

Commission on the Status of Women
Fifty-sixth session
27 February –9 March 2012

Elimination and prevention of all forms of violence against women and girls

Moderator's summary

1. On 29 February 2012, the Commission on the Status of Women convened an expert panel on “Elimination and prevention of all forms of violence against women and girls” to provide an opportunity to discuss issues to be considered in preparation for the priority theme of the Commission in 2013. Ms. Irina Velichko, Vice-Chair of the Commission, moderated the discussion. The panelists were: Dr. Nduku Kilonzo, Liverpool VCT, Kenya; Ms. Marai Larasi, End Violence against Women Coalition, United Kingdom; Dr. Margarita Quintanilla, PATH/InterCambios, Nicaragua. Ms. Michelle Bachelet, Executive Director, United Nations Entity for Gender Equality and the Empowerment of Women (UN-Women), made closing remarks. Representatives from Member States, regional intergovernmental bodies and civil society contributed to the discussion.
2. Panelists' presentations focused on the provision of services for victims/survivors of violence, and primary prevention. Participants identified questions and issues, summarized below, that should be further examined in the preparations for the fifty-seventh session of the Commission. They stressed that all stakeholders should take

developmental goals, such as those related to poverty reduction, health (including reproductive health, prevention of maternal mortality and HIV/AIDS), education, and economic development, among other areas. While the State has the primary role in ending violence against women and girls, this task is a shared societal responsibility.

Provision of support services

5. Notable progress has been made in providing support services to women and girls victims/survivors of violence, building on the pioneering work of women's and other non-governmental organizations that have historically been at the forefront of service provision in many countries. However, service provision often receives inadequate support and funding, and as such, services remain limited in quality, scope and coverage. Furthermore, in many cases commodities and supplies, such as those needed for examining and treating injuries or drugs for preventing pregnancy or sexually transmitted infections, including HIV, are not available. Access to such services can be especially problematic for women in rural and remote areas, or women from marginalized groups, such as those belonging to ethnic minorities, indigenous and migrant women, victims/survivors of trafficking in persons, adolescent girls, and those with disabilities or living with HIV/AIDS. Better approaches need to be developed to reach such populations.
6. A rights-based and gender-sensitive approach to the provision of support services is required. Services should respond to different manifestations of violence. They should be tailored accordingly so as to meet the diverse needs and rights of victims/survivors, including those subjected to multiple forms of discrimination.
7. Communities have a critical role in responding to violence against women and girls. In order to enhance community responses to violence, there is a need for greater involvement of community and local leaders th

10. Limited coordination across sectors remains a barrier to the delivery of quality services. In this respect, experience shows that the designation of a central institution with the authority to coordinate different sectors and stakeholders and harmonize service delivery and national reporting frameworks strengthens delivery and enhances accountability. The expertise and knowledge of specialized non-governmental organizations should be drawn upon, and supported. Increased coordination and consultation with and among civil society and private sector actors that provide services is also needed. Gender-based violence should be established as a priority for service delivery within and across sectors, including health, judicial and security, among others.
11. Strengthened coordination is also essential for improving monitoring and evaluation of support services. The absence of commonly used local and national indicators to guide the development of data collection tools and measure the effectiveness of services delivery approaches remains a persistent challenge. Due to the dearth of financial resources, research and evidence gathering on the impact of service delivery remains limited, thus hampering the replication and scaling-up of potentially successful models.

Primary prevention

12. Although some advances have been made in the provision of support services to victims/survivors, primary prevention is an area where much work remains to be done. Given the significant costs to the health, social and economic well-being of individuals, families, communities and societies, preventing violence from occurring in the first place is an imperative. Investments in primary prevention hold the potential for high social and economic development returns, as well as cost-effectiveness. Investments in primary prevention initiatives should not be diverted from already low-resourced support services. Such investments should also include a focus on monitoring and evaluation of existing primary prevention initiatives, to expand the limited, though growing, body of evidence on effective approaches in particular contexts. Good practices and a better understanding of prevention efforts can help in expanding this necessary area of work.
13. Awareness-raising initiatives are an important starting point for primary prevention efforts, but are insufficient to achieve social transformative change. A systematic and sustained approach to prevention is urgently required. This entails working with girls and boys from an early age, including through 'w

transforming stereotyped attitudes and behaviour patterns. New technologies, social