassment and exploitation in educational institutions and the workplace.

#### The unfinished business:

- One in three women and girls in Africa has experienced GVAW. Much of this violence is physical and/or sexual violence, and committed by her husband, boyfriend, intimate partner, relatives or friends.
- Young and adolescent women, elderly women, women with disabilities, female sex workers, and bisexual or transgender women can be more exposed and vulnerable to certain types of violence.
- Sexual violence as a weapon of war severely affects women and girls, and is also targeted at men.
  
- All countries prohibit at least one type of GVAW, but most countries lack a comprehensive legal framework and response to all forms of GVAW.
- 3 in 10 African countries have no legal provision regarding domestic violence.
- 3 in 5 African countries do not criminalize marital rape.
- There is a strong need to reliable, accurate and comprehensive data on GVAW, to inform evidence-based policy making and monitor progress and gaps in implementation.

### Harmful Practices

Harmful practices refer to behaviours, attitudes, and practices which violate the fundamental rights of women and girls and are conducted for non-therapeutic purposes. This report focuses on two types of harmful practices: female genital mutilation (FGM) and child marriage. State parties have an obligation to:

1. PROHIBIT all forms of harmful practices
2. PROTECT women who are being subjected to harmful practices, and SUPPORT victims with health services, legal support, counselling and vocational training
3. PROHIBIT ALL forms of *female genital mutilation* in order to eradicate them.
4. ENSURE that no *marriage* takes place before the age of 18
5. ENSURE that no marriage takes place without the free consent of both parties and that the legal age of marriage applies civil, customary and religious marriages.

#### **The unfinished business:**

- Four in ten girls in sub-Saharan Africa are married before the age of 18.
- In seven of these countries, more than 1 in 2 girls is married before the age of 18.
- Countries with high levels of child marriage also have high rates of maternal deaths and high adolescent birth rates.
- Eight out of ten countries set the legal age of marriage at 18, but many have legal loopholes.
- In 36 countries, full and free consent is not guaranteed, and only half of the countries guarantee the minimum age of marriage to apply to customary and religious marriages as well.
- FGM is concentrated in 27 countries in Africa; in 8 countries, over 80% of girls and women have undergone female genital mutilation.
- In two-third of those 27 countries, the majority of women and girls think the practice should end.
- Fifteen countries do not prohibit FGM or harmful practices.

### **Reproductive Rights and Sexual & Reproductive Health**

Sexual and reproductive health means a state of complete physical, mental and social well-being in all matters related to sexuality and the reproductive system and processes. The right to the highest attainable standard of health, including SRH, requires all women and girls to be able to control their health and fertility, free from coercion and with full and free consent. State parties have an obligation to:

1. RESPECT and PROMOTE women and girls' right to control their fertility and decide on the number, timing and spacing of pregnancies
2. RESPECT and PROMOTE women and girls' right to choose a method of contraception
3. PROVIDE adequate, comprehensive and accessible health services, including information and education, to ALL women
4. STRENGTHEN health services for pregnant women and new mothers
5. AUTHORISE safe abortion in cases of sexual assault, rape, or incest; when the life and/or the health of the woman is in danger; and in case foetal impairment

#### **The unfinished business:**

- One in four girls in sub-Saharan Africa are pregnant before the age of 18.
- More than half of maternal deaths worldwide occur in sub-Saharan Africa.
- More than 1 in 5 women in Africa have an unmet need for contraception.
- 3 out of 4 abortions in Africa are unsafe.
  
- Only a limited number of countries has specific SRH legislation.
- 2 out of 5 countries are making progress towards meeting the Abuja targets on health financing.
- More progress is required in developing and implementing adolescent SRH policies and strategies.
- In 3 out of 5 African countries, women cannot access safe abortion on the grounds specified in the Maputo Protocol.

### **HIV & AIDS**

HIV and AIDS affect women and girls disproportionately across the continent. Respect and promotion of women and girls' human rights are at the heart of the fight against HIV and AIDS. State parties have an obligation to:

1. RESPECT and PROMOTE women and girls' right to protect themselves and be protected from HIV.
2. RESPECT and PROMOTE women and girls' right to be informed of their health status and that of their partner, including through voluntary testing ensuring informed consent.
3. ENSURE that adequate, affordable, and accessible SRH services are provided to ALL women and girls, irrespective of their marital status, age, HIV status or other factors.
4. INFORM AND EDUCATE all women and girls on SRH, sexuality, and sexual and reproductive rights, especially those in rural areas

#### **The unfinished business:**

- 7 in 10 people worldwide living with HIV live in sub-Saharan Africa. More than half of these are women and girls.
- Young women (15-24 yrs) in sub-Saharan Africa are 2.5 times more likely to be infected with HIV than men.
- AIDS-related illnesses are the second leading cause of death for women in Africa aged 15-24.
- 3 out of 10 countries lack legislation that guarantees non-discrimination on the basis of HIV.
- Criminalisation of sexual and HIV-related conduct, as well as of wilful transmission of HIV poses a threat to voluntary testing and counselling and access to SRH services and information.

## Regional Economic Communities

The AU recognizes eight Regional Economic Communities (RECs) as pillars in the regional integration process, and these eight differ in their roles and structures, as well as their progress.

- Five RECs have a normative and institutional framework for gender equality and women and girls' rights in place: ECOWAS, EAC, SADC, COMESA and IGAD.
- The key opportunities of the RECs for promoting gender equality and women and girls' rights are in harmonization of as well as regional coordination in legal and policy frameworks.
- New steps in the recently formulated normative legal and policy frameworks of these five RECs relate to the formulation of monitoring frameworks and tracking mechanisms.
- These five RECs, as well as ECCAS, have a gender infrastructure in place, which vary in size, capacity and mandate. They suffer from limitations in human and financial resources.
- Regional advocacy networks are active at the level of the RECs. The level of civil society engagement varies by REC. There is a need for stronger consultative frameworks of the RECs with civil society.
- The utilization of regional courts could be advanced to promote the protection of women and girls' rights. ECOWAS has a Court of Justice where states and individuals can file cases; the Court of Justice of EAC has not been utilized yet for cases on women and girls' rights. The Tribunal of SADC has been suspended.
- Other regional initiatives that have taken initiatives on women and girls' rights in SRHR include the International Conference on the Great Lakes Region (ICGLR) and the Eastern and Southern Africa Commitment on Comprehensive Sexuality Education (ESA Commitment).

## Strategies for Change

The *State of African Women Report* presents thirty-three case studies that cover a wide range of initiatives, change agents and strategies pursued to promote, expand and realise women and girls' rights in SRHR. Many cases capture the work of women's rights and feminist organisations and activists, at community, national, regional or continental level, engaged in pushing for legal reform, in mobilising communities, in implementing or supporting the implementation of legal and policy frameworks, or monitoring progress in their implementation.

The key lessons that can be learned from this diverse set of case studies include:

- Civil society, and women and girls' rights organisations in particular, are critical actors in promoting and monitoring legal, policy and institutional reform on each of the four rights areas
- It is critical to advance and support women and girls' leadership and participation in political and decision-making processes on aspects that affect their lives and concern their rights in SRHR
- Youth champions and youth leaders play an important role in advocating for adolescents and young people's rights in SRHR.
- Important initiatives to raising awareness and promoting institutional and social norms change towards women and girls' rights are facilitated and initiated by faith-based organisations and progressive faith leaders.
- Multi-disciplinary coalitions and networks provide powerful opportunities for transformative and sustainable change, especially when organisations join forces around shared agendas.
- Collaboration and coordination between stakeholders, both state and non-state, along medical as well as legal service delivery and justice chains is critical in implementation and for realising actual changes in women and girls' lives.
- Legal, policy or institutional change is of pivotal importance, but not enough to realise and expand women and girls' rights in SRHR; these need to be complemented with challenging gender inequalities and patriarchal hierarchies, norms and practices.

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