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**Promotion and protection of all human rights, civil,
political, economic, social and cultural rights,
including the right to development**

Written statement* submitted by Associazione Comunita Papa Giovanni XXIII, a non-governmental organization in special consultative status

The Secretary-General has received the following written statement which is circulated in accordance with Economic and Social Council resolution 1996/31.

[22 May 2022]

* Issued as received, in the language of submission only. The views expressed in the present document do not necessarily reflect the views of the United Nations or its officials.



Violence and its impact on the right to health

Associazione Comunita Papa Giovanni XXIII (APG23) is present in 42 countries around the world. In Italy and abroad, in its many hosting structures, it has assisted and welcomed hundreds of children, adolescents and women victims of domestic violence or intended for sex tourism and the exploitation in prostitution. In Italy, it has welcomed hundreds of women victims of intra-family violence, genital mutilation, and forced marriage.

In its facilities APG23 welcomes migrants, unaccompanied children and victims of trafficking; many of them have on their bodies the signs of physical injury due to abuse and injuries they have been suffered during their migratory journey by the border authorities. Sadly, they have experienced emotional and psychological harm and violence that leaving no visible scars, will indelibly affect their emotional, social and human development.

APG23 is deeply concerned about the humiliations, violence and threats that in certain places migrants suffer from border authorities on the external European borders; physical and mental health of people arriving at the border of Europe is not taken into any consideration when policies that seem to have no human rights approach are put in place. On the contrary, Governments should consider the great impact of those practices on the right to health and life of people reaching borders; they should consider their journey and the reasons why they left their countries of origin and protect their health from further deterioration.

Violence against people on the move has got many forms and particular attention should be paid to the protection of the most vulnerable groups such as women and children; often minors are treated as adults and often beaten and pushed back to borders without any protection. It is important to remember that the best interest of the child must be respected and is not negotiable; children should always be protected regardless of their migration status or that of their parents.

Among many other activities, APG23 has promoted a project called “MIRIAM: Free Migrant Women Against GBV (Gender Based Violence) through identification and access to specialized support service”, carried out in collaboration with Differenza Donna in Italy e Fundaci3n de Solidaridad Amaranta in Spain. It is a European project funded by the Rights, Equality and Citizenship Programme of the European Union, aimed at preventing and combating all forms of violence against children, youth, and women. It intends to strengthen services for early detection, protection and specialised support services for migrant women who are already or potentially victims of GBV with a strong focus on victims of sexual exploitation, intimate partner violence and forced marriage (1).

A report named “The Mental Health of Migrant Women Victims of GBV. Promising practices in the context of the pandemic”(2) was published within the framework of the project. In this report, among the forms of GBV to which migrant and refugee women are exposed, the authors focused on sexual exploitation and forced marriage, the consequences on the mental and physical health, the assistance services and psychosocial support pathways activated by NGOs and/or public services and other private social entities.

Migrant, asylum seeker, and refugee women are at greater risk of being victims of sexual exploitation (3) during their journey and upon arrival in their destination country. A major study on refugee women's integration conducted for the European Parliament in 2016, reports that «Refugee women are the most affected by violence against women than any other female population in the world» (4).

According to UNHCR data in 2017, women accounted for only 12.6% of arrivals by sea to Europe, but this percentage is increasing among asylum seeker women. The increasing number in recent years is therefore a sign of worsening conditions in countries of origin and of the serious impact on women. A striking example concerns the number of African women who crossed from Libya and then the Mediterranean Sea in the years 2016-2017. The case of Nigerian women in Italy is emblematic: according to IOM, in fact, about 80% of Nigerian women who arrived in Italy in 2016 were victims of sexual exploitation in the country or in other European countries, and victims of violence and rape in Libya. Currently, sexual exploitation involves 60% of trafficked women in Europe; related online criminal activities are also on the rise.

Many migrant women and girls are subject to multiple discriminations and violence

Narrations comprise pre-journey experiences that may include abuse, forced early marriage, domestic violence, genital mutilation or forced sterilization, abduction by armed members of conflicting parties, persecution for political, gender or sexual orientation, ethnic and religious reasons, threats and torture against themselves and their families, just to name a few. During the journey, migrant girls and women are exposed to the risk of abuse, mass rape and forced pregnancy, forced prostitution, labour exploitation, forced abortion, assault and threats with firearms, human trafficking, and detention. In both transit and destination countries, girls and women may be subject to lengthy and unpredictable asylum procedures, lack of women-centred and culturally sensitive services, lack of understanding of the host country's language and disorientation regarding the location of health and social services, difficulty in moving and independently accessing services without partners or semi-stranger compatriots, and gender or racial discrimination. In addition, they may be exposed to sexual exploitation, labour exploitation, begging, forced prostitution, revenge porn, forced marriage, forced abortion and sterilization, sexual violence and re-trafficking, forced drug and alcohol use, and forced surrogate pregnancies. All this increases in these women the sense of uncertainty and helplessness and the risk of developing PTSD, anxiety, depression and suicide attempts (5).

Awareness of the multiple violence suffered by women before, during and after the journey is a fundamental starting point to be able to help in the recovery of their mental health and wellbeing. As access to GBV services is still very difficult for a migrant woman, language barriers, lack of information, different perception and awareness of rights, precarious conditions of work, uncertain legal status and lack of solidarity network to rely on, are among the conditions that make their journey out of situations of violence even more problematic.

The way out from gender violence is a long and difficult path. Migrant women are not always able to bring the situation on the surface or to report their aggressors. A big challenge is the creation of teams of health professionals trained in gender-sensitive, culturally sensitive approach and in intercultural and interreligious competences. There is the need of more connections with ethnic and religious communities, vulnerable groups and ethnic minorities in the more peripheral areas of cities and in the countryside, and also to ensure health information in the main languages of GBV victims, language mediation services or interpretation in hospitals and health and social services. It is important to consider different types of psychosocial support pathways such as those based on skill life and not only on drug therapies, to foresee long-term care pathways not only in emergency and beyond the migrant's status, and to build up life projects also through social reintegration centres/workshops for autonomy (6).

In conclusion, APG23 believes that starting from border management, no Government can ever ignore the respect of human rights of people on the move, especially their right to life and health. No one should be robbed, beaten and humiliated and be victim of violence just because in search of a chance of dignity and a better future. These concepts are extremely linked with the right to physical and mental health, and we advocate for the right to health to be respected, protected and fulfilled for migrants also taking into consideration the many challenges that the most vulnerable groups, such as women and young girls, experience not only prior to starting the journey and along the way, but also once settled in a foreign country. We have a collective responsibility to advocate for and promote the mental and physical health and wellbeing of every human being that decides to look for a better life or is forced outside the country of origin. States have the duty to cooperate towards a better future for all.

(1) <https://www.apg23.org/it/progettomiriam/>

(2) https://www.apg23.org/downloads/files/La%20vita/Antitratta/Miriam/REPORT_%20Mental%20Health%20of%20migrant%20victims%20of%20GBV.pdf

(3) The report defines: Sexual exploitation is the actual or attempted abuse of a position of vulnerability, power, or trust, for sexual purposes, including - but not limited to - economic, social, or political gain from the sexual exploitation of another. Acts of sexual exploitation specifically include Sexual Violence. Demanding sex in any context or making sex a condition of getting assistance. Forcing someone to have sex or forcing them to have sex with anyone. Forcing a person into prostitution or pornography. Unwanted contact of a sexual nature. Forced Stripping. Forcing to use unsafe sexual practices. (page 6)

(4) Online: <https://www.unhcr.org/it/risorse/carta-di-roma/fact-checking/donne-rifugiate-la-violenza-molte-facce/>

(5) https://www.apg23.org/downloads/files/La%20vita/Antitratta/Miriam/REPORT_%20Mental%20Health%20of%20migrant%20victims%20of%20GBV.pdf

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