Sexual Violence in Latin America and the Caribbean
A Desk Review

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Aim

To increase knowledge of the situation of SV in LAC through a desk review of relevant information about different aspects of the topic. These include: extent and nature of the situation, legal and policy framework, intervention services and current research situation.

Methodology

- Review (mainly on-line) of relevant second hand information:
  - Scientific studies (books, national and international journals)
  - Technical reports (international organisations)
  - Legal documents
  - Websites information

- Analysis, categorisation and organisation of the information.

- Identification of main priorities.

- Presentation of work progress.

- Elaboration first draft.

- Final report.

Outline

Introduction
- Scope of the study
- Aim and specific objectives
- Methodology
- Limitations

SV
- Definitions, characteristics, consequences
- International attention
- Current situation
- Challenges

LAC Context
- Socio-political context
    - Diversity
    - Inequalities-Poverty
    - Political system
    - Cultural context
    - Culture of violence
    - Gender structures
    - Transformations
    - Vulnerable populations
- GBV in LAC
    - Attention and progress
    - Current situation

Outline

Extent of SV in LAC
- General Data
- SV in spousal relationships
- SV by non-partners
  - Child and youth sexual abuse
  - Trafficking, prostitution and sexual exploitation
  - Migration
  - Sexual harassment
  - Emergency and conflict and post-conflict situations
- SV against men
- RSH Consequences

Nature
- Macrosocial
  - Gender norms
  - Violent culture
  - State responsibility
- Community
  - Lack of protection
- Relationship
  - Control of women's sexuality
- Individual
  - Age
  - Socio-economic characteristics
  - Violent experiences during childhood

Outline

Legal and policy framework
- Legislation
  - International laws
  - Current situation of national laws
  - Implementation of laws
- Policy framework
  - Policies, plans and programmes
  - Institutions and networks
  - Implementation of plans and programmes

Survivor's situation
- Women's response
  - Strategies
  - Disclosure and reporting
- Accessing to services and services responses

Outline

Interventions

- Support services
  - Health
  - Justice
  - Social
  - Integral
- Education and capacity building
- Raising awareness
- Community mobilisation
- Promoting public safety
- Working with men

Data, research and evaluations

- Data collection
  - Local studies
  - RSH and GBV national-based surveys
  - Official data
- Studies and Methodologies
- Research related to interventions
- Future Research

Conclusions

Extent of SV in LAC

General Data

- In Colombia, around 722,000 girls and women have been raped (ENDS; 2005).

- In Argentina, there is a sexual attack every 150 minutes (Bianco, M. *et al.*; 2008).

- In the Caribbean (Barbados, Jamaica and T&T) between 57% and 76% of women have suffered of sexual coercion (Le Franc, E. *et al.*; 2008).

- In Mexico, the lifetime prevalence of sexual abuse is 17% (ENVIM; 2003).

Extent of SV in LAC

SV in spousal relationships

% of Women (15-49) ever in union, who reported having experienced of SV by a partner
(National Coverage)

Country	Year	Ever (in any relationship)
Bolivia	2003	15
Colombia	2005	12
Ecuador	2004	9
Haiti	2000	17
Mexico	2006	18
Nicaragua	1998/99	10
Peru	2004	10
Dominican Rep.	2002	6

Extent of SV in LAC

SV in spousal relationships

- Lima 23% and Cusco 47% in Peru (WHO; 2005).

- Sao Paulo 10% and Pernambuco 14% in Brazil (WHO; 2005).

- Guadalajara 23% and Durango 42% in Mexico (Krug *et al.*; 2002).

- 28% public health providers in Sao Paulo (Oliveira, A.R. *et al.*, 2008); 23% women attending health centre in Mexico (Ramos-Lira, L. *et al.*; 2001).

Extent of SV in LAC

SV by non-partners

- Between 8% and 27% of women have suffered SV by a non-partner (Ellsberg, M.; 2005).

- The abusers are mainly men who are close to the victims: relatives, neighbours, friends, colleagues, priests, teachers, service providers.

- Around 20% of victims of SV (in Bolivia and Colombia) were attacked by an unknown man (CEPAL website).

- An unexpected finding of a study in Peru was accounts of "group rape" (Cáceres, C.F.; 2005).

Extent of SV in LAC

Child and youth sexual abuse

- Most cases of SV are against female children and adolescents.

- Perpetrators: acquaintances who have power over the victims.

- First sexual intercourse forced or coerced.

- "Being touched in a way that was not right".

- Most pregnant girls less than 16, the pregnancy was consequence of rape.

- Particularly vulnerable: low socio-economic status.

Extent of SV in LAC

Trafficking, prostitution and sexual exploitation

- LAC is primarily reported as an origin region.

- Two of the world's four countries with the highest number of women victims of human trafficking for sexual exploitation abroad are in LAC: Brazil and Dominican Republic.

- Victims: low socio-economic status. "Street children".

- Diverse mechanisms used by traffickers: work promise, marriage, adoption.

- SV against sex workers.

Extent of SV in LAC

Migration

- Illegal migrants in high risk of being sexually abused. Lack of protection.

- In the border Mexico-Guatemala 60% of female migrants have been victims of sexual abuse (Montaño, S. *et al.*; 2007).

- In the same border, 76% of sex workers are migrants from Honduras, El Salvador and Nicaragua. Most of them are single mothers who have suffered intimate partner violence (Bronfmann, M.; 2001).

- Particularly vulnerable: displaced population (Colombia, Guatemala, Mexico and Peru).

Extent of SV in LAC

Sexual harassment

- Lack of information.

- In Santiago de Chile, 20% of workers reported having been victims of sexual harassment at their work places (Rico, N.; 1996).

- In Brazil, about 26% reported some form of sexual harassment at work during the past 12 months. Of these, 68% reported having experienced sexist hostility, 59% sexual hostility, 46% unwanted sexual attention, 30% sexual coercion (DeSouza, E.R. *et al.*; 2008).

- Women who work in maquila and domestic workers are at high risk.

Extent of SV in LAC

Emergency and conflict and post-conflict

- Sexual abuse has been documented during armed conflicts in Central America and during dictatorships in South America.

- Main aggressors are government and paramilitary forces who have used SV to sow terror within communities making it easier for military control to be imposed, to force people to flee their homes to assist acquisition of territory, to wreak revenge on adversaries, to accumulate "trophies of war" and to exploit women as sexual slaves (A.I.; 2004).

- Indigenous women at greater risk.

- Countries emerging from conflict (Guatemala, El Salvador, Haiti) report high criminal violence levels, including SV.

- Women and girls victims of sexual abuse in shelters during a storm in Dominican Republic (Alba, W. *et al.*; 2008).

Extent of SV in LAC

SV against men

- Lower levels of SV against men than SV against women.

- Main victims: children and homosexuals.

- In Brazil, 24% of men living with HIV/AIDS reported having suffered SV. Main aggressors: relatives, friends and teachers (Segurado, A.C. *et al.*; 2008).

- % of men who suffered SV during childhood in CA: 5.5% Belize City; 10% San José; 6.2% San Salvador; 3.3% Tegucigalpa; 8.3% Managua; 4.3% Panama City (Pantelides, E. *et al.*)

Extent of SV in LAC

RSH Consequences

- STI/HIV-AIDS.

- Unwanted pregnancies.

- Less likely to know about sexual matters.

- Early sexual initiation.

Nature

Macrosocial: Gender Norms***

- SV results from cultural values, rules and practices, that allow and encourage patriarchal structures, which maintain women's subordination to the hegemonic masculine order.

- SV a "natural" consequence of a condition in which men have power over women.

- Particularly important different sexual roles (passive-active) based on the traditional Catholic moral.

Nature

Macrosocial: Gender Norms***

- Gender inequality is reflected in SV in LAC through:
  - Legitimisation of Intimate Partner Sexual Violence.
  - Blaming women.
  - Justifying men for their "inherent sexual desires".
  - Women viewed as sexual objects.
  - Cult to the virginity of women.

- Transformation of gender dynamics.

Nature

Macrosocial: Violent culture

- The societal acceptance of violence is associated with the use of SV.

- Particularly important in conflict settings. SV is the norm.

- In Guatemala as in other LAC countries, rape by soldiers was not only condoned but encouraged by military officers.

Nature

Macrosocial: State responsibility

- Lack of political will to implement national laws and plans.

- Lack of technical, financial and human resources.

- Lack of plans, policies and mechanisms to face trafficking.

- Women without knowledge of their basic rights.

Nature

Community: Lack of protection

- Victims less likely to have access to social and family support.

- Push factor: family pressure to improve economic situation.

- This is particularly important for victims of trafficking, migrants and sex and domestic workers.

Nature

Relationship: Control of women's sexuality

- Jealousy.

- Sex refusal. Violent reaction. Control of women's bodies.

- IPSV aggravated by women's empowerment (participation of women in labour force, women's demands, household duties, etc.).

Nature

Individual: Age***

- The strongest factor associated with forced sex in several multivariate analysis: age.

- Young women are at greater risk of partner and non-partner SV than older women .

- Young bodies conceptualised as attractive and erotic.

Nature

Individual: Socio-economic characteristics***

- The smaller the level of education, the larger is the proportion of women who had experienced SV. Confirmed by several studies in LAC.

Educational level	Bol03	Col 05	Hai00	Peru04	RD02
None	16.6	14.3	13.2	22.5	6.5
Primary	16.4	13.9	19.1	16.5	8.6
High-school	14.7	11.0	17.3	15.7	4.7
Degree	9.6	7.2		12.8	3.5

- High levels of poverty, social exclusion and unemployment associated to SV.

- Ethnicity another important variable.

Nature

Individual: Violent experiences during childhood***

- Women who experienced child abuse are more likely to be victims of SV (evidence from Brazil, Chile, Guatemala, Honduras, Mexico).

- In Mexico, women who suffered sexual abuse before 15 are 3 times more at risk to suffer SV by a partner and 12 times by a non-partner (Rivera-Rivera *et al.*; 2006).

- Female children who have suffered SV are more at risk to be involved in sexual trafficking (UNICEF; 2001).

Legal and policy framework

Legislation: International laws

- LAC was the first region in the world where all countries ratified CEDAW and the first to formulate a legal instrument explicitly designed to eradicate VAW: Belém do Pará.

- Belém do Pará is the only treaty directed solely at eliminating VAW and has frequently been cited as a model for a binding treaty on VAW (UN Secretary General, 2006).

- Ratified by all countries in LAC.

- International instruments essential for the national legal reforms on VAW in the region.

Legal and policy framework

Legislation: Current situation of national laws

- Significant legislative reforms in the past 20 years: revision of penal codes, particularly related to sanctions to aggressors of SV; introduction of marital rape as criminal offence; eliminating provisions that allow rapists to escape criminal sanctions by agreeing to marry the victim; rape as a criminal rather than a moral offence.

- Brazil, Chile, Costa Rica, Mexico, Venezuela: "second generation" of laws.

- Good practice: Lei Maria da Penha (Brazil).

Legal and policy framework

Legislation: Current situation of national laws

- Still important gaps:
  - Rape is still not considered a crime in some countries, particularly marital rape.
  - Most laws focus mainly on domestic and family violence. Protection of the family: traditional perspective.
  - In some countries legislation still weak in terms of offering protection for abused women and their children.
  - Intimidation and sexual harassment not considered as serious crimes.
  - Access to safe abortion for survivors of SV.
  - Local laws related to SV are seriously deficient.
  - Conciliation still accepted.

Legal and policy framework

Legislation: Implementation of laws

- Much legislation has been implemented poorly or not at all.

- Lack of human and economic resources.

- No political will.

- Traditional values, attitudes and behaviours of service providers.

- Weak institutions. Lack of national capacities.

- Lack of coordination between key institutions and actors.

- Socio-cultural, economic and religious context a barrier.

- Lack of references to international agreements.

Legal and policy framework

Policy framework: Policies, plans and programmes

- Countries in the region have policies and national plans related to VAW and DV. Most of them are based on a gender and human rights approach.

- National plans are important mechanisms for the implementation of programmes involving different sectors. Increase government commitment.

- Good practice in LAC: Costa Rica's National Plan for the Elimination of Violence (PLANOVI) which has been implemented since 1994.

- However, most of plans and programmes are isolated actions. Lack of sustainability.

- Lack of innovative projects. For example, very few related to Trafficking.

- Lack of multisectorial approaches that includes key players (e.g. educational sector).

- No specific policies about SV (Claramunt, M.C. *et al.*; 2007).

Legal and policy framework

Policy framework: Institutions and Networks

- Establishment of national institutions for the promotion of women's rights which are usually in charge of the implementation of plans and programmes on VAW.

- Establishment of national commissions for the purpose of improving inter-sectoral coordination and monitoring progress on the development of initiatives on VAW (Morrison, A. *et* al.; 2004).

- Establishment of special governmental units to provide support to women involved in GBV. Copying models developed by NGO's (Larrain, S.; 1999). However, most of them just in urban areas.

- Good practice in LAC: National Women's Rights Council in Brazil established in 1985.

Legal and policy framework

Policy framework: Institutions and Networks

- Relevant: the creation of local and national networks.

- Coalition mainly between governmental institutions and women's organizations. Other partners: private sector, religious institutions, political parties, etc.

- Good practices in LAC: Nicaraguan Network of VAW; Network for prevention and protection of VAW in Bolivia; National System for prevention and protection of Inter-family Violence in Costa Rica.

Legal and policy framework

Policy framework: Implementation of plans and programmes

- The commitment of the States for eradicating GBV and particularly SV is still weak.

- The transition from developing plans to their implementation is very problematic.

- Socio-cultural and religious context that justify GBV.

- Policies are not widely disseminated among service providers. Limited training.

- Plans and programmes are not monitored and evaluated.

Legal and policy framework

Policy framework: Implementation of plans and programmes

- Lack of financial resources.

- Lack of sustainability.

- Lack of political will.

- Lack of coordination.

- Insufficient support services.

- Bureaucracy.

Survivor's situation

Women's response: Strategies

- Show indifference and/or downplay the incidents.

- Tolerance to the violent situation.

- Little voice of resistance.

- Way out when women realise that the situation is not going to change or when it gets worse.

Survivor's situation

Women's response: Disclosure and reporting

- It is estimated that in LAC only 5% of the adult victims of SV report the event to the police (UNFPA; 2005). In Haiti and Chile this percentage is around 2% (Gage, A.J.; 2005; Lehrer, J.A. *et al.*; 2005); in Brazil and Mexico around 10% (Gasman, N. *et al.*; 2002).

- In Mexico and Peru studies have found that around 80% of women who suffered SV did not look for support in any official institution.

Survivor's situation

Women's response: Disclosure and reporting

- Why not reporting?
  - Shame, discrimination, stigma.
  - Fear of rejection by their husbands and their communities.
  - Afraid of repercussions from the rapist.
  - Guiltiness. Think that it is their fault.
  - Lack of trust in the authorities.
  - Critical path too complicated. More costs than benefits.
  - They do not know where to go.
  - Families and friends do not believe them.
  - Families persuade them not to complaint.

Survivor's situation

Women's response: Disclosure and reporting

- Disclosure... First contact with non-official supporters: family (mother), neighbours and friends (female), religious institutions.

- Official services: 1) Health Sector; 2) Police; 3) NGO's and social workers (Claramunt, M.C., *et al.*; 2007).

- Most of them are alone or with friends or relatives.

Survivor's situation

Women's response: Accessing to services and services responses.

- Most service providers show patriarchal attitudes and behaviours. Justify aggressors and blame victims.

- Re-victimisation is common.

- Few institutions offer support and useful information to survivors.

- Lack of coordination and quality of services.

- Police the least supportive… NGO's the best support.

Survivor's situation

Women's response: Accessing to services and services responses.

- Women often feared that seeking support would be worse.

- Lack of basic infrastructure in all services. Lack of shelters.

- Services are not monitored and evaluated.

- Extremely few options in rural communities and conflict settings.

- The lack of institutional response reinforces the belief that men are allowed to commit SV.

Survivor's situation

Women's response: Accessing to services and services responses.

- Justice:
  - Few perpetrators are ever brought to justice (10% in Argentina; 4% in Chile; 3% in Ecuador; 0.3% in Guatemala).

  - Authorities do not believe the victims (65% in Mexico).

  - SV is not considered a priority.

  - High focus on physical proof.

  - Public prosecutors' offices are reluctant to accept cases and recommend the woman to go to the gender violence units.

Survivor's situation

Women's response: Accessing to services and services responses.

- Health:
  - Lack of right medical and psychological treatment to survivors.

  - Lack of STI/HIV tests, especially confidential testing.

  - Obstacles to obtain legal abortion.

  - Blaming the victims. Hostile interrogations.

  - In Brazil, half of women who initiate medical treatment did not continue.

Interventions

- An important number of interventions have been implemented in the last years. Most of them emerged from NGO's.

- Important to highlight the initiatives related to support victims from the health and legal sectors and those that employ multiple strategies to promote change of norms.

- South-South cooperation.

- Most of them in urban areas. Few in marginalised and conflict settings. Few associated to trafficking and migrants. They are not culturally sensitive.

- Most of initiatives have not been monitored and evaluated.

Interventions

Support services: Health

- Main problems:
  - Poor psychological and medical therapies for victims.

  - Health response focuses mainly on immediate care for injuries. Emergency units do not offer comprehensive care.

  - Few programmes that integrate RSH-HIV/AIDS and SV services.

  - Difficult access to health services, mainly for women in marginalise settings.

  - Lack of training for health service providers. Behaviour change.

Interventions

Support services: Health

- Main problems:
  - Deficient services to treat victims who require legal abortion.

  - Lack of orientation during undergraduate studies in the health professions about how to deal with SV.

  - Lack of systematisation of information.

  - Lack of emotional support for health providers who care for SV victims.

Interventions

Support services: Health

- Relevant regional and sub-regional experiences:

  – International Planned Parenthood Federation (IPPF).
    Improve health service response to GBV. Systems Approach.
    Local partners: PROFAMILIA (Dominican Republic), INPPARES (Peru), PLAFAM (Venezuela).

  – Pan American Health Organisation (PAHO).
    Model for violence prevention and care in 10 LAC countries.

  – IPAS
    Comprehensive model of quality services for survivors. Includes legal abortion.

  – Caribbean Community (CARICOM)
    Capacity-building for integrating services on HIV and VAW in the Caribbean.

Interventions

Support services: Health

- Relevant local experiences:

  – GHESKIO (Haiti).
    Integrated services. Emergency contraception to rape victims.

  – Doctors Without Borders (MSF) (Colombia).
    Medical and psychological support to victims of SV in extremely poor regions.

  – CONFAD (Brazil)
    Medical-school health centre. Basic and therapeutic counselling.

Interventions

Support services: Justice

- Main problems:
  - Corrupt and inefficient policing practices and human rights violations. Discriminatory attitudes and behaviours.

  - SV is not a priority. Downplaying SV cases.

  - Investigation procedures extremely inefficient.

  - Compensation for victims focuses mainly on economic aspects.

  - Lack of police training.

Interventions

Support services: Justice

- Relevant regional and national experiences:

  - Specialised Women's Police Units. *Comisarías*.
    First in Brazil. Model carried out in other Latin American countries (Argentina, Colombia, Costa Rica, Ecuador, Nicaragua, Peru, Uruguay).

  - Tribunales de Conciencia (Guatemala).

  - Casas de Justicia (Colombia).
    Integral support for victims.

Interventions

Support services: Social

- Few initiatives focus on providing social support for victims.

- Most frequent: shelters.

- According to Leslie, H. (2001) "trauma of GBV in LAC is primarily social rather than medical in nature... An approach to healing for women should be rooted in the notion of empowerment, enabling women survivors to pursue individual and collective strategies for social change in ways that are appropriate to the political and cultural nature of the trauma".

Interventions

Support services: Integral

- In LAC has been recognised the importance of integral support models.

- Some organisations that have conducted integral interventions:

  – Manuela Ramos and Flora Tristan (Peru)
  – Nicaraguan Network of Women against Violence (Nicaragua)
  – PAHO
  – IPPF
  – IPAS
  – ECPAT

Interventions

Education and capacity building

- In LAC most of educational interventions focus on training to service providers.

- There are some initiatives that include 1) training to community leaders to raise awareness and to empower women and 2) victims to become facilitators to support other victims of SV.

- Development of educational materials, tool kits, etc.

- Few initiatives undertaken in the education sector.

Interventions

Education and capacity building

- Relevant experiences:

  - Ministry of Education's Office on Gender Equality (Costa Rica).
    Prevention of sexual harassment.
  - UNFPA (Several countries in LAC)
    Training to Armed Forces and Police.
  - ILANUD
    Training in Police Academies in Honduras and Nicaragua.

Interventions

Raising Awareness

- Several campaigns to raise awareness of GBV in LAC based on gender and human rights perspectives. They appear to be successful.

- Important efforts aimed to media, including TV and radio programs.

- Most of the campaigns are undertaken by NGO's who do not have enough resources to keep these efforts permanently.

- Need to involve different partners.

Interventions

Raising Awareness

- Relevant national and local experiences:

  - Puntos de Encuentro (Nicaragua)
    Sexto Sentido: Soap operas, radio programs, school-based work.

  - Manuela Ramos (Peru)
    ReproSalud: Community awareness campaigns.

  - Nicaraguan Network of VAW (Nicaragua)
    Annual campaigns.

  - Sistren Theatre Collective (Jamaica)
    Theatre to express women's experiences of abuse.

Interventions

Community Mobilisation

- Community based initiatives essential to support women, to recognition of women's rights and to raise awareness.

- Community leaders crucial role to promote prevention programmes.

- Few experiences systematised and evaluated.

- Innovative project: *Defensorías Comunitarias* (Peru). Similar projects: *Defensoras Populares* (Guatemala and Nicaragua) and Family Counselors (Colombia).

Interventions

Promoting Public Safety

- Recent and interesting approach.

- To consider SV as a public safety problem gives opportunity to visibilise the topic, to get resources and to include it in the political agenda.

- Innovative project: *Cities without violence for women: Safe cities for all* (Bogota, Colombia; Rosario, Argentina; Santiago, Chile).

Interventions

Working with men

- LAC a leader in work with men.

- Two main programmes:
  - Men and boys reflection about gender, masculinity and GBV.
    Instituto Promundo (Brazil)
    Salud y Genero (Mexico)
    Instituto Papai (Brazil)
    Center for Popular Education and Communications (CANTERA) (Nicaragua)

  - Work with aggressors.
    Programa Hombres Renunciando a su Violencia (Peru)
    Hombres por la Equidad (Mexico)

Data, research and evaluations

Data collection: Local studies to obtain basic data

- Most conducted in Brazil and Mexico. Rest: Chile, El Salvador, Haiti, Nicaragua, Venezuela.

- Most non-representative samples. Some studies N<500.

- Estimating: SV, Child Sexual Abuse, IPSV and Sexual Harassment.

- Respondents: Women (students, health services, rural areas, married).

Data, research and evaluations

Data collection: RSH and GBV national-based surveys

- Demographic Health Surveys (DHS); Centers for Disease Control and Prevention Surveys (CDC); National and Regional Surveys.

- Low estimations of SV.

- Relevant experience: Multi-Country study in Brazil and Peru.

- Prevalence, characteristics and risk factors.

Data, research and evaluations

Data collection: Official Data

- Very poor data. Lack of sources. Non-reliable information.

- Some settings even without any official data about SV.

- No data about SV during conflicts.

- Need for mechanisms for collecting information.

Data, research and evaluations

Studies and methodologies

- Around half of the studies in LAC just in Mexico and Brazil.

- Very few in Argentina, Costa Rica, Ecuador, Dominican Rep., Uruguay.

- No studies found in Cuba, Honduras, Panama, Paraguay.

- Few Sub-regional. Mainly in CA.

Data, research and evaluations

Studies and methodologies

- Types of studies:
  - Prevalence, factors and characteristics.
  - Survivors history and SV experiences.
  - Situation analysis.
  - Use of health services and health sector response.
  - Consequences, mainly RSH.
  - Norms.
  - Theoretical.

- Methodology:
  - Difficulties to define SV.
  - Few mix quantitative and qualitative.
  - Few aimed to men.
  - Few involving different types of SV (trafficking, sexual harassment, etc.)
  - Few use second hand and official data.

Data, research and evaluations

Research related to interventions

- Most of these studies related to the health sector:
    - Assess to services.
    - Process of treatment.
    - Health providers attitude, behaviour, values, knowledge.

- Very few evaluations and almost none impact evaluations.

- Most of evaluations are positive:
    - Programa H
    - Reprosalud
    - IPPF Initiative
    - Puntos de Encuento

Data, research and evaluations

Future Research

- Integrate empirical research with social theory.

- Specifically research on SV.

- Studies in different settings. Cultural sensitive approach. Excluded and neglected groups.

- Improve methodologies.

- Improve official data collection.

Data, research and evaluations

Future Research

- Evaluations.

- Systematisation of experiences.

- Mechanisms to implement laws, plans, programmes.

- Support countries without research and data.

- Research including different actors and types of SV.

- Research of interventions related to the Justice sector.