

# **HONDURAS**

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**MINISTRY OF FOREIGN AFFAIRS**

**REPORT OF HONDURAS ON IMPELEMENTATION OF THE BEIJING  
PLATFORM FOR ACTION (1995) AND THE OUTCOME OF THE TWENTY-  
THIRD  
SPECIAL SESSION OF THE GENERAL ASSEMBLY (2000)  
(For the period 1995 -2004)**

**Tegucigalpa, Honduras  
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# REPORT OF HONDURAS ON IMPLEMENTATION OF THE BEIJING PLATFORM FOR ACTION (1995) AND THE OUTCOME OF THE TWENTY-THIRD SPECIAL SESSION OF THE GENERAL ASSEMBLY (2000)<sup>1</sup>

## INTRODUCTION

Pursuant to the international responsibilities undertaken by the State of Honduras which require it to promote measures to reduce the gender inequalities between men and women, the Ministry of Foreign Affairs submits this country report to the Commission on the Status of Women for incorporation in the “*Review of the implementation of the Beijing Platform for Action and the outcome documents of the twenty-third special session of the General Assembly*” and in the consideration of the “*Current challenges and forward-looking strategies for the advancement and empowerment of women and girls*”. It must be stressed that this is the first occasion on which a report of this kind has been prepared jointly by the Inter-American Commission of Women (IACW) and the National Institute for Women (INAM), bodies which coordinate and monitor the international commitments of Honduras and the application of its gender-equality legislation and policies. Attention must also be drawn to the support received from the secretariat of the Office of the President, the United Nations Population Fund, the INAM technical team, and agencies and individuals in various sectors,<sup>2</sup> in particular the distinguished leaders of the women’s movement, who furnished information and suggestions for the preparation of this report.

The report describes the achievements and problems in the priority areas of the National Policy for Women, which is the governmental instrument for dealing with problems of gender inequality and constitutes at the same time the national mechanism for giving effect to the Platform for Action and the recommendations contained in other international agreements relating directly to women and girls. An effort was made to move beyond the merely descriptive to the analytical plane and to supply statistics, as far as possible, to demonstrate gender inequalities objectively and persuade decision-makers to support the measures designed to overcome these inequalities. The drafting of the report provided an opportunity to look in different directions: at what we have done, at what we are doing, and at what we still have to do. It enabled us to evaluate the measures carried out by the Honduran Government and by other social sectors in fulfilment of the commitments entered into by the world’s Governments. We know that we still have much ground to cover but we reaffirm our will to unite our efforts to achieve a fairer society, one in which women play the role assigned to them by history and by right.

Our thanks go to all the persons who supported us in this effort.

**Leónidas Rosa Bautista**  
**Minister for Foreign Affairs**

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<sup>1</sup> Prepared on the basis of the questionnaire.

<sup>2</sup> See list in annex 1.

## I. SUMMARY

According to the 2001 population and housing census, in that year the female population was larger than the male (50.4% and 49.6% respectively) and there were more women than men in urban areas (52.39%); and according to the 2002 household survey, 42.1 per cent of the population was aged under 15. The Honduras *Human Development Report 2003* noted that although the gender development index has shown a slight improvement in recent years (especially in health and education), the indicators from which the index is constructed still show substantial disparities, especially in terms of the income gap between men and women but above all in rural areas and in political participation by women.

The State of Honduras, specifically the present Government, has included in its Government Plan 2002-2006 the commitment “to support participatory arrangements which promote equality of opportunities and gender equity”,<sup>3</sup> and this is reaffirmed in the section on human development, which sets “the reduction of gender inequalities”<sup>4</sup> as one of the goals. This political will is being translated into concrete achievements, such as: the establishment of the National Institute for Women (INAM) by Decree No. 232-98 of 11 February 1999 and the approval of legislation in the CEDAW framework - progress in which INAM, IACW, the Legislative Commission on Women of the National Congress and the country’s women’s movement played a proactive role; and the official adoption by Executive Decree No. 015-2002 of the National Policy for Women: First National Equal Opportunities Plan, which raises policy in this area to the level of State policy.<sup>5</sup> The Act establishing INAM invests the head of this institution with ministerial status and the right to participate in the Social Cabinet and the Council of Ministers. The Act also establishes the National Governing Council for Women as the INAM governing body, with eight members drawn from governmental agencies and five from civil society. Other concrete manifestations of the political will to follow up on the Platform for Action include the formulation of sectoral policies, such as: the policy on gender equality in agriculture, the gender-equality policy of the Ministry of Natural Resources and Environment, the policy on sexual and reproductive health, the initiative for gender mainstreaming in the formulation of the national revenue and expenditure budget, etc.

As a result of the official adoption of the National Policy for Women: First National Equal Opportunities Plan 2002-2007, priority is now given to five areas showing the greatest disparities in the key development indicators, which coincide with the gender disparities according to the gender development index: health; education and means of communication; the economy and poverty; violence; and social and political participation; these areas were identified with the active collaboration of the women’s movement and the relevant State agencies.

One response to the big challenges involved in poverty reduction in general and women’s poverty in particular is the poverty reduction strategy itself, which takes a crosscutting approach to these challenges and also addresses them in the component “Strengthening social protection for specific groups”, which has an objective concerning equity and equality: to contribute to the integrated development of poor women by securing their full and effective participation in the country’s social, political, cultural and economic life and empowering them through exercise of their rights and enjoyment of equal opportunities in access to health, education, justice and decent incomes. INAM has also

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<sup>3</sup> *Plan de Gobierno 2002-2006*, p. 1.

<sup>4</sup> *Plan de Gobierno 2002-2006*, p. 12.

<sup>5</sup> 7 November 2002. Executive Decree No. 15-2002.

successfully initiated a process to furnish support to 16 municipal women's offices, a move consistent with the State's intention to stimulate local development through its decentralization and local development programme (PRODDEL), which is conceived as "an orderly process of systematic and selective transfer of powers, functions and resources to the municipalities".

Accordingly, the National Policy for Women is helping to make gender equality into a crosscutting focus in the projects and programmes stemming from the Government's economic and social policy and the processes of the modernization of the State. It also acts as a support in the negotiation and agreement of measures, at the level both of civil society and of cooperation agencies, designed to give effect to the Platform for Action and other international instruments. It is also the guiding focus of the Gender Equality Panel created under the poverty reduction strategy.

Progress has been made in some of the areas of the Platform for Action, but there is still much ground to cover, in terms of establishing gender perspectives on a crosscutting basis and mainstreaming them in national and institutional planning, before the goal of gender equality is attained. Altering perceptions and approaches within the State apparatus is a long-term task, for there persists in Honduras a traditional culture which sees men as the leading players on the social stage and restricts the opportunities and possibilities for women to secure access on an equal footing to the benefits of development.

## **OBSTACLES**

### **Structural:**

- The poverty of most of the country's population, which impedes civic participation. According to figures from the National Statistics Institute (INE), in May 2002 there were 3,169,471 people living in extreme poverty, 89.7 per cent of them surviving on incomes below one United States dollar a day; this situation is worse in the case of women, especially women heads of household.

### **Institutional:**

- Little awareness of and scant attention given to the National Policy for Women and the international agreements and treaties both in macro- and micro-processes and in the institutions of the branches of State power and municipal corporations; this restricts the role of the relevant agencies in giving effect to gender-equality measures.
- Lack of awareness and support on the part of some authorities when it comes to promoting the mainstreaming of gender issues in the State; this means that projects and programmes are designed and/or implemented without any gender perspectives, many of them merely reinforcing the traditional roles of women without giving any consideration to their social and production roles, thus reducing their opportunities to improve their living conditions and quality of life.
- Scant resources allocated to the agencies created by the Government for hiring qualified personnel to mainstream gender perspectives in plans, programmes and projects and try to satisfy women's requirements in terms of health, education, justice, production resources, and services.

- The uncompleted construction of a national information system producing sex-disaggregated data to facilitate the measurement of the effects and impacts of the work of public and private bodies to secure the rights of women and girls.

### **Socio-economic and political:**

- The scant involvement of women in political affairs. According to the *Human Development Report 2002*, women's representation in the National Congress is barely 8.6 per cent, and they take little part in other decision-making forums, as shown in section 3 of this Summary (Women and social and political participation).
- The failure of the country's various sectors to take the women's agenda on board as a means of helping to reduce the existing inequalities.
- The reinforcement of the sexist culture and discrimination against women in the mass media and among communicators of both sexes, who are unaware of or do not acknowledge women's social contribution in any area but their reproductive function.
- The inequalities in access to jobs and incomes. Despite some progress, the wage gap between men and women persists and women's jobs tend to be more unstable, a situation which is more obvious in businesses created as part of the process of globalization.

The challenge of implementing and monitoring of the Platform for Action and the recommendations made in other international agreements has been taken up with women in various sectors. This will provide support in any negotiations to ensure that part of the resources released by the forgiving of external debt will be directed towards the general attainment of the Millennium Development Goals (MDGs), in particular the central goal of the poverty reduction strategy: "To place the female human development index on an equal footing and raise it by 20 per cent by endeavouring to eliminate any form of discrimination against women, especially with respect to their access to good-quality education, jobs and democratic participation".

### **1. Women and education**

The Government of Honduras is aware that gender inequality constrains the full flowering of the individual and impedes countries' development to the detriment not only of women but also of men and the whole of society; it has therefore been successfully promoting, through the Ministry of Education, measures for the attainment of the strategic education objectives set out in the Platform for Action. Within the framework of the National Agreement on Change for Human Development, headed by the National Forum on Convergence,<sup>6</sup> and the Education Ministry's action plan and strategy for 2002-2006, the Government has entered into a national commitment to secure application of the existing gender legislation, for example the Domestic Violence Act, the Equal Opportunities for Women Act, and the National Policy for Women. This has led to the establishment and consolidation of inter-institutional coordination among public and private bodies with a view to making full use of their experience and the experience of international agencies which support activities connected with the rights of women and girls.

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<sup>6</sup> A body created in 1999 by a Special Act as a forum to discuss and suggest solutions to the country's problems and formulate a national project, which will include gender equity and equality as the focus for educational and social development.

## ACHIEVEMENTS

Attention may be drawn here to the high attendance rate of boys and girls in primary education in both urban and rural areas, especially in the 7-12 age group. The national differences in school attendance run in favour of girls by 5.9 and 5.4 per cent respectively in the 13-15 and 16-18 age groups; but the improvement in the education standards of girls in these two age groups has not led to better access to jobs or to improvement in their employment and incomes situation.

Between 1998 and 2001 the female illiteracy rate fell from 34.7 to 19.8 per cent, a bigger decline than in the male rate, which fell from 33.9 to 20.2 per cent in the same period. Although girls aged five to six lag behind boys by 2.1 per cent, the situation starts to change from age seven. The figures show a coverage of 85 per cent of girls aged seven to 12 in both rural and urban areas, with the attendance rate for girls being 1.2 per cent higher than the rate for boys. The higher attendance rate for girls increases to 5.9 per cent in the 13-15 age group. Although the attendance rate for both sexes declines from age 19, the decline is smaller for girls than for boys.<sup>7</sup> When it comes to higher education, although the female attendance rate was higher than the male in the period 1998-2001 (2.1 against 1.5 per cent), there remains an unfavourable gap for women. The male attendance rate in 2001 was 4.1 per cent, as against 3.8 per cent for females.

This progress is due *inter alia* to the extension of the school year throughout the country from 135 days in the 1990s to 200 days in 2000 and to the implementation of illiteracy programmes in collaboration with other public and private bodies, in which 50 per cent of the participants (aged over 15) are female. Among these programmes, the adult literacy and basic education programme (PRALEBAH), which ended in February 2004, helped 52 per cent of females to obtain the primary qualification on completion of the six levels taught over three years. Vocational training programmes were run throughout the country by the National Vocational Training Institute, the lead agency for vocational training in the informal education system in agriculture, industry, commerce and services. A total of 31,855 persons received training in 1997, and the coverage was expanded in 2002, with 99,632 participants, including 44,358 females, completing the courses successfully; the training for females was concentrated in the services sector. Other contributory factors included the updating of targets in the preparatory basic action plan for the transformation of the national education system and the redirection of content towards gender equity and equality in the National Core Curriculum, the instrument which sets the standard for the national education system.

An analysis of this information in the light of CEDAW, the Platform for Action and the Equal Opportunities for Women Act shows that these are only the first steps towards the effective establishment of the principle of equality of opportunities and treatment at all levels of formal and informal education. An effort will therefore be made to follow up on proposals for the review of the National Core Curriculum from the gender perspective in the teacher-training plans, programmes and schools in both formal and informal education, with a view to turning education into a tool for changing attitudes to the gender divide in employment, which has a most powerful impact on women's school performance and increases their drop-out rate owing to their double burden of production and reproduction, a burden aggravated in

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<sup>7</sup> Rosa Bravo, Ema Velásquez, Juan Carlos Castaldi, Sabina Schnell and Ariel Montes de Oca. *Pobreza en Honduras: Perspectivas de Género*. Secretariat of the Office of the President, Technical Support Unit and National Institute for Women, 2003.

the case of adolescent pregnancy. It is worth mentioning here that article 35 the Equal Opportunities for Women Act states that “pregnant students shall be granted maternity leave without prejudice to the continuation of their education”. An Education Map for the whole country is currently being prepared, with the support of cooperation agencies.<sup>8</sup>

## OBSTACLES

- Access to education is fair and egalitarian up to a point, but according to a January 2004 study a gap persists between the coverage and the quality of the service, reinforcing the lack of coherence between basic, adult, vocational, secondary and higher education and the socio-economic, political and cultural demands.<sup>9</sup>
- The correlation between education and employment is unfavourable for women. The progress in education has not meant increased access and entry to the labour market for women, since men without any education or with only primary obtain jobs more easily than women.
- Although there is scant information on gender equality and geographic location, according to figures from Education for All gender inequality in education persists in urban and rural areas, and was particularly apparent in the gross enrolment rate for the sixth grade in 2000: 77 per cent for boys and 85 per cent for girls in urban areas and 59 and 60 per cent respectively in rural areas.<sup>10</sup>
- Furthermore, according to the same source the indigenous population in Honduras fares badly where gender equality is concerned, owing to the persisting gender inequality in education, especially at the pre-basic and basic levels; this situation impedes progress at the national level.
- The gross rates of education coverage conceal persistent obstacles to the completion of at least six grades of schooling. Many pupils enrol but have to repeat grades and leave the system before reaching the sixth grade. In statistical terms, only 31.9 per cent of pupils complete their primary education in the statutory six years, and 53.9 per cent take an average of 9.4 years to do so (data disaggregated by sex).
- Lack of technical and financial resources for carrying out initiatives such as the improvement and expansion of secondary education, which would in turn provide an effective framework for regulating and protecting women’s education rights.
- Lack of governmental policies and strategies to guide and/or support measures to improve women’s access to communication technology and counteract male and female stereotypes based on inequality, violence and consumerism. It should be mentioned here that despite the improvement of the National Core Curriculum there is still a gender-based division of roles in domestic science and industrial arts subjects. The 1948 rules still apply, but the main problem is a sexist view of things.
- The persistence of violence against women and girls in all its manifestations, which is still regarded as a private problem.
- Discontinuation of the sex education and reproductive health handbooks, which has contributed to the high rate of adolescent pregnancy. In 2001, adolescent pregnancies accounted for 29.4 per cent of all pregnancies in the 15-18 age group.

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<sup>8</sup> Trade union organizations and other institutions of civil society have requested the Education Ministry to ensure that earlier trials conducted in the country are taken into account in the production of this Education Map.

<sup>9</sup> *El Heraldo* and the National Autonomous University (UNAH) established reading comprehension centres. *El Heraldo*, 24 April 2004, pp. 2 and 3.

<sup>10</sup> Higher rates for girls, as mentioned earlier.

## 2. Women and health<sup>11</sup>

According to PAHO/WHO, health is not merely the absence of sickness or pain but a state of full physical, mental and social well-being throughout the human life cycle. The work of the Ministry of Health has been monitored - in action in some cases - within the frame of reference of this proposition and the MDGs. It was found that five of the 10 priority areas for the period 2002-2006 relate directly to the health of women and children, including: health protection and promotion; reduction of maternal and infant mortality; reduction of mortality among under-fives; and reduction of the risk of transmission of HIV/AIDS. The measures are aimed mainly at improvement of the coverage and the quality and efficiency of the health services and at increased access and equality. In an effort to give effect to these priorities the Health Ministry coordinates activities with international agencies and public and private bodies, especially those working for the rights of women and children.

### PROGRESS

Every care and prevention programme has technical components which are executed through the national system of health services, with the participation of organizations of civil society. Major achievements in gender mainstreaming in the Ministry of Health include: the integration of components on a crosscutting gender approach in Essential Health Function No. 5 (Policy development and institution building in the planning and management of public health), in the annual operating plans of the Maternal and Child Department, and in the strategic plan to combat HIV/AIDS 2003-2007; increased female life expectancy at birth to 74 years in 2002; reduction of the total birth rate from 4.9 children per woman in 1993-1995 to 4.4 in 2001; slight improvement in the coverage of antenatal care in institutions from 82.29 per cent in 1998 to 82.6 per cent in 2001; decline in the proportion of caesarean births from 11.1 per cent in 1998 to 7.9 per cent in 2001; significant rise in the number of deliveries in institutions from 58.3 per cent in 1996 to 62 per cent in 2001; improved access by women to contraception from 50 per cent in 1998 to 61.8 per cent in 2001.<sup>12</sup> With respect to micronutrients (multivitamins, iron, folic acid), 72.1 per cent of the women receiving antenatal checks were given multivitamins, 45.3 per cent iron supplements, and 37 per cent folic acid.<sup>13</sup>

The Ministry of Health is carrying out measures to strengthen the comprehensive care of children: reactivation of the Interagency Coordination Committee; formulation of technical guidelines for the initiative to reduce infant mortality in the 28 public hospitals; consolidation of the comprehensive care strategy for children in 1,700 rural communities; and implementation of the comprehensive care strategy for common childhood diseases in four local hospitals.<sup>14</sup> Neonatal maternity care has improved. More than 45 per cent of the 298 municipalities had achieved rates of vaccination coverage of over 95 per cent as of September 2003; including Sabin - 46% (137), Pentavalente - 47% (141) and MMR - 56% (167). On the first Latin American Vaccination for Health Day in June 2003, 98 per cent of under-fives received a booster dose of Sabin vaccine, folic acid supplements were given to 501,243 women in the 15-24 age group, and information on the early detection of eye cancer was distributed to 500,000 mothers and fathers and other persons responsible for under-fives. This means that Honduras has one of the highest rates of vaccination coverage in Latin America.

<sup>11</sup> See annex 4 for fuller information.

<sup>12</sup> Ministry of Health. *Salud en Cifras 1997-2001*.

<sup>13</sup> National epidemiology and family health survey 2001.

<sup>14</sup> Danlí, Tela, Trujillo and La Paz.

With a view to strengthening the national care programme for adolescents, health personnel have been recruited at the regional level, and the health services for adolescents have been expanded by the initiation of six different activities in the health system's regions. A manual on standards of comprehensive care for adolescents with a gender perspective was drafted, approved and distributed, together with a comprehensive advice handbook for adolescents and a family planning guidance handbook for adolescent parents.

Measures were taken to prevent and combat maternal mortality under the comprehensive care programme for women, including the revision and updating of the standards for the comprehensive care of women to include a gender focus, the updating of the rules on obstetrical and neonatal emergencies, and the establishment of a technical group to support the regional initiative for the reduction of maternal mortality. The 28 public hospitals are participating in the maternal mortality reduction initiative. A study on the availability and use of essential obstetrical procedures was carried out in 25 Health Ministry hospitals and two hospitals of the Honduran Social Security Institute (IHSS). The introduction of a comprehensive care programme for men is at the proposal stage; here the main aim is "to provide sexual and reproductive health services in service units".

The principal achievements in the HIV/AIDS programme included the establishment of the national programme on prevention of the transmission of HIV from mother to child. Antiretroviral therapy (ART) was expanded in 2001 to cover 1,100 new patients in the five comprehensive treatment centres; there are now 1,400 ART patients. Five clinics were equipped to provide comprehensive care for persons with HIV/AIDS; 1,000 HIV/AIDS counsellors have been trained to work in the national system, together with 120 facilitators for the counselling network; and 40 municipalities have advisory clinics on prevention of the transmission of HIV/AIDS from mother to child.

## **OBSTACLES**

- Changes in the internal structure of the Ministry of Health, dismissal of technical personnel, and poor coordination among the various programmes.
- The reproductive health services have a very small budget. And one very obvious constraint is that where health is concerned women are still viewed from the standpoint of their reproductive role and not from a gender perspective.
- Although a start has been made on introducing the policy on a crosscutting basis, the expected progress has failed to materialize, owing to lack of resources for hiring personnel to mainstream gender perspectives in the Health Ministry and ensure their incorporation in its policies, plans and programmes.
- The impetus of the strategy for preventing morbidity and mortality among under-fives and producing epidemiological profiles disaggregated by sex has fallen off, and a high infant mortality rate is reported for the 1-4 age group (42 per 1,000 live births or 13 per 1,000 inhabitants).
- There are no clear policies for tackling adolescent pregnancies on a comprehensive basis; in 2001 they accounted for 29.4 per cent of pregnancies in the 15-18 age group.

- Little action has been taken to reduce maternal mortality<sup>15</sup> or to prevent deaths of women of childbearing age from HIV/AIDS, cancer of the neck of the womb, tuberculosis, malaria, dengue and violence.
- There are no clear technical policies on abortion as a public health problem although it remains the second commonest cause of hospital admission nation-wide, a situation which has not changed over the past 20 years
- Problems in the provision of obstetrical care. A study on the availability and use of emergency obstetrical services<sup>16</sup> revealed deficits in hospital infrastructure and in materials and equipment: only three hospitals had intensive-care units for dealing with obstetrical complications.
- Only 12 of the 27 hospitals studied have maternal mortality committees working to establish conditions to prevent maternal deaths, and only five hospitals are open 24 hours a day to deal with obstetrical emergencies.
- Defects in the application of the regulations on personnel qualifications in the childbirth and other reproductive health services.
- Failure to give priority to such matters as mental health, the quality of the services for women, the consolidation of women's self-determination and self-help, and their empowerment in health and other fields.
- The STI-HIV/AIDS programme concentrates on HIV/AIDS, owing to the characteristics of that disease, to the detriment of other sexually transmitted infections which have a powerful impact on reproductive health. As of December 2003, there were 20,283 cases of HIV/AIDS, 15,717 of them diagnosed and 4,566 asymptomatic. Of the 15,717 cases of AIDS, 59 per cent involved males and 41 per cent females; the main transmission paths are by homosexual contact and from mother to child.
- Shortcomings in the functioning of the information system. Statistics are usually not disaggregated by sex and they are published late. No figures are produced on sexual violence because this problem does not appear on the forms used by the Ministry's information system. The lack of gender indicators on health obstructs the analysis and monitoring of the various health policies, plans and programmes.

### 3. Women and social and political participation

Equality between women and men has been accepted as a fundamental human rights principle since the adoption of the Charter of the United Nations in 1945. Several international treaties, notably the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), require the signatory States to take action against discriminatory practices, and the preamble to CEDAW states: "*Convinced* that the full and complete development of a country, the welfare of the world and the cause of peace require the maximum participation of women on equal terms with men in all fields". The international conferences constitute means of promoting and the formal basis for invoking the right to equality. As a result of these conferences, various pieces of legislation recognizing women's human rights were either adopted or revised in the period covered by this report. It is worth mentioning that women's organizations played a leading role in this adoption and

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<sup>15</sup> Despite some improvement, the maternal mortality rate remains high (108 per 100,000 live births); the main causes of death are haemorrhages, hypertension disorders, and infections.

<sup>16</sup> Regina Fonseca Discua and Mirna Yanira Villanueva D. *Disponibilidad y Uso de Cuidados Obstétricos de Emergencia en 27 Hospitales de Honduras*. Ministry of Health, PAHO/WHO, United Nations Population Fund, Columbia University and the Honduran Social Security Institute. Honduras, 2003.

revision exercise. Their purpose, like that of the State, is to eliminate the marginalization of women from the decision-making process.

## PROGRESS

The period 1995-2004 has seen the publication of the Domestic Violence Act (1997), the Act establishing the National Institute for Women (1998), and the Equal Opportunities for Women Act (2000).<sup>17</sup> A bill on reform of the Municipalities Act is being drafted, with a view to legalizing the creation of the municipal offices for women, together with a bill on reform of the section of the Criminal Code dealing with offences against sexual integrity and personal honour, which include the offences of trafficking in women and the commercial exploitation of women and children.

Clear progress with respect to civic participation with a high representation of women was made in the composition of the Supreme Court of Justice, which was altered by means of a constitutional reform to comprise 15 titular judges appointed for a term of seven years; the means of appointment was also reformed by the establishment of an Appointments Board, on which civil society played a leading role.<sup>18</sup> For the first time in its history Honduras had a Supreme Court with more women than men members: nine against six.<sup>19</sup> And also for the first time, a woman presides over this branch of State power. Furthermore, women are also in the majority as official guardians and members of the government prosecutor's department: 58.5 and 55 per cent respectively. The progress also includes the participation of a woman as a presidential candidate in each of the last three elections. It is realized that changes in this area are not going to be achieved merely by means of legislation and that legislation must be backed by concrete measures such as the introduction of mechanisms for applying the legislation, raising awareness and providing training, especially with respect to information and education activities for women. The aim is for women to exercise active leadership to secure progress towards the equitable distribution of power between men and women and to support those women who have attained positions of power, with a view to ensuring that women's requirements and needs are included in the political agendas. Accordingly, the State, in conjunction with public and private bodies, has been introducing and/or backing initiatives which have led to **progress** in such areas as: the provision of data to facilitate the analysis of the situation of women in the exercise of power; the establishment of gender units in four State agencies, three of which are now in operation;<sup>20</sup> the mainstreaming of gender perspectives in the handbooks on local management methodology used by the Ministry of the Interior and Justice, and the training of technical personnel in their use; active participation in the sectoral panels on governance and human rights and on decentralization and local development; provision of technical back-up for the establishment and operation of the municipal offices for women; the agreement reached between members of the National Congress and the women's movement on the democratization of elections, including *inter alia*: equal (50%) opportunities for men and women to be hold posts filled by popular vote; introduction of an open preferential system with named candidates; and the mandatory requirement for political parties to comply with provisions on participation by women contained in the Elections and Political Organizations Act.

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<sup>17</sup> See the summaries in the annex 2.

<sup>18</sup> María Antonia Martínez, a distinguished lawyer and leader of the country's women's movement, was a member of the Appointments Board.

<sup>19</sup> One of the women judges resigned recently.

<sup>20</sup> The gender units in the Ministry of Agriculture and the Ministry of Natural Resources and Environment; the gender unit in the Ministry of Finance was recently closed down.

## OBSTACLES

- The prevailing culture of exclusion in political parties and other places where power is exercised, which is out of step with the evolution of the human race and of life in society and obstructs the civic representation of women in national affairs.
- The failure of the Executive to consider the women's proposal that the closed electoral system should be replaced by an open preferential system with named candidates in both internal and general elections and that a 50 per cent quota for women should be introduced for posts filled by popular vote and a 30 per cent quota in political parties, with penalties for parties which do not comply.
- Women's lack of access to and control of resources to finance political campaigns.
- Women's double burden of production and reproduction, which restricts their possibilities of acquiring information about their rights and their awareness of them, in particular the right to take part in public affairs.
- Poor judgement when it comes to choosing persons for decision-making posts at both local and national levels.
- Scant involvement of women in the adoption of economic and political decisions or in the exercise of power at the local, national and international levels - a situation confirmed below.
- Although women account for 50 per cent of voters, analysis of the six most recent elections shows limited access by women to posts filled by popular vote and to public office: there has been no improvement in women's parliamentary representation between 1985 and 2004, for they have not succeeded in obtaining more than 10 per cent of the seats - a situation consistent with what happens world-wide. Although the Equal Opportunities for Women Act came into force in 2000 and provides for a minimum 30 per cent quota for women with respect to posts filled by popular vote, the number of women titular deputies fell by 25 per cent in comparison with the previous election.<sup>21</sup>
- Women's representation as alternate deputies is also very small: 15.6 per cent, as against 84.4 per cent for men; and women's representation is even lower in the Central American Parliament, where they have been encountering setbacks: the 1993 election returned 19 titular deputies but only one woman; in 1997, 18 men and two women; and in 2001, 17 men and three women.
- Similarly, women are poorly represented in public posts filled by appointment: in the Government's 15 ministries there are three women ministers and three deputy ministers.
- The representation of women in mayoral office fell in the last three elections: from 30 mayoresses elected in 1993, to 28 in 1997 and to 27 in 2001.<sup>22</sup> In the 298 town halls, women currently account for 9.06 per cent of the holders of mayoral office, as against 90.93 per cent for men.

### 4. Women and the economy

Two important indicators of changes in the labour market are the evolution of the economically active population (EAP): for women workers and for child and juvenile workers. In 2002, women accounted for 51.8 per cent of the total labour force required by the economy for national economic production, and they contributed 33 per cent of the workforce in commerce and 94 per cent of unpaid domestic workers.

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<sup>21</sup> Blanca Dole. *Diagnóstico sobre Participación Política 2002*. INAM.

<sup>22</sup> There are currently 26, for one has died.

Women are concentrated in the labour force in the commercial and personal services branches. A study conducted by the Ministry of Labour and Social Security<sup>23</sup> indicates that women's participation in the labour market is determined by their numbers and the kind of work which they perform in the farm exports sector, in shrimp-exporting plants, in the operation of small rural agro-industrial units, and in the *maquilas* (assembly and finishing plants). But women's entry into the labour market does not mean an improvement in their living conditions: they earn less than men (on average, women earn the equivalent of only 47 per cent of what men earn)<sup>24</sup> and in most cases they do not enjoy the benefits provided for under the labour legislation. On the other hand, the figures indicate that households headed by women (25.1%) have a bigger per capita income than households headed by men; these figures should be borne in mind by economic analysts of both sexes, who take a restricted view of women's contribution to the economy and see no linkage between the productive and the reproductive spheres. Coordinated measures have been carried out by agencies of the governmental and other sectors to overcome the gender inequalities in employment and access to production resources; these measures have secured the progress described below:

## **PROGRESS**

Inclusion of a "Women and poverty" component in the National Policy for Women and a "Gender equity and equality" component in one of the programme areas<sup>25</sup> of the poverty reduction strategy, together with the identification of objectives, policy measures, and programmes and projects for women in various sectors.<sup>26</sup> Attention may also be drawn to the completion of studies based on statistics produced by the National Statistics Institute,<sup>27</sup> the availability of an employment database disaggregated by sex, and a system of employment indicators. Female employment increased in financial establishments (by almost 12%), followed by manufacturing, commerce and transport (by almost 9%), and there was a significant rise in the number of women employed in agriculture (8.5%); in this latter sector, the gender gap narrowed between 1995 and 1999, and increasing numbers of women engage in informal work in the urban farm sector.

The recruitment of qualified technical personnel by the Ministry of Labour to promote gender mainstreaming in its programming. The negotiation with the National Statistics Institute of the inclusion of the modules on "Access to and control of production resources" in the permanent general-purpose household survey. The formulation of the gender equality policy for agriculture. The lobbying of the National Agricultural Development Bank, which resulted in the establishment of equal financial ceilings in the rural women's and the rural mixed savings banks. The talks initiated with the Honduran Private Enterprise Council, workers' organizations, the Ministry of Labour and other ministries on the formulation of an employment and incomes policy with gender equality, and the production of a first draft of a bill on reform of the Equal Opportunities for Women Act with a view to expanding the chapter on equal opportunities in employment and social security. And lastly, the initiative to mainstream gender perspectives in the national budget, with the inclusion of gender aspects

<sup>23</sup> Sara Elisa Rosales, Rosibel Garay, Marina Martínez and others. *Situación Sociolaboral de la Mujer en Honduras*. Ministry of Labour and Social Security, 2001.

<sup>24</sup> *La Pobreza en Honduras*. Cited earlier.

<sup>25</sup> *Fortaleciendo la Protección Social para Grupos Específicos*, pp. 94 and 95.

<sup>26</sup> Preparation of women for work and support for women workers and businesswomen and the participation of indigenous and black women, as well as for information centres on women's rights and on prevention of violence in the family and care for its victims.

<sup>27</sup> *Diagnóstico de la Seguridad Social en Honduras. Estudio sobre el Salario Mínimo Legal. La Pobreza en Honduras*.

in the budget components and measures to raise the awareness of macroeconomists and senior officials in the various ministries, and to establish a non-reimbursable cooperation fund to consolidate and develop a strategy for securing progress towards the formulation of a budget policy with gender perspectives.

## **OBSTACLES**

- The persisting discrimination against women in the labour market, which aggravates their poverty by perpetuating inequality in the distribution of opportunities, resources and incomes, as well as in access to jobs and social services.
- Invisibility of the contribution to output made by women, young people of both sexes, and children who receive no payment and therefore produce no value added for the purpose of calculating GDP.
- Women's scant access to and control of production resources (land, information, technology, financing) or markets for their products.
- Exports diversification and trade liberalization are opening up opportunities for women in the production of goods and services for the external market, but the conditions are precarious: low wages, hard work and long hours, piecework and job instability. This situation has a direct impact on women in principle, but in the medium and long terms it affects the whole country through the social costs which must be borne in terms of treatment for women who fall sick as a result of the lack of social security and their unsatisfactory working conditions.
- One good example of this situation is that of women working in the assembly and finishing plants and the farm-exports industries, which employ more women than men owing to the nature of their products but present problems with respect both to the hiring system and to working conditions: low wages, working days of over eight hours, risks of chemical contamination, use of dangerous materials, excessive noise, etc.
- Some of the programmes and projects designed to improve women's economic conditions do not include measures on the release of women from work for childbearing or any monitoring and follow-up arrangements for measuring their effects and impact.
- Gender violence in private and in public damages women's physical and mental health and affects their economic performance.
- Although some top-level authorities do show some interest in having the poverty strategy include projects which will contribute to the economic and political empowerment of women, such projects are focused primarily on the question of women's vulnerability.
- The increasing numbers of girls in the economically active population (EAP). In the 10-14 age group girl workers used to account for 18.8 per cent of the EAP, as against 81.2 per cent for boys; but by 1998 the proportion of girls had increased to 29.4 per cent, as against 70.6 per cent for boys.<sup>28</sup>

## **5. Women and violence**

The first measures to improve the situation with regard to violence against Honduran women were introduced in the 1980s, an achievement due without any doubt to the women's movement, which had begun to bring the gender-discrimination debate to the public's notice, calling for society to build a situation in which all citizens have full and genuine access to the

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<sup>28</sup> Jorge Irías, Rosibel Garay and others. *Dianóstico General de la Situación de Trabajo Infantil en Honduras*. National Commission for the Gradual and Progressive Eradication of Child Labour. IPEC, ILO, UNICEF and Save Children Britannic.

fundamental rights and in which violence committed against women in private or public is not ignored.

Domestic violence increased from 3,000 cases in 2000 to over 5,000 in 2001 in the capital alone; in January 2003 there were 3,994 reports of domestic violence, and in the first three months of 2004 there were 792 reports, according to figures provided by the Office of the Procurator for Women.<sup>29</sup> Domestic violence remains a major public health problem; the 2001 ENESF<sup>30</sup> indicates that 24 per cent of the victims of domestic violence are separated and divorced women and widows in the 15-49 age group, while married women and women living in a relationship account for 17.8 per cent and single women for 7.2 per cent. Domestic violence increases in step with women's age and is lower only among women with higher levels of education.

In recent years, public violence and civic insecurity have increased among girls and adolescents, who represent one of the population groups at highest risk. In the second half of 2001, two violent deaths of female minors were reported each week. The total number of violent deaths of women was 261 in 2003; 31.4 per cent of them were reported as accidents and 28.7 per cent as murders.

Although sexual violence is one of the commonest types of violence (now boosted by trafficking in children for sexual purposes), it is usually ignored as a social problem. "A study on sexual violence against women and children based on information taken from the reports found that 90 per cent of the child victims were girls and 10 per cent boys. Sexual attacks accounted for 52 per cent of the reports concerning girls aged under 11".<sup>31</sup> Combating violence against women is not a task for the State and its public policies alone; the scale of the problem demands effective coordination with women's organizations and other private bodies.

## **PROGRESS**

The ratification in April 1995 of the Inter-American Convention on the Prevention, Punishment and Eradication of Violence against Women, which entered into force in June of that year, was followed by major progress: the Domestic Violence Act, the Family Code, the Equal Opportunities for Women Act, and reforms of the Criminal Code. Under the new Code of Criminal Procedure, domestic violence offences may be prosecuted automatically by the Public Prosecutor. Honduras has three agencies responsible for receiving reports of domestic violence: the Office of the Procurator for Women and the Office of the Public Prosecutor, which are represented in the country's largest towns, and the special domestic violence courts, which are generally used by people in rural areas; family guidance centres were established in 1993 under the auspices of the Ministry of Health.

Creation of the Office of the Procurator for Women, the family guidance centres, and the special domestic violence courts, which issue protection orders and receive and process

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<sup>29</sup> "A woman is beaten up every 20 minutes". *El Heraldo*, 29 March 2004, p. 4.

<sup>30</sup> National epidemiology and family health survey.

<sup>31</sup> *Explotación sexual comercial de niños, niñas y adolescentes en Honduras*. ILO, p. 22.

reports in accordance with the Domestic Violence Act. The operation, with support from private bodies, of three refuges for women victims of violence. The approval of the regional project “Gender perspectives in the modernization of police institutions and in civic security”, which introduced training to reduce gender bias within and outside the police forces as a response to the civic security needs. The establishment of a legal and institutional framework for protecting girls in the context of the sexual and commercial exploitation in Honduras.<sup>32</sup> The design of a module on violence for inclusion in the household survey.

## **OBSTACLES**

- The general attitude of permitting and tolerating gender violence and domestic violence in all their manifestations.
- The limited capacity of some of the agencies created by the State to address this problem and respond effectively to reports. For example, the Office of the Public Prosecutor has only four women’s procurators, and it is the Office of the Procurator for Women which attends to most of the cases (an average of 90 cases per procurator); this has an adverse impact on the quality and effectiveness of the work. In the special domestic violence courts only 14.84 per cent of reports result in final sentences, while only 2.1 per cent of the reports received by the Office of the Procurator for Women lead to prosecutions, and only 36 per cent of this total result in convictions.
- The lack or underdevelopment of national institutional machinery for the prevention of this violence and the protection of the rights of its direct and indirect victims.
- The lack of an operational network to facilitate coordinated and sustained efforts by public agencies and the alliance with private bodies by sharing and learning from experience.
- The low awareness level and scant training in gender issues of officials of the justice system and other related agencies, which impede the provision of quality governmental services in the struggle against domestic violence.
- The ignorance of most Honduran women of the legislation designed to protect their right to lead lives free of violence.
- The promotion of the rights of women victims of violence in a context of poor provision of agencies offering the necessary services; and the serious financial problems of the refuges.

The experience of NGOs working to prevent domestic violence and provide care for its victims should be utilized by the State as it addresses this problem, which is one of the principle causes of female mortality.

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<sup>32</sup> *Enfoque de Género en la Modernización de las Instituciones Policiales y en la seguridad ciudadana*. Prevention policy of Honduras, 2003.

## II. INSTITUTIONAL MECHANISMS FOR THE ADVANCEMENT OF WOMEN

The creation of institutional mechanisms is directly related to the formulation, promotion and implementation of public policies on gender issues in Honduras on the basis of: **Article 60 of the Constitution**, which declares that “all Hondurans are equal before the law” and that discrimination by reason of sex or class or any other discrimination which impairs human dignity shall be punishable by law; the **State Modernization Act**, which provides that “the State shall be organized in such a way as to guarantee its inhabitants justice, freedom, culture and economic and social well-being”. Specific legislation has also been adopted on gender issues, including: the **Act establishing the National Institute for Women (INAM)**, which confers on INAM a mandate to secure “the full integration [of women] in the sustainable development process on the basis of gender equality both in social and in economic, political and cultural affairs”. This mandate was reinforced by the adoption of the **Equal Opportunities for Women Act**, which stipulates the State’s responsibility for formulating and executing public policies in the fields of health, education, environment, culture, communication, employment and social security, means of production, and involvement of women in decision-making within the structures of power. All of this derives from the binding international commitments signed and ratified by Honduras, such as the **Convention on the Elimination of All Forms of Discrimination against Women** and the **International Covenant on Economic, Social and Cultural Rights**, supplemented by the **Platform for Action adopted at the Fourth World Conference on Women**.

There are institutional mechanisms, already mentioned above, for the design, execution and monitoring of policies for the advancement of women and the incorporation of gender perspectives in State legislation, policies, programmes and projects: the National Congress’s Commission on Women and Inter-Institutional Commission on Children and the Family, the gender units in central and decentralized public bodies, the Gender Equality Panel, the Inter-Institutional Technical Committee on Gender Issues, the Panel on Gender and the Economy, the municipal women’s offices (now being opened), and the involvement of women in the transparency and anti-corruption commissions. Institutions have also been conducting experiments with the crosscutting approach which enjoy strategic priority, for example in health, the Judiciary, the National Commission on Informal Education (CONEANFO), and the National Vocational Training Institute (INFOP). The creation of these institutional mechanisms is regarded as progress for Honduras, especially as they function as coordination forums with few or no financial resources. Another achievement is the coordination of activities between the lead agency for the National Policy for Women, agencies of the three branches of State power, civil society, and international cooperation bodies. In terms of progress, mention must also be made of a study on the institutional gender framework in the State, which includes a proposal for a **system for mainstreaming gender perspectives on a crosscutting basis in the public sector**, which is still on the table.<sup>33</sup>

The institutional mechanisms have enjoyed the operational support of international cooperation bodies, as well as their back-up for project execution in the areas covered by the National Policy for Women: out of 21 projects aimed at a female target population, 17 were implemented by the Government and four by NGOs. Most of the cooperation funds have been allocated to health and the economy.<sup>34</sup>

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<sup>33</sup> Mariela Arce and Narda Meléndez. *Revisión del marco institucional de género en el Estado*. Presidential Commission on Modernization of the State, April 2002.

<sup>34</sup> See annexes.

## OBSTACLES

- Assignment of very few budgetary resources for the operation of the institutional mechanisms, which limits their capacity to respond to the demands received. For example, INAM currently has a budget of 9.4 million lempiras, equivalent to \$US 522,000, plus £US 2.3 million from international cooperation agencies, to be spent over three years. The lack of funds undermines the sustainability of the measures. A similar situation is found in the other institutions described above.
- The activities of the bodies created to mainstream gender perspectives in the State and promote and protect women's rights often go unrecognized even though these bodies are essential if the obstacles to the application of the international treaties and agreements relating to women and girls signed and ratified by Honduras are to be overcome. An effective response to these challenges requires strengthened institutions with sufficient human and financial resources to attain the targets which have been set.
- The tendency for measures to be discontinued when the Government changes, which makes it difficult to develop institutional coordination with constant feedback and an effective presence vis-à-vis the State, especially with respect to its reform processes.
- The underdevelopment of technical and methodological skills for applying theoretical gender knowledge in the daily work of the institutions.
- Scant participation by women from private bodies, particularly bodies belonging to the women's movement, in the forums which are already functioning, for their participation is an important factor in the creation and consolidation of a national platform in favour of the mainstreaming of gender perspectives in strategic agencies which have a role to play in the determination of national priorities and the adoption of binding plans.

## MAIN CHALLENGES AND ACTIONS TO ADDRESS THEM

Fulfilment of the commitments undertaken at the Fourth World Conference on Women will require action in the following areas:

**Challenge:** To strengthen over the next five years the institutional arrangements and the capacity of the responsible agencies to implement measures to secure gender equity and equality (INAM, IACW, gender units, Office of the Procurator for Women, family guidance centres, etc.).

**Response:** Introduction of a system for the mainstreaming of gender perspectives in the State on a crosscutting basis with a view to establishing consistent, interconnected and long-term operational processes which will put an end to improvisation, lack of coordination, and duplication and help to secure recognition of gender policies as policies of the State. Continuation of the negotiations to secure bigger appropriations from the national budget and a stronger flow of funds from international cooperation agencies. Incorporation of gender perspectives in the five-year National Plan 2002-2006 and in other national plans.

**Challenge:** Although the main challenge is the implementation of all the measures contained in the National Policy for Women and the international agreements and treaties, there are some specific actions requiring priority.

**Challenge:** Incorporation of gender perspectives in the national budget from 2006. The negotiations will have to be conducted this year with the Ministry of Finance.

**Response:** Bringing influence to bear on the Government at the highest level, by means *inter alia* of awareness-raising activities and negotiations. Creation of a specialized technical group in the Ministry of Finance.

**Challenge:** Determination in the short term of a joint strategy shared by the State's various gender institutions.

**Response:** Convening of meetings to identify interests and needs, share experience and formulate joint measures.

**Challenge:** Expansion over the next two years of the forums for interaction among the State's various gender agencies, the women's movement and private bodies.

**Response:** Promotion of their participation in sectoral panels and in meetings convened by INAM or IACW to negotiate agendas of common interest deriving from the policies and political agreements promoted by the women's movement, as well as from the Platform for Action, the Millennium Development Goals and the other international accords which constitute priorities for Honduran women.

**Challenge:** Commissioning by mid-2005 of a national information system on women and girls.

**Response:** Implementation of the agreement already signed with the National Statistics Institute and the corresponding operational plan, as well as the agreements signed with governmental agencies on the provision of statistics disaggregated by sex.

**Challenge:** To study the situation of women migrants and migrant families in order to lay the foundations for measures to furnish them with support in key areas.

**Response:** Conclusion of research agreements in 2005 and 2006 with public and private universities. Use of the existing information on migration held in the National Statistics Institute.

**Challenge:** To reduce the trafficking in women and children for sex purposes.

**Response:** Dissemination of the research carried out in this area and continuation of inter-agency coordination.

It may be said in conclusion that there is clear evidence of substantial progress in the fulfilment of the commitments undertaken at the Fourth World Conference on Women and that there are many challenges for the future. The specific weaknesses in each sphere can be overcome if good use is made of the structures, culture and activities in each context in order to continue the existing measures and determine technical and political strategies to consolidate the progress made and sustain on that basis proposals, programmes and projects which will help to improve the status and situation of women in society.

## ANNEX 1

### List of key sources of information who attended the workshops for discussion of the report

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**ANNEX 2**  
**Legislation concerning women adopted or amended in the period 1995 -2004**

<b>Legislation on violence against women</b>	<b>Date of adoption or amendment</b>	<b>Summary</b>
Domestic Violence Act	11 September 1997; entered into force on 15 February 1998 by Decree No. 132-97	Special legislation to prevent, punish and eliminate domestic violence against women; provided women for the first time with a legislative instrument offering greater protection and clearly characterizing the different forms of violence; established a special scale of punishments and a special procedure for reporting domestic violence between partners. Several State agencies are involved in the application of the Act's provisions. The Act also prescribes measures for the design of policies and action plans for securing structural changes in a society which generates and propagates violence against women
Amendments to the 1983 Criminal Code	1997	The amendments eliminated the sexist characterization of criminal offences such as rape and rape of minors, indecent behaviour, abduction, and trafficking in women, as well as discrimination amongst women in terms of legal protection when the severity of the punishment depended on a woman's "good" or "bad" reputation. Imprisonment was replaced by house arrest in the case of pregnant or breastfeeding women. The amendment process provided an opportunity to introduce new types of offence such as sexual harassment and violence in the family (by Decrees Nos. 191-96 and 59-97)
New Code of Criminal Procedure  Family Code		During the adoption of the new Code there was a risk of returning to the characterization of domestic violence as a privately actionable offence, as it was treated in the first draft of the text, but timely action by Honduran women's organizations ensured that offences involving violence in the family may now be prosecuted automatically by the Public Prosecutor's Office, even when the offence is categorized as one requiring a private complaint. If the investigation of cases had been made subject to the requirement of a complaint by the victim, a situation of impunity would have been established, for we know only too well that women are reluctant to report the attacks to which they are subjected - owing to the cycle of violence and their unequal status vis-à-vis men in the relationship of power. This text does not provide a definition of domestic violence or special protection for women's rights, being based instead on considerations of equal justice for both

		partners in their family relationship, but in practice the interpretation is a broad one recognizing physical, psychological, sexual and economic violence.
Equal Opportunities for Women Act	11 April 2000 (Decree No. 34-2000)	This legal instrument lays down guiding principles for preventing and eliminating gender-based discrimination and calls for the adoption of public policy measures to promote equality of opportunities and help to alter patterns of social and cultural behaviour which perpetuate the idea of women's inferiority in the public and private spheres. The Act offers a useful framework for eliminating the situation of subordination of women in Honduras, for it promotes steady progress towards reversal of the sexual roles which facilitate violence against women; it also facilitates the application of the Inter-American Convention on the Prevention, Punishment and Eradication of Violence against Women, especially with respect to the promotion of the right of all women to a life free of violence, including <i>inter alia</i> : (a) the right to be free of all forms of discrimination; and (b) the right to be valued and receive education free of stereotyped patterns of behaviour and social and cultural practices based on concepts of inferiority or subordination. The Act has been subjected to harsh criticism since its adoption on the ground that it is a merely declarative text. But despite its limitations the Act is regarded as a major step forward in securing formal recognition of women's right to equality of opportunities in the social, economic, cultural and political fields.
Act establishing the National Institute for Women (INAM)	1998 (Decree No. 232-98)	INAM is an independent social development institution; it has juridical personality and its own budget. It enjoys technical and managerial autonomy, and its head has ministerial rank under the Act. One of its most important achievements was to secure an INAM presence at meetings of the Council of Ministers. The creation of INAM marked a major step forward in the struggle to achieve genuine equality for women, for it facilitates the establishment of a political framework for the advancement of women, coordination with other governmental policies and agencies, promotion of legislation, channeling the proposals of the women's movement, encouraging participation in civic affairs, and identifying and allocating resources. Since 2000 INAM has been involved in the joint formulation of the National Policy for Women, and in October 2002 the Office of the President of the Republic approved this Policy, by Decree No. 013-2002, as the First Equal Opportunities Plan 2002-2007, and as a State policy having binding force. The subject of violence against women is one of

		the priorities of the Policy.
Family guidance centres	9 June 1993 (Executive Agreement No. 0079)	These centres operate under the Mental Health Office of the Ministry of Health. They were established as a means of monitoring and defending human rights by preventing physical, psychological and sexual violence in the family and providing protection and support for its victims. The Decree establishing the centres states that their sphere of intervention is the family and that, in addition to the protection of the security and personal integrity of the members of the family group, the legal benefit is the protection of the family as an institution. There are currently 13 centres in operation for the whole country, but only three of them have the four professionals stipulated by law.
Act establishing the National Commissioner for Human Rights		The creation of this institution was promoted by the women's movement, which succeeded in having the question incorporated in the debate. The idea is that one of the primary tasks of the new institution will be to defend the human rights of women and in particular to enhance awareness of the unequal distribution of power. At present it is competent to institute legal proceedings in cases of domestic violence against women and it encourages the submission of reports of such cases to the Public Prosecutor's Office. The Commissioner also has the power to receive reports of failure to apply or faulty application of national legislation and to take action on his own motion against officials of the justice system guilty of negligence in the implementation of the Domestic Violence Act.

**ANNEX 3**  
**Ratifications of conventions, agreements and laws and of amendments to laws pursuant to commitments undertaken by Honduras approved by the National Congress**

No	Law/Bill/Ratification	Instrument	Date
	<b>Ratification of conventions/agreements:</b>		
1	Convention on the Rights of the Child	Decree No. 75-90	24 July 1990
2	Convention for the Suppression of the Traffic in Persons and of the Exploitation of the Prostitution of Others	Decree No. 120-92	1 September 1992
3	Inter-American Convention on the Prevention, Punishment and Eradication of Violence against Women (Convention of BELEM DO PARA)	Decree No. 72-95	24 April 1995
	<b>New legislation:</b>		
1	Health Code	Decree No. 65-91	28 May 1991
2	Family Allowances Act	Decree No. 127-91	15 October 1991
3	Agriculture Sector (Modernization and Development) Act	Decree No. 31-92	5 March 1992
4	Family guidance centres	Agreement No. 0079	9 June 1993
5	Family guidance centres and their regulations	Agreement No. 0079 Agreement No. 0153	9 June 1993 5 July 1993
6	Family guidance centres regulations	Agreement No. 0153	5 July 1993
7	Act on special treatment for persons of the third age, retired persons and persons in receipt of disability pensions	Decree No. 220-93	1 October 1993
8	Code on Childhood and Adolescence	Decree No. 73-96	30 May 1996
9	Domestic Violence Act	Decree No. 132-97	11 September 1997
10	Act establishing the Honduran Institute for Children and the Family	Decree No. 199-97	17 December 1997
11	Act establishing the National Institute for Women (INAM)	Decree No. 132-98	29 August 1998
12	Development of Alternative Non-Formal Education Act	Decree No. 313-98	18 December 1998
13	Special HIV/AIDS Act	Decree No. 147-99	9 September 1999
14	Equal Opportunities for Women Act	Decree No. 34-2000	11 April 2000
	<b>Amendments to legislation:</b>		
1	Article 19 of the Elections and Political Organizations Act		Submitted on several

			occasions since March 1993
2	Title II of the Family Code		6 July 1993
3	Title IV of the Criminal Code		7 July 1993

## ANNEX 4

### Supplementary information on health

The State of Honduras has been making efforts to eliminate gender disparities in the various spheres of national life. The Ministry of Health is one of the governmental agencies which has been carrying out measures to support this national process through the application of domestic legislation and the international treaties signed and ratified by the Government of Honduras. In addition, as the summary shows, a number of national projects have been formulated and started up, demonstrating the Government's political will and consolidating the process. Five of the Ministry's 10 priorities for 2002-2006 relate directly to the health of women and children: to mainstream the protection and promotion of health from a gender perspective as a fundamental priority in public and private integrated development programmes; to encourage the adoption of healthy practices and habits by the general public, particularly schoolchildren and adolescents; to reduce maternal and infant mortality, especially mortality among under-fives; to reduce the risk of transmission of HIV; and to improve access to health services as well as their coverage, equality, quality and efficiency. In order to give effect to these priorities the Ministry is coordinating measures with public and private agencies, NGOs (especially ones working for the rights of women and children) and international organizations.

Within the Ministry, the measures adopted under the priorities are carried out through the technical components of each care and prevention programme, the national system of health services, and the activities of organizations of civil society. This approach is outlined in the various documents providing guidance for the Ministry's work, such as: the guidelines for the incorporation of gender perspectives on a crosscutting basis in Essential Health Function No. 5 (Development of policies and the institutional capacity for public-health planning and management); the annual operational plans of the mother and child unit (technically the Integrated Family Health Department); and the strategic plan to combat HIV/AIDS 2003-2007.

Within this context, attention may be drawn to the following **principal areas of progress in women's and children's health**. Female life expectancy at birth rose from 71.78 years in 1998 to 74 years in 2002. Where reproductive health is concerned, in 2001 the coverage of antenatal care in an institution stood at 82.6 per cent, up from 82.29 per cent in 1998; childbirth in an institution rose from 34.66 per cent in 1998 to 82.6 per cent in 2001; the proportion of caesarean deliveries fell from 11.1 per cent in 1998 to 7.9 per cent in 2001; and the proportion of women using contraception rose from 50 per cent in 1998 to 61.8 per cent in 2001.<sup>35</sup> With regard to micronutrients (multivitamins, iron, folic acid), 72.1 per cent of women attending for antenatal checks stated that they were receiving multivitamins, 45.3 per cent iron supplements, and 37 per cent folic acid, according to the national epidemiological and family health survey 2001.

The **other progress achieved in 2003**<sup>36</sup> is described below:

**Integrated child health programme**. The Inter-Agency Committee on Integrated Care for Children was reactivated. The technical guidelines for the project on reduction of infant mortality are being implemented in the 28 public hospitals. The strategy for integrated

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<sup>35</sup> Ministry of Health. *Salud en Cifras 1997-2001*.

<sup>36</sup> Ministry of Health. *Informe de Logros por Programa 2003*.

child care was introduced in 1,700 communities. The strategy for comprehensive treatment of childhood diseases was implemented in four local hospitals (Danlí, Tela, Trujillo and La Paz). Neonatal maternal care improved following the training of 18 specialists, 23 general practitioners and 67 professional nurses in various health regions. As of September 2003, over 45 per cent of the 298 municipalities had achieved a vaccination coverage of more than 95 per cent: Sabin - 46 per cent (137); Pentavalente - 47 per cent (141); and MMR - 56 per cent (167).

**The following results were achieved at the first Latin American Vaccination for Health Day in June 2003:** 933,440 under-fives (98 per cent) received a booster dose of Sabin vaccine; promotion and preventive activities were carried out, with vitamin-A supplements distributed for 38,585 infants aged under 12 months, 539,700 children aged 1 to 4, and 10,009 new-born babies, as well as folic acid supplements for 501,243 women of childbearing age in the 15-24 age group and information on the early detection of eye cancer (retinoblastoma) in under-fives for 500,000 mothers, fathers and other persons responsible for under-fives.

**Food security programme.** The handbook on the hospital treatment of children suffering from severe malnutrition was revised to incorporate quality indicators, and its use was monitored after reprinting. A handbook on children suffering from slight malnutrition was produced for use by volunteer health workers. An exercise to diagnose malnutrition among under-fives and pregnant and breastfeeding women was carried out in 14 municipalities rendered vulnerable by drought in the departments of Choluteca, Valle and El Paraíso. A draft version of a national plan to reduce the incidence of anaemia in children and women was also produced.

**National programme on care for adolescents.** Health personnel were recruited at the regional level to consolidate the programme, and the availability of services was improved by the opening of six different facilities in the health regions. A handbook on comprehensive care standards for adolescents was drafted, approved and distributed, and handbooks were produced on integrated counselling for adolescents and on family planning advice for adolescent parents.

**Access to services and comprehensive health care for women.** The rules on emergency obstetrical treatment and on care of new-born babies were revised and updated, and a technical lead group was established to back up the regional initiative to reduce maternal mortality; this initiative is being pursued in the 28 public hospitals. A study was made of the availability and use of essential obstetrical services in all the hospitals run by the Ministry of Health and the Honduran Social Security Institute (IHSS); the handbook on the rules for emergency obstetrical treatment and on the care of new-born babies was revised and updated in the light of the study's findings, and personnel are being trained in its use.

**Comprehensive care for men.** An inter-agency and inter-programme technical group was established under the programme on comprehensive care for men run by UNFPA, PAHO and Engender Health. The Health Ministry ran programmes on AIDS and mental health, and a men's workshop was held in June 2003 with the principal aim of "Delivering sexual and reproductive health services in service units". A study was produced on men in Central America: "Promotion of recourse by men to the sexual and reproductive health services". In July 2003 a lead support group was formed for the programme on comprehensive care for men at the operational level as a result of the workshop held in June of that year; it has 20

members working in the regions and locally. The programme for men was established, with an operational structure which will include an interim chief of Department from 2004.

**HIV/AIDS programme**. The national programme to combat HIV in mothers and children was established, and the coverage of the programme to prevent the transmission of HIV from mothers to children was increased by 20 per cent. As of June 2003, counselling had been given to a total of 7,036 pregnant women, and 6,088 of them took the diagnostic test; 53 of these women (0.87%) were found to be HIV-positive and 26 began antiretroviral therapy (ART). The number of ART patients rose by 300 per cent. This meant 1,100 new patients in the five comprehensive care centres in 2002; there are currently 1,400 ART patients, and ART drugs have been acquired for 2,000 patients over the next 12 months. A monitoring and evaluation unit was set up in the STI-HIV/AIDS Department. Counselling has been given to 31,840 HIV/AIDS sufferers: 17,622 females and 12,218 males. Five integrated-care clinics for persons with HIV/AIDS were established in Tegucigalpa, Tela, La Ceiba and Choluteca. A thousand counsellors and 120 facilitators were trained to staff the national HIV/AIDS counselling system; 40 municipalities have clinics offering advice on prevention of the transmission of HIV from mothers to children.

**Prevention of domestic violence and violence in the family and care of the victims**. A total of 27,050 persons received attention under the family counselling programme, most of them women and children. Five new local “networks against violence” were set up, bringing the national total up to 58 networks supporting the family counselling programme. A hundred women’s self-help and support groups were formed in the local networks, together with 50 men’s groups consisting of perpetrators of domestic violence referred by the family courts or joining of their own accord. A domestic violence and mental health action plan was produced.

## **Problems encountered**

### **General**

1. The Ministry of Health has undergone several changes in its structure and in the assignment of persons responsible for coordinating gender activities in the health field. This has caused dislocations in its work, so that it has not implemented in good time and efficiently the measures required for fulfilment of the commitments undertaken by Honduras under the various agreements and other legislation which it has adopted both nationally and internationally.

2. There is a persisting problem with the information system, which generally speaking does not furnish statistics disaggregated by sex; in any event the statistics are published very late: at present, the only information available is for 2001, although some 2003 figures have been obtained from interviews. There is also a problem with the mechanism for collection of data on gender violence, for this subject does not appear on the forms used by the Ministry’s information system. Three years ago a project was carried out in the Department of Olancha, with CDC support, to test a new information system which would include disaggregation by sex at the municipal level. But progress has been slow, and there appears to be no possibility of extending the project to the national level.

3. The health statistics do not use gender indicators which would facilitate analysis and monitoring of the various health policies, plans and programmes. This area requires strengthening.

4. The effort to incorporate gender perspectives in policies, plans and programmes, in accordance with the document drafted for that purpose, has slackened off.

5. The strategic alliances forged with various bodies must be consolidated if the work plans are to be implemented and the country's commitments fulfilled.

6. Coordination among the different programmes in the Ministry is still weak; coordination is a critical factor and it must be improved if progress is to be made in the mainstreaming of gender perspectives and in the prevention of domestic violence and provision of care for its victims. It must be stressed in this connection that the mainstreaming initiative has still not been incorporated in the policy for reform of the health sector.

**Specifics points:**

7. With regard to services for children, no research is conducted on the gender inequalities with a view to facilitating decisions based on the evidence.

8. The strategy for prevention of morbidity and mortality among under-fives using epidemiological profiles disaggregated by sex is currently in abeyance.

9. Measures must be devised to prevent adolescent pregnancies and provide services for pregnant adolescents, who accounted for 29.4 per cent of all pregnancies in the 15-18 age group in 2001.

10. Pregnancy services are in a very poor state in terms of the quality of the care and of the personnel attending to women seeking reproductive health services.

11. The reproductive health services have a very small budget and are generally sustained by external cooperation resources; expenditure must be rationalized and the work done in public and private services must be strengthened in the light of the common objectives. The programme on comprehensive care for men must have its own budget and stop taking funds from the programme on comprehensive care for women, especially in view of the findings described in paragraph 12 below.

12. A study on the availability and use of emergency obstetrical services<sup>37</sup> found that:

- There are a number of deficits in terms of infrastructure, equipment and materials in all the hospitals visited, and this situation has a direct impact on the quality and diligence of the care.
- Only the IHSS hospitals in Tegucigalpa, the Mario Catarino Rivas hospital, the Maternal and Child hospital, and the El Progreso local hospital in Yoro have intensive-care units for dealing with obstetrical emergencies.
- The proportion of personnel assigned to the services of the Emergency Operations Centre (COEm) varies between 12 and 37 per cent of the total number assigned to hospital care

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<sup>37</sup> [Text of footnote missing from Spanish original.]

in each of the hospitals surveyed. However, these emergency personnel provide between 33 and 82 per cent of all hospital care, indicating that the demand for gynaecological and obstetrical personnel is greater than the present supply.

- The interviews revealed that 12 of the 27 hospitals surveyed have active maternal mortality committees. This means that more than half of the hospitals need to set up a committee to examine mortality with a view to improving hospital conditions and avoiding maternal deaths.

An analysis of six indicators gave the following findings:

- Indicator 1 describes the number of COEm establishments available to the public; it showed that five of the 27 hospitals surveyed did not meet the criteria for classification as COEm establishments (Salvador Paredes hospital in Trujillo and the Roatán, Puerto Lempira, General San Felipe and Leonardo Martínez hospitals). Of the 22 hospitals classified as advanced COEm establishments, only five were open 24 hours a day throughout the year. And only three of them were run by the Ministry of Health and two by the IHSS. There were no basic COEm establishments.
- According to the population criterion, there ought to be one advanced and four basic COEm establishments for every 500,000 inhabitants. This means that Honduras ought to have at least 12 advanced and 55 basic COEm establishments. Although there are more advanced establishments than needed, they are not open 24 hours a day and their location makes them less than ideally accessible to the people that need their services.
- Indicator 2 shows the geographical distribution of the COEm establishments; the country's eastern region has no coverage.
- Indicator 3 measures the proportion of all babies delivered in basic and advanced COEm establishments (the minimum acceptable proportion is 15 per cent). All the hospitals were found to be above this minimum level, but in some cases, in the Southern and Western hospitals for example, the establishments handle more deliveries than they should according to their geographical location, being inundated with childbirth cases.
- Indicator 4 measures the demand met by the COEm establishments, which should be 100 per cent of the total number of emergency cases expected. The results show that all the regional hospitals and two national hospitals handle more emergency cases than the number estimated for their area, perhaps because they take cases referred from local hospitals. The only local hospital which handles more than the estimated number of emergency cases for its area is Suazo Córdova hospital in La Paz.
- The hospitals classified as COEm establishments which handle fewest emergency cases are the IHSS hospital in Tegucigalpa, San Isidro de Tocoa hospital in Colón and Juan Manuel Gálvez de Gracias hospital in Lempira.
- Indicator 5 shows the proportion of caesarean deliveries per hospital. The expected range is five to 15 per cent of all births, but three of the hospitals were found to be above 15 per cent, and eight were below the minimum acceptable level of five per cent.
- Indicator 6 shows the mortality rate from obstetrical complications in hospitals having COEm services. Although this rate is generally within acceptable limits, two of the hospitals (Manuel de Jesús Subirana in Yoro and the Puerto Lempira hospital) were above the upper limit of one per cent.

13. It is important to stress that for several years now the STI-HIV/AIDS programme has been concentrating solely on HIV/AIDS, owing the nature of that disease, to the detriment of the other STIs. The strategies for dealing with these diseases must be strengthened and they must be differentiated by gender and by the epidemiological behaviour

of each disease (as of December 2003, there were 20,283 cases: 15,717 diagnosed cases of AIDS and 4,566 asymptomatic cases; 59 per cent involved males and 41 per cent females; the main transmission paths were by heterosexual contact and from mother to child).

**ANNEX 5**  
**Main NGOs providing services connected with domestic violence**

<b>Organizations of and for women</b>	<b>Services connected with domestic violence</b>
Centre for Women's Rights (CDM)	Legal representation, emotional support, revision of the current legal framework, training, publicity materials, political lobbying
Centre for Women's Studies (CEM-H)	Research, publicity campaigns, training, psychological support services, organization, political lobbying
"Visitación Padilla" women for peace movement	Organization, publicity campaigns, training, legal counselling, political lobbying
Action for Popular Development (ADP)	Protection of victims in a refuge where comprehensive care is provided (emotional support, training, occupational therapy, legal counselling)
Quality of Life Association	Protection of victims in a refuge where comprehensive care is provided (emotional support, training, occupational therapy, legal counselling)
"University Women" feminist collective	Research, publicity, training, psychological therapy, organization, political lobbying
ANDAR Association	Research, training, organization
"Las Hormigas" women's association	Legal representation, emotional support, training, organization
Honduran Women's Committee (CODEMUH)	Legal representation, emotional support, training, organization
Study and Action Centre for Popular Development (CESADEH)	Training, publicity, organization
Black Women's Network (ENMUNH)	Legal counselling, emotional support, training, publicity materials, organization
CARITAS	Organization, training, legal counselling
Women's networks	Services connected with domestic violence
Women's Collective against Violence (made up of 14 women's and mixed organizations)	Lobbying, social mobilization, education, publicity, public policy proposals, internal coordination, research, etc.
Convergencia de Mujeres	Lobbying, social mobilization, education, publicity, public-policy proposals, internal coordination, research, etc.
Local networks of women against violence (established in some rural areas and made up of victims of violence, local NGOs, employers' organizations, etc.	Lobbying, social mobilization, education, publicity, extension work, care of victims, coordination, etc.
Human rights organizations providing some services for women	Services connected with domestic violence
People's Legal Information Service	Legal representation, training, organization
Office of Legal Services for Women and Unprotected Children (OFALAM)	Legal representation, training, organization, research

Committee of Families of Detainees and Disappeared Persons In Honduras	Legal representation, training
Centre for Human Rights Research and Promotion (CIPRODEH)	Training, organization and research

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