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Gender Based Violence & Human Rights Violation In Sub-Saharan Africa: An Insight

Dr. Akhilesh Kumar Khan*

Dr. Om Krishna**

Email: hod@lloydlawcollege.edu.in, om.krishna@lloydlawcollege.edu.in

*Deputy Director, (Lloyd Law College, Greater Noida, Uttar Pradesh, India)

**Assistant Professor (Lloyd Law College, Greater Noida, UP, India)

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Abstract

Violence toward women is not a recent occurrence, nor are the effects to women's physical, emotional, and reproductive health. What is recent, however, is the increasing awareness that acts of violence against women are not isolated incidents, but rather part of a pattern of conduct that violates women's rights, restricts their social participation, and harms their health, prestige, and well-being. Women in Sub-Saharan Africa (SSA) are subjected to human rights violations that are unrivaled anywhere else in the world in the modern age. Intimate partner violence (IPV) continues to be the most significant component of violence against women, and is a widespread type of human and natural rights abuse. For women who are abused, intimate partner violence is linked to a variety of negative effects, including pregnancy loss and sexually transmitted infections. Nonetheless, African women continue to face economic, social, and cultural challenges, especially in the areas of healthcare, economic status, and basic education. The impact of violence on women's physical, sexual, reproductive, and mental health is detailed and highlighted in this paper. It also highlights some of the continent's gender equality initiatives, such as increased access to girls' education, an increase in the number of professionals and women in leadership roles, and the fact that women are now engaging in roles that were previously reserved for men. The study reveals that violence against women is widespread across the world. The results send a strong message around the world that violence against women is not a minor issue that occurs in isolated areas of society, but rather a global public health crisis that requires immediate intervention from all stakeholders.

Keywords: Natural rights violations, cultural issues, gender equality, and mental health.

1. Introduction

"Any act of gender-based violence that results in, or is likely to result in, physical, sexual, or mental damage or distress to women, including threats of such actions, intimidation, or unreasonable deprivation of liberty, whether occurring in public or private life," according to the United Nations. Important progress has been made at the

regional and national levels in the last three decades in promoting women's human rights and achieving gender equality on the African continent. The African Union Commission and its human rights structures have passed "binding agreements, various interventions, and recommendations and studies concerning women's human rights." "The African Charter on Human and Peoples' Rights; the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa; the Convention Governing the Specific Aspects of Refugee Problems in Africa; the African Charter on the Rights and Welfare of the Child; and the Protocol on the Statute of the African Court of Justice and Human Rights," according to the African Court of Justice. "We are all born equal, irrespective of sex, race, faith, or creed," says the Declaration of Human Rights' preamble.

"Prohibits discrimination, including on the basis of sex, and obliges State parties in art. 18 (3) to abolish all forms of discrimination against women and to ensure the protection of women's rights," says Article 2 of the African Charter on Human and Peoples' Rights. Furthermore, the African Commission on Human and Peoples' Rights is mandated by Article 60 of the Charter to "take inspiration from international law in the promotion and defense of human rights." It "acknowledges that women's rights are not merely a charitable act, but a humane philosophy and a precursor to inclusiveness and prosperity." This principle is further reaffirmed in the African Charter on Human and People's Rights, which is "consecrated in the Protocol to the African Charter on Human and People's Rights on the Rights of Women and by prior continental and global conventions and policies on human and women's rights, and actualized by the AU theme of 2016," which is "human rights with a particular focus on the rights of women."

2. Some information about intimate partner violence (IPV) and gender-based violence (GBV).

According to the World Health Organization, developed countries account for nearly all maternal deaths (99 percent). Sub-Saharan Africa accounted for nearly 66 percent of all maternal deaths in 2015. Intimate partner violence is described as "physical, sexual, or psychological damage caused by an intimate partner or ex-partner, including physical assault, sexual harassment, psychological abuse, and controlling behaviors." Miscarriage, stillbirth, pre-term delivery, and low-birth-weight babies are all increased by intimate partner abuse during pregnancy. "Women who witnessed intimate partner abuse were 16 percent more likely to have a miscarriage and 41 percent more likely to have a pre-term birth," according to the same 2013 report. The word "violence against women" refers to a variety of acts of violence against women, including intimate relationship violence, rape/sexual harassment, and other types of sexual violence committed by someone other than a partner (non-partner sexual violence), female genital mutilation, honor killings, and women's trafficking. Gender-based violence (GBV) is described by the United Nations (UN) as "any act of gender-based violence that causes or is likely to cause physical, sexual, or mental harm or suffering to women, including threats of such actions, intimidation, or arbitrary deprivation of

liberty, whether occurring in public or private life.” GBV is found and graded in a variety of ways. It can be classified “based on the relationship between the perpetrator and the victim (intimate partner violence (IPV) vs. non-intimate partner violence (non-IPV)), or by the form of GBV act, such as sexual, physical, or emotional violence.” GBV against women is a serious health issue in Sub-Saharan African countries. GBV, which includes both IPV and non-IPV, is common in SSA. More than two-fifths (44%) of women aged 15–49 in SSA countries have been exposed to IPV, with about a fifth (14%) having been exposed to non-IPV.

Women's abuse, particularly intimate partner and sexual violence, is a major public health issue and a violation of their human rights. According to WHO reports, "about one-third (35%) of women worldwide have witnessed physical and/or sexual intimate partner abuse or non-partner sexual violence in their lifetime." The majority of this abuse is between intimate partners.” “Nearly one-third (30%) of women who have been in a relationship claim they have been subjected to physical and/or sexual abuse by their intimate partner at some point in their lives. A male sexual partner is responsible for up to 38% of all female murders worldwide.” “Women in SSA countries face a wide range of IPV (physical, sexual, and emotional abuse), with emotional violence being the most common. The highest levels of GBV are experienced by women in Eastern and Western African regions.”

3. Women's Rights in Africa and the Lack of Equality and Basic Rights

The African Union, in collaboration with the Office of the United Nations High Commissioner for Human Rights (OHCHR) and the United Nations, released the first of a proposed series of reports highlighting and concerning the human rights of African children. Although women's participation in politics has increased, the report states that "women's rights and equality are seriously lacking in a very number of other arenas." African women "continue to be subjected to unsafe activities such as child marriage, female genital mutilation, and forced sterilization of HIV-positive people." According to the study, “women's lack of access to sufficient reproductive health services, the challenges faced by women with albinism, the prevalence of sexual and gender-based abuse, and the condition of women in prisons are all issues that need to be addressed.” The report also describes the regional human rights legal structure that applies to women's rights, with a focus on the position of the African Charter on Human and Peoples' Rights Protocol on the Rights of African Children.

As a result, it is recommended that provisions of the Maputo Protocol be expedited, as well as the reform and strengthening of institutions that serve and empower women and girls, the repeal of patriarchal laws and practices, and the adoption of additional goals to validate and initiate movement toward gender equality and justice. Moreover, numerous studies and analysis have shown that significant progress has been made in the advancement of women's rights and feminine political involvement in governance at both the national and regional or grassroot levels. “The continental human rights regime has adopted numerous legal instruments, such as the Maputo Protocol;

declarations, such as the African Union Solemn Declaration on Gender Equality in Africa; and resolutions, such as the African Union Solemn Declaration on Gender Equality in Africa; and resolutions designed to ensure the implementation and adaptation of women's rights, as well as several oversight bodies to oversee and implement them. Furthermore, many African countries record high levels of female involvement in politics and governance, with Rwanda ranking first in the world for female legislative membership at nearly 64%, and 24 African countries outranking the United States.”

Sub-Saharan Africa had the world's "latest level of HIV infection and contributed 71 percent of the world's HIV-positive population, which disproportionately affected women in the country," according to the study. Stigma, abuse, and relationships between young women and older men all contribute to HIV prevalence, which is linked to low condom usage. According to the study, HIV-positive women are at higher risk than HIV-positive men, and in some countries, HIV-positive women have been sterilized without their consent.

4. Monitoring and Enforcement of Human and Peoples' Rights

Children's marriages continue to be popular in Africa. Children's marriage is a common practice that stems from ancient cultural traditions and mostly affects girls in rural and impoverished areas. Sexual abuse, sexually transmitted diseases, and early pregnancy have all been attributed to the practice, which can also deprive girls of their right to an education. Although child marriages have declined among the wealthy, they continue to be prevalent among the poor. African women are especially vulnerable to sexual and gender abuse, and are more likely to be arrested, where they face additional obstacles, due to patriarchal laws and access to services. Legislative voids Furthermore, deficiencies in the law's supervision and compliance result in both deeper and de facto discrimination against women in the region.” This is often “due to the exclusion of many women from the delegation and excessive targeting of girls for crimes such as adultery and Code violations.” Women who are incarcerated still do not have access to proper recovery, therapy, or health-care services.” Female genital mutilation, according to the study, may be a form of gender-based violence in many parts of Africa. Its criminalization has led to a decrease in its use in some countries in recent years.

5. Upcoming Challenges & Gender Indices

The African Charter on Human Rights and Peoples, which has been ratified by each State Party of the African Union (AU), including Morocco, forbids discrimination, including on the basis of gender, and requires states parties to eliminate all forms of discrimination against women and to protect their rights. “The Maputo Protocol has been structured to extend the legal safeguards for women and imposes a constructive duty on States to handle gender discrimination and secure women's rights to personal and political autonomy, access to education and jobs, and thus the right to be free of harmful practices, among other things.” Thirty-seven African countries ratified the

Maputo Protocol, but many of them did so with reservations, implying that some provisions are needed. “Challenges for full adoption of the Maputo Protocol include many important factors, including unawareness of human rights instruments; rarity of reports in compliance with the Maputo Protocol; and also the continued use of faith and culture to justify unequal, harmful, and violent practices,” according to the study.

“Frail states across Africa, including Chad, Republic of Sierra Leone, Liberia, Mali, Mauritania, Central African Republic, Somalia, Niger, Congo, and the Democratic Republic of Congo (DRC), have the worst gender indexes,” according to Equal Measures 2030's 2019 Global Report. HRW confirmed that “the DRC's governance and security forces used systematic repression and high human rights abuses in 2018.” “Government officials and security forces administered systematic repression and heavy human rights violations,” according to the Planet Report 2019. Things reached unprecedented levels in central and eastern DRC, where an estimated 4.5 million people were displaced from their homes, with about 130,000 refugees fleeing to neighboring countries.”

According to the Global Gender Gap Report 2020, this may indicate that the vast majority of women work in low-wage jobs in the informal sector. In the Democratic Republic of Congo, for example, about 62 percent of women and 67 percent of men work. However, only about a quarter of women work in specialized or technological fields. In the same way, just 23% of women in Cote d'Ivoire's workforce are professionals. Mali and Togo have equal percentages of 21 percent and 20 percent, respectively.

6. Maternal Mortality and Sexual and Reproductive Health in Sub-Saharan Africa

On the African continent, high rates of maternal mortality and morbidity are due to proximal determinants such as hemorrhage, sepsis, and illegal abortion, as well as more distal determinants such as gender inequality. This includes a “lack of autonomy of women to make educated choices on whether to become pregnant in the first place or seek care, a lack of access to contraceptives, and a lack of education, including comprehensive sexuality education.” It's also linked to wider problems like insufficient infrastructure to “ensure women's enjoyment of health rights truly,” such as insufficient roads and transportation networks for getting to health clinics, as well as a lack of access to water and sanitation, which is “necessary for preserving physiological condition, even during pregnancy.” Women will face problems and unnecessary delays as soon as they enter health facilities, due to poor health services and deficiencies in the quality of treatment, such as medication stock or insufficient human resources among health professionals, which lead to high maternal mortality and morbidity. Because of deep social norms that do not approve of sex outside inside, such classes, such as youth, single women, and women seeking abortion, face stigma that prevents them from obtaining sexual and reproductive health goods and services. Pregnancy in pregnancy and childbirth is a teenage girl - more than half of all births in

the geographical area occur during puberty, and the connection would be established in the absence of reliable knowledge about pregnancy to prevent pregnancy to prevent pregnancy.

Sex, education and literacy, and economic factors are three overarching social determinants of maternal mortality in Sub-Saharan Africa that form things as a human rights problem. "In any geographical area, gender remains a vital social determinant of maternal mortality. Gender biases in the provision of health care and the marginalization of women in these communities are largely to blame for the high number of women who have died prematurely during pregnancy in Black Africa."

Angola, Botswana, Malawi, Mozambique, Republic of South Africa, Zambia, and Zimbabwe have all discovered gender inequality when it comes to access to health services. Scholars have looked into the material of several Sub-Saharan African countries, including Nigeria, Tanzania, and Kenya, where male-dominated social ideals and systemic mores continue to silence and marginalize African women. This gender imbalance leads to social vulnerability, as women are exposed to sexual abuse and infectious diseases such as HIV, which can lead to unintended pregnancies and further exacerbate such pregnancies, resulting in higher maternal mortality rates in this part of the world.

"Another significant social determinant of maternal mortality in a geographical area is education and literacy. According to studies, there is an inverse relationship between a population's level of education, especially women's education, and the country's MMR. For example, Mauritius showed relatively high levels of education among women in one study, resulting in a lower MMR."

"In a geographic region, economic factors play a major role in determining maternal mortality. Researchers in the field believe there is a strong connection between the Gross National Product (GNP) per capita of Sub-Saharan African countries and their health status, as measured by maternal morbidity and mortality." Education is undeniably beneficial to the economic process and the elimination of poverty. 'It improves an individual's livelihood prospects by developing cognitive and life skills such as literacy, numeracy, and demanding thought.' Since the introduction of Education for All (EFA) and, as a result, the Millennium Development Goals (MDGs) in 2000, access to education has increased significantly in each geographical area, owing to rapid increases in primary and secondary enrolment rates as well as improved gender parity. Four major projects implemented by UNESCO over the past two biennia have clearly yielded results, enabling Aspiration 6 of the African Union's Agenda 2063 to take shape. "Violence is still a daily fact in this part of the world. As a result, it should come as no surprise that UNESCO's primary mission, as stated in its Constitution, is to build peace defenses in the minds of men and women, because it is in their minds that wars begin. Whether or not the effects of violence can be found in

the social and human worlds, the cause of violence is primarily cultural. UNESCO is responsible for a wide range of projects.”

9. Conclusion

African women would only be able to take their rightful place in society if they live in an inclusive and empowered Africa. This must be driven by a "bold vision of all people contributing to and benefiting from Africa's growth." The findings show that overall reproductive and maternal health resources for women and girls are limited – half of women and girls do not receive the most basic interventions, and these are spread inequitably both within and across countries. Importantly, “maternity care package,” “delivery by professional personnel,” and “school attendance” were the most unequally distributed opportunities, while “not having anemia” and “exclusive breastfeeding” were more fairly distributed. The key causes of discrimination for women of reproductive age are income and associated circumstances such as schooling and place of residence. Early marriage tends to be the major contributor to inadequate maternal and reproductive health opportunities for the adolescent subgroup.”

Scarcity creates disparity between those who have access (and therefore better outcomes) and those who do not, which is often manifested as systemic and enduring disparities between individuals belonging to different socioeconomic classes. “There are significant disparities in maternal health coverage and access between the poorest and wealthiest families, as well as between rural and urban areas. According to the World Economic Forum's 2020 Global Gender Gap Study, "Sub-Saharan Africa has made substantial progress toward closing the gender gap." The study looks at four different areas: health, education, employment, and politics. "In Mali, 52 percent of ministers are women, and in Ethiopia, this number is 48 percent," says the study. "This is concerning because good representation of women in political leadership will contribute to policies that favor women." Burundi, Guinea, Rwanda, and Sierra Leone have also made substantial strides in terms of women's labor market participation. In these nations, women make up at least as much of the work force as men. Cape Verde, Mali, Nigeria, and Sierra Leone are among the countries where women's economic participation has improved significantly. This was primarily accomplished by promoting entrepreneurship and job creation. Economic empowerment is a central foundation for all facets of equality, including political and social equality.

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The African Union proclaimed the Decade of African Women's Financial and Economic Inclusion from 2020 to 2030, recognizing the connection between empowerment and equality. The African Women Leadership Fund, founded at the recent AU summit, aims to mobilize money from the global private sector to fund initiatives that advance gender equality.” If it helps women achieve economic independence, the fund may be a game changer. Africa's governments and private sector should contribute to the fund as well. This will ensure that women's empowerment is squarely on Africa's political agenda, assisting in the resolution of the perennial issue of political will.

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