

A STATISTICAL PROFILE OF VIOLENCE AGAINST CHILDREN IN LATIN AMERICA AND THE CARIBBEAN

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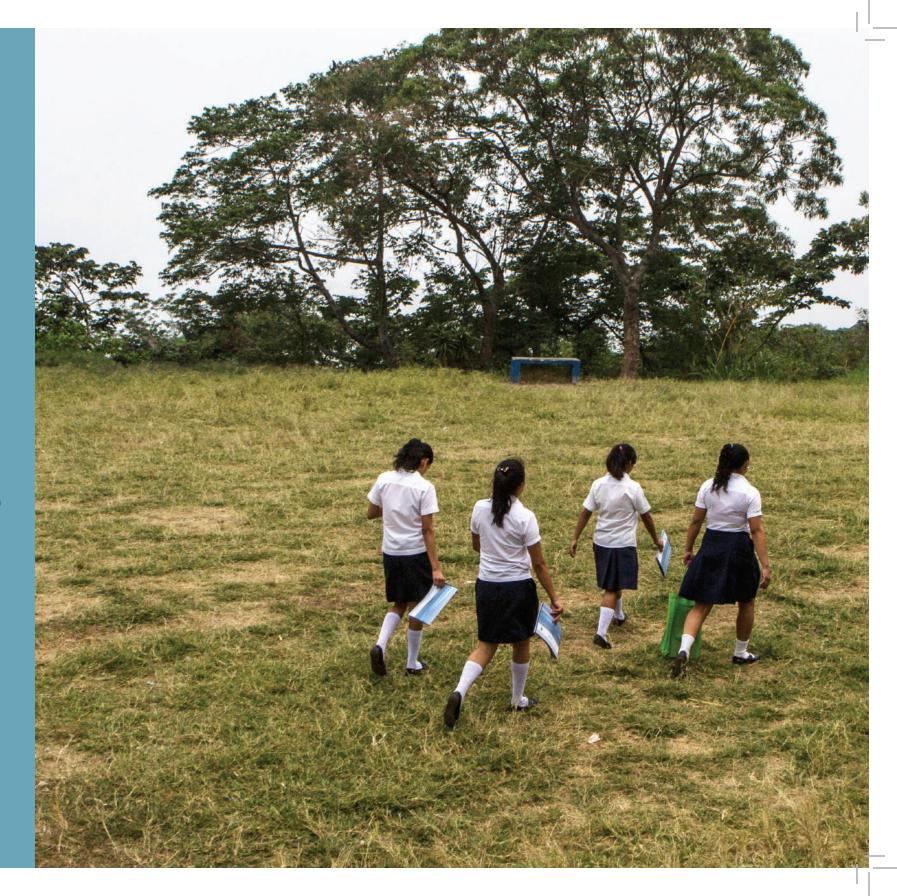
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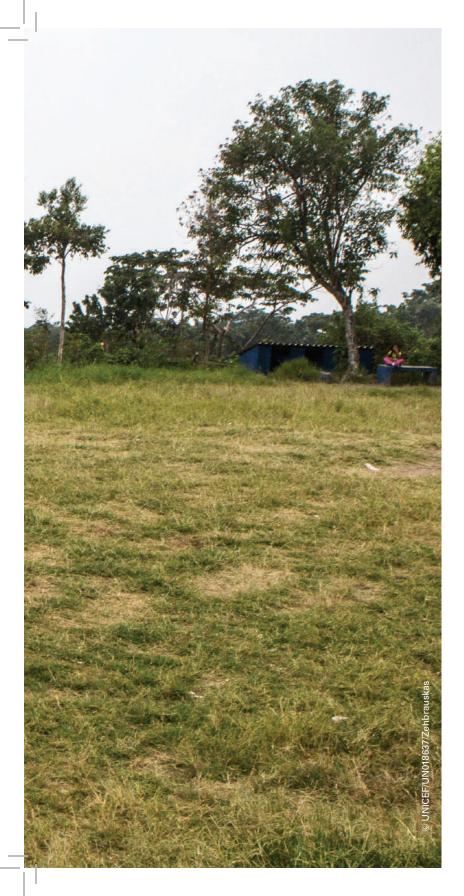
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This publication was prepared by the Data and Analytics Section of UNICEF Headquarters (Claudia Cappa and Nicole Petrowski) with inputs from the Regional Office for Latin America and the Caribbean (Kendra Gregson and Esther Ruiz). Isabel Jijon (independent consultant) was involved in data compilation and fact-checking. Munkhbadar Jugder (Data and Analytics Section, UNICEF Headquarters) provided support for data processing and tabulations. The publication was edited by Lois Jensen and designed by Era Porth (independent consultants).

COVER PHOTO

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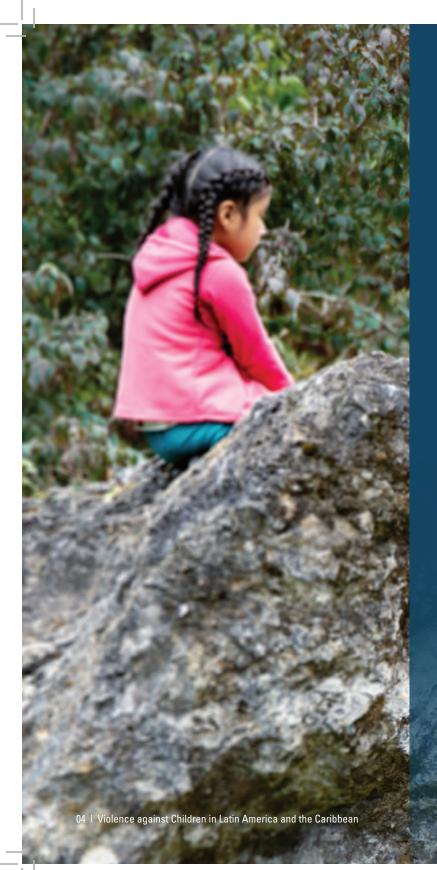


VIOLENCE AGAINST CHILDREN IN LATIN AMERICA AND THE CARIBBEAN

Across Latin America and the Caribbean, violence has become part of everyday life. In fact, by various measures, the region today is considered the most violent in the world. Its high rates of violence against children have been attributed to a dominant patriarchal culture, limited understanding among caregivers of effective non-violent disciplinary methods, authoritarian social norms, weak government systems, corruption, organized crime, narco-economies, urban marginalization, the proliferation of small arms and light weapons, and tough security policies. All these factors, combined with constant threats to gender equality and lack of recognition of the rights of the LGBTQI2+ community, have created a region characterized by stark inequalities.

Available data confirm that being a child in Latin America and the Caribbean is dangerous. This publication offers a snapshot of three forms of violence: corporal punishment and psychological aggression used as disciplinary methods; sexual violence; and violent death, with a focus on armed violence. All of them compromise children's lives and futures and can have dire consequences: early pregnancies, low school performance, health issues, poor mental health, suicidal thoughts, social exclusion and fear.

Violence against children is a reality in all countries in the region, but it does not have to be. This publication concludes with specific strategies and actions that UNICEF and its partners are prioritizing in addressing violence against children in the region. Sadly, however, the response so far has not been proportionate to the problem, and children are paying the price.



VIOLENCE AGAINST CHILDREN IN THE SUSTAINABLE DEVELOPMENT GOALS (SDGS)

A critical component of the 2030 Agenda for Sustainable Development is that every child must be protected from violence and exploitation. This marks the first time that the protection of children from these rights violations has formally been included in a global monitoring framework with time-bound targets. Addressing violence against children is reflected in two child-specific SDG indicators under target 16.2, along with one indicator under target 16.1, which has a broader scope but is meant to be disaggregated by age.

GOAL 16



Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels

Target 16.1: Significantly reduce all forms of violence and related death rates everywhere

• Indicator 16.1.1: Number of victims of intentional homicide per 100,000 population, by sex and age

Target 16.2: End abuse, exploitation, trafficking and all forms of violence against and torture of children

- Indicator 16.2.1: Proportion of children aged 1 to 17 years who experienced any physical punishment and/or psychological aggression by caregivers in the past month
- Indicator 16.2.3: Proportion of young women and men aged 18 to 29 years who experienced sexual violence by age 18

EY FACTS ABOUT VIOLENCE AGAINST CHILDREN IN LATIN AMERICA AND THE CARIBBEAN

Nearly two thirds of children aged 1 to 14 in Latin America and the Caribbean experience violent discipline at home; levels exceed 80 per cent in Haiti, Jamaica and Suriname.

Of the region's 187 million children, 73 million live in countries and territories where corporal punishment at home is still permitted to some extent, while 7 million school-aged children lack full legal protection from corporal punishment at school.

Comparable prevalence data on sexual violence in childhood remain limited, largely due to differences in the definitions used to classify acts as sexual violence. Among countries in the region, levels of sexual violence in childhood among young women vary widely – from just 1 per cent to 25 per cent.

Around 1 in 10 deaths among children and adolescents in the region are the result of homicide, and it is the leading cause of death among adolescents aged 10 to 19.

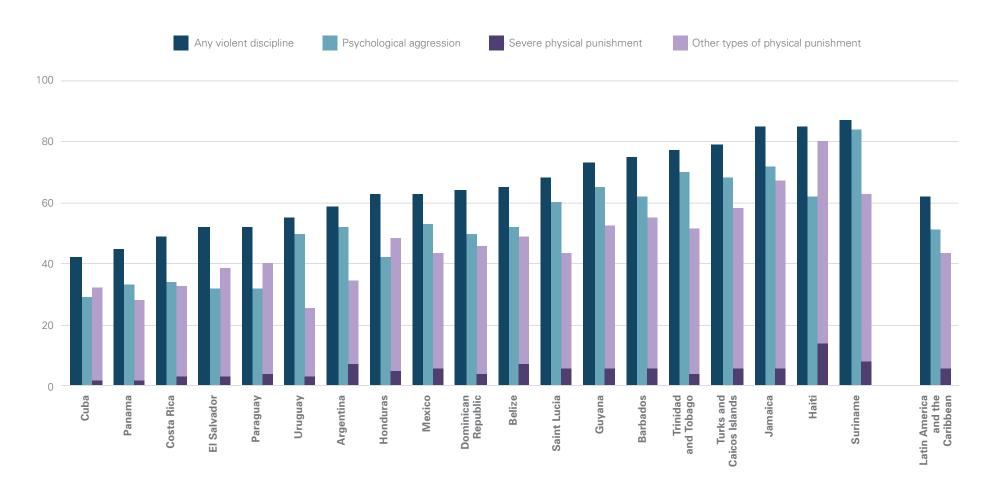
Boys are seven times more likely to die as a result of homicide than girls.

The five countries with the highest homicide rates among children and adolescents worldwide are all in Latin America and the Caribbean.

VIOLENT DISCIPLINE

Nearly 2 in 3 children experience violent discipline at home; levels exceed 80 per cent in Haiti, Jamaica and Suriname

Percentage of children aged 1 to 14 years who experienced violent discipline in the past month, by type



Notes: Data for Barbados, Jamaica, Saint Lucia, Trinidad and Tobago, and Uruguay refer to children aged 2 to 14 years. Data for Mexico refer to children aged 0 to 14 years. Regional estimates are population-weighted averages based on a subset of 19 countries and territories with available data between 2011 and 2020, covering 41 per cent of the regional population of children aged 1 to 14 years.

Source: UNICEF global databases, 2022, based on Multiple Indicator Cluster Surveys (MICS), Demographic and Health Surveys (DHS) and the National Survey of Health and Nutrition (ENSANUT) in Mexico.

DEFINITIONS

Violent discipline

Any physical punishment and/or psychological aggression.

Physical punishment

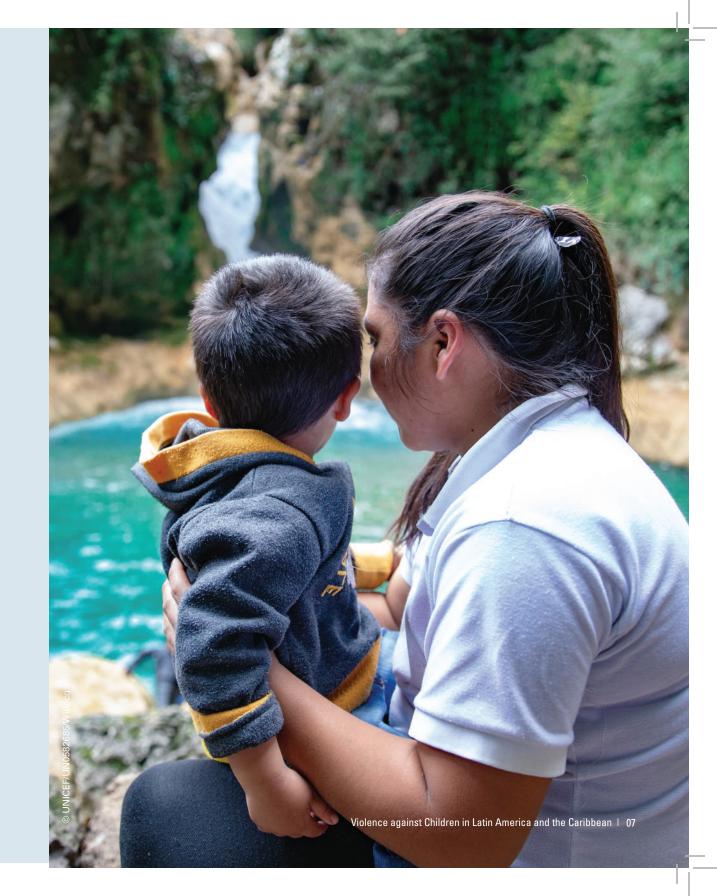
Shaking, hitting or slapping a child on the hand/ arm/leg; hitting on the bottom or elsewhere on the body with a hard object; spanking or hitting on the bottom with a bare hand; hitting or slapping on the face, head or ears; or hitting or beating hard and repeatedly.

Severe physical punishment

Hitting or slapping a child on the face, head or ears or hitting or beating a child hard and repeatedly.

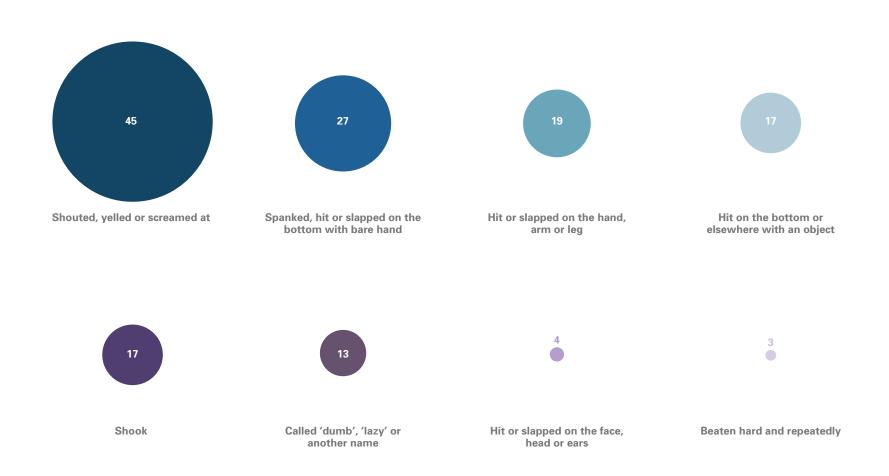
Psychological aggression

Shouting, yelling or screaming at a child as well as calling a child offensive names such as 'dumb' or 'lazy'.



Nearly half of children experience shouting, yelling or screaming as a form of discipline, and around 1 in 4 are subjected to spanking

Percentage of children aged 1 to 14 years who experienced violent discipline in the past month, by type

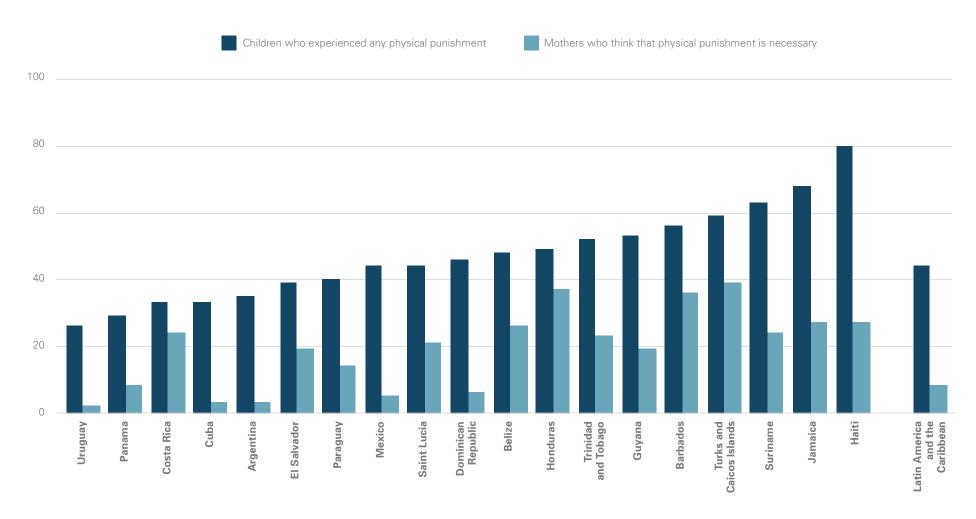


Note: Regional estimates are population-weighted averages based on a subset of 18 countries and territories with available data between 2011 and 2020, covering 20 per cent of the regional population of children aged 1 to 14 years.

Source: UNICEF global databases, 2022, based on MICS and DHS.

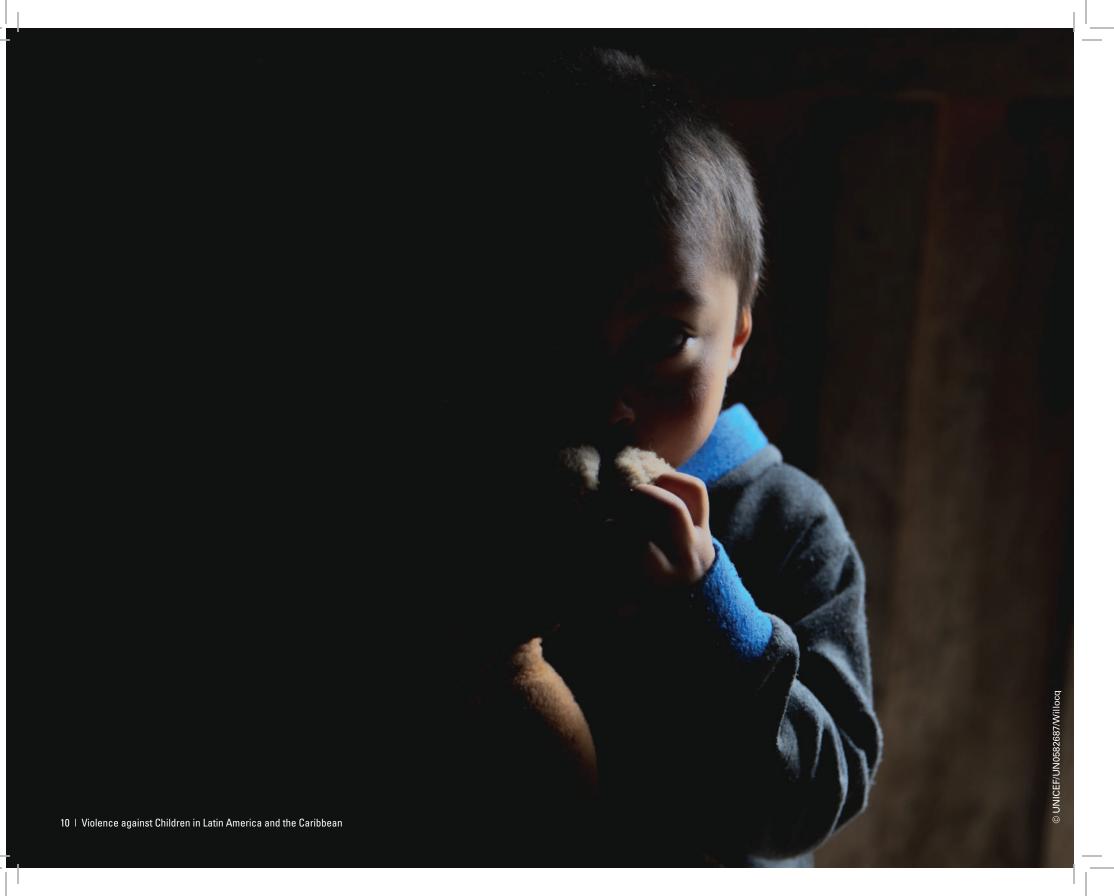
A mismatch is found between the high proportion of children who experience physical punishment and the share of mothers who think it is a necessary form of discipline

Percentage of mothers who think that physical punishment is necessary to properly raise or educate children and percentage of children aged 1 to 14 years who experienced any physical punishment in the past month



Notes: Regional estimates are population-weighted averages based on a subset of 19 countries and territories with available data between 2011 and 2020, covering 38 per cent of the regional female population aged 15 years and older and 41 per cent of the regional population of children aged 1 to 14 years. Data for Barbados, Belize, El Salvador, Haiti, Jamaica, Panama, Paraguay, Saint Lucia, Trinidad and Tobago, and Uruguay refer to attitudes about physical punishment among any adult household member who responded to the child discipline module.

Source: UNICEF global databases, 2022, based on MICS, DHS and ENSANUT.



Only 11 countries have adopted legislation that fully prohibits the use of corporal punishment against children at home and in school: 73 million children live in countries and territories that have not completely outlawed corporal punishment at home, and 7 million school-aged children do not have full legal protection from this form of violence at school

Countries and territories where corporal punishment is prohibited:

	At home	In school	
Anguilla	Not prohibited	Fully prohibited	
Antigua and Barbuda	Not prohibited	Not prohibited	
Argentina	Fully prohibited	Fully prohibited	
Bahamas	Not prohibited	ted Not prohibited	
Barbados	Not prohibited	Not prohibited	
Belize	Not prohibited	Fully prohibited	
Bolivia (Plurinational State of)	Fully prohibited	Fully prohibited	
Brazil	Fully prohibited	Fully prohibited	
British Virgin Islands	Not prohibited	Not prohibited	
Chile	Not prohibited	Fully prohibited	
Colombia	Fully prohibited	Fully prohibited	
Costa Rica	Fully prohibited	Fully prohibited	
Cuba	Not prohibited	Fully prohibited	
Dominica	Not prohibited	Not prohibited	
Dominican Republic	Not prohibited	Fully prohibited	
Ecuador	Not prohibited	Fully prohibited	
El Salvador	Not prohibited	Fully prohibited	
Grenada	Not prohibited	ot prohibited Not prohibited	
Guatemala	Not prohibited	Not prohibited	

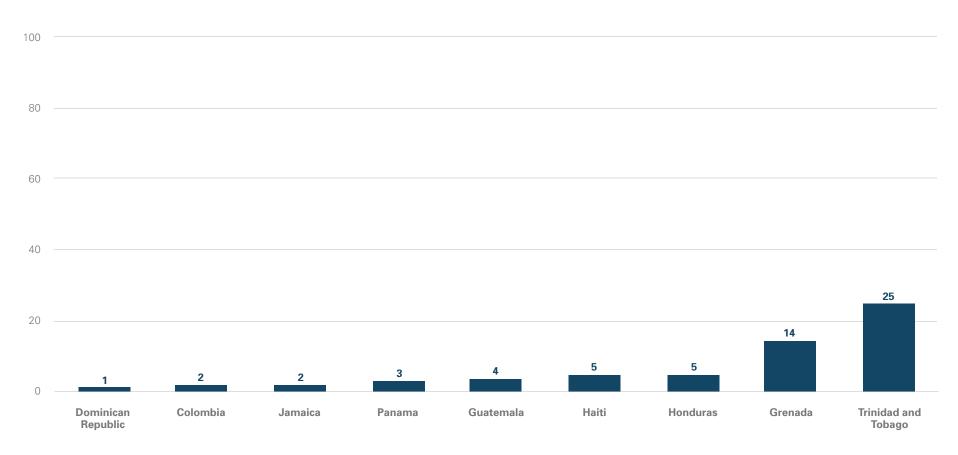
	At home	In school		
Guyana	Not prohibited	Not prohibited		
Haiti	Not prohibited	Fully prohibited		
Honduras	Fully prohibited	Fully prohibited		
Jamaica	Not prohibited	Not prohibited		
Mexico	Partially prohibited	Fully prohibited		
Montserrat	Not prohibited	Not prohibited		
Nicaragua	Fully prohibited	Fully prohibited		
Panama	Not prohibited	Not prohibited		
Paraguay	Fully prohibited	Fully prohibited		
Peru	Fully prohibited	Fully prohibited		
Saint Kitts and Nevis	Not prohibited	Not prohibited		
Saint Lucia	Not prohibited	Not prohibited		
Saint Vincent and the Grenadines	Not prohibited	Not prohibited		
Suriname	Not prohibited	Not prohibited		
Trinidad and Tobago	Not prohibited	Fully prohibited		
Turks and Caicos Islands	Not prohibited	Not prohibited		
Uruguay	Fully prohibited	Fully prohibited		
Venezuela (Bolivarian Republic of)	Fully prohibited	Fully prohibited		

Source: Global Initiative to End All Corporal Punishment of Children as of February 2022.

SEXUAL VIOLENCE

Among countries in the region, levels of sexual violence in childhood among young women vary widely – from just 1 per cent to 25 per cent – largely due to differences in the definitions used to classify acts as sexual violence

Percentage of women aged 18 to 29 years who experienced any sexual violence before the age of 18



Notes: Data for Colombia, Dominican Republic, Guatemala, Haiti, Honduras and Panama refer to sexual intercourse or any other sexual acts that were forced, physically or in any other way. Data for Jamaica refer to being forced to have sexual intercourse, being forced to have sex when too drunk or drugged to refuse, being forced or persuaded to have sex against one's will with more than one man at the same time, being touched sexually against one's will, or being made to do something sexual that was unwanted. Data for Grenada and Trinidad and Tobago refer to sexual touching against one's will or being made to do something sexual that was unwanted.

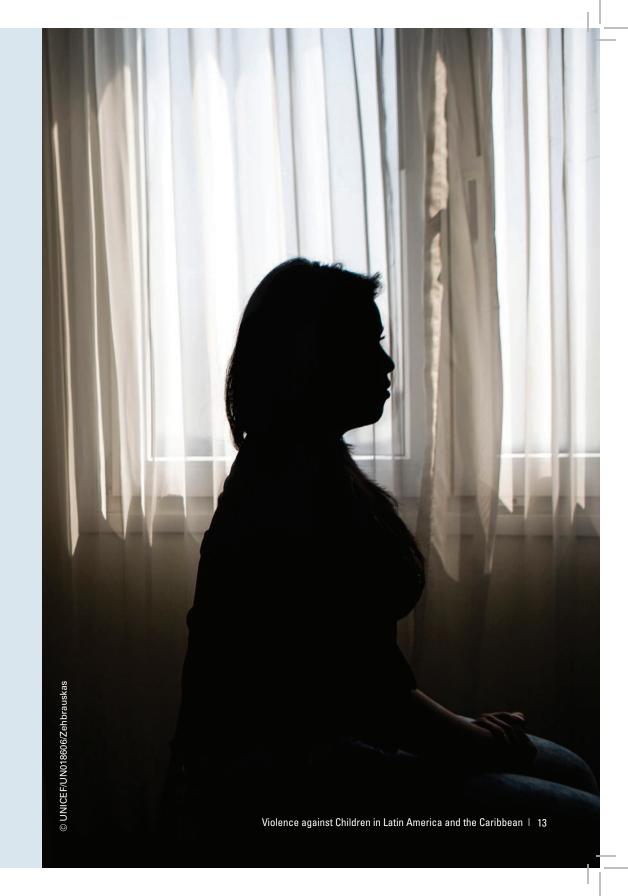
Source: UNICEF global databases, 2022, based on the following surveys: Dominican Republic (DHS 2013), Colombia (DHS 2015), Jamaica (Women's Health Survey 2016), Panama (National Survey of Sexual and Reproductive Health 2014-2015), Guatemala (DHS 2014-2015), Haiti (DHS 2016-2017), Honduras (MICS 2019), Grenada (Women's Health and Life Experiences Survey 2018), and Trinidad and Tobago (National Women's Health Survey 2017).

HOW DEFINITIONS OF SEXUAL VIOLENCE CAN AFFECT PREVALENCE

The availability of comparable data on sexual violence in childhood in the region remains limited. Reported prevalence levels tend to vary, depending on how questions are formulated and what definitions are applied. A broad concept of sexual violence, for example, that includes a wide range of acts – from forced sexual intercourse to unwanted sexual comments – would likely yield higher prevalence rates. Indeed, research confirms that higher rates of sexual violence are obtained in studies that apply a more comprehensive definition of violence and detailed questionnaires.²

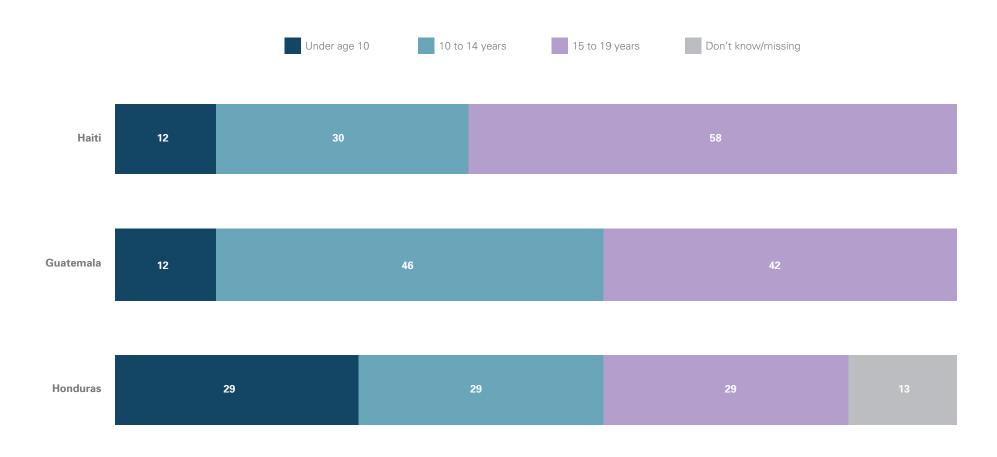
The Violence against Children Surveys (VACS), led by the US Centers for Disease Control and Prevention under the Together for Girls Initiative, are nationally representative household surveys of violence in childhood. To date, four countries in the region (Colombia, El Salvador, Haiti and Honduras) have implemented VACS. Prevalence levels of sexual violence captured by VACS tend to be much higher than those produced through DHS given that the VACS definition covers a wider range of acts, including unwanted sexual touching and attempted or pressured sex, compared to the more limited definition employed in the DHS. For example, the 2012 VACS in Haiti estimated that around 1 in 4 women aged 18 to 24 years had experienced sexual violence (defined as unwanted sexual touching, unwanted attempted sex, physically forced sex or pressured sex) before the age of 18. By comparison, the DHS also conducted in 2012 in Haiti estimated that around 4 per cent of young women had experienced sexual violence (defined as forced sexual intercourse or other forced sexual acts) in childhood.

Systematic government-led data collection efforts using standard measures are therefore needed — urgently. The limited data availability on experiences of sexual violence in childhood among boys is also a critical gap to be filled.



In the few countries with comparable data, girls are particularly vulnerable to sexual violence after age 10

Percentage distribution of girls aged 15 to 19 years who ever experienced sexual violence, by age at first incident

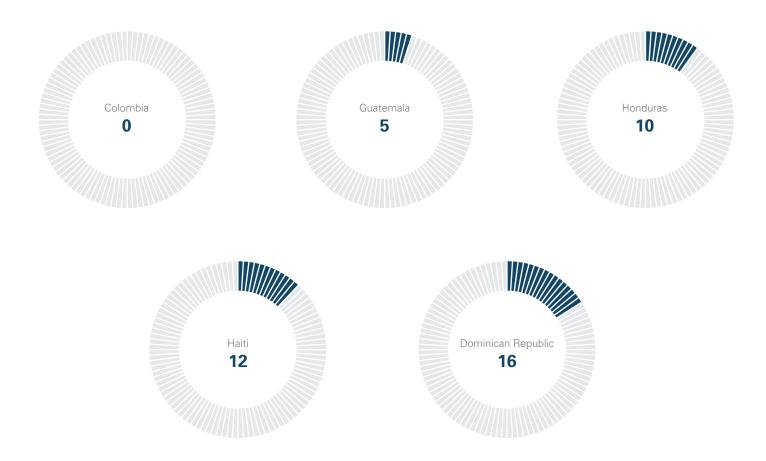


Notes: These data need to be interpreted with caution since there are significant proportions of girls who could not recall the exact age at which they first experienced sexual violence and of missing data overall. Only those countries where the proportion of 'don't know/missing' was less than 20 per cent are included in the chart.

Source: UNICEF global databases, 2022, based on MICS and DHS, 2014-2019.

Seeking help from professionals among adolescent girls who have experienced sexual violence is uncommon in the few countries with comparable data

Percentage of girls aged 15 to 19 years who ever experienced sexual violence and sought help from professional sources



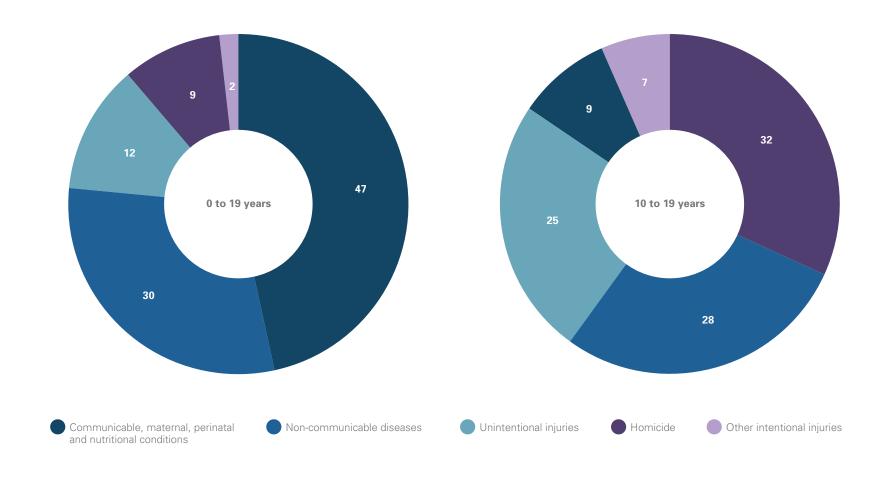
Notes: Professional sources of help include doctor/medical personnel, police, lawyer/court and social service organization. The figures in this chart may overestimate help-seeking from professional sources for experiences of sexual violence since they also include those who have ever experienced physical violence and sought help.

Source: UNICEF global databases, 2022, based on MICS and DHS, 2014-2019.

VIOLENT DEATH

Around 1 in 10 deaths among children and adolescents in the region are the result of homicide, and it is the leading cause of mortality among adolescents aged 10 to 19

Percentage distribution of deaths among children and adolescents aged 0 to 19 years in Latin America and the Caribbean, by age and cause, in 2019



Notes: Values for '10 to 19 years' do not add up to 100 due to rounding. 'Other intentional injuries' include deaths due to self-harm and collective violence and legal intervention. Source: World Health Organization, Global Health Estimates 2020: Deaths by cause, age, sex, by country and by region, 2000-2019, WHO, Geneva, 2020, recalculated by UNICEF.

MORTALITY DATA AND CHALLENGES WITH MEASUREMENT

Estimates of mortality presented in this publication are derived from the Global Health Estimates for 2000 through 2019 produced by the World Health Organization (WHO).³ For countries with high-quality vital registration systems, death registration data are used by WHO to estimate cause-specific mortality. For countries without comprehensive death registration data, WHO drew on the Global Burden of Disease Study 2019 in order to produce estimates of mortality and causes of death.

Substantial gaps remain in data on levels, trends and causes of mortality globally. Such statistics may not be systematically collected by the criminal justice, health or vital registration systems, and determining cause of death, particularly when victims are young, can be challenging – even in countries with advanced and well-functioning systems.

Vital statistics may be a poor source of data on violence-related deaths among children due to the limited information available on many death certificates, strict coding guidelines and/or reluctance to register certain causes of death. In particular, homicides may be substantially underreported in death registration and criminal justice systems.

In the absence of reliable figures from actual counts, mortality estimates for causes of death are necessarily based on modelling methods that attempt to account for possible errors due to underreporting and misclassification of causes of death. However, such estimates, including those presented here, are not without limitations and are also prone to measurement errors.



The mortality rate from homicide among children and adolescents in the region is four times higher than the global average; boys are seven times more likely to die as a result of homicide than girls

Number of deaths and mortality rate (deaths per 100,000) due to homicide among children and adolescents aged 0 to 19 years, by sex, in 2019

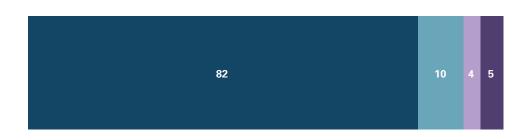
		Rate per 100,000		
Region	Number of deaths	Total	Boys	Girls
Latin America and the Carribean	23,700	12.6	22.6	3.2
World	69,800	3.0	3.9	1.4

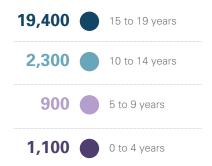
Note: Figures in this table have been rounded.

Source: World Health Organization, Global Health Estimates 2020: Deaths by cause, age, sex, by country and by region, 2000-2019, WHO, Geneva, 2020, recalculated by UNICEF.

More than 80 per cent of young homicide victims in the region are adolescents between the ages of 15 and 19

Percentage distribution of deaths and number of deaths due to homicide among children and adolescents aged 0 to 19 years in Latin America and the Caribbean, by age, in 2019





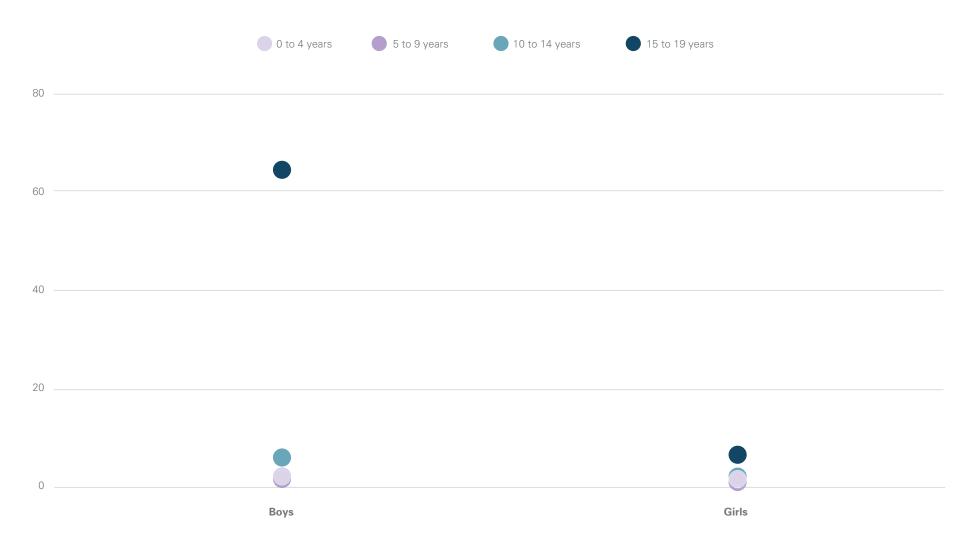
Note: Figures have been rounded.

Source: World Health Organization, Global Health Estimates 2020: Deaths by cause, age, sex, by country and by region, 2000-2019, WHO, Geneva, 2020, recalculated by UNICEF.



Adolescent boys between the ages of 15 and 19 are at the greatest risk of dying by homicide

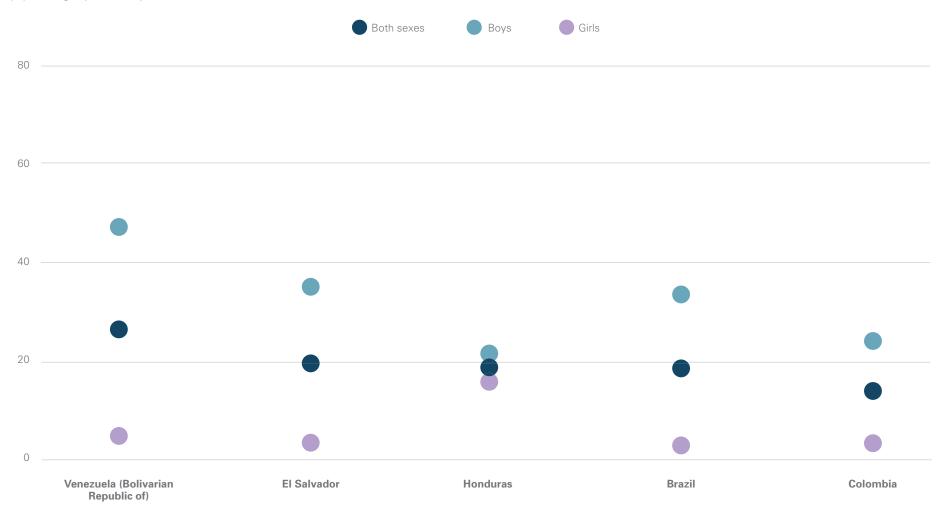
Mortality rate (deaths per 100,000) due to homicide among children and adolescents aged 0 to 19 years in Latin America and the Caribbean, by sex and age, in 2019



Source: World Health Organization, Global Health Estimates 2020: Deaths by cause, age, sex, by country and by region, 2000-2019, WHO, Geneva, 2020, recalculated by UNICEF.

The five countries with the highest homicide rates among children and adolescents worldwide are all in Latin America and the Caribbean, with boys facing far greater risk than girls

Mortality rate (deaths per 100,000) due to homicide among children and adolescents aged 0 to 19 years in the five countries with the highest homicide rates worldwide among this population group in 2019, by sex



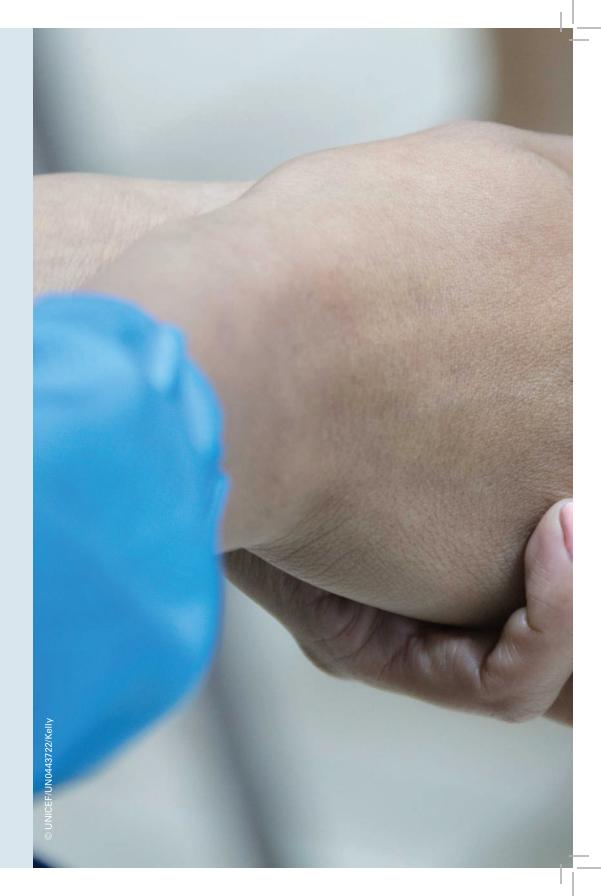
Notes: Multiple years of national death registration data with high levels of completeness and quality on the cause of death were available for the Bolivarian Republic of Venezuela, Brazil and Colombia. Multiple years of national death registration data with low levels of completeness and/or moderate quality issues were available for El Salvador. National death registration data were unavailable or unusable due to quality issues for Honduras; therefore, the estimates should be interpreted with caution.

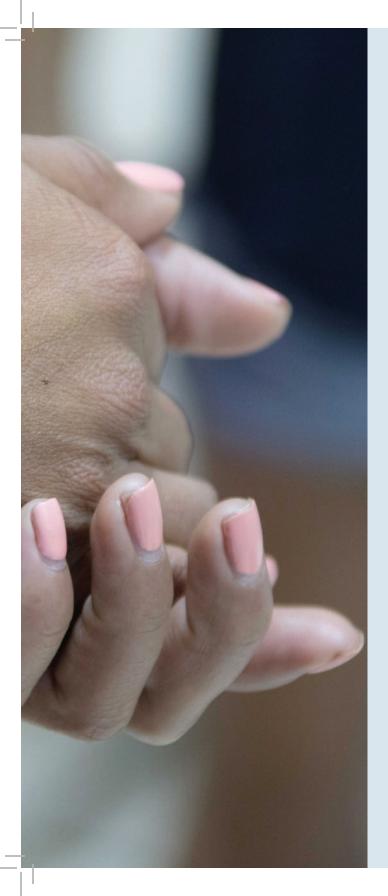
Source: World Health Organization, Global Health Estimates 2020: Deaths by cause, age, sex, by country and by region, 2000-2019, WHO, Geneva, 2020, recalculated by UNICEF.

Homicide in the context of armed violence

The high homicide rates among adolescent boys in Latin America and the Caribbean need to be interpreted in light of pervasive armed violence (defined as the intentional, threatened or actual use of arms to inflict injury or death) in the region, linked to both gang activities and organized crime. In 2015, the 10 countries worldwide with the largest share of male homicide victims among the total homicide victim population were all located in this region; in general, these are also the same countries reporting a large share of homicides due to organized crime and gangs. A similar pattern is observed for homicides committed using firearms, with many of the same countries in the region that have a large share of homicides due to crime also among the top countries for firearm homicides.

In response to the devastating impact of armed violence on children and adolescents in much of the region, UNICEF has been working with its partners to prevent and reduce such violence. From 2013 to 2018, with funding from the Swedish International Development Cooperation Agency (SIDA), UNICEF launched a related subregional programme in nine countries: Belize, Costa Rica, El Salvador, Guatemala, Honduras, Jamaica, Mexico, Nicaragua and Panama. For some countries, such as Belize, Costa Rica, Nicaragua and Panama, the programme represented an opportunity to initiate dedicated work on armed violence. It emphasized community participation, advocacy, evidence-building, public awareness and school-based initiatives. It also helped build the capacity of local institutions to tackle the complex problem of armed violence. Work on this issue has continued as a regional priority in those nine countries and in others, including Brazil and Colombia.





Femicide and other forms of gender-based violence

Femicide⁷ (also referred to as feminicide or aggravated female homicide, depending on national laws) refers to the killing of girls and women based on gender. Femicide can be seen as falling at the extreme end of a long continuum of gender-based violence that includes many other nonlethal forms. The femicide rate (female deaths per 100,000 women) was adopted as a key regional indicator for monitoring SDG target 5.2 by the Statistical Conference of the Americas.

Data from 24 countries and territories in Latin America and the Caribbean indicated that at least 4,640 cases of femicide occurred among girls and women of all ages in 2019.8 The highest rates of femicide recorded in the region that year were in Honduras, El Salvador and Trinidad and Tobago (6.2, 3.3 and 2.9 per 100,000 women, respectively). In seven of the nine countries with data, the majority of femicides were perpetrated by an intimate partner of the victim (conjugal, cohabiting, dating or occasional intimate relationship).

While data on femicide disaggregated by age are limited, at least 86 girls between the ages of 0 and 19 years were victims of femicide in seven countries and territories (Costa Rica, El Salvador, Guatemala, Panama, Paraguay, Puerto Rico and Uruguay) in the region in 2019. In four other countries (Argentina, Chile, Colombia and Mexico), 142 girls under the age of 18 were reportedly victims of femicide that year.

Accurate recording of cases of femicide remains a challenge, stemming from poor reporting practices, the absence of standardized definitions and codes, underreporting, misreporting on causes of death, and insufficient resources and capacity of relevant institutions.

In recent years, a focus on gender-based violence and femicide has grown, both at the global level and in this region. Amidst the COVID-19 crisis and related containment measures, emerging evidence and data indicate that violence against girls and women has intensified in what has been coined the 'shadow pandemic'. Government responses have varied, but in some countries in the region, including Argentina, Colombia, Dominican Republic, Honduras and Mexico, services for women who have been victims of violence were declared as essential and allowed to remain open and operational during periods of lockdown.

PROTECTING EVERY CHILD FROM VIOLENCE

Violence against children is preventable. UNICEF's regional theory of change to end such violence recognizes the importance of engagement at all levels of society. It emphasizes working with children and adolescents, families and other caregivers and enhancing coordinated services and community decision-making. It also highlights the need for national and regional commitment to action complemented by strong legal and policy frameworks. Ending violence against children in Latin America and the Caribbean will demand changes in gender and social norms that perpetuate violence, both in the community and in the political arena. Countering beliefs that normalize sexism, racism and violence itself are fundamental to this goal.

UNICEF engages with government and civil society partners across the region to end violence against children. It works within the specialized child protection system to optimize the strengths of various agencies and structures and considers policies in light of the practicalities of implementation. Examples of initiatives in the region that address corporal punishment, sexual violence and armed violence include the following:

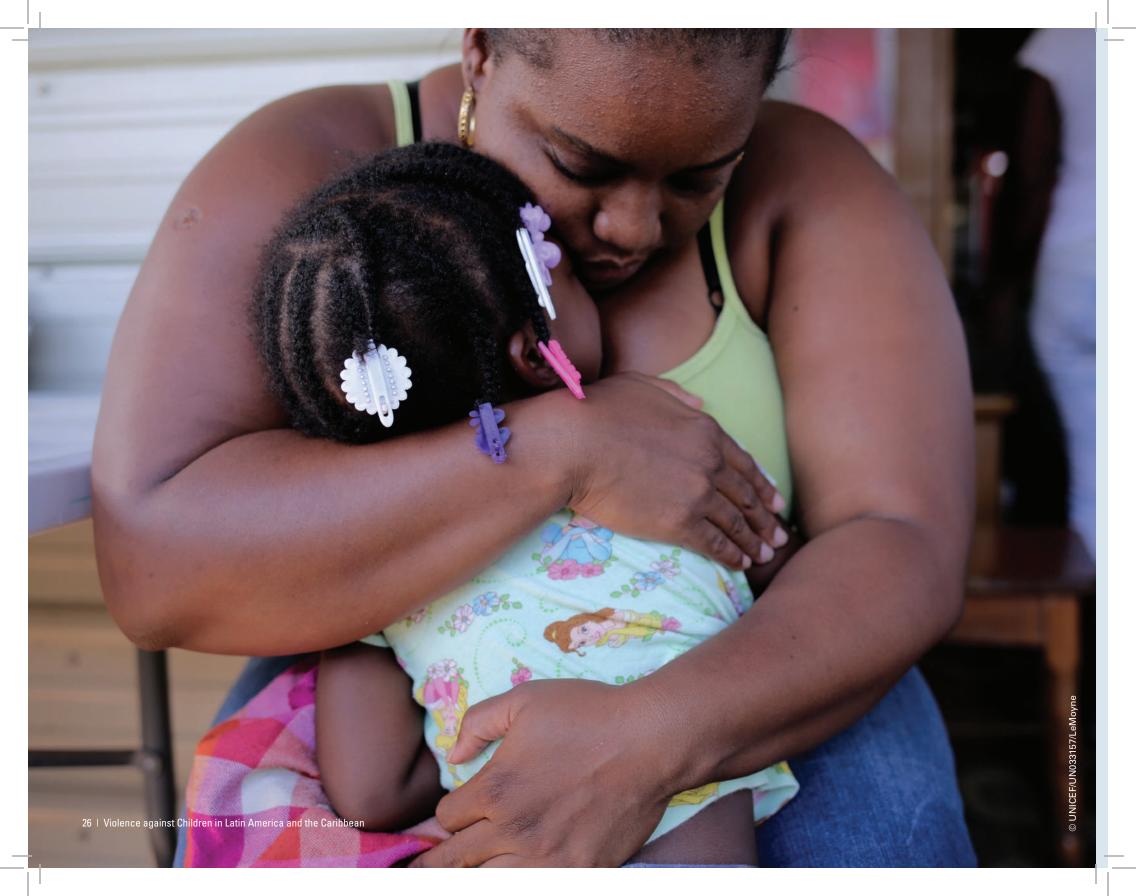
Corporal punishment: Ending corporal punishment requires a change
in mindsets, and one strategy is to encourage parents to use positive and
alternative forms of discipline. In Argentina, UNICEF is providing psychosocial
support to parents and children to reduce risk factors. In Belize, positive
parenting messages are being communicated through WhatsApp/SMS. In
Bolivia, a 'Safe Family' helpline is providing support, counselling and parenting

advice. In Chile, UNICEF is working with the private sector to improve work-life balance and has developed fact sheets on child protection and the prevention of violence at home. In Cuba, a book was published on positive parenting, and in Jamaica, face to face training towards the same end has been carried out. Work on parenting is complemented by support for the implementation of related laws, as in Colombia, and evidence-gathering on the practice, as in the Dominican Republic.

- Sexual violence: Sexual violence is one of the most hidden forms of violence. In Argentina, an Observatory is being created to assess the quality and effectiveness of related interventions and bring about more coordinated responses. In Ecuador, a campaign called 'Now that you see it, say no more' included prevention of sexual abuse among peers as a key message. Case management structures in many countries in the region are ensuring that children who have experienced sexual violence have access to necessary services. This is particularly true in areas with high levels of migration, such as Colombia, Ecuador and Panama.
- Armed violence: Armed violence is a complex multidimensional issue linked to high levels of inequality and exclusion and institutional and structural constraints. In Brazil, UNICEF is working with State Committees for the Prevention of Adolescent Homicide, which has resulted in state funding for violence prevention and victim assistance. Strategies and programmes have been developed in major Brazilian cities to address armed violence, incorporating participation by adolescents, community engagement, the strengthening of the social workforce, school-focused interventions and risk-mitigation for gender-based violence. In Honduras, programmes to address gang activities are creating alternative social networks for children and youth through sports and community networks and activities.

Despite some progress, these efforts are simply not enough. UNICEF calls on governments in the region — all of which committed to end violence against children within the framework of the Sustainable Development Goals — to take urgent and lifesaving action.





ENDNOTES

- 1. United Nations Children's Fund, Reduciendo la Violencia contra la Infancia: Evaluación multi-país de las intervenciones de UNICEF en la región de América Latina y el Caribe, UNICEF, January 2020, https://evaluationreports. unicef.org/GetDocument?fileID=13116>.
- 2. See, for example: Pereda, N., et al., 'The International Epidemiology of Child Sexual Abuse: A continuation of Finkelhor (1994)', Child Abuse & Neglect, vol. 33, no. 6, 2009, pp. 331-342; Collin-Vézina, D., I. Daigneault and M. Hébert, 'Lessons Learned from Child Sexual Abuse Research: Prevalence, outcomes, and preventive strategies', Child and Adolescent Psychiatry and Mental Health, vol. 7, no. 22, 2013, pp. 1-9; Pereda, N., et al., 'The Prevalence of Child Sexual Abuse in Community and Student Samples: A meta-analysis', Clinical Psychology Review, vol. 29, no. 4, 2009, pp. 328-338.
- 3. For details on methods and data sources, see: World Health Organization, WHO Methods and Data Sources for Country-Level Causes of Death, 2000-2019, WHO, Geneva, December 2020.
- 4. Dammert, L., 'Gang Violence in Latin America', in *The Wiley Handbook on* Violence and Aggression, Wiley-Blackwell, New York, 2017.
- 5. United Nations Office on Drugs and Crime, Global Study on Homicide 2019, UNODC, Vienna, 2019.
- 6. Ibid.
- 7. Generally referred to as 'female homicide' in the Caribbean.
- 8. Data collected were published in official documents or sent to the Gender Equality Observatory for Latin America and the Caribbean by the entities that produced the information and by mechanisms for the advancement of women. All data on femicide are drawn from: Economic Commission for Latin America and the Caribbean, Addressing Violence against Women and Girls during and after the COVID-19 Pandemic Requires Financing, Responses, Prevention and Data Compilation, ECLAC, Santiago de Chile, 2020.
- 9. See, for example: United Nations Entity for Gender Equality and the Empowerment of Women, Strategies for the Prevention of Violence against Women in the Context of COVID-19 in Latin America and the Caribbean, Brief v.11.23.04.2020, UN Women Regional Office for Latin America and the Caribbean, Panama City, 2020, <lac.unwomen.org/en/digiteca/ publicaciones/2020/04/prevencion-de-la-violencia-contra-las-mujeresfrente-a-covid-19#view>.

TECHNICAL NOTES

The data presented in this publication are from the most recently available sources identified for each country.

Collecting reliable data on violence against children is a complex undertaking that raises considerable methodological challenges and ethical issues. When interpreting these data, the recommended approach is to exercise caution and assume that figures underestimate the actual number of children affected.



For information on the data contained in this publication:

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