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IRB - Immigration and Refugee Board of Canada

Colombia: Gender-based violence (GBV), particularly domestic and sexual violence; impact of COVID-19; state protection and support services available, including psychological services, particularly in Bogotá, Santiago de Cali, and Medellín (2020-July 2022) [COL201107.E]

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1. Overview

Human Rights Watch (HRW) notes that GBV is "widespread" in Colombia (HRW 13 Jan. 2022, 7). According to the Office of the Attorney General [Office of the Prosecutor General] (Fiscalía General de la Nación), domestic violence is the second most reported crime in the country, after theft (Colombia 8 Mar. 2021). The Bogotá Post, an English-language news website, reports that Colombia has high rates of domestic violence, "femicides," and sexual violence (The Bogotá Post 27 Sept. 2021). The US Department of State's Country Reports on Human Rights Practices for 2021 indicates that rape, including spousal rape, and violence against women remained "problem[s]" in Colombia (US 12 Apr. 2022, 27).

1.1 Statistics

Infobae, a Spanish-language online news source from Argentina, citing data from the [Colombian government's] National Institute of Legal Medicine and Forensic Sciences (Instituto Nacional de Medicina Legal y Ciencias Forenses, INMLCF), reports that between January and October 2021, 98,545 women experienced [translation] "some type of violence," including 97,354 women who "were assessed for injuries or assaults, 16,402 for interpersonal violence, 15,644 for alleged sexual crimes, 8,534 for domestic violence [and] 23,679 for intimate partner violence" (Infobae 18 Nov. 2021).

The information in the following paragraph was provided by the Peace and Reconciliation Foundation (Fundación Paz y Reconciliación, Pares), a non-profit NGO that uses research and analysis to contribute to [translation] "democratic transformation" and the rule of law in Colombia (Pares n.d.), using data from the National Police of Colombia's information system for statistics, crimes, minor offences and operations (Sistema de Información Estadística, Delincuencial, Contravencional y Operativa de la Policía Nacional de Colombia, SIEDCO):

Between January 2019 and January 2022, 97,237 cases of sexual violence were reported, of which 85 percent (82,873) were committed against women. Of the 82,873 cases, 56,172 (67 percent) were reported against minors, while the remaining 32 percent were reported against women over 18 years of age. During the same period, 354,832 domestic violence complaints were registered in Colombia, of which 77 percent (275,218) were committed against women and girls (Pares 8 Mar. 2022).

The information in the following paragraph was provided by the Office of the Ombudsman (Defensoría del Pueblo):

In 2021, 3,646 cases of GBV were reported at the national level, which included 2,451 cases of [translation] "psychological violence," 1,597 cases of physical violence, 1,001 cases of "economic" violence, 693 cases of sexual violence, and 678 of "patrimonial violence" [1]. In "some cases," women experienced more than one type of GBV. The departments with the "highest number" of GBV cases, in descending order, are Norte de Santander, Bolívar, Valle del Cauca, Putumayo, Cauca, Cundinamarca, Chocó, Bogotá, and Magdalena. Of perpetrators, the "majority" were ex-partners (24 percent), followed by strangers (22 percent), current partners (15 percent), acquaintances (13 percent), and family members (6 percent). Among survivors in these GBV cases, 40 percent are engaged in "informal activities" and 20 percent care for the home, while 10 percent are unemployed. Poverty and inequality in education and work make women and girls more vulnerable to GBV (Colombia 8 Mar. 2022).

The information in the following three paragraphs was sourced from various searches in the Colombia Dynamic Femicide Report (Reporte Dinámico Feminicidios Colombia), which is compiled by the Colombian Observatory of Femicides (Observatorio Colombiano de Feminicidios), an information system by the Antimilitarist Feminist Network (Red Feminista Antimilitarista) [2] that tracks femicides and violence against women (Observatorio Colombiano de Feminicidios n.d.):

In 2020, there were 630 [translation] "femicides" in Colombia, which included 113 cases in the department of Antioquia, 95 cases in Valle del Cauca, and 49 cases in Bogotá. Victims were most commonly between 25 and 29 years old (81 cases), followed by 20 to 24 (73 cases), and 30 to 34 (54 cases), although the age of the victim was unknown in 153 cases. The most common perpetrators were strangers (95 cases) and "domestic partners" (69 cases), while the perpetrator's relationship to the victim was unknown in 386 cases (Reporte Dinámico Feminicidios Colombia n.d.a).

In 2021, there were 622 femicides in Colombia, which included 109 cases in the department of Antioquia, 75 cases in Valle del Cauca, and 47 cases each in Cauca and Bogotá. Victims were most commonly between the ages of 25 and 29 (90 cases), followed by 20 to 24 (79 cases) and 30 to 34 (76 cases). The age of the victim was unknown in 94 cases. The most common perpetrators were "domestic partners" (103 cases) and strangers (77 cases), while the perpetrator's relationship to the victim was unknown in 371 cases (Reporte Dinámico Feminicidios Colombia n.d.b).

Between January and April 2022, there have been 222 "femicides" in Colombia, which include 39 cases in the department of Valle del Cauca, 31 cases in Antioquia, and 29 cases in Bogotá. The age range with the most cases has been 30 to 34 (38 cases), followed by 20 to 24 (27 cases), and 25 to 29 (24 cases). The age of the victim was unknown in 31 cases. The most common perpetrators were "domestic partners" (24 cases) and strangers (23 cases), while the perpetrator's relationship to the victim was unknown in 145 cases (Reporte Dinámico Feminicidios Colombia n.d.c).

According to a Red Feminista Antimilitarista report, of the 622 femicides in Colombia in 2021, Afro Colombian, indigenous, and Venezuelan women were the most affected with 71, 47, and 45 deaths, respectively (Red Feminista Antimilitarista Apr. 2022, 3).

The most recent National Survey on Demographics and Health (Encuesta nacional de demografia y salud, ENDS Colombia 2015) from 2015 by the Ministry of Health and Social Protection (Ministerio de Salud y Protección Social) and Profamilia, a non-profit organization in Colombia that promotes [translation] "the respect and exercise" of sexual and reproductive rights (Profamilia n.d.a.), provides the following statistics:

	Urban	Rural	Total			
Women	Men	Women	Men	Women	Men	
Have experienced [translation] "intimidation" by a partner	23.8%	20.2%	24.0%	18.7%	23.9%	19.8%
Have been "undervalu[ed]" by a partner	39.9%	38.1%	35.9%	28.2%	39.0%	35.7%
Have experienced controlling actions from a partner	59.1%	74.2%	53.1%	67.4%	57.9%	72.5%
Have experienced physical violence from a partner (excluding rape)	32.7%	24.3%	29.2%	16.2%	31.9%	22.4%
Have experienced economic and patrimonial violence	32.1%	26.8%	27.7%	20.0%	31.1%	25.2%
Have experienced sexual violence	7.8%	1.2%	7.0%	0.9%	7.6%	1.1%

Experience of gender-based violence among individuals ages 13 to 49 who are or have ever been in a relationship

(Ministerio de Salud y Protección Social and Profamilia [2016], 47)

1.2 Impact of COVID-19

The Bogotá Post reports that "various forms of violence against women" increased during the COVID-19 pandemic in Colombia (The Bogotá Post 27 Sept. 2021). According to Al Jazeera, the INMLCF stated that the COVID-19 pandemic "left more than 15,000 women in Colombia at extreme risk of femicide" (Al Jazeera 20 Oct. 2020). The Guardian notes that according to a representative from the Femicide Foundation of Colombia (Fundación Feminicidios Colombia), "an NGO that provides support for women and tracks gender-based violence," there was an "increase in the number of violent acts against women, such as disappearances, immolations and dismembering, alongside sexual violence" in 2020 (The Guardian 25 Jan. 2022). The New Humanitarian, an online news source that reports on humanitarian crises (The New Humanitarian n.d.), indicates that GBV levels "have risen by more than half" since the beginning of the COVID-19 pandemic in Colombia (The New Humanitarian 24 Feb. 2021). UN Entity for Gender Equality and Empowerment of Women (UN Women) provides the following data for Colombia in its report on violence against women during COVID-19 [3] which covers the period between April and September 2021:

Reported that they have experienced, or know a woman who has experienced, a form of violence against women since the COVID-19 pandemic	41%
Reported that they have ever experienced a form of violence against women or know another woman who has experienced it	62%
Reported that COVID-19 has made them feel even less safe at home	11%
Reported that COVID-19 has made conflict between adults in the household more frequent	20%
Reported that COVID-19 made them feel less safe walking alone at night	52%
Reported that physical or verbal abuse by a spouse/partner has increased in their community during the pandemic	43%
Said they think that violence against women in the community increased during the pandemic	23%
Said they think that sexual harassment increased during the pandemic	27%

Experience of women in Colombia related to violence against women and the COVID-19 pandemic

(UN 2021, 7, 10, 12, 13, 15, 16)

2. Legislation

A report by the High Council for the Rights of Victims, Peace, and Reconciliation (Alta Consejería para los Derechos de las Víctimas, la Paz y la Reconciliación), a unit of the Mayor's Office of Bogotá, states that Colombia has laws that aim to [translation] "promote equality and equity for women," such as Law 1257 of 2008 (*Ley 1257 de 2008*) and Law 1719 of 2014 (*Ley 1719 de 2014*) (Bogotá Nov. 2020, 8). Law 1257 provides the following:

[translation]

ARTICLE 1. PURPOSE OF THE LAW. The purpose of this law is to adopt standards ensuring that all women live free of violence, both in public and in private, can exercise the rights recognized in domestic and international law, and have access to administrative and judicial procedures for their protection and treatment, and to adopt the public policies necessary therefor.

ARTICLE 2. DEFINITION OF VIOLENCE AGAINST WOMEN. Violence against women means any action or omission that causes death, physical, sexual, psychological, economic or property-related harm or suffering for them as women, as well as threats of such acts, coercion or arbitrary deprivation of freedom, whether in public or in private.

. . .

ARTICLE 8. RIGHTS OF VICTIMS OF VIOLENCE. Any victim of any of the forms of violence provided herein, as well as in article 11 of Law 906 of 2004 and article 15 of Law 360 of 1997, has the right to:

- 1. Receive comprehensive treatment through accessible quality services with sufficient coverage;
- 2. Receive free, immediate and specialized guidance, legal advice and technical legal assistance as soon as the authority is aware of the act of violence. The aggressor may be ordered to pay the costs of this treatment and assistance. The State must ensure this right by taking the appropriate action with the aggressor and in any case make sure that this service is provided by the public defender;
- Receive clear, complete, accurate and timely information on her rights and on the mechanisms and procedures covered in this law and in other related provisions;
- 4. Give her informed consent to medical legal examinations in cases of sexual violence and choose the sex of the medical professional who will examine her, according to the possibilities offered by the service. Entities that promote and provide health services will arrange for health professionals of both sexes to treat victims of violence:
- $5. \ \ Receive \ clear, complete, accurate \ and \ timely \ information \ on \ sexual \ and \ reproductive \ health;$
- Have her identity protected when receiving medical, legal or social assistance, and protection of her personal information and that of her children or of any other person in her care or custody;
- Receive comprehensive specialized medical, psychological, psychiatric and forensic assistance under the legal terms and conditions established for victims and their children;
- 8. Access protection and treatment mechanisms for victims and their children;
- 9. Truth, justice, compensation and guarantees of non-recurrence of the acts of violence;
- 10. Stabilization of her situation as provided herein;
- 11. Decide voluntarily whether she can meet her aggressor in any of the treatment facilities and in administrative, judicial or other proceedings

. . .

CHAPTER V PROTECTION MEASURES

ARTICLE 16. Article 4 of Law 294 of 1996, as amended by article 1 of Law 575 of 2000, shall read as follows:

"Article 4. Anyone who, in their family environment, is a victim of physical or mental harm, whose sexual integrity is harmed, or who is threatened, assaulted or suffers any other form of aggression from another member of the family, may, without prejudice to the recourses provided by the criminal law, ask the family commissioner [4] of the place where the offences occurred or, if there is no such commissioner, the municipal civil or joint civil-criminal judge, for an immediate protection measure to end the violence, mistreatment or aggression or to prevent it if it is imminent.

If there is more than one competent judicial office for this action in the place where the aggrieved person lives, the request will be submitted immediately for assignment to the appropriate official.

PARAGRAPH. In cases of domestic violence in indigenous communities, the competent authority to hear such

cases is the indigenous authority, pursuant to the special jurisdiction under article 246 of the National Constitution."

ARTICLE 17. Article 5 of Law 294 of 1996, as amended by article 2 of Law 575 of 2000, shall read as follows:

"Article 5. Protection measures in cases of domestic violence. If the competent authority determines that the petitioner or a member of a family group has been a victim of violence, it will order a permanent protection measure, stating that the aggressor shall refrain from the conduct mentioned in the complaint and from any similar action against the victim and other members of the family group. The official may also impose the following measures, depending on the case, without prejudice to the measures provided in article 18 hereof:

- Order the aggressor to leave the home shared with the victim if his presence threatens the life, safety or health of any member(s) of the family;
- 2. Order the aggressor to refrain from entering any place where the victim is found, if the official considers such a limitation necessary to prevent him from disturbing, intimidating, threatening or in any other way interfering with the victim or with minors over whom she has provisional custody;
- Forbid the aggressor to conceal or to move the children and defenceless disabled persons in the family group, without prejudice to applicable recourses in criminal law;
- Require the aggressor to undergo re-education and treatment in a public or private institution that offers such services, at his expense.
- If necessary, order the aggressor to pay the costs of counseling and the legal, medical, psychological and psychiatric care that the victim requires;
- 6. If the violence or mistreatment is serious and recurrence thereof is feared, the competent authority will order the police to provide special temporary protection for the victim both at home and at work (if she works outside the home):
- Order the police, at the victim's request, to accompany her when she returns home if she had to leave for her safety;
- Provisionally decide the regime of child visiting, care and custody, if there are any children, without prejudice to the competence of other authorities in civil matters, who may confirm or modify this measure;
- Forbid the aggressor to own, carry and use weapons; if he must do so for his work or profession, this suspension must be justified;
- 10. Provisionally decide who shall pay support, without prejudice to the competence of other authorities in civil matters, who may confirm or modify this measure;
- 11. Provisionally decide the use and enjoyment of the family home, without prejudice to the competence of other authorities in civil matters, who may confirm or modify this measure;
- 12. Forbid the aggressor to do anything to sell or encumber his goods that are subject to registration, if his property is owned jointly with the victim. For this purpose, the competent authorities shall give notice and the prohibition will be ordered by the judicial authority;
- 13. Order the aggressor to immediately return items of personal use, identity documents and any other document or item that the victim owns or that is in her care;
- 14. Any other measure necessary for the fulfilment of the objectives hereof.

PARAGRAPH 1. In cases of divorce or separation due to mistreatment, the judge may order any of the protection measures listed in this article.

PARAGRAPH 2. These same measures may be issued provisionally and immediately by the judicial authority that is informed of offences arising from acts of domestic violence.

PARAGRAPH 3. The competent authority must submit all cases of domestic violence to the Attorney General of Colombia for investigation of the offence of domestic violence and possible related offences."

CHAPTER VI TREATMENT MEASURES

ARTICLE 19. The treatment measures provided herein and those implemented by the National Government and territorial entities shall seek to avoid having the victim and the aggressor treated by the same person and in the same place. The treatment measures shall consider the situation of women who are at particular risk.

- 1. Provide food and housing for the victim through the general system of social security. Health promoters and welfare administrators shall provide food and housing services in health care institutions or shall contract with hotels for such services; in all cases, transportation for the victims and their children shall be included. Also, reference and cross-reference systems for the treatment of victims shall be provided, always ensuring protection of their life, dignity and integrity.
- If the victim decides not to stay in the available hotels or no hotels have been contracted, she will be given a monthly allowance for food and shelter for herself and her children, provided that this allowance is used to

https://www.ecoi.net/en/document/2080065.html

cover these expenses in a place other than the one where the aggressor lives. This allowance is conditional on the victim keeping the medical, psychological or psychiatric appointments that she requires.

In the contributory regime, this allowance will be equivalent to the amount of the payment that the victim makes to the general system of social security, and for the subsidized regime, it will be equivalent to the current minimum monthly wage.

Health promoters and administrators of the subsidized regime will be responsible for providing medical, psychological and psychiatric services to women victims of violence and to their children.

PARAGRAPH 1. The measures in (a) and (b) will apply for up to six months and may be extended for another six months if the situation warrants.

PARAGRAPH 2. The general system of social security will cover the cost of applying these measures.

PARAGRAPH 3 The location of the victims will be kept secret for their protection and security and that of their children.

ARTICLE 20. INFORMATION. Municipalities and districts will provide information and counseling on the services available, the entities responsible for providing these services, the pertinent legal procedures and available compensation measures to women victims of violence, according to their personal situation.

Treatment providers in municipalities and districts will immediately provide precise and complete information on protection mechanisms and treatment for victims to the community and to victims of any form of violence. The necessary measures will be taken so that disabled or illiterate women who are victims of violence and women who speak a language other than Spanish have full and adequate access to information on their rights and existing resources. (Colombia 2008, bold in original)

Law 1719 provides the following:

[translation]

CHAPTER I

General provisions

Article 1. Purpose of the law. The purpose of this law is to adopt measures to guarantee the right of access to justice for victims of sexual violence, in particular sexual violence associated with the internal armed conflict. These measures seek to address the needs of woman, child and adolescent victims on a priority basis.

. . .

Article 13. Rights and guarantees for victims of sexual violence. Victims of sexual violence, without prejudice to the rights, guarantees and measures established in Articles 11 and 14, and Chapter IV of Title IV of Law 906 of 2000; Articles 8, 19, 20, 21 and 22 of Law 1257 of 2008; Articles 35, 36, 38, 39, 40, 41, 42, 43, 44, 52, 53, 54, 69, 132, 135, 136, 137, 139, 140, 149, 150, 151, 181, 182, 183, 184, 186, 187, 188, 190 and 191 of Law 1448 of 2011; Article 54 of Law 1438 of 2011; Article 15 of Law 360 of 1997; Articles 192, 193, 194, 195, 196, 197 and 198 of Law 1098 of 2006; and such other provisions as amend or add to them, have the right to:

- Have their privacy preserved at all times, maintaining the confidentiality of information concerning their name, place of residence, telephone number, place of work or study, among other information, including in regard to their family and close associates. This protection cannot be waived for victims under the age of 18.
- Have a copy of the complaint, forensic medical examination and any other document of interest to the victim issued to them.
- 3. Not be discriminated against on the basis of their past or their sexual conduct or orientation, or for any other reason, respecting the principle of equality and non-discrimination in any area and at any point in their care, especially by justice operators and those involved in the judicial process.
- 4. Be attended to by people with training in Human Rights and [the] differential approach. All institutions involved in the care of victims of sexual violence shall make budgetary, pedagogical and administrative efforts to comply with this obligation.
- 5. Not to be confronted with their aggressor, to not be subjected to repetitive evidence and to request that the judicial authorities refrain from ordering the taking of evidence or exclude evidence already taken that entails an unnecessary or disproportionate interference with their right to privacy.
- 6. Be cared for in accessible places that ensure their privacy, health, security and comfort.
- Be protected against all forms of coercion, violence or intimidation against them or against their families or persons in their custody.
- To have the context in which the events under investigation occurred assessed without prejudice against the victim.

- 9. To have advice, support and legal technical assistance at all procedural stages and from the moment the authorities are made aware of the events. Interviews and proceedings conducted before the indictment must be carried out in a safe place that generates trust in the victim, and no official may prevent [the victim] from being assisted by a lawyer or psychologist. Waiting rooms for victims that are isolated from the areas in which the judicial proceedings are carried out must be guaranteed, so that contact is avoided with the aggressor or his defence, with support from qualified personnel.
- 10. To be given the same opportunities to testify, from a differential approach, as other witnesses, and to adopt measures to facilitate such testimony in criminal proceedings.
- 11. To have their condition of special vulnerability considered, based on their age, disability, belonging to an ethnic group, belonging to discriminated populations or to social organizations or groups that are subject to socio-political violence, in the adoption of prevention and protection measures, in guarantees for their participation in the judicial process and in determining their reparations.
- 12. To, if pregnant and the victim of violent sexual intercourse during and in the course of the armed conflict, be informed, counselled and assisted regarding the possibility of continuing or terminating the pregnancy.

Paragraph 1. Public officials who, in the course of criminal proceedings or any other type of judicial or administrative action, fail to comply with their obligations with respect to guaranteeing the rights of victims of sexual violence, shall be liable to the competent Courts and Tribunals, and to the disciplinary authorities for such conduct.

...

Article 17. Obligation to carry out investigations within a reasonable period of time and under the impetus of judicial officials. In cases involving sexual violence, the prosecutor, judge or magistrate must act with due diligence; they must make full use of their informal powers in the investigation to prevent impunity.

The investigation must be initiated immediately upon learning of the facts and must be carried out within a reasonable period of time. Initiation of the investigation is a legal duty in its own right; this burden should not depend on the initiative of the victim, his/her participation, or his/her recantation. In case of recantation, it is up to the prosecutor of the case to corroborate the motives that prompted this decision of the victim, especially those referring to security conditions, protection measures and possible situations of revictimization.

The prosecutor for the case must have personnel trained in sexual crimes within his/her group of criminal investigators and shall, with them, adapt the methodological approach to the investigation according to the characteristics of each case and taking into account the age and ethnic and socioeconomic characteristics of the victim.

The actions carried out by judicial officials must at all times respect the dignity of victims of sexual violence and address their needs in such a way that they do not constitute acts of re-victimization.

...

Article 22. Protection to ensure access to justice for victims of sexual violence. In order to protect the rights of victims of sexual violence during the armed conflict and to ensure their access to justice and facilitate their participation at all stages of the process, the following rules shall apply:

1. The heightened vulnerability of victims of sexual violence due to the armed conflict, the risk of suffering new aggressions that affect their personal safety and physical integrity, and the existence of disproportionate risks of sexual violence for Colombian women in the armed conflict are presumed, as provided in Order 092 of 2008 of the Constitutional Court. Consequently, the adoption of the provisional protection measures that may be appropriate may not be conditioned to risk studies by any of the competent authorities.

. . .

- 3. In addition to the protection measures provided for in Articles 11, 12, 13, 17 and 18 of Law 1257 of 2008, and the care measures provided for in Articles 19 and 22 of the same Law, permanent psychosocial care shall be provided to victims of sexual violence, if they decide to accept such care, until their full emotional recovery.
- 4. Protection measures shall always be extended to the family group and to the victim's dependents, and to those who, due to defending the rights of the victim, enter into a situation of risk.

. . .

6. A request for protection before the competent authorities is appropriate prior to reporting of the act of sexual violence. No official may coerce the victim to give a statement on the facts before a suitable protection measure is in place that guarantees conditions of safety and confidence to make the complaint.

..

10. Access to the victim and witness protection programs of the Office of the Attorney General; for victims of sexual violence during the armed conflict, this may not be conditional upon the effectiveness or usefulness of the victim's participation, for the collection of evidence or for the identification of the perpetrator; it shall be understood that the purpose of protection in these cases corresponds to the generation of sufficient conditions of safety and trust, for the full exercise of the rights of the victim and to ensure their participation during the conducting of the criminal proceedings.

. . .

Article 23. Comprehensive and free health care. Victims of sexual violence have the right to priority care within the health sector, which shall be provided as a medical emergency, regardless of the time that has elapsed between the time of the assault and the consultation, and the existence of a criminal complaint. Comprehensive health care for any victim of sexual violence is free of charge. All entities of the health system are empowered to implement the Protocol and the Model of Comprehensive Health Care for Victims of Sexual Violence, which will include within the procedures of voluntary interruption of pregnancy the objection of doctors and counselling of the woman on continuing or interrupting the pregnancy.

Article 24. Psychosocial care for victims of sexual violence. The Social Security Health System must have qualified professionals and specialized programs for the psychosocial care of victims of sexual violence during the armed conflict.

Psychosocial care must be provided to a victim who requests it from the moment at which the events are made known to the judicial authorities, [and] throughout the criminal process. Psychosocial care will be considered in cases of remediation as one of the measures to be ordered in terms of rehabilitation. Psychosocial care provided prior to the remediation incident may not be considered as a remediation measure. The care of and reparations for victims of sexual violence within the framework of the special criminal process of justice and peace will adhere to the provisions of Law 975 of 2005, as amended by Law 1592 of 2012.

Psychosocial care provided to victims of sexual violence should be provided for as long as the victim requires it and cannot be restricted for financial or time-related reasons.

Psychosocial care should be aimed at generating emotional conditions that favour the participation of victims in the processes of enforceability of rights to truth, justice and reparation; and overcoming the emotional impacts of sexual violence.

Transitional paragraph. Without prejudice to the provisions of Articles 47, 52, 53, 54, 137 and 138 of Law 1448 of 2011; Articles 19 and 54 of Law 1438 of 2011, and Articles 13 and 19 of Law 1257 of 2008, and where sufficient and adequate personnel and resources are not guaranteed under the terms established in this article for accessing psychosocial care, victims of sexual violence may opt for the services provided by private organizations which are experts in this area. To this end, the Ministry of Health and the territorial entities, under the principles of coordination, subsidiarity and concurrence, will establish agreements with private or public organizations that certify their expertise in psychotherapeutic care with a psychosocial perspective, through which the service will be provided to victims of sexual violence who request it, for the time necessary for their emotional recovery.

The psychosocial care received through a private organization shall be an integral part of the victim's medical history and must be made known to the medical staff of the EPS or ARS to which the victim belongs. (Colombia 2014, bold in original)

Law 599 of 2000 (Ley 599 de 2000) provides the following:

[translation]

ARTICLE 104A. Feminicide. Added by Art. 2 of Law 1761 of 2015. A person who causes the death of a woman because of her status as a woman or for reasons of her gender identity, or where any of the following circumstances were present at the time of her death or prior thereto, shall be subject to two hundred and fifty (250) months to five hundred (500) months in prison.

. . .

ARTICLE 205. Violent sexual intercourse. Amended by Art. 1, Law 1236 of 2008. A person who performs sexual intercourse with another person by means of violence shall be subject to eight (8) to fifteen (15) years in prison.

ARTICLE 206. Violent sexual act. Amended by Art. 2, Law 1236 of 2008. A person who performs a sexual act on another person other than sexual intercourse by means of violence shall be subject to three (3) to six (6) years in prison.

ARTICLE 207. Sexual intercourse with or sexual act on a person made incapable of resisting. Amended by Art. 3, Law 1236 of 2008. A person who performs sexual intercourse with a person who has been made incapable of resisting or who is unconscious, or who has a condition of psychological inferiority that prevents him/her from understanding the sexual relationship or consenting thereto, shall be subject to eight (8) to fifteen (15) years in prison.

If a sexual act other than sexual intercourse is performed, the penalty will be three (3) to six (6) years.

. . .

ARTICLE 210. Sexual intercourse with or act of sexual abuse on a person who is unable to resist. Amended by Art. 6, Law 1236 of 2008. A person who performs sexual intercourse with a person who is unconscious, who suffers from a mental disorder or who is incapable of resisting, shall be subject to four (4) to eight (8) years in prison.

If the access is not performed, but other sexual acts are, the penalty will be three (3) to five (5) years in prison.

ARTICLE 210A. Added by Art. 29, Law 1257 of 2008 Sexual harassment. Anyone who, for his/her own benefit or for that of a third party and, taking advantage of his/her manifest superiority or relations of authority or power, age, sex, work, social, family or economic position; harasses, persecutes or physically or verbally abuses, for non-consensual sexual purposes, another person, shall be subject to one (1) to three (3) years in prison. (Colombia 2000, bold and italies in original)

3. State Protection

3.1 Reporting GBV

The District Women's Secretariat (Secretaria Distrital de la Mujer) in Bogotá, a municipal government entity, states that women can report incidents of GBV at:

[translation]

- · Complaint and misdemeanor offices
- · Police stations
- Family commissioner offices (comisarias de familia) for cases of domestic violence or sexual offences in the family environment
- Office of the Attorney General. (Bogotá 6 May 2020, 19)

Profamilia indicates that individuals who experienced GBV can seek assistance from one of the following organizations:

- Prosecutor's offices (Fiscalía), at a Comprehensive Care Centre for Victims of Sexual Crimes (Centro de Atención Integral a Víctimas de Delitos Sexuales) or a Rapid Response Unit (Unidad de Reacción Inmediata, URI).
- Police stations or criminal investigation units (Unidades de Policía Judicial), such as the Central Directorate
 of the Judiciary Police and Intelligence (Dirección Central de Policía Judicial e Inteligencia, Dijin), judicial
 investigation branches (Seccionales de Investigación Judicial, Sijin) or Technical Investigation Unit (Cuerpo
 Técnico de Investigación, CTI), which refer cases to the Prosecutor's Office and victims to the INMLCF.
- The INMLCF, which assesses the state of the victim and the severity of their injuries.
- Family commissioner offices, which accept domestic violence cases and refer them to the Prosecutor's Office.
 They can also arrange for protective measures, such as removing the [translation] "aggressor" from the home, extracting clothing and other necessities for the survivor, obtaining police protection, and temporarily resolving issues around custody and child support. To access these protections, the survivor must report the assault within 30 days.
- Colombian Family Welfare Institute (Instituto Colombiano de Bienestar Familiar, ICBF), a national entity
 working [translation] "for the prevention and comprehensive protection" of children, adolescents, and
 families in Colombia (Colombia n.d.a), which has regional family welfare centres in all cities but only deals
 with cases involving minors.
- Office of the Ombudsman and Municipal Office of the Ombudsman (Personería Municipal), which protect
 human rights for [translation] "both victims and perpetrators" in cases of violence, including through
 providing advice and assistance to individuals (Profamilia n.d.b).

The National Police of Colombia states that there are three [translation] "immediate care hotlines" that provide "direct communication channels" to report acts of GBV in the home; these are free of charge, available 24 hours a day, and can be accessed from any cellphone or landline:

- Line 155 (Línea 155) provides guidance to women experiencing violence,
- · Line 122 (Línea 122) is for the Office of the Attorney General, and
- Line 123 (Línea 123) is for care and emergencies (Colombia 6 May 2020).

According to the Presidential Office for Women's Equity (Consejería Presidencial para la Equidad de la Mujer), the 155 helpline is staffed by

[translation]

[s]pecialized personnel [who] are available to provide clear and complete information on women's rights, as well as to provide guidance on how to file a complaint, the types of violence women may experience, and procedures to obtain legal assistance and health care.

. . .

If a case of violence is reported during a call, the call will be redirected to the National Police so that the necessary support for immediate care can be provided. (Colombia n.d.b).

The Office of the Attorney General notes that it has reporting mechanisms, such as the ADenunciar virtual platform, the 122 hotline, and a national toll-free number, to initiate [translation] "urgent care protocols" and "identify the alleged perpetrators of crimes against women" (Colombia 8 Mar. 2021). According to another article by the same source, once an individual has completed the GBV form on the ADenunciar platform, the information will be reviewed by staff from the Office of the Attorney General, who will then take the appropriate action for each case; the person who submitted the report will be informed by email of the results of this review (Colombia 11 Dec. 2020).

The website of the city of Bogotá notes that the 123 hotline is an emergency hotline that is [translation] "linked" to the District Purple Line in Bogotá "so that anyone can request help if they see that a woman's life is at risk" (Bogotá 16 Sept. 2021). A research paper on domestic violence in Bogotá during COVID-19 quarantines and lockdown by Paula Rodríguez Díaz et al., [5] which was part of the UNDP [Latin America and the Caribbean (LAC)] Working Paper Series, states the following:

The diversity of problems received by the District Purple Line is managed by a team of psychologists, nurses and social workers who provide the necessary assistance and response for victims. The District Purple Line is not only a telephone line but can also be reached by email and WhatsApp to answer citizens' various requests related to women's vulnerability.

The District Purple Line is not a mechanism to officially report crimes with law enforcement (e.g. SIEDCO) or emergencies (e.g. [emergency line] 123). The goal of the District Purple Line is to provide assistance and activate institutional measures to prevent crimes. However, it serves as a trustworthy source for domestic violence records. Additionally, the District Purple Line aims to reduce the impact of different crimes that have been perpetrated. It addresses situations or problems that involve violence against women in public or private places and situations identified by women in which they feel threatened. (Rodríguez Díaz et al. Feb. 2022, 6)

3.1.1 Impact of the COVID-19 Pandemic

The Bogotá Post notes that "all Colombia's helplines — 155, 123, and 122 —reported a significant increase in calls related to domestic violence" during the pandemic, and between March and October 2020 the hotline specific to domestic violence received "more than double" the calls than in the same period in 2019 (The Bogotá Post 27 Sept. 2021). According to a report by UN Women, there was a 79 percent increase in calls to helplines and/or hotlines in Colombia during the COVID-19 pandemic (UN 2020, 2). A report by the UN High Commissioner for Human Rights, citing the Colombian Women's Observatory (Observatorio Colombiano de las Mujeres, OCM), an online tool of the Administrative Department of the Presidency of the Republic (Departamento Administrativo de la Presidencia de la República), through the Presidential Counseling [Office] for Women's Equity that collects, analyzes, and disseminates "information related to the situation of women" in Colombia (Colombia n.d.d), states that between March and December 2020, the 155 hotline received 21,602 calls regarding domestic violence, which represents an increase of 103 percent compared to 2019 (UN 17 Mar. 2021, para. 67). The Ministry of Health notes the following statistics:

- Line 155 domestic violence hotline
 - Calls between 25 March and 22 October 2021 were 5.92 percent higher than in the same period of 2019 and 2020.
 - · 94 percent of callers were women.
 - In both 2020 and 2021, calls from six departments (Bogotá, Antioquia, Valle del Cauca, Cundinamarca, Atlántico, and Santander) made up 75 percent of calls.
- Line 123 national police hotline
 - Between 25 March and 13 October 2021, calls for intimate partner violence were 16.3 percent higher compared to the same period in 2020 (11.426 to 13.637 calls).
- Line 122 Office of the Attorney General hotline
 - Of the 25,209 calls made between 25 March 2020 and 30 September 2021, 70.6 percent were for domestic violence (Colombia 25 Nov. 2021).

The website of the city of Bogotá indicates that the Purple Line [translation] "tripled its service capacity" in 2020 and handled 35,440 calls and 28,672 WhatsApp conversations between 1 January and 24 December 2020 (Bogotá 1 Jan. 2021).

3.2 State Response

According to US Country Reports 2021, the Office of the Attorney General "opened 63,000 investigations into domestic violence [between January and July 2021], with women identified as the victim in 50,000 of those investigations" (US 12 Apr. 2022, 28). The Office of the Attorney General states that between February and November 2020, the Office [translation] "achieved an increase in the resolution of femicides" from 74 to 94 percent, while in 16 departments the average solve rate was 100 percent (Colombia 19 Nov. 2020). Another article by the same source reports that out of 185 femicides nationwide in 2020, the Office of the Attorney General [translation] "made progress" in 178 cases, which represents a solve rate of 90 percent (Colombia 17 Mar. 2021). UN Women indicates that the Presidential Council for Gender Equality in Colombia is "monitoring" calls to hotlines "with the objective of consolidating and analyzing this information and disseminating it through an institutional bulletin" (UN 2020, 8). The same source further notes that the Ministry of Justice "is organizing a training course for women's organizations, legal advisors and gender equality agents, to sensitize and strengthen their capacities for [Violence Against Women and Girls] prevention and response" (UN 2020, 8).

However, the *Guardian* reports that authorities are "often unresponsive," when contacted by women facing domestic violence (*The Guardian* 25 Jan. 2021). Colombia Reports, an English-language online news site, states that "[m]any women don't even bother to report domestic violence" and that the prosecution "is notoriously useless" (Colombia Reports 4 Mar. 2020). The Bogotá Post indicates that "prosecution rates remain low" for GBV and sexual violence, and "[a]ctivists point to impunity of over 90% for some of these crimes" (The Bogotá Post 27 Sept. 2021). The same source notes that according to *No Es Hora de Callar* (It's Not Time to Stay Quiet), a campaign led by a Colombian journalist, "only 7% of the femicide cases have been fully pursued by the courts" (The Bogotá Post 27 Sept. 2021). Pares cites the Office of the Attorney General as stating that out of the 677 cases of femicide reported between 2019 and 2021, [translation] "only" 378 arrests and 140 convictions have been made (Pares 8 Mar. 2022). HRW states that "[p]erpetrators of violent, gender-based crimes are rarely held accountable" (HRW 13 Jan. 2022, 7).

According to HRW, a "[I]ack of training and poor implementation of treatment protocols impede timely access to medical services and create obstacles for women and girls seeking post-violence care and justice" (HRW 13 Jan. 2022, 7). Additional information on the provision of medical and psychological treatment could not be found among the sources consulted by the Research Directorate within the time constraints of this Response.

3.3 Protection Orders

An article on legal protection against sexual violence in Colombia [6] analyzed three "recent Constitutional Court tutela judgments on sexual violence" in Colombia and found that women who are "victims of sexual violence" "encounter judicial-type obstacles, above all in relation to the violation of due process, life in dignified conditions and comprehensive repair," including "a very long time elapsing between the application for protection being presented and effective protection coming into play; inadequate measures to protect the victim comprehensively (physical health, psychological health, specialized care, etc.) and the absence of a gender perspective" (Parra-Barrera et al. Apr 2021, 9).

The information in the following paragraph was provided by Greta Friedemann-Sánchez and Margaret Grieve [7] in a report on the family commissioner offices:

The demand for protection orders due to GBV is "staggeringly high in the largest cities." In Medellín, "Family Commissioners cannot keep pace. Many are forced to schedule hearings for permanent protective orders two, three or even four months into the future." In rural areas, individuals "are often reluctant to seek protective orders" because "[t]hey do not believe in the State's ability to enforce them." "Many women" also "refuse to request a temporary protective order once they learn that the information they provide will be sent to prosecutors and could result in a criminal proceeding against their intimate partners" (Friedemann-Sánchez and Grieve [2020], 2, 7, 8).

3.4 Impact of the COVID-19 Pandemic

The Bogotá Post reports that according to a representative from the Ministry of Health and "several activists," "victims may have had trouble" reporting crimes related to GBV due to quarantine restrictions (The Bogotá Post 27 Sept. 2021). The research paper by Rodríguez Díaz et al. states that

mobility restrictions in [Bogotá] affected the way citizens approached denunciation and reporting channels, as barriers were imposed to in-person procedures. Additionally, mechanisms to provide personal support and protect domestic violence victims from physical or psychological abuse also faced challenges because of these barriers. (Rodríguez Díaz et al. Feb 2022, 3)

According to the UN High Commissioner for Human Rights report, information provided by the Office of the Presidential Adviser for Women's Equity indicates "a decrease of 52 per cent in medical and legal records on this type of violence and a decrease of 71 per cent in complaints made to the Office of the Attorney General, owing to obstacles in accessing those services during the pandemic" (UN 17 Mar. 2021, para. 67). The same source further notes that according to data provided by the Office of the Ombudsman in response to a request for information, there were

problems in the State response to gender-based violence, such as lack of technological resources in the comisarias de familia (entities at the district or municipal level tasked with addressing domestic violence) to provide online assistance to victims, insufficient rooms in shelters to receive victims, the collapse of the hotline network and lack of access to forensic assessments. (UN 17 Mar. 2021, para. 68)

Al Jazeera states that according to "one report," which it does not name, "590 police forces in Colombia lack basic infrastructure like the internet to take domestic violence calls" (Al Jazeera 20 Apr. 2020). The same source notes that this is "[d]espite orders" from the President "for local governments to provide resources to women and children faced with domestic violence" (Al Jazeera 20 Apr. 2020). The National Police of Colombia reports that [translation] "essential services, such as shelters and hotlines serving those who experience domestic violence, have reached the limits of their capacity" (Colombia 25 Nov. 2020).

4. Support Services

4.1 Bogotá

According to US Country Reports 2021, the District Women's Secretariat in Bogotá and the Ombudsman's Office "offered free legal aid for victims of gender violence and organized courses to teach officials how to treat survivors of gender violence respectfully" (US 12 Apr. 2022, 28). El Tiempo reports that in December 2021 the Office of the Attorney General and the District Women's Secretariat in Bogotá [translation] "relaunched" the Access to Comprehensive Care for Women (Ruta de Atención Integral para Mujeres) program in the Ciudad Bolívar courthouse, noting that six more courthouses in the district were set to begin to offer the service as well (El Tiempo 7 Dec. 2021). According to the same article, the program's goal is to consolidate services for survivors of sexual, physical and emotional violence into a single location (El Tiempo 7 Dec. 2021). The source further notes that the program is composed of the following three phases:

- · First, women who have experienced violence must go to the courthouse reception desk and register.
- Next, at the Reception and Information Centre (Centro de Recepción e Información, CRI), which specializes
 in assisting women, individuals [translation] "with experience and training in gender and women's issues will
 provide guidance" to survivors and assess each survivor's risk of being killed or harmed. The CRI analyzes
 each situation and refers the woman to the agency best suited to provide them with protection and care.
- Lastly, Women's Secretariat lawyers and psychologists provide support and follow-up for each case.
 Survivors also have access to free psychosocial counselling as well as legal advice and representation regarding both administrative and judicial issues (El Tiempo 7 Dec. 2021).

The research paper by Rodríguez Díaz et al. indicates that Bogotá has "in-person reporting mechanisms" in addition to two domestic violence support hotlines (Line 155 and the Purple Line) "that reinforce, and in some cases substitute for, in-person assistance and the respective official complaint" (Rodríguez Díaz, et al. Feb 2022, 3).

4.2 Santiago de Cali

The website of the Office of the Ombudsman of Santiago de Cali (Personería Distrital de Santiago de Cali) cites the District Attorney as stating that the *Linea Únete* (Unite Line) hotline handles cases of GBV and [translation] "immediately" connects individuals with the relevant agencies, including the Office of the Attorney General and the police (Santiago de Cali 15 May 2020).

The information in the following paragraph was provided by the Mayor's Office of Santiago de Cali:

Survivors of GBV can access [translation] "guidance and support" at one of five *Consultorios Rosa* (Rose Clinics) in Cali. The Clinics are available to everyone, "regardless of gender or sexual identity, to receive the necessary care in cases of economic, psychological, emotional, physical, and sexual violence." Additionally, individuals can contact the 106 hotline (Línea 106), which is open 24 hours a day, 7 days a week, and provides "psychological counseling and accompaniment" to residents of the city of Cali. The hotline is staffed by psychologists and social workers who provide access to care and "react immediately in cases that require urgent intervention" using a vehicle provided for this purpose (Santiago de Cali 16 Mar. 2022).

4.3 Medellín

The information in the following paragraph was provided by the website of the city of Medellín:

There are Gender Equity Centres (Centros de Equidad de Género, CEG) in four *comunas* (urban divisions of a municipality) that provide "empowerment and care" for women. "[A]II" psychological care and legal assistance at the Centres is provided free of charge by trained professionals. There is also a Mobile CEG that offer "state services" to women experiencing GBV in "all" urban divisions and townships. These services include the provision of "information and psychosocial and legal counselling," in addition to community outreach and education services (Medellin n.d.).

The information in the following paragraph was provided by the Colombian newspaper *El Espectador*:

[translation] "[T]emporary care" in transitional housing is available for at least 100 women "whose lives are at risk." A representative from the Women's Secretariat in Medellin indicated that women may "stay for up to 90 days" and

family accommodation, food, nutritional assessment and monitoring, individual and group psychological care, legal advice, legal aid, psychosocial support, training in economic autonomy, [and] individual psychological care. Men identified as alleged aggressors also receive psychological care and follow-up to prevent the recurrence of violence.

"[T]echnical defence" is another support service provided by Medellín's Women's Secretariat in coordination with

the Office of the Ombudsman

to ensure that women experiencing violence have effective access to justice, prompt and appropriate reparation for the damage caused and ... relevant information on violations of their rights and the mechanisms for redress. Women must use the 123 Women's Agency hotline (Línea 123 Agencia Mujer) to access [these services]. (El Espectador 26 Jan. 2022)

El Espectador reports that the 123 Women's Agency hotline is Medellín's [translation] "main mechanism ... for providing emergency care to women at risk" or experiencing GBV (El Espectador 26 Jan. 2022). According to the Government of Antioquia, women may use the following to [translation] "receive guidance" or "request immediate assistance":

- In Medellín: 123 Women's Agency Hotline
- In the Aburrá Valley: 123 Metropolitan Women Hotline (Línea 123 Mujer Metropolitana)
- In the rest of Antioquia: Line 155 or the 4407649 Health for the Soul Hotline (Línea Salud para el Alma 4407649)
- Throughout Antioquia: the Gender Authority of [the] municipality, i.e., the office/public servant that serves
 women in each municipality. (Antioquia n.d.)

This Response was prepared after researching publicly accessible information currently available to the Research Directorate within time constraints. This Response is not, and does not purport to be, conclusive as to the merit of any particular claim for refugee protection. Please find below the list of sources consulted in researching this Information Request.

Notes

- [1] Patrimonial violence (violencia patrimonial) is a type of domestic violence in which the abuser controls the household's income and property and uses this economic power to control their partner's life and decisions (Colombia and Spain [2016], 10).
- [2] The Antimilitarist Feminist Network (Red Feminista Antimilitarista) is an organization that aims to [translation] "eradicate" the "hegemonic and colonial model of sex, class and race" through education and communication (Red Feminista Antimilitarista n.d.).
- [3] The information in the UN Women report is based on surveys on the impact of COVID-19 on violence against women conducted in 13 countries; these surveys were led by UN Women, in collaboration with Ipsos, and with support from "national statistical offices, national women's machineries and a technical advisory group" (UN 2021, 2). There was a total of 16,154 "nationally-representative" female respondents aged 18 and over, with "at least 1,200 per country" (UN 2021, 4).
- [4] The website of Colombia's Ministry of Justice (Ministerio de Justicia) states that the Family Commissioner's Office (Comisaría de Familia) is a [translation] "district, municipal or inter-municipal agency whose mission" includes protecting the rights of the members of a family unit in which domestic violence has occurred and redressing rights violations in such a context (Colombia n.d.b).
- [5] Paula Rodríguez Díaz and five other co-authors of the working paper on domestic violence in Bogotá during COVID-19 quarantines and lockdowns are researchers from Quantil, a Bogotá-based consulting and mathematics company (DevelopmentAid n.d.), and another two co-authors are researchers of the Office of Information Analysis and Strategic Studies of the District Secretariat of Security for Bogotá (Rodríguez Díaz et al. Feb. 2022, 1). The authors note, however, that the interpretations and findings of the working paper reflect their own views (Rodríguez Díaz et al. Feb. 2022, 1).
- [6] The authors of the article on legal protection against sexual violence in Colombia are: Sandra M. Parra-Barrera of the Human Rights and Sex Education Plan Foundation (Fundación Plan de Investigación, Derechos Humanos y Educación Sexual) in Barranquilla, Nieves Moyano of the Faculty of Humanities and Science Education at the University of Jaén in Spain, Miguel Ángel Boldova of the Department of Criminal Law, Philosophy of Law and History of Law at the University of Zaragoza in Spain, and María del Mar Sánchez-Fuentes of the Department of Psychology and Sociology at the University of Zaragoza (Parra-Barrera et al., 15 Apr. 2021).
- [7] Margaret Grieve is an American lawyer and businesswoman, and Greta Friedemann-Sánchez is an Associate Professor at the University of Minnesota's Hubert H. Humphrey School of Public Affairs (Friedemann-Sánchez and Grieve [2020], IV).

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