

Commission on the Status of Women

Fifty-seventh session

4-15 March 2013

Agenda items 3 (a) (i) and (c)

Follow-up to the Fourth World Conference on Women and to the twenty-third special session of the General Assembly, entitled "Women 2000: gender equality, development and peace for the twentyfirst century":

Implementation of strategic objectives and action in critical areas of concern and further actions and initiatives: priority

and of systemic gender-based discrimination. Despite increased global commitments to addressing the issue, violence against women and girls continues to persist in all countries and regions, with national statistics indicating prevalence rates of alarming proportions. Violence against women and girls has devastating consequences for survivors. It can result in serious injury and death. Violence has short and long-term effects on the survivors' rights and health, including sexual and reproductive health, as well as significant mental health consequences, and can lead to a higher risk of subsequent victimization. Violence against women and girls also hinders social and economic development and reduces productivity. It has enormous direct and indirect costs for countries. In terms of the health sector, the

mobile outreach to individual women and girls. These can be tailored to address one form of violence, mainly domestic and/or sexual violence, or to respond to multiple forms of violence.

8. Some of these services have been established as rights- and survivor-based approach and are based on the understanding that one size does not fit all. Interventions must also take account of women's realities by providing services that respond to different manifestations and forms of violence and to the diverse needs of specific groups of women and girls, including women with disabilities, indigenous women, migrant women, women living with HIV and lesbian, gay, bisexual and transgender community

9. Participants confirmed that health systems and health services are often a key point of entry for survivors. Therefore it is important that health services be an integral part of effective multisectoral responses. The provision of comprehensive quality health care should encompass free medical treatment and care, including emergency contraception and post-exposure prophylaxis and counselling support. Facility infrastructure should be upgraded to ensure privacy and adequate supplies, and protocols and guidelines should be strengthened and the capacity of health workers built with a view to identifying and responding appropriately to survivors of violence. While respecting the right of survivors to decide whether or not to report incidences of violence to police, health care professionals play a key role in providing support, referring survivors to other specialized services, including the police, and collecting forensic evidence and documentation. A shared understanding and comprehensive referral mechanisms between police and health services to facilitate reporting procedures for survivors and minimize revictimization are

17. Providing sustained support and accompanying women and girls throughout the reporting and recovery process, as well as of empowering survivors, are essential. Participants stressed that a holistic approach necessarily entails going beyond the provision of quality immediate and short-term support to the provision of long-term assistance, including employment assistance, access to long-term housing, social reintegration, reintegration into education for girls, and access to reparations that, in addition to providing restitution, compensation, rehabilitation and reintegration are transformative in nature and address the root and structural causes of discrimination and inequality underlying violence against women and girls.
