Sexual violence in El Salvador, Guatemala, Honduras and Nicaragua: Definitions, recommended data and indicators.
Authors

Dinys Luciano Ferdinand (Development Connections)
and Karen Padilla Z.

Design

Marcelino Guzmán V.

Correspondence

Ipas Centroamérica
Managua, Nicaragua. Apartado Postal # 1833
informacion@ipas.org
www.ipas.org


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Sexual violence in El Salvador, Guatemala, Honduras and Nicaragua: Definitions, recommended data and indicators.
### Abbreviations and acronyms

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
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<tr>
<td>EC</td>
<td>Emergency contraception</td>
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<tr>
<td>AECID</td>
<td>Spanish Agency for International Development Cooperation</td>
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<tr>
<td>LAC</td>
<td>Latin America and the Caribbean</td>
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<tr>
<td>IADB</td>
<td>Inter-American Development Bank</td>
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<tr>
<td>CCJ</td>
<td>Central American Court of Justice</td>
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<tr>
<td>CDC</td>
<td>Centers for Disease Control and Prevention</td>
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<tr>
<td>CEDAW</td>
<td>Convention on the Elimination of All Forms of Discrimination against Women</td>
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<tr>
<td>CIM</td>
<td>Inter-American Commission of Women (CIM/OAS)</td>
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<tr>
<td>ECLAC</td>
<td>Economic Commission for Latin America and the Caribbean</td>
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<tr>
<td>GBV</td>
<td>Gender-based violence</td>
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<tr>
<td>IASC</td>
<td>Inter-Agency Standing Committee</td>
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<tr>
<td>IACHR</td>
<td>Inter-American Commission on Human Rights</td>
</tr>
<tr>
<td>IAWG</td>
<td>Inter-Agency Working Group</td>
</tr>
<tr>
<td>ICW</td>
<td>International Community of Women Living with HIV</td>
</tr>
<tr>
<td>M&amp;E</td>
<td>Monitoring and evaluation</td>
</tr>
<tr>
<td>MDGF</td>
<td>Millennium Development Goals Achievement Fund (AECID)</td>
</tr>
<tr>
<td>NGO</td>
<td>Non-Governmental Organization</td>
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<tr>
<td>OAS</td>
<td>Organization of American States</td>
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<tr>
<td>PAHO</td>
<td>Pan American Health Organization</td>
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<tr>
<td>STI</td>
<td>Sexually Transmitted Infections</td>
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<td>SV</td>
<td>Sexual violence</td>
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<tr>
<td>UNDP</td>
<td>United Nations Development Program</td>
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<tr>
<td>UNFPA</td>
<td>United Nations Population Fund</td>
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<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
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<tr>
<td>UNODC</td>
<td>United Nations Office on Drugs and Crime</td>
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<tr>
<td>USAID</td>
<td>U.S. Agency for International Development</td>
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<tr>
<td>VAW</td>
<td>Violence against women</td>
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<tr>
<td>VSSV</td>
<td>Victims and survivors of sexual violence</td>
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<tr>
<td>WHO</td>
<td>World Health Organization</td>
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**Annex**  
1. Introduction

The countries of Central America have a growing interest in providing comprehensive responses to sexual violence (SV), thus addressing both protective and risk factors and factors associated with the social and individual consequences of SV. It has become a priority to be able to systematically report reliable, timely and comparable data, in order to strengthen the work of all sectors involved and improve the use of this information for sectorial decisions, as well as to strengthen inter-agency coordination and evaluate the results and impact of interventions.

Under the initiative “Comprehensive security for women, with an emphasis on sexual violence: Combat impunity of sexual violence”, carried out during the period 2008-2011 by the office of the United Nations Population Fund for Latin America and the Caribbean (UNFPA LACRO) with support from AECID, along with the development of comprehensive models for SV care, various studies were conducted in El Salvador, Guatemala, Honduras and Nicaragua that showed limitations in the reporting, analysis and dissemination of data on the different forms of SV. These studies also highlighted the need to make progress in defining nationally and regionally agreed-upon variables and indicators to improve the collection of information and guarantee the comparability of data gathered by different sources. Current barriers to the collection and analysis of data on SV include the following:

- Lack of consensus on the scope of the term “sexual violence”. In each country’s legislation and research, different terms are used to describe the same acts, leading to differing conclusions on the incidence and prevalence of SV in the four selected countries.
• Little research on many of the forms of SV (workplace, school, public services, recreation areas, and others) in the selected countries. There is limited data on SV because of institutional barriers and patterns of use of justice, public safety and health services by victims/survivors of SV (VSSV). Many forms of SV are not documented, because the justice, health, and public safety sectors tend to prioritize two types: rape, generally conceived as a forced sexual act with vaginal/anal penetration, and the sexual abuse of children. There is now also increasing documentation of cases of human trafficking for purposes of sexual exploitation. Furthermore, many forms of SV are grouped into a single category, limiting the analysis of disaggregated information on the different types of SV.

• Lack of consistent information on the numbers of women affected by the different forms of SV, which impedes knowing the proportion of women affected in the general population, the characteristics of the affected groups, the consequences of SV on the realization of human rights, and the particularities of SV in the different population groups and contexts (armed conflict, disasters) and therefore, how to focus interventions or expand existing services. This also restricts the possibility of monitoring changes in the incidence and prevalence of SV over time, patterns of access to existing services by VSSV, and the ability of services to respond to the needs of VSSV in an effective and efficient manner.

• Data sources which are created and maintained for purposes other than monitoring gender-based violence (GBV/SV). For example, the Public Ministry may emphasize the collection of data to document the number of formal complaints received and the activities implemented in line with its responsibilities under the law. The health sector may concentrate on recording indicators like mortality, morbidity, and services (out-patient consultations, admissions, lab results) without including mechanisms for the routine screening of SV. The public safety sector (police) may focus on documenting SV in reported cases of crimes and offenses, collecting evidence to establish charges and arrest offenders, etc.

• Each sector tends to document GBV/SV using different terms and definitions, without a minimum set of indicators which can be used to compare the information each one produces. In countries where efforts have been made to establish common variables and indicators, at times not all entities use them or include them among their data collection forms.
Data for the same VSSV can appear in more than one information system (justice, health, public safety) or in only one. Certain types of SV can be repetitive, or the same person can be the victim of different forms of SV at the hands of different persons and in different contexts – making it impossible to know whether the number registered in each sector reflects the number of persons affected or the number of incidents of SV.

Overlapping categories are used to document sexual violence. For example, police data on “sexual crimes” can overlap with disaggregated information on SV types such as rape, sexual abuse, sexual exploitation and pornography, statutory rape, incest, human trafficking and sexual harassment. In addition, the use of different age categories from one sector to another results in a lack of standardized criteria for the classification of VSSV.

For various reasons, including fear of becoming involved in legal proceedings, service providers in some sectors (health, education) do not document cases of SV.

Inter-sectorial coordination for joint analysis and use of data as an evidence base for developing policies and programs is limited. In the four countries selected for this document, the use of multiple sources of information for analyzing SV is rare. Not having standardized minimum indicators limits inter-sectorial coordination for analysis and decision-making.

As a regional partner of the initiative “Comprehensive security for women, with emphasis on sexual violence: Combating impunity for sexual violence”, Ipas implemented several of the studies through which these limitations were identified, including the “Investigation of the dimensions of sexual violence in El Salvador, Guatemala, Honduras and Nicaragua: Analysis of primary and secondary data”\textsuperscript{1}, and therefore took a lead role in preparing this proposal. The following inputs were considered:

- Proposals for the standardization of variables, indicators and guidelines on SV developed by the Centers for Disease Control and Prevention (1997, 1999, 2009)\textsuperscript{2,3,4}, the Central American

\textsuperscript{2} Petersen R, Saltzman L, Goodwin M and Spitz A. (1997). Key scientific issues for research on violence occurring around the time of pregnancy. CDC. Atlanta.
Court of Justice\textsuperscript{5}, the United Nations Latin American Institute for the Prevention of Crime and the Treatment of Offenders (ILANUD, 2002)\textsuperscript{6}, the Inter-Agency Standing Committee (IASC, 2005)\textsuperscript{7}, the World Health Organization (WHO, 2003; 2010)\textsuperscript{8,9}, the Pan American Health Organization (PAHO/WHO, 2001)\textsuperscript{10}, IUNAIDS, UN WOMEN and UNFPA (2011)\textsuperscript{11}, USAID’s Inter Agency Working Group (IGWG), and Measure (2008)\textsuperscript{12}.

- Data from primary sources produced by the justice, health and public safety sectors for the four countries participating in the UNFPA initiative.
- Analysis of studies of the dimensions of violence against women, as in the WHO study (García-Moreno et al, 2005)\textsuperscript{13}, the sets of questions on violence against women used in the demographic and health surveys and reproductive health surveys in El Salvador\textsuperscript{14}, Guatemala\textsuperscript{15}, Honduras\textsuperscript{16} and Nicaragua\textsuperscript{17}, the surveys on victimization in El Salvador\textsuperscript{18}, Guatemala and Honduras\textsuperscript{19} and the statistical report on violence in Guatemala\textsuperscript{20}.

\textsuperscript{5} Corte Centroamericana de Justicia (2012). Buenas prácticas en atención integral a las víctimas de violencia sexual, Managua.
\textsuperscript{6} Corte Centroamericana de Justicia. (2012). Buenas prácticas en atención integral a las víctimas de violencia sexual, Managua.
\textsuperscript{7} Instituto Latinoamericano de Naciones Unidas para la Prevención del Delito y Tratamiento del Delincuente, Oficina del Alto Comisionado para los Derechos Humanos de las Naciones Unidas y el Programa Regional de Capacitación contra la Violencia Doméstica. (2002). Violencia de género, derechos humanos e intervención policial. Costa Rica.
\textsuperscript{8} IASC. (2005). Directrices aplicables a las intervenciones contra la violencia por razón de género en situaciones humanitarias.
\textsuperscript{11} Concha-Eastman A y Villaveces A. (2001). Guías para el diseño, implementación y evaluación de sistemas de vigilancia epidemiológica de violencia y lesiones. OPS/OMS Washington D.C.
\textsuperscript{13} García – Moreno, Claudia et al. (2005). WHO Multi-country Study on Women’s Health and Domestic Violence against Women. Geneva.
\textsuperscript{20} Rodríguez A y García Santiago I. (2007). Informe estadístico de la violencia en Guatemala. Programa de las Naciones Unidas para el Desarrollo, Guatemala
• Regional observatory of the Economic Commission for Latin America and the Caribbean (ECLAC)\textsuperscript{21} and the Organization of American States (OAS)\textsuperscript{22}, national observatories on gender-based violence in El Salvador\textsuperscript{23}, Guatemala\textsuperscript{24}, and Honduras\textsuperscript{25}; the data management system on gender-based violence (coordinated by UNFPA, UNICEF, UNHCR, International Rescue and others)\textsuperscript{26}, and the database of the United Nations Office on Crime and Drugs (UNODC)\textsuperscript{27}.

• Regional reports on access to justice for women victims of violence by the Inter-American Commission on Human Rights and the Inter-American Commission of Women (2007, 2011, 2012)\textsuperscript{28,29,30}.

• International guidelines on ethical considerations for researching GBV/SV and data analysis.

The preliminary version of this proposal was reviewed at the Consultative Meeting on “Definitions, recommended data elements and indicators on sexual violence in El Salvador, Guatemala, Honduras and Nicaragua” organized by Ipas and UNFPA in June 2012, with the participation of experts from agencies that collect information on SV in the justice, health, public safety sectors, women's affairs agencies, statistics and planning offices in the four countries, as well as technical personnel representing observatories, international and regional organizations like the Central American Court of Justice (CCJ), the Pan American Health Organization (PAHO/WHO), the Economic Commission for Latin America (ECLAC), the United Nations Development Program (UNDP/El Salvador), PATH/Central America, and UNFPA and Ipas personnel.

\textsuperscript{21} CEPAL. Observatorio de Igualdad de Género de América Latina y el Caribe. http://www.cepal.org/oig/
\textsuperscript{22} OEA. Observatorio Hemisférico de Seguridad . http://www.oas.org/dsp/espanol/cpo_observatorio.asp
\textsuperscript{24} Observatorio de violencia sexual y femicidio en Guatemala. Alianza Sororaria por la vida de las mujeres. http://www.observatorioviolenciacontramujeres.org/category/observatorio/salud/
\textsuperscript{25} IUDPAS-UNAH. Observatorio de muertes violentas y femicidios. http://iudpas.org/observatorios/actividades.html
\textsuperscript{26} Sistema de gestión de datos sobre la violencia por razón de género. http://es.gbvims.org/
At this meeting the proposal was examined in country groups using the following criteria: i) Pertinence: whether or not the existence of standardized definitions, data and indicators on SV were valid and relevant for the country, considering the legal framework and policy priorities on GBV/SV; ii) Reliability: whether or not the collection of data on the proposed data elements and indicators meets the minimum criteria on quality to be used with confidence; and iii) Accessibility and sustainability: whether the data would be easy to collect through existing sources in the country (institutional records, surveys, specific studies or others) and if it is possible to obtain information on these elements routinely over time. This version incorporates the inputs from that consultative meeting and was sent to the experts of the participating countries for their review.
2. Purpose and scope of the proposal

The objective of this document is to support the development of capacities of the institutions in charge of SV data collection and surveillance in the four selected countries, with proposed definitions, variables and indicators that can be used as a reference for the collection and analysis of data on SV. The selection of indicators is based on international commitments for the elimination of violence against women and gender-based violence including: CEDAW (1979) and CEDAW General Recommendations on Violence against Women [No. 12 (1989) and No. 19 (1992)]; the Inter-American Convention on the Prevention, Punishment and Eradication of Violence against Women (Belém do Pará, 1994); the Vienna Declaration and Programme of Action (1993); the Programme of Action of the United Nations International Conference on Population and Development, Cairo (1994); the Protocol to Prevent, Suppress and Punish Trafficking in Persons, especially women and children, which complements the United Nations Convention on Transnational Organized Crime (2000); the Optional Protocol to the Convention on the Rights of the Child on the sale of children, child prostitution and child pornography (2002); the Rome Statute of the International Criminal Court (2002); the UN Declaration on the Rights of indigenous Peoples and ILO Convention

- **Types of SV, associated factors and consequences**

This proposal includes definitions, variables and indicators that address the diverse types of SV that occur in public and private spheres. It also takes into consideration the fact that these forms of SV can overlap, that SV occurs in different scenarios of GBV and that the cumulative effects of GBV/SV throughout the lifecycle play an important role in the consequences and needs of VSSV when receiving services. The proposal is based on human rights, gender equality and crosscutting approaches, in which gender is addressed along with other social determinants and factors associated with SV in the general population and in specific populations and contexts. Furthermore, it is based on the premise that all forms of SV have an important impact on the lives, homes and communities of affected women/persons throughout their lifetime, as well as repercussions for exercising all human rights (work, education, physical and mental health, including sexual and reproductive health, social and political participation, individual and collective security, freedom of movement, and others). Also, the indirect victimization of sexual violence, including fear and perceptions of SV, should be considered in the analysis of the dimensions, associated risk factors and consequences of SV.

The following figure shows the variables around which the selected indicators are grouped, as well as strategic aspects for guaranteeing the production of reliable and comparable information on SV from a human rights, gender equality and inter-sectional approach.

**Key variables and indicators for the recording and analysis of information on sexual violence**

<table>
<thead>
<tr>
<th>Magnitude of SV in types of interpersonal and collective violence</th>
<th>Associated factors: Structural and intermediate determinants.</th>
<th>Consequences of SV in the enjoyment of Human Rights</th>
<th>Social responses to SV</th>
<th>Reliable and comparable information on the distribution and dimensions of SV, trends, determinants, results and impact of interventions.</th>
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</table>

- Mechanisms to guarantee the rights of VSSV, privacy, confidentiality, and safety.
- Inter-agency coordination
- Application of gender analysis principles.
• **Types of variables and indicators**

The list of variables and indicators suggests a step-by-step progression through groups of core and expanded data, which in turn are complemented by a list of SV magnitude indicators, structural determinants, factors associated with the responses and approach to SV, impact of SV on human rights and help-seeking behaviors, and the response, effectiveness and efficacy of services. In all, 18 basic variables, seven expanded variables and 42 indicators are proposed, along with 41 definitions of SV types, associated terms, involved parties, circumstances and consequences of SV.

• **Sources**

The list of definitions, variables and indicators are based upon the premise that in each country multiple data sources will be combined in a functional system of annual reporting as a foundation for surveillance and documentation of violence in the justice, health and public safety (police) sectors. This data set contributes to eliminating the fragmentation of traditional surveillance and reporting systems for GBV/SV, in which each sector follows its own data and indicators and does not combine data sources or include contextual or other sectorial information. The proposed data is intended to facilitate analysis at the national and sub-regional levels and generate indicators that incorporate the different types of SV. This proposal draws on a selection of standard data which for the most part are currently collected from different sources.

• **Rights of VSSV and ethical principles**

This proposal emphasizes the need to use a variety of information sources to document SV in all the countries, accompanied by standards and mechanisms to protect the confidentiality, privacy and safety of VSSV. In this way, the quality of information will improve, and the rights of affected persons will be protected, thereby encouraging the filing of formal complaints, reporting these to the appropriate authorities, seeking support from institutional services in each country and mobilizing citizens to prevent and address all forms of SV. Ethical considerations are complemented by other strategic aspects such as inter-agency coordination and the application of gender analysis principles in the interpretation of the data and their subsequent use in decision-making.
• Uses

This document is not compulsory for the agencies in the four participating countries. It is for the voluntary use of institutions, networks, inter-sectorial mechanisms, and individuals involved in the study and surveillance of SV, and has been designed taking into consideration the particularities and specific needs of these countries. This proposal is not intended to establish reporting mechanisms in addition to those that already exist in the countries and at the sub-regional level, but rather for use as a reference for improving the systems and the collection of information on SV from an inter-sectorial perspective. It is conceived as a dynamic instrument still in the development phase, and periodic modifications and updates are anticipated to ensure that it responds to advances in the generation and analysis of information on SV in Central America.
3. Definitions

3.1. Types of sexual violence

The World Health Organization (2002) defines sexual violence as:

“Any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts of traffic, or otherwise directed, against a person’s sexuality using coercion, by any person regardless of their relationship to the victim, in any setting, including but not limited to home and work. Coercion can cover a whole spectrum of degrees of force. Apart from physical force, it may involve psychological intimidation, blackmail or other threats – for instance the threat of physical harm, of being dismissed from a job or of not obtaining a job that is sought. It may also occur when the person aggressed is unable to give consent – for instance while drunk, impaired by drugs, is asleep or mentally incapable of understanding the situation. Sexual violence includes rape, defined as physical forced or otherwise coerced penetration – even if slight – of the vulva or anus using a penis, other body parts or an object. The attempt to do so is known as attempted rape. Rape of a person by two or more perpetrators is known as gang rape. Sexual violence can include other forms of assault involving a sexual organ, including coerced contact between the mouth and penis, vulva or anus.” (WHO, 2002)\(^{31}\).

The types of SV established by the World Health Organization (2002, 2003) are the following:

a. **Rape within marriage, by the partner.** This is inflicted by the spouse, companion or partner (male or female). Partner violence refers to any behavior within an intimate relation that causes physical, psychological or sexual harm to the members of the relation. In the WHO Multi-Country Study of Women’s Health and Domestic Violence against Women (2005) sexual violence perpetrated by a partner is operationalized in the following ways:

- being forced to have sexual relations against one’s will;
- having sexual relations for fear of what one’s partner might do;
- being forced to perform some sexual act one considers degrading or humiliating.

b. **Date rape.** When a person intentionally injures, causes harm to and/or fear in someone with whom he/she has an intimate relationship. It includes physical, emotional and sexual abuse. Forms of sexual abuse include forcing the person to perform sexual acts (kisses, touching) or to do something sexual when the person is not in a condition to consent, under the effects of either alcohol or drugs (CDC). For the analysis of date rape, the forms of sexual violence perpetrated by the partner established in the WHO Multi-country Study of Women’s Health and Domestic Violence against Women (García-Moreno et al, 2005) also apply.

c. **Systematic rape during armed conflicts.** Rape executed in contexts of war and armed conflict in a generalized or systematic way as a weapon of war and a means for subjugating women (Inter-American Commission of Women, 2012). SV in the context of armed conflict is intended to undermine community ties, and therefore the perception of the enemy, and may also be used as a tool for “ethnic cleansing” (WHO, 2002). It is a form of collective violence (UN Security Council, 2012).

d. **Sexual harassment.** Includes unwanted insinuations of a sexual nature and the requirement to have sexual relations in exchange for favors (WHO, 2002). In the work environment it is defined as unwanted sexual requirements, requests for sexual favors or other verbal or physical conduct in which: i) submission occurs implicitly or explicitly as a condition associated with the person’s employment; ii) submission and/or rejection is used as a basis for decisions regarding the person’s employment; or iii) it has the purpose or effect of interfering with the labor performance of the person or creating an intimidating, hostile or offensive work environment (United Nations, Women Watch)\(^36\).

e. **Sexual abuse of physically or mentally disabled persons\(^37\).** Sexual violence exercised against a person who has limitations in her physical or mental functions that impede her from carrying out tasks or roles that people are generally expected to be able to do (Institute of Medicine, 1991; cited by CDC)\(^38\).

f. **Sexual abuse of children and adolescents.** Abuse that involves any sexual act, either consummated or attempted, or sexual contact with a child. Includes inappropriate forms of sexual activity in which no physical contact, sexual harassment or exploitation of a child takes place (adapted from Leeb, Paulozzi, Melanson, Simon and Arias, 2008)\(^39\).

g. **Forced marriage or cohabitation.** A practice in which a woman, without having the right to oppose, is promised or given in marriage in exchange for compensation in money or in kind delivered to her parents, her guardian, her family or any other person or group of persons (UNODC, 2009)\(^40\).

h. **Marriage among underage girls and boys.** This is a formal or informal union before the age of 18 years. Affects both girls and boys, although it is more frequent in girls (UNICEF, 2011)\(^41\).

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i. **Acts of violence that affect women’s sexual integrity.** Cultural and social practices like female genital mutilation and virginity inspections (WHO, 2002).

j. **Forced prostitution.** A situation in which the victim is manipulated or obligated to perform actions of sexual content that involve her body to satisfy the sexual desires of other persons, with or without remuneration for it (UNODC, 2009).

k. **Human trafficking for purposes of sexual exploitation.** “‘Trafficking in persons’ shall mean the recruitment, transportation, transfer, harboring or receipt of persons, by means of the threat or use of force or other forms of coercion, of abduction, of fraud, of deception, of the abuse of power or of a position of vulnerability or of the giving or receiving of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation. Exploitation shall include, at a minimum, the exploitation of the prostitution of others or other forms of sexual exploitation, forced labor or services, slavery or practices similar to slavery, servitude or the removal of organs;” (United Nations, 2002)42.

**Other concepts used in the analysis of types of SV are:**

**Incest.** Practice of a sexual relation between persons that have some relation of ascendant or descendant kinship or consanguinity. Physically, incest is any act of penetration – oral (fellatio), anal (sodomy) or vaginal – imposed with a part of the aggressor’s body (finger, penis…) or with the use of an object. It also can take the form of sexual aggression, consisting of imposing contact of the child’s body with one’s own body (rubbing against the child, masturbation) seeking sexual satisfaction. The child may be forced to perform actions of masturbation on the aggressor, or touch him where he/she asks (AIVI)43.

**Kidnapping (Abduction).** Consists of illegally detaining a person or persons against their will for the purpose of demanding, for their liberation, an illicit advantage or any kind of economic or other material benefit, or in order to force someone to do something or allow something to be done (Economic and Social Council Resolution 2002/26). This is a violation of individual liberty that undermines human rights. Kidnapping also has devastating repercussions on family members, intimate friends and colleagues. It creates fears and doubts in communities and can have adverse consequences for


the economy and security of States. (UNODC, 2006)\textsuperscript{44}

**Pornography.** Includes the activities of production, distribution, dissemination through any medium, import, export, offer, sale or possession of material in which a person or her/his image is used in explicit sexual activities – real or simulated – or using the representation of her/his genital parts for primarily sexual or erotic purposes. (UNICEF, 2006)\textsuperscript{45}.

### 3.2. Terms associated with sexual violence

a. **Sexual act.** Contact between the penis and vulva or the penis and anus with penetration, however insignificant, contact between the mouth and penis, vulva or anus, or the penetration of the anal or genital orifice of another person with a hand, finger or other object (Basile and Saltzman, 2009).

b. **Non-sexual contact.** Sexual abuse that does not include physical contact of a sexual nature between the aggressor and the victim. This includes acts like voyeurism, exhibitionism, unwanted exposure to pornography, verbal sexual harassment or behavior, threats of sexual violence to achieve some other purpose, or taking nude photographs of a sexual nature of a person without their consent, or of a person that is incapable of consenting or declining (Basile and Saltzman, 2009).

c. **SV incident.** An act or series of acts of sexual violence perceived as interconnected and that can last for a period of minutes, hours or days. One or various perpetrators can commit an act of sexual violence. A violent episode may involve one or more types of violence (sexual, psychological, or physical) (Basile and Saltzman, 2009).

d. **Consent.** When a person is legally or functionally competent and informed to concede and freely authorize or agree to having sexual relations or sexual contact (Basile and Saltzman, 2009). In cases of human trafficking, the consent of the victim to the requirements of the trafficker is not valid (UNODC, 2009)\textsuperscript{46}.

e. **Inability to consent.** When an agreement by free will to have sexual relations or sexual contact is invalid due to the age,
disease, disability, state of consciousness or influence of alcohol or other drugs (Basile and Saltzman, 2009).

f. **Inability to refuse.** When a free-will agreement to have sexual relations or sexual contact was invalidated due to the use or possession of firearms or other weapons, or due to physical violence, threats of physical violence, real or perceived coercion, intimidation or pressure and abuse of authority (Basile and Saltzman, 2009).

### 3.3 Involved parties, their relationship, and circumstances of the sexual violence act(s)

a. **Victim.** Any person(s) that individually or collectively has suffered physical, mental, emotional, economic harm or substantial deterioration of her or his fundamental rights due to acts or omissions that violate the laws of that State (UN, 1998)\(^{47}\). “Victim/Survivor of Sexual Violence” (VSSV) is used as a synonym for victim of sexual violence.

b. **Perpetrator.** Person that inflicts sexual violence (Basile and Saltzman, 2009; Concha-Eastman and Villaveces, 2011).

c. **Intimate partner\(^{48}\).** Current legal spouse, intimate companion, current boyfriend or girlfriend (opposite or same-sex), ex-spouse, separated spouses or former boyfriends/girlfriends. The couples may or may not have a sexual relationship at the moment an incident of SV occurs (Basile and Saltzman, 2009).

d. **Person in position of power or confidence.** Person in a position of responsibility, authority or trust, such as a teacher, babysitter, doctor, religious leader, coach or employer (Basile and Saltzman, 2009; Concha-Eastman and Villaveces, 2011).

e. **Friend/acquaintance.** Someone known to the victim but unrelated by consanguinity or affinity. He or she is not a spouse or ex-spouse, or a current or former partner, or another family member or person in a position of power or trust, as for example a work associate, neighbor, or apartment-mate (Basile and Saltzman, 2009).

f. **Stranger/unknown person.** Someone the victim does not know (Basile and Saltzman, 2009).


\(^{48}\) Each country has parameters for establishing what it considers a stable informal union.
g. **Other, non-stranger/unknown person.** Someone known by sight but not a spouse or ex-spouse, current or former partner, family member, person in position of power or trust, or friend. Examples include guards, maintenance personnel or employees (Basile and Saltzman, 2009).

h. **Family member.** Someone who shares a relation of consanguinity or affinity, or with whom a legal relation exists (legal adoption, non-family member who raised the victim). This includes current and former family members, such as step-fathers, fathers, brothers, ex-fathers-in-law and members of the adoptive family, but excludes any intimate partner (Basile and Saltzman, 2009).

### 3.4 Human rights consequences of the sexual violence act(s)

a. **Impact of sexual violence and pregnancy.** Pregnancy resulting from sexual violence or loss of a pregnancy due to sexual violence (Basile and Saltzman, 2009).

b. **Transmission of HIV through sexual violence.** Acquisition of the human immunodeficiency virus because of sexual violence. Various laws in Central America establish measures of compensation for harm related to HIV in cases of domestic/intra-family violence, sexual violence and human trafficking (Ramírez, 2011)\(^{49}\).

c. **Disease.** Any acute or short-term deterioration of health conditions. Includes any physical or mental condition (Basile and Saltzman, 2009).

d. **Injury.** Any intentional or non-intentional harm to the body associated with the sexual violence experience (adapted from Concha-Eastman and Villaveces, 2001)\(^{50}\).

e. **Disability.** Any chronic or long-term deterioration or weakening experienced by the victim as a result of some restriction or inability to perform an action or activity in the way or range of ways considered normal. This includes physical or mental deterioration (Basile and Saltzman, 2009).

f. **Human rights.** Those liberties, faculties, institutions or vindications that accrue to all persons by the simple fact of

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50 Adapted from the definition of “injury” used in en Concha-Eastman A and Villaveces A, 2001.
their human condition, to guarantee a dignified life without any distinction due to ethnicity, color, sex, language, religion, political or any other sort of opinion, national or social origin, economic position, birth or any other condition. Human rights include the right to life, liberty, security, non-discrimination, right to vote, freedoms of expression and press; respect for privacy, home or family; right to be tried fairly and under the presumption of innocence; adequate well-being and level of living; right to education, work and equity of salary; and the right of minorities to preserve their culture (United Nations)\textsuperscript{51}.

g. **Right to liberty.** Established in the Declaration of Human Rights (Art.3) on the right to life, liberty and security of person (United Nations)\textsuperscript{52}. Violence in public spaces has been defined as a limiting factor for women’s rights to mobility, education, work, recreation, collective organization and participation in political life (UN Women, UNICEF and UN-Habitat, 2011)\textsuperscript{53}.

h. **Effects of sexual violence or fear on the realization of human rights.** The operationalization of the following variables and indicators is suggested (UNFPA, 2012)\textsuperscript{54}:

- **Work:** Barriers to access to work, labor absenteeism, labor mobility, limitations on access to incentives and promotion, loss of income level.
- **Education:** Obstacles to access to education, school dropout, grade repetition, desertion, negative effects on the selection of a career, grades and promotion, restrictions on access to night education and/or education centers far from the place of residence.
- **Access to services:** SV as a barrier to the use of health, justice, public safety, social assistance, shelters, housing and other services.
- **Use of public spaces:** SV as an obstacle to access recreation and leisure-time spaces, use of transportation, night-time mobility, fear of SV as a barrier to the use of public spaces, and others.
- **Social participation:** SV as a factor limiting integration into social, community and political activities.


\textsuperscript{54} UNFPA. 2012. Sistematización y lecciones aprendidas “Seguridad integral de las mujeres, con énfasis en violencia sexual: Combate a la impunidad frente a la violencia sexual” del Fondo de Cooperación UNFPA-AECID para América Latina y el Caribe 2008-2011.
• **Residence**: SV as a factor inducing territorial mobility and/or abandonment of residence.

i. **Citizen security.** The situation of cohabiting in a community free of risks, respecting the rights and duties of all citizens (IADB, UNODC, 2011)^55^.

j. **Fear of sexual violence.** Individual and collective perception of being the victim of sexual violence, both in public and private spaces. (Whitzman, 2008; IUDOP, 2009; May, Rader and Goodrum, 2010)^56,57^.

k. **Protection.** Programs or measures oriented to the protection or physical defense of victims (adapted from UNODC, 2009).

l. **Denouncement/formal complaint.** A report to the competent authority of a violation of the law (Concha-Eastman and Villaveces, 2001).

m. **Costs of sexual violence.** The costs of violence against women and girls, including SV, are costs that must be paid by society and the persons affected. Among the direct costs are all the goods and services used for the prevention, treatment, apprehension and prosecution of the perpetrators. Non-monetary costs include those related to health impacts, which are not necessarily provided for by the kind of services available in cases of homicide, suicide, drug abuse and depression associated with higher mortality rates. Violence against women and girls also has multiplying effects like lower accumulation of human capital, lower participation in the labor market, greater absenteeism from work, low salaries and an impact on the future productivity of children. In social terms, it includes the inter-generational transmission of violence, the privatization of police functions (greater spending on individual security), erosion of social capital, lower quality of life and less participation in democratic processes (Buvinic and Morrison, 2000)^58^.

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^55^ BID, UNODC. (2011). Regional system of standardized indicators in peaceful coexistence and citizen security.


4. Recommended data elements

The variables have been classified in two types: core data and expanded data. Most of the proposed data are currently being collected by the justice and health sectors, and to a lesser degree by public safety agencies (police). Those that are still not being documented in some countries or sectors – like ethnic identity, number of incidences of GBV/SV throughout life, effects of SV, collected evidence – could be incorporated later through regional initiatives already underway for the improvement of statistics and information systems.
4.1. Core data

Identification

All registration forms should include the date and place (city, province, department) in which the information is being documented, as well as a description of the source; in this case the institution and department/area of work.

Number/Case Code

Description: Code required for the unique identification of each case recorded in the institution or care system. In order to protect the privacy and confidentiality of the victims, access to this information must be limited to authorized personnel (Basile and Saltzman, 2009). Institutional records currently use the identity card number or the birth certificate if the VSSV is a minor. In the case of foreigners the document identifying her/him and a file number related to the identity document can be used. For protected witnesses the identity number should be concealed with a code. For surveys, a code is assigned including the categories that are pertinent to the person interviewed.

Fields/Values: A unique identity number should be created to permit linkage to all data sources. When creating a unique number/code, links to multiple sources can be included.

Sources: Institutional registries (health, public safety, judiciary bodies) and surveys.

City/province/department in which the sexual violence act was registered

Description: Department and/or State, City/province and Neighborhood/district where the act is registered (SV).

Use: Makes it possible to establish the relation between the place where the sexual violence act was registered and the place where the most recent incident of sexual violence took place (Basile and Saltzman, 2009).

Fields/values: Assign a value to each component of this element. For example:

- Neighborhood/District
- City/Province
- State/Department

59 There are other strategies for establishing the case code. In the management system for data on gender-based violence (UNFPA et al) they are created based on the combination of the date of birth, selected letters from the name, and numbers assigned to the birth place.

60 In the case of migrants lacking documentation, a file or case number should be created for them. In no case should this mean a delay in care for the woman.
Sources: Institutional records (health, public safety, judicial bodies) and surveys.

Demographic characteristics of the VSSV

Sex of the victim/survivor

Description: Sex of the victim.

Use: Standard demographic information is used to identify the victim and analyze the information disaggregated by sex.

Fields/values:
- Male
- Female
- Other (specify, taking sexual diversity into account: for example, transgender persons).

Sources: Institutional records (health, public safety judicial bodies) and surveys.

Victim’s date of birth

Description: Victim’s date of birth as shown on the identity document (ID, passport, residence card, other).

Use: May be used for calculating the age of the victim and distinguishing among victims with the same name. If the date of birth is unknown, the year can be estimated from the victim’s age (Basile and Saltzman, 2009).

Fields/values: Day, month and year (DDMMYY).

Sources: Institutional records (health, public safety, judicial bodies) and surveys.

Country of origin

Description: Victim’s country of origin when providing information to the registration system for documenting her/his nationality/nationalities.

Use: May be used to calculate the incidence of SV by affected party’s country of origin.

Fields/values: Countries, classified by regions of the world.

Sources: Institutional records (health, public safety, judicial bodies) and surveys.
Ethnic identity of the victim

**Description:** Victim’s ethnicity based on self-declaration (self-ascription or self-pertinence). It is recommended that other criteria be used, like territorial localization, language spoken and language spoken by grandparents and parents, so that the groups can be characterized according to different variables and reflect heterogeneity (CEPAL, 2009) ⁶¹.

**Use:** The disaggregated data must be collected in order to define strategies against SV that show the differences among the different ethnic groups, clarify their specific needs and eliminate and combat racial and ethnic discrimination in the responses to SV.

**Fields/values:** Categories of ethnic groups/peoples in the country of reference.

**Sources:** Institutional records (health, public safety, judicial bodies) and surveys. This is currently being documented in El Salvador, Guatemala and Honduras, although not on all registration forms.

Victim’s occupation

**Description:** Victim’s labor activity during the past three months.

**Use:** This establishes the demographic profile of VSSV, including employment by type of work.

**Fields/values:**

- Has worked in the last 3 months. Yes --- No ---
- Main occupation or class of work victim performs (or performed) (according to the country’s labor activity classification)⁶².

**Sources:** Institutional records (health, public safety, judicial bodies) and surveys.

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⁶² In some countries the question is asked: “Do you work for a salary at home or outside your home?”, avoiding the VSSV believing that work refers only to remunerated activities performed under a supervisor and/or that excludes remunerated activities performed in the VSSV’s home.
Most recent incident of sexual violence

Latest incident of sexual violence

**Description:** Type(s) of sexual violence experienced most recently (latest) by the victim.

**Use:** This indicator provides information on each type of sexual violence experienced in the most recent incident committed by any perpetrator (Basile and Saltzman, 2009).

**Fields/values** (WHO, 2002)

- Coerced sexual act
- Attempt to consummate a sexual act through coercion
- Unwanted sexual comments or insinuations
- Actions to commercialize or use any other mode of sexuality of a person through coercion
- Forms of aggression affecting a sexual organ
- Gang rape
- Other(s)

Forms and contexts of the latest incident of sexual violence

**Description:** Forms and contexts in which the last experience of sexual violence experienced by the victim occurred.

**Use:** This indicator provides information on each form and/or context in which the most recently experienced sexual violence committed by any perpetrator occurred.

**Fields/values** (WHO, 2002; 2003)

- Sexual harassment (including demands for sex in exchange for employment, promotion or school grades and passage of school year)
- Trafficking for purposes of sexual exploitation
- Forced exposure to pornography
- Forced pregnancy
- Forced sterilization
- Forced abortion
- Forced marriage
- Genital mutilation
- Proof of virginity
- Date rape

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• Sexual servitude
• Sexual abuse of physically or mentally disabled persons
• Sexual abuse of minors
• Other(s)

Sources: Institutional records (health, public safety, judicial bodies)\textsuperscript{65}. The selected demographic and health survey and surveys on reproductive health in the selected countries inquire about SV by a partner in the last year and during childhood\textsuperscript{66}.

Date of last incident of sexual violence

Description: Date of victim’s last incident of sexual violence.

Use: Can be used to calculate the period of time passed between the event and the use of the service, and evaluate the usefulness of particular medical treatments (emergency contraception, HIV prophylaxis).

Fields/values: Day, month, year and hour.

Sources: Institutional records (health, public safety, judicial bodies) (Basile and Saltzman, 2009).

Place of last incident of sexual violence

Description: Physical location of the most recent incident of sexual violence.

Use: This indicator can help to determine the places where sexual violence most commonly occurs.

Fields/values: Determine in which places victims report the most sexual violence:

• Perpetrator’s place of residence
• Victim’s place of residence
• Perpetrator and victim’s shared place of residence
• Victim’s place of work (Specify)
• Perpetrator’s place of work (Specify)
• Vehicle
• Parking place/garage
• School/education center
• Commercial establishment
• Park

\textsuperscript{65} Currently, in El Salvador different forms of SV are documented but their classification has not been standardized. In Guatemala it is documented in the justice sector according to the description of the crime in current laws. In Honduras there is no form for documenting this information, but work is being done on its standardized inclusion in the justice and health sectors.

\textsuperscript{66} In the case of Honduras’ National Demography and Health survey 2005-2006, a question was included on SV before the age of 12, while in the Guatemala’s V National Mother-Child Health Survey 2008-2009 there was a question on SV with penetration.
• Public services (health center, services for disabled persons, youth, children, elderly)
• Unknown
• Other(s)

Sources: Institutional records (health, public safety, judicial bodies) and surveys (Basile and Saltzman, 2009).

Multiple perpetrators

Description: Identify whether one or multiple perpetrators were involved in the most recent incident of sexual violence.

Use: Permits analysis of differences and similarities between incidents in which one perpetrator is involved and those in which more than one perpetrator participate.

Fields/values:

• One perpetrator
• Two or more
• Undetermined number of perpetrators

Sources: Institutional records (health, public safety, judicial bodies) and surveys.

Sex of the perpetrator of the latest incident of sexual violence

Description: Sex of the perpetrator of the latest incident of sexual violence.

Use: Standard demographic information used to identify the perpetrator(s) and analysis of information disaggregated by sex.

Fields/values:

• Man
• Woman
• Other (Specify, considering sexual diversity, for example transgender persons)

Sources: Institutional records (health, public safety, judicial bodies) and surveys (Basile and Saltzman, 2009).

Age of the perpetrator of the latest incident of sexual violence

Description: Age of the perpetrator(s) of the most recent incident of sexual violence.
**Use:** Permits the determination of the age of the perpetrator(s) and establishment of the age difference between the victim and the perpetrator(s)\(^{67}\).

**Fields/values:**
- Under 12 years of age
- 13-17
- 18-29
- 30-44
- 45-59
- 60-64
- 65 and older

**Sources:** Institutional records (health, public safety, judicial bodies) and surveys (Basile and Saltzman, 2009).

**Country of origin of the perpetrator(s) of the latest incident of sexual violence**

**Description:** Information on the perpetrator(s)’ country of origin for the registration system for documenting nationalities.

**Use:** Helps to establish the profile of the perpetrator(s) by country of origin.

**Fields/values:** Countries, classified by regions of the world.

**Sources:** Institutional records (health, public safety, judicial bodies) and surveys.

**Ethnic identity of the perpetrator(s) of the latest incident of sexual violence**

**Description:** Ethnic identity of the perpetrator(s) based on the declaration of the victim and/or the accused.

**Use:** The data disaggregated by ethnic groups must be collected to establish the demographic profile of the perpetrator(s).

**Fields/values:** Categories of ethnic groups/peoples in the country of reference.

**Sources:** Institutional records (health, public safety, judicial bodies) and surveys.

\(^{67}\) The documented age should refer to the age in completed years, since in some places it is customary to list the age at the next birthday. One additional option would be to request that data be provided about the age of victim or perpetrator, and based on this to create age groups/ranges as needed, leaving the question open.
Victim-perpetrator relation in the latest incident of sexual violence

**Description:** Relation of the perpetrator(s) to the victim at the moment of the latest incident of SV.

**Use:** Permits the examination of a wide range of possible relations between the victim and the perpetrator(s), and analysis of the differences in the SV experiences by type of relationship (Basile and Saltzman, 2009).

**Fields/values** Adapted from the WHO study (García-Moreno et al, 2005):

- Spouse, companion
- Boyfriend, Lover
- Father
- Step-father
- Other family member (Male)
- Other family member (Female)
- Teacher
- Policeman/Soldier
- Male friend of the family
- Female friend of the family
- Stranger
- Co-worker (specify relation: boss or of the same rank/level)*
- Service provider (specify health, justice, social service sectors, others)*
- Community leader (excluding religious leader)*
- Priest/religious leader
- Member of a gang or organized crime association68*
- Other(s)

**Sources:** Institutional records (health, public safety, judicial bodies) and surveys.

*Added by the authors.

Use of weapons or objects in the latest incident of sexual violence

**Description:** Type of weapon or other objects in the latest incident of sexual violence.

**Use:** Helps to document the use of arms or other objects in the SV incident.

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68 When documenting this indicator, it should be considered whether the VSSV has a partner relation with the gang member, or if it is an incident in which the gang member(s) practice(s) one or various forms of SV against the victim or survivor as part of an initiation rite, punishment or other purposes.
**Fields/values:**

- No use of weapons
- Firearms
- Knife or other sharp object
- Other(s)

**Sources:** Institutional records (health, public safety, judicial bodies) and surveys (Basile and Saltzman, 2009).

**Consequences of the latest incident of SV**

**Pregnancy as a result of the latest incident of sexual violence**

**Description:** Pregnancy was or was not diagnosed after the most recent incident of sexual violence.

**Use:** Allows the analysis of the relation between the most recent incident of sexual violence and the presence of a pregnancy or loss of an existing pregnancy. This element makes it possible to examine the different impacts of sexual violence related to pregnancy.

**Fields/values:**

- Victim has had a pregnancy after the most recent incident of SV
- Victim has lost a pregnancy after the most recent incident of SV
- Not known whether the victim was pregnant following the most recent incident of sexual violence

**Sources:** Institutional records and surveys. (Basile and Saltzman, 2009).
4.2. Expanded data

Incidents of sexual violence throughout lifetime

Number of SV incidents

**Description:** Number of incidents of sexual violence in the victim’s lifetime.

**Use:** Provides a measure of the frequency of sexual violence incidents in the victim’s lifetime at the hands of any perpetrator.

**Fields/values:**

- 1 incident
- 2-5 incidents
- 6-10 incidents
- More than 10 incidents
- Undetermined number of incidents

**Sources:** Institutional records (health, public safety, judicial bodies) and surveys (Basile and Saltzman, 2009).

*Note:* It is recommended to use the same demographic variables of the perpetrator(s) of the most recent incident (core data): sex, age and ethnicity, plus the victim-perpetrator relationship.

First incident of sexual violence

**Description:** Type(s) of sexual violence experienced by the victim in the first reported incident of SV.

**Use:** Identifying the types of sexual violence the victim experienced during the first incident.

**Fields/values** - Defining the possible types of violence:

- Complete sexual act, without consent of the victim or with a victim incapable of consenting or refusing
- Attempted rape
- Sexual abuse
- Unspecified SV
- Other(s)

**Sources:** Institutional records and/or population-based surveys.

*Note:* It is recommended to explore the date, place of first incident of SV, victim-perpetrator relationship and consequences of the first incident.
Physical evidence from the victim during the latest incident of sexual violence

**Description:** Physical injuries suffered by the victim during the most recent incident of violence described by that victim.

**Use:** This data element documents the degree of physical injury experienced by the victim during the most recent incident of sexual violence.

**Fields/values:**
- Victim did not suffer any physical injury during the most recent incident of SV.
- Victim suffered some physical injury during the most recent incident of SV.
- Not known whether the victim suffered any physical injury during the most recent incident of SV.

**Sources:** Institutional records and surveys (Basile and Saltzman, 2009).

Diagnosis of HIV following the latest incident of sexual violence

**Description:** Whether or not HIV was diagnosed following the latest incident of sexual violence.

**Use:** Documenting the transmission of HIV after the most recent incident of sexual violence. Also makes it possible to determine whether HIV was acquired in the most recent incident of sexual violence, or in some other contact.

**Fields/values:**
- Victim has not been diagnosed with HIV following the most recent incident of SV.
- Victim was diagnosed with HIV following the most recent incident of SV.
- Not known if the victim was diagnosed with HIV following the most recent incident of sexual violence.

**Sources:** Institutional records (Basile and Saltzman, 2009).

Diagnosis of STI following the latest incident of sexual violence

**Description:** STI was or was not diagnosed following the latest incident of sexual violence.

**Use:** Documenting the transmission of any STI(s) after the most recent
incident of sexual violence. Also makes it possible to determine whether the STI(s) were acquired during the most recent incident of violence or in some other contact.

**Fields/values:**

- Victim has not been diagnosed with any STI following the most recent incident of SV.
- Victim was diagnosed with some STI(s) following the most recent incident of sexual violence.

**Sources:** Institutional records (Basile and Saltzman, 2009).

Psychological changes in the VSSV as a consequence of the most recent incident of sexual violence

**Description:** Changes in psychological functioning caused or aggravated by the most recent incident of SV.

**Use:** Helps to analyze a broad range of psychological effects of the different types, forms and contexts of SV.

**Fields/values:**

- Anxiety
- Depression
- Eating disorders
- Sleep disorders
- Post-traumatic stress
- Other(s)

**Sources:** Institutional records and surveys (Basile and Saltzman, 2009).
Human rights consequences of the latest incident of SV

Description: Human rights effects of the most recent incident of SV, other than health effects.

Use: Documenting the different effects of SV on areas of the VSSV’s life and establishing what rights need to be restored through the available services and resources.

Fields/values (UNFPA, 2012):

- Work
- Education
- Access to services
- Use of public spaces
- Social participation
- Residence
- Other(s)

Sources: Institutional records and surveys.
5. Indicators

5.1 Magnitude of sexual violence

Rate of formal complaints of rape per 100,000 population.

Definition: This indicator expresses the total number of formal complaints of rape per 100,000 population in a determined territory and period of time.

Numerator: Total number of formal complaints of rape in the population of a territory within a determined period of time.

Denominator: Total population of a territory in a determined period of time.
**Use:** This indicator is widely used in the justice and public safety sectors, and in databases on crime and public safety to establish the patterns of formal complaints of SV.

**Sources:** Institutional records of public safety, public prosecutor offices and judicial bodies.


**Number of cases of human trafficking**

**Definition:** This indicator expresses the total number of cases of human trafficking recorded in a given territory and period of time.

**Number:** Number of cases of human trafficking recorded in a determined territory and period of time\(^{69}\).

**Use:** Laws establishing measures on human trafficking have been passed recently in the four selected countries, so only a small number of these cases has been documented by the justice and public safety sectors. It is expected that as awareness of human trafficking as a rights issue increases and as it is punished by the country’s legal system, the number of reported cases will increase.

**Sources:** Institutional records of public safety, public prosecutor offices and judicial bodies.

**Reference:** Annual reports of the judicial bodies of Honduras, Nicaragua, Guatemala and El Salvador.

**Number of women/girls reporting incidents of sexual violence per 100,000 population in the emergency area in a specific period of time, disaggregated by age, ethnicity and geographic area.**

**Definition:** Incidents of SV reported in a specific period of time defined as an emergency.

**Numerator:** Number of incidents of sexual violence reported by women and girls in a specific period of time.

**Denominator:** Total population of the geographic area/country/camps in the same period of time.

**Calculation:** Divide the numerator by the denominator and multiply the result by 100,000.

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\(^{69}\) It is recommended to document each person as a case, even in a situation in which various victims of trafficking are involved.
Use: Producing an estimate of the frequency of sexual violence in emergency contexts. The use of this indicator will permit a comparison over time in the same place or among places in emergency contexts.

Sources: UNFPA information system, institutional records of public safety, health, public prosecutor offices and judicial bodies.

Reference: Adapted from “Violence against Women and Girls: a Compendium of Monitoring and Evaluation Indicators” (Bloom, 2008).

Proportion of femicides/feminicides in which sexual violence was present

Definition: Proportion of gender-related homicides of women in which evidence of sexual violence has been found, in a determined territory and period of time.

Numerator: Cases of homicides of women in which evidence of sexual violence was found.

Denominator: Total number of women's deaths classified as femicide/feminicide.

Use: The analysis of SV in cases of femicide/feminicide makes it possible to see the Cross-cutting nature of SV in the homicide scenario – a phenomenon which due to the circumstances of place, time and mode tends to be more frequent in the case of violent deaths of women than with the deaths of men. Despite its importance, the countries face difficulties in reconciling the records from different information sources and ensuring the consistency of the information so as to arrive at a diagnosis of the prevalence of violent deaths of women characterized as femicide/feminicide, not because of their criminal classification but according to the circumstances and the perpetrators (Gherardi, 2012).


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Proportion of women that have experienced sexual violence before the age of 15, disaggregated by marital status, age, ethnicity, area of residence, education, employment and place where the SV incident occurred.

**Numerator:** Women that reported sexual violence before the age of 15.

**Denominator:** Total number of women interviewed.

**Use:** Estimating the prevalence of women that experienced sexual violence before the age of 15 out of the total population of women. It offers no information on the frequency of sexual violence.

**Sources:** Population-based surveys (demographic, health and reproductive health surveys).

**Reference:** WHO study (García-Moreno et al, 2005), study of “Sexual violence in El Salvador, Guatemala, Honduras and Nicaragua: Analysis of primary and secondary data” (Ipas and UNFPA, 2012).

Proportion of women that have experienced sexual violence by an intimate partner in the last 12 months, disaggregated by age, ethnicity, area of residence, education, employment, place where the incident of SV occurred and marital status.

**Definition:** Proportion of women interviewed that report having experienced sexual violence at the hands of their intimate male partner in the last 12 months. “Intimate partner” is defined as the partner with whom the woman cohabits or has cohabited, regardless of marital status. The SV could have occurred after separation.

**Numerator:** Women that currently have or have had an intimate partner and report sexual violence by at least one partner in the last 12 months. The women included in the numerator are those reporting that in the last 12 months their current or former partner:

- Physically forced them to have sexual relations against their will.
- Inspired fear of what he would do if she did not have sexual relations with him.
- Forced her to do something sexual that she felt was degrading or humiliating.

**Denominator:** Total number of women interviewed that have or have had an intimate partner.
Use: Estimating the recent prevalence (past 12 months) of sexual violence. Does not measure the frequency or duration of the sexual violence.


Proportion of women reporting that their first sexual relation was forced or rape

Definition: Proportion of women interviewed who reported that their first sexual relation was forced or rape.

Numerator: Women who reported that their first sexual relation was forced or rape.

Denominator: Total number of women reporting having had at least one sexual relation.

Use: Analyzing SV as the experience initiating the victim’s sexual life and potentially evaluating the cumulative effects of SV with respect to the last incident of SV.

Sources: Demographic surveys, studies of specific populations.


Proportion of women experiencing sexual violence before the age of 15, by victim-perpetrator relationship.

Numerator: Women reporting having experienced sexual violence before the age of 15 (with or without penetration), by victim-perpetrator relationship.

- Father
- Step-father
- Other family member (male)
- Other family member (female)
- Teacher

74 Some surveys ask if the sexual relation was forced while others ask if it was rape.
- Policeman/Soldier
- Friend of the family (male)
- Friend of the family (female)
- Stranger
- Service provider (specify: health, justice, or social services sector, others)
- Community leader (excluding religious leader)
- Priest/religious leader
- Member of gang or organized crime association
- Other(s)

**Denominator:** Total number of women surveyed.

**Use:** Analyze incidents of SV in the victim’s life cycle and potential consequences of the cumulative effects of SV.

**Sources:** Demographic surveys, studies of specific populations.

**Reference:** WHO study (García-Moreno et al, 2005), study of “Sexual Violence in El Salvador, Guatemala, Honduras and Nicaragua: Analysis of primary and secondary data” (Ipas and UNFPA, 2012).

Proportion of women who reported sexual violence by an intimate partner and by any perpetrator ever in their life, disaggregated by age, ethnicity, area of residence, education, employment, place where the incident of SV occurred and marital status

**Definition:** Proportion of women interviewed that report having experienced sexual violence by an intimate male partner and by any perpetrator ever in their life among all women interviewed.

**Numerator:** Women who reported sexual violence by an intimate male partner and by any perpetrator ever.

**Denominator:** Total number of women reporting having had at least one sexual relation.

**Use:** Given the potential for ongoing service needs over the lifespan related to victimization, these estimates can help communities understand this burden and use this information for prevention planning and response. Several limitations of the measures used in different surveys on the type of sexual violence, the perpetrators (by an intimate partner and by any perpetrator) and the timeframe in which occurred, may produce a significant underestimation of the percentage of lifetime sexual violence.

**Sources:** Demographic surveys, studies of specific populations.
5.2. Structural determinants

5.2.1 Gender norms and SV

Proportion of women and men that consider it to be a woman’s obligation to have sexual relations with her partner even if she does not want to

**Numerator:** Number of women and men interviewed that believe it is the woman’s obligation to have sexual relations with her partner although she refuses.

**Denominator:** Total number of women and men interviewed.

**Use:** The gender norms that justify forced sex in intimate partner relations place women at risk of experiencing sexual violence and increase the difficulties of negotiating protected sex, and therefore the risk of unwanted pregnancies and/or transmission of STI, including HIV.

**Sources:** Demographic surveys, studies of specific populations.

**Reference:** WHO study (García-Moreno et al, 2005) and study of “Sexual Violence in El Salvador, Guatemala, Honduras and Nicaragua: Analysis of primary and secondary data” (Ipas and UNFPA, 2012).

Proportion of women and men that consider it acceptable for the man (husband/partner) to beat the women in specific situations

**Numerator:** Number of women and men interviewed that believe it is acceptable for the man to exercise physical violence against a woman when:

a. She refuses to have sexual relations with him.

b. He suspects that she is unfaithful.

c. He discovers that she is unfaithful (WHO, 2005).

**Denominator:** Total number of women and men interviewed.

**Use:** The gender norms justifying physical violence as a mechanism for controlling the sexuality of women base the existence of different forms of sexual violence on intimate partner relationships, while promoting such negative values as the woman being the property of the man. These cultural norms increase the risk of physical and sexual violence against women in intimate partner relationships.

**Sources:** Demographic surveys, studies of specific populations.
Proportion of adult women and men, adolescents and boys and girls that know the rights related to GBV/SV

Numerator: Number of women and men of all age groups that know at least two rights related to GBV established in the country of reference’s legal framework, including against sexual violence.

Denominator: Total number of persons interviewed.

Use: Knowledge of the rights of women of all ages to a life free of violence, and of the laws that punish, prevent and provide care for GBV/SV, is a factor favoring prevention, as it confronts the idea that GBV/SV is something natural, while promoting help-seeking and filing of formal complaints by the affected parties. Statistics on the level of knowledge of rights make it possible to directly examine the effect of dissemination of information on these rights. This information also may be used to indicate the proportion of persons that have been victims of SV who despite being cognizant of their rights have not sought help from the existing services.

Sources: Demographic surveys, specific studies with children, adolescents and older adult women.


Proportion of women who were married or in informal unions before the age of 18, disaggregated by age group, ethnicity, urban/rural residence.

Numerator: Number of women aged 15 and older that report having been married or in a union before the age of 18.

Denominator: Total number of women aged 15 and older interviewed.

Use: The Convention on the Rights of the Child considers that marriage before the age of 18 is a human rights violation. This practice has consequences for the human development of women, limiting their access to opportunities, liberties, education, and social and political participation.
Sources: Demographic surveys and specific studies of children, adolescents and older adult women.

Reference: Adapted from “Violence against Women and Girls: a Compendium of Monitoring and Evaluation Indicators” (Bloom, 2008).

Level of perception of the risk of experiencing SV in public and private spaces, disaggregated by sex, age group, ethnicity and area of residence

Numerator: Number of persons perceiving the risk of experiencing sexual violence in public spaces and in private spaces on a scale of risk: high, medium, low, and none.

Denominator: Total number of persons interviewed aged 18 and older.

Use: The perception of SV is as important as direct sexual victimization. There is a complex relation between fear, risk and behavior related to violence against women. The fear of violence, including SV, bears high costs such as lack of opportunities for education, work, access to services, social participation and recreational activities. It is also associated with negative self-image, anxiety, depression, lack of trust in neighbors and individuals in general (Whitzman C, 2008).

Sources: Surveys on victimization.

Reference: Adapted from victimization surveys in El Salvador, Guatemala and Honduras.
5.2.2 Socio-economic context and interpersonal and collective violence

Proportion of people living on US$1.25 or less per day, disaggregated by sex, ethnicity and urban/rural residence

**Numerator:** People living on less than US$1.25 a day.

**Denominator:** Total population in a determined period of time.

**Use:** Poverty is a situation that affects the quality of life of people and families, reducing their possibilities of health, employment, access to education, credit, housing and assets, and of course earning an income sufficient for a dignified life. The World Bank defines extreme poverty as less than US$1.25 a day per person.

**Sources:** Household and labor force statistics.

**Reference:** ECLAC, Statistics on Latin America and the Caribbean75.

Proportion of women and men that have completed at least 10 years of formal education, disaggregated by age group

**Numerator:** Men and women with less than 10 years of schooling.

**Denominator:** Total number of men and women surveyed.

**Use:** Reflects the level of socio-economic development of society. It is a good indicator for analyzing the living conditions of a population. A schooling rate below four years of study is similar to a level of functional literacy, which translates into difficulties for individuals to perform the simplest activities in contemporary societies.

**Sources:** Household surveys, demographic and health surveys.

**Reference:** ECLAC, statistics on Latin America and the Caribbean.

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Homicide rate per 100,000 population

**Definition:** This indicator expresses the total number of homicides committed for every 100,000 population in a determined territory and period of time.

**Numerator:** Total number of homicides among the population in a determined territory and period of time.

**Denominator:** Total number of population in the same determined territory and period of time.

**Use:** This indicator is widely used in the majority of sectors of social and economic activity, for purposes of management and analysis of health, demographic and citizen safety. It is a crude, brute or general rate, given that the denominator includes the total population of the determined place and time. The comparisons made across regions or countries may not be adequate because of the difference in age categories used in the compared populations, so the crude rate is frequently adjusted for these purposes, using the direct or indirect standardization method, also known as rate adjustment.

**Sources:** Police and judicial records.

**References:** UNODC (2009), OAS (2010), UNODC, IDB and CISALVA (2011).

Physical assault rate (blows, injuries) reported to the police per 100,000 population, disaggregated by sex, geographic area, age group, and ethnicity

**Numerator:** Number of women and men filing formal complaints with the police, of having suffered any kind of physical assault in a determined period.

**Denominator:** Total population of a territory for the same determined period.

**Use:** This indicator refers to people that were victims of a crime in a determined period, and aims to measure the proportionality of the crime in different places based on complaints received by the police. Physical assault is carried out in different ways, such as blows, injuries with different objects, kicks and others.

**Sources:** Police records.
5.3 Factors associated with responses and comprehensive approaches to SV

Proportion of multi-sectorial initiatives on GBV/SV with budget allocation

**Numerator:** Number of initiatives with established budget and assigned funding sources.

**Denominator:** Total number of multi-sectorial strategies (plans, inter-sectorial programs) on gender equality and violence that include GBV/SV.

**Use:** Analysis of financial viability and sustainability of the multi-sectorial initiatives addressing GBV/SV.

**Sources:** Documents on sectorial policies, laws and programs.

**Reference:** Research protocol “Situation and quality of services for sexual violence in Central America” (Ipas and UNFPA, 2011).

Number and type of public policy instruments for addressing SV by sector (justice, health, public safety, citizen/community safety, education and others)

**Definition:** Total number of public policy instruments that include specific measures for providing care for, preventing and/or punishing SV, by type of instrument (laws, guidelines, protocols).

**Use:** The Belém do Pará Convention (1995) establishes actions on all forms of violence against women, although initially most have been centered on domestic intra-family violence. Instruments have gradually been developed to respond to other forms of GBV such as trafficking of women, sexual harassment in the workplace and rape.

**Sources:** Documents on sectorial polices, laws and programs.

**Reference:** Research protocol “Situation and quality of services for sexual violence in Central America” (Ipas and UNFPA, 2011).

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Proportion of organizations participating in existing GBV/SV prevention and care networks, by geographic area

**Numerator:** Number of governmental and non-governmental organizations that are part of prevention and care networks (including referral networks) for GBV/SV.

**Denominator:** Total number of organizations preventing and responding to violence including SV.

**Use:** Comprehensive care is based on the response to the needs of VSSV, which generally is offered by different sectors, some in a single site and others through referral networks. Also, comprehensive preventive actions for SV (primary, secondary and tertiary) require inter-agency coordination. Participation in networks therefore is a key component for a comprehensive response to SV.

**Sources:** Sectorial reports.

**Reference:** Research protocol “Situation and quality of services for sexual violence in Central America“ (Ipas and UNFPA, 2011).

Proportion of organizations using registration forms (reporting templates) with comparable data among the sectors involved in the response and prevention of GBV/SV

**Numerator:** Number of governmental and non-governmental organizations offering SV services that report using forms/templates that include a set of common SV indicators for registering/documenting cases.

**Denominator:** Number of governmental and non-governmental organizations in the selected sample.

**Use:** The systematic report of reliable, timely and comparable data is key to strengthening the work of all involved sectors and using the information for sectorial decision-making processes, strengthening of inter-agency coordination and evaluating results and the impact of the interventions.

**Reference:** Research protocol “Situation and quality of services for sexual violence in Central America“ (Ipas and UNFPA, 2011).
Inclusion of representatives of women’s organizations and specific populations in the management structures of the sectorial and inter-sectorial groups addressing GBV/SV

**Definition:** Number of sectorial and inter-sectorial groups that include representatives of women’s organizations (civil society) and other groups (youth, ethnic minorities, women living with HIV, etc.) in the management teams for establishing strategies for responding to GBV/SV.

**Use:** The purpose is to incorporate the opinions, interests and experience of women’s organizations and representatives of specific populations (sex workers, indigenous peoples, youth, women living with HIV and others) at each stage of the process of planning and implementation programs for preventing and responding to SV. In this way civil society representation is guaranteed and equality achieved in decision-making – not only between men and women, but also among State institutions, civil society organizations and specific populations.

**Sources:** Institutional records.


Protocols for GBV/SV that are aligned with international standards for emergency cases have been established for the management of sexual violence survivors within the emergency area at all levels of justice and health systems

**Definition:** Clinical management for VSSV is complex due to multiple factors related to care and support. To ensure that women and girls receive adequate care, it is necessary to have a protocol for emergency areas that is aligned with international standards.

**Yes:** When there is a protocol for the care of victims of sexual violence at all levels of the health and justice systems in emergency areas. This protocol also should be coherent with international norms, such as the Minimal Initial Service Package (MISP) and the WHO protocol (2004) for clinical treatment of survivors of sexual violence.

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**No:** There is no protocol or one exists at some levels of the health and justice systems or it exists at all levels but is not aligned with international norms.

**Use:** This indicator measures whether a protocol exists for ensuring that the survivors of sexual violence are attended adequately in the emergency area by the health and justice systems.

**Sources:** Institutional records, sectorial execution reports, follow-up mechanism to the Inter-American Convention for Preventing, Punishing and Eradicating Violence against Women (MESECVI).

**Reference:** “Violence against Women and Girls: a Compendium of Monitoring and Evaluation Indicators” (Bloom, 2008)\(^80\).

**Mechanisms established to promote cooperation among the institutions of the justice system and the migratory and border authorities to address human trafficking**

**Definition:** Existence or not of mechanisms for dialogue, commitment and cooperation among the institutions of the justice, migration and customs sectors to fight human trafficking that particularly affects women and children, to adopt prevention and protection mechanisms for victims, in accordance with the principle of non-discrimination and respect for human rights and fundamental liberties.

**Use:** This indicator shows how much progress has been made in inter-agency coordination and cooperation for responding to human trafficking and identifying the critical aspects for seeking responses to strengthen joint efforts by the different sectors involved.

**Reference:** Red Iberoamericana de Protección de Datos (2003)\(^81\), UNODC\(^82\); “Violence against Women and Girls: a Compendium of Monitoring and Evaluation Indicators” (Bloom, 2008).

**Number of GBV/SV policies and programs which include the needs of specific groups** (ethnic groups, disabled persons, persons living with HIV, sex workers, victims of trafficking, youth, immigrants, children, street adolescents and adults, persons in prisons, and others)

**Definition:** The prevention of GBVB/SV depends significantly on changing community norms regarding gender equality. Therefore

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policies and programs must be inclusive, taking specific groups into account and offering a comprehensive response to the problem. Social exclusion reduces personal capacity for decision-making and this compromises the future of society. Solutions ensuring the full integration of specific groups and their participation in decision-making on all matters concerning them must be guaranteed. This explains the importance of monitoring and guaranteeing that the norms related to GBV/SV effectively respond to the needs of these groups.

**Use:** This indicator is useful in identifying policies and norms that still do not address the needs of specific groups, and revisiting the experience of the documents that do so; and in that way guaranteeing that all the sectors involved in the prevention and care for GBV/SV respond to these populations’ needs.

**Reference:** Red Iberoamericana de Protección de Datos (2003).

**Number and type of SV services available for investigating, punishing, and providing compensation for these acts and preventing impunity**

**Definition:** Number of services available (special public prosecutors’ offices for women, commissaries for women, forensic medical services, networks, healthcare teams for GBV/SV and shelters) in a determined territory and time.

**Use:** The existence of services is an indicator of the level of equity in the provision of resources and care in response to the needs of the VSSV, and permits them to restore their rights. The provision of services should be analyzed along with indicators showing the patterns of their use and mechanisms for eliminating the economic, cultural, geographic or other barriers that restrict the possibilities of VSSV gaining access to them.

**Reference:** Research protocol “Situation and quality of services for sexual violence in Central America” (Ipas and UNFPA, 2011); CIM/OEA (2012); CIDH (2011).

**Number and type of user and community participation mechanisms for the development and evaluation of services**

**Definition:** Number of users and community participation mechanisms (suggestion boxes, user committees, quality committees, exit surveys of users, service networks) per service-providing organization.
Use: From a human rights perspective, VSSV should participate significantly with a voice in all the processes that attempt to respond to the problems affecting them. Access to services and follow-up of VSSV depends on the active integration of the organizations and community leaders in the identification, counseling and social support of VSSV.

Reference: Research protocol “Situation and quality of services for sexual violence in Central America” (Ipas and UNFPA, 2011).

Number of specialized services provided for persons who are objects of trafficking

Description: Number of specialized services available for persons who are objects of trafficking in the geographic zone/country of destination.

Use: The provision of specific, timely and high-quality services for persons who are objects of trafficking is a requisite for addressing their specific needs.


Number of comprehensive SV services available per 100,000 population

Numerator: Number of services available through stand-alone services, or referral networks for VSSV providing basic services of justice and health (filing of formal complaints, legal support, crisis care, forensic assessments, safety measures, medical and psychological assistance) in a determined territory and period of time.

Denominator: Total population in a determined territory and period of time.

Use: Shows the proportion of the general population that could be covered by the existing services and whether the existing availability meets the criteria for quality, considering the services and the size of the population they cover.

Reference: Research protocol “Situation and quality of services for sexual violence in Central America” (Ipas and UNFPA, 2011).
5.4. Outcomes of sexual violence and help-seeking patterns

Proportion of women that reported sexual violence by an intimate partner and by any perpetrator ever in their life, whether they sought help, and where or from whom they requested it.

Numerator: Number of women reporting having sought help in the following options:
- Did not seek help
- Friends
- Mother
- Father
- Sister/Brother
- Uncle or aunt
- Spouse/partner’s family
- Neighbors
- Police
- Doctor/Health personnel
- Priest/religious leader
- Counselor
- NGO/Women’s organization
- Local leader
- Teacher
- Other(s)

Did you ever turn to the following places to ask for help?
- Police
- Hospital or health services
- Legal consultancy center
- Court/public prosecutor’s office
- Shelter
- Local leader
- Women’s organization
- Priest/religious leader
- School
- Some other place? Where?

Denominator: Total number of interviewees reporting sexual violence by a partner and by any perpetrator ever in their life.

Use: Learning the help-seeking patterns of VSSV, their use of services, main entry points and persons in whom they trust to address the situation (potential support networks).
Sources: Demographic and health surveys, reproductive health surveys.

References: WHO study (García-Moreno et al, 2005) and study of “Sexual Violence in El Salvador, Guatemala, Honduras and Nicaragua: Analysis of primary and secondary data” (Ipas and UNFPA, 2012).

Proportion of women that reported sexual violence by an intimate partner and by any perpetrator ever in their life, by reasons for not seeking help, according to age group, ethnicity, area of residence, type of work, health status and education

Numerator: Number of women reporting not having sought help for any of the following options:

- Don’t know/no response
- Fear of threats/consequences
- More violence
- SV is a normal situation
- Shame/fear of not being believed or being scolded
- Thought they would not help/know of another VSSV that was not helped
- Believed it would not do any good
- Fear that the relation would end
- Fear of bringing shame on the family
- Other(s)

Denominator: All interviewees reporting having experienced sexual violence at any time by an intimate partner and by any perpetrator ever in their life and did not seek help.

Use: Helps to explore the barriers to seeking help in relation to the individual and family effects and consequences of SV, negative perception of the services’ capacity to address their needs and gender norms that normalize SV.

Sources: Demographic and health surveys, reproductive health surveys.

References: WHO study (García-Moreno C et al, 2005) and study of “Sexual Violence in El Salvador, Guatemala, Honduras and Nicaragua: Analysis of primary and secondary data” (Ipas and UNFPA, 2012).
Proportion of women ever married or in informal union reporting different types of consequences (physical, psychological or others) as a result of violence (sexual, physical, emotional) by the current/last spouse or intimate partner.

**Numerator:** Number of women who, as a consequence of violence (physical, sexual or psychological) reported:

- Having been injured seriously enough to need medical assistance.
- Having to spend a night in the hospital due to this situation
- Having suffered changes in their emotional state: depression, anxiety, guilt feelings, suicidal thoughts
- Sleep disorders
- Eating disorders
- Pregnancy
- STI (specify)
- HIV
- Other

**Denominator:** All interviewees reporting sexual violence at some time by an intimate partner and by any perpetrator ever in their life who did not seek help.

**Use:** Learning about the frequency of the different consequences for women experiencing sexual violence. The consequences for women’s health can increase the risk of poor health in the future. Therefore, sexual violence may be considered a risk factor for numerous health problems.

**Sources:** Demographic and health surveys, reproductive health surveys.

**References:** WHO study (García-Moreno et al, 2005) and study of “Sexual Violence in El Salvador, Guatemala, Honduras and Nicaragua: Analysis of primary and secondary data” (Ipas and UNFPA, 2012).
5.5. Social responses and capacity of services to address victims'/survivors' needs

Proportion of VSSV that have received HIV prophylaxis within the 72 hours following the occurrence of the sexual violence incident

Numerator: Number of eligible VSSV that received HIV prophylaxis within 72 hours of the incident.

Denominator: Total number of SV cases reported.

Use: The provision of prophylaxis among eligible VSSV for the prevention of HIV in the established period is fundamental for avoiding the risk of acquiring HIV associated with SV.

Sources: Health sector and forensic medicine reports.


Proportion of VSSV that received Emergency Contraception (EC) for the prevention of pregnancy within a period of 120 hours after occurrence of the sexual violence incident

Numerator: Number of eligible VSSV that received EC within 120 hours of the event.

Denominator: Total number of cases of SV reported.

Use: The provision of emergency contraception among eligible VSSV in the established period is fundamental for avoiding the risk of a pregnancy associated with SV.

Sources: Health and forensic medicine reports.

Total number of cases of SV (different types) registered/document ed in the justice, health, and public safety sectors per year.

**Definition:** Total number of cases of sexual violence recorded by sector (health, police, justice, medico-legal medicine institutes, public prosecutor offices, Supreme Court of Justice) by typologies established in the country’s legislation, and type of services in a determined territory and period of time.

**Use:** Comparing the number of VSSV seeking the services, the main points of entry, and in the case of the justice sector, comparing the number of cases entering the justice system with the number receiving sentences.

**Reference:** Study of “Sexual Violence in El Salvador, Guatemala, Honduras and Nicaragua: Analysis of primary and secondary data” (Ipas and UNFPA, 2012).

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**Proportion of reports on SV prepared by the police that are remitted to the public prosecutor’s office**

**Numerator:** Number of cases remitted by the police to the public prosecutor in a determined territory and period of time.

**Denominator:** Total number of cases of SV registered with the police in the same period.

**Use:** Learning the proportion of reports that were remitted by the police to the public prosecutor’s office out of the total number of cases registered and examining their potential impact on VSSV’s access to justice.

**Reference:** Study of “Sexual Violence in El Salvador, Guatemala, Honduras and Nicaragua: Analysis of primary and secondary data” (Ipas and UNFPA, 2012).

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**Proportion of SV cases handled by justice sector services that have been judged and have received sentences (convictions and acquittals)**

**Numerator:** Number of cases of SV that have resulted in sentences in a determined territory and period of time.

**Denominator:** Total number of cases of SV registered in the justice sector in a determined territory and period of time.

**Use:** Analyze the gaps in access to justice and restitution of the rights of VSSV, particularly with respect to impunity.

**Reference:** Study of “Sexual Violence in El Salvador, Guatemala, Honduras and Nicaragua: Analysis of primary and secondary data” (Ipas and UNFPA, 2012).
Proportion of case dismissals (provisional and definitive) out of the total of cases registered in a determined period of time.

**Numerator:** Number cases of SV dismissed by the court, by reason for dismissal, in a determined territory and period of time.

**Denominator:** Total number of cases of SV registered within the justice sector in a determined territory and period of time.

**Use:** A proxy indicator used for partially analyzing the reasons for the differences between the number of cases of SV entering the justice system and those receiving convictions.

**Reference:** Study of “Sexual Violence in El Salvador, Guatemala, Honduras and Nicaragua: Analysis of primary and secondary data” (Ipas and UNFPA, 2012).

Documentation of complete and reliable forensic evidence: i) number of doctors trained in the collection of forensic evidence, and ii) number of kits with complete collection of specimens, documentation and maintenance of the chain of custody

**Definition:** Crime scene investigation is a formal process where the forensic investigators, in addition to documenting and collecting physical evidence, use scientific knowledge and forensic techniques to identify and generate information for solving a crime. In order to have quality forensic evidence it is necessary to have: i) human resources trained in forensic techniques for the collection, preservation and transfer of evidence of the crime, ensuring it will be reliable and useful in the trial, and ii) a kit for taking, preserving and transferring the evidence.

**Use:** Regarding trained human resources, it is necessary to calculate the proportion of health providers trained in forensic techniques that work in the health unit and provide assistance to the VSSV, over a determined period of time. This information can be disaggregated by type of provider, region or province, etc. Calculating the percentage of kits that comply with the guidelines for complete specimen collection, documentation and chain of custody helps determine if there is a training need to improve providers’ abilities and thus guarantee high-quality evidence for criminal trials.

**Reference:** “Violence against Women and Girls: a Compendium of Monitoring and Evaluation Indicators” (Bloom, 2008).
Proportion of cases of SV that have obtained high quality forensic evidence and expert testimony in the selected services, disaggregated by community, department/state

**Definition:** Proportion of cases processed for SV that result in a conviction over a specific period of time, when there is good quality forensic evidence and expert testimony for the case.

**Numerator:** Number of cases of GBV/SV that went to trial and resulted in convictions over a specific period of time.

**Denominator:** Total number of cases that went to trial in the same period.

**Use:** This indicator measures the efficacy of the justice sector when there is high quality forensic evidence, by monitoring the cases that went to trial and were sentenced.

Proportion of victims/survivors receiving medical and psychological care in the health services

**Definition:** Shows the percentage of all women reporting sexual violence who received medical and psychological care from health services.

**Numerator:** Number of women victims of sexual violence that received adequate medical and psychological care from health services in accordance with national and international standards.

**Denominator:** Number of women who reported having been victims of sexual violence in a determined territory and period of time.

**Use:** The term “adequate medical and psychological care” implies the timely compliance with the protocols established in each country for offering care to victims of violence. This indicator permits the evaluation and monitoring of health actions established to prevent, diagnose and treat women VSSV in a timely fashion.

**Reference:** “Violence against Women and Girls: a Compendium of Monitoring and Evaluation Indicators” (Bloom, 2008).

Level of quality of the justice, health and public safety services from the users’ perspective

**Definition:** Institutions of the justice, health and security sectors that provide high quality services to VSSV from the users’ perspective in a given country, state or community. If there are different types of
institutions and/or organizations, the following should be categorized:

- State institutions vs. non-governmental institutions.
- Type of legal, security and health services.
- Department/state, municipality, province.

**Use:** The calculation is based on interviews made with women users of the services in a determined area and specific time.

**Reference:** Billings, Valenzuela and Place (2010)\(^{83}\).

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6. Strategic considerations for collecting, analyzing and disseminating information on sexual violence

The production, analysis and dissemination of comparable and high-quality data on SV require basic conditions for sustainability using a framework of ethical principles for ensuring the human rights of VSSV.

6.1. Ethical considerations

a. Confidentiality and privacy of the persons interviewed. To ensure confidentiality and anonymity it is recommended that the following standard procedures be applied: i) use of a number code for files, with unique identifiers that are not identity card numbers or the names of the VSSV; ii) storage of the registration forms in archives with restricted access.
b. The information must be collected and stored in a way that does not put the safety of the VSSV at risk.

c. The information must be given voluntarily. The consent forms will include information regarding the use to be made of the collected information, how its confidentiality will be maintained, and the right to refuse tests or other procedures\textsuperscript{84,85}.

d. Training for personnel that handle the information in the use of data collection instruments and conceptual aspects of SV\textsuperscript{86}.

### 6.2. Integration of information sources and inter-agency coordination

- Complementary roles of different sources of information. For more accurate and reliable information on the magnitude, nature consequences and responses to SV, it is recommended to combine different sources of surveillance (administrative data, surveys, second generation surveillance, qualitative research). This will lead to obtaining more detailed information on the selected indicators.

- Inter-agency coordination. A comprehensive information system on SGBV/SV calls for inter-agency coordination mechanisms to guarantee the use of uniform definitions, data elements and common and mutually agreed-upon indicators, as well as the dissemination of data and their use in making decisions for addressing GBV/SV, including policy priorities and budgetary allocations.

### 6.3 Application of gender analysis principles to the documentation and analysis of data

The data should be analyzed using the principles of gender analysis that emphasize the consideration of gender and other social determinants (ethnicity, age, disability, socio-economic status, work, area of

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\textsuperscript{84} Skinner T., Hester M., and Malos E. Methodology, feminism and gender violence. In Researching gender violence. Willian Publishing, Oregon, USA.

\textsuperscript{85} Vázquez M y Hale F. (2011). Consideraciones éticas para una respuesta integrada a los derechos humanos, el VIH y la violencia contra las mujeres en Centroamérica. CIM/OEA. Washington D.C.

residence, migratory status, health status, etc.) as factors associated with specific risks and protective factors for SV among women and men, seen from their multiple identities. These differences also determine access to services and resources of SV protection, care and prevention.

Gender analysis applied to SV emphazises the following aspects\textsuperscript{87,88}:

- Explore the critical areas of gender inequality related to SV in specific socio-cultural contexts of each country/community.
- Identify the factors that contribute to SV at the different levels (macro, sectorial, community, family and individual).
- The way in which SV affects the realization of human rights and how this problem can be affected by certain interventions.
- The production and analysis of information to identify the most appropriate strategies for addressing SV.

The inequalities revealed by the data on SV should not be seen as aggregated individual characteristics, but rather as a reflection of gender as a principle of social organization (Bacchi and Eveline, 2003)\textsuperscript{89}.

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\textsuperscript{88} OPS/OMS. (2004). Indicadores básicos para el análisis de la equidad de género en salud. Washington D.C.

\textsuperscript{89} Bacchi, Carol and Eveline, Joan. (2003). Mainstreaming and Neoliberalism: A contested relationship. Faculty of Economics and Business, Government and International Relations, University of Sydney.
Annex

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<tr>
<th>No</th>
<th>Name</th>
<th>Country</th>
<th>Position and Institution</th>
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<tr>
<td>1</td>
<td>Loany Patricia Alvarado Sorto</td>
<td>Honduras</td>
<td>Public Prosecutor For Women, Attorney General’s Office.</td>
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<tr>
<td>2</td>
<td>Marza Mirza Montes Aguilar</td>
<td>Honduras</td>
<td>Technical staff: Information systems area.</td>
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<tr>
<td>3</td>
<td>Marco Tulio Garay Osorio</td>
<td>Honduras</td>
<td>Technical level Specialist with the Gender Unit. Judicial Branch.</td>
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<td>Elky Griselle Alvarado Medina</td>
<td>Honduras</td>
<td>Office of the Public Prosecutor, Public Ministry of the Atlántica Region, La Ceiba, Honduras.</td>
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<td>Technical Coordinator of Medical Records and Statistics. Hospital Regional Atlántida.</td>
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<td>Aleyda Sofía Ramírez Martínez</td>
<td>Honduras</td>
<td>Gender Officer. UNFPA.</td>
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<td>Angelica Jeaneth Valenzuela Claverie</td>
<td>Guatemala</td>
<td>Director. Center for Training and Support for Women.</td>
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<tr>
<td>No</td>
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<td>11</td>
<td>Anabella De La Cruz</td>
<td>Guatemala</td>
<td>Coordinator of statistics on violence against women and intra-family violence, National Statistics Institute (INE).</td>
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<td>Rodríguez</td>
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<td>Silvia Negreros</td>
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<td>Population and Development officer, UNFPA</td>
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<td>Yamileth del Carmen Molina</td>
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<td>Program Officer, PATH/ Central America</td>
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<td>Dina Isabel Cerda López</td>
<td>Nicaragua</td>
<td>Director of Information and Statistics of the Judiciary Power, Supreme Court of Justice</td>
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<td>15</td>
<td>Martha Ileana Morales</td>
<td>Nicaragua</td>
<td>Director of Planning and Statistics of the Public Ministry.</td>
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<td>Mendoza</td>
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<td>16</td>
<td>Pastora Ernestina Cuadra</td>
<td>Nicaragua</td>
<td>Director of Regulations and Registry of Evidence. Medico-Legal National Institute-Supreme Court of Justice</td>
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<td>17</td>
<td>Gema Josefa Romero</td>
<td>Nicaragua</td>
<td>Civil servant responsible for the Department of Statistics, IML-CSJ.</td>
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<td>18</td>
<td>María Elena Vado Vásquez</td>
<td>Nicaragua</td>
<td>Head of the Department of Counseling and Control of the Women’s Commissary. National Police.</td>
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<td>19</td>
<td>Claudia María Rebollo</td>
<td>El Salvador</td>
<td>Assistant to Magistrate Fortín, Criminal Court, Supreme Court of Justice</td>
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<td>20</td>
<td>María Elena Avalos</td>
<td>El Salvador</td>
<td>Coordinator of the Integrated and Comprehensive Program on Violence in all Life Cycles, Ministry of Health</td>
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<td>David Rodríguez</td>
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<td>Ministry of Health.</td>
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<td>Irma Yolanda Núñez</td>
<td>El Salvador</td>
<td>National Director. Ciudad Mujer.</td>
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<td>DIGESTIC.</td>
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<td>24</td>
<td>Walter Mejía</td>
<td>El Salvador</td>
<td>Systems technician. UNFPA.</td>
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<td>MDGF Coordinator. UNFPA.</td>
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<td>Vilma Vaquerano</td>
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<td>ORMUSA, Violence Observatory</td>
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<td>UNFPA.</td>
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<td>Panamá</td>
<td>Gender Specialist. UNFPA LACRO.</td>
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<td>Karen Padilla Zuniga</td>
<td>EU</td>
<td>IPAS Consultant</td>
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<td>IPAS Consultant, Development Connections.</td>
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<td>35</td>
<td>Pearl Friedberg</td>
<td>EU</td>
<td>Advisor on Health Systems, IPAS.</td>
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<td>36</td>
<td>Paulina Pavez Verdugo</td>
<td>Chile</td>
<td>ECLAC</td>
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<td>Christopher Bross</td>
<td>EU</td>
<td>IPAS – LAC Regional Manager.</td>
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<td>Diana Arango Jimena</td>
<td>EU</td>
<td>PAHO/ Regional Office.</td>
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<td>Marcos Alberto Membreño Idiáquez</td>
<td>Nicaragua</td>
<td>Central American Court of Justice.</td>
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<td>Mario Vargas</td>
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<td>UNDP consultant</td>
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