



March 7, 2012

United Nations Committee against Torture
Office of the United Nations High Commissioner for Human Rights
Palais des Nations
CH-1211 Geneva 10
Switzerland

Re: List of issues prior to the submission of the third periodic report of El Salvador

Honorable Committee Members:

This letter is intended to assist the U.N. Committee against Torture (the "Committee") in its preparation of List Of Issues Prior to Reporting ("LOIPR") to be submitted to El Salvador for its third periodic report. The Center for Reproductive Rights (the "Center"), an independent non-governmental organization, hopes to further the work of the Committee by providing independent information concerning the rights protected in the International Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (the "Convention"). This letter highlights the ways in which the State party's restrictive abortion laws and the implementation thereof lead to violations of the Convention.

Article 10(1)¹

- 1. Please indicate whether training and monitoring programmes currently exist for medical personnel to ensure the appropriate treatment of women seeking post-abortion care and other related medical treatment in accordance with World Health Organization (WHO) guidelines and the human rights standards set out in the Convention and other treaties to which El Salvador is a party. If such programs exist, please describe them in detail and provide training manuals or other relevant documentation, if any. If not, please describe plans for the implementation of such programs.*

As described in greater detail with respect to item #6 below, women who seek post-abortion care in state-run or private hospitals in El Salvador following both clandestine abortions and miscarriages, do not receive medical care that meets WHO guidelines or basic human rights standards. Furthermore, as described in greater detail with respect to item #7 below, women who are incarcerated following accusations of obtaining illegal abortions are forced to live in inhuman conditions. In both scenarios, women and girls are subject to treatment that constitutes CIDT under the Convention.

States parties to the Convention have positive obligations to prevent torture and CIDT. In the context of the prevalent violations of Article 16(1) described in greater detail with respect to items #6 and #7 below, the establishment of and continuing support for training programs for medical personnel and the staff of detention facilities is a key element of any strategy designed to prevent and eliminate CIDT. The Human Rights Committee ("HRC") has previously emphasized the importance of appropriate training for medical personnel to prevent CIDT under Article 7 of the International Covenant on Civil and Political Rights ("ICCPR"): "States parties should inform the Committee of the instruction and training given and the way in which the prohibition of article 7 forms an integral part of the operational rules and ethical standards to be followed by such persons."² In addition, research has shown that health care providers who have knowledge of international human rights standards are less likely to report women who have had unlawful abortions to authorities.³ Such care also follows basic ethical guidelines such as those set out by the U.N. General Assembly⁴ and standards governing doctor-patient confidentiality and other aspects of the doctor-patient relationship. The Committee has also emphasized the importance of implementing monitoring programs to ensure treatment of prisoners and other detainees in accordance with the Convention.⁵

- 2. Please describe guidelines that the State party has in place for prosecutors, judges and law enforcement personnel with respect to investigations, prosecutions and other proceedings under the sections of the Penal Code which criminalize abortion. Are there any measures designed to ensure due process throughout such proceedings and how are such measures implemented in practice? How does the State party's system to investigate women who seek post-abortion care or emergency obstetric care function and what safeguards does the system include to prevent violations of the Convention and other international human rights treaties to which El Salvador is a party?*

In El Salvador, women and girls are prosecuted for obtaining abortions in contravention of the Penal Code, including women that have had a miscarriage, have given birth prematurely or have had an otherwise complicated birth that results in the death of the fetus.⁶ Women have been sentenced to two- to eight-year prison terms for obtaining abortions, and in certain cases, to 30-year prison terms for aggravated homicide. Furthermore, women commonly receive such sentences without proper due process guarantees in contravention of international human rights standards, thereby constituting arbitrary detentions. For example, cases often go to trial and are decided without sufficient evidence, women who have miscarriages are typically automatically charged with having had an abortion and public defense lawyers are either unavailable or provide inadequate representation.⁷ Furthermore, in practice, women are often presumed to be guilty.^{8 9}

The Center has conducted in-depth research in El Salvador with respect to the treatment of women in the State party's criminal justice system.¹⁰ For example, Rosemary and Manuela,¹¹ two Salvadorian women, both suffered complications during labor leading to stillbirths. When the women sought follow-up medical care, doctors accused both women of having undergone abortions in violation of El Salvador's restrictive abortion law. Police immediately arrested them for homicide—one of the women was shackled while she was still receiving critical medical care. Both were sentenced to more than 30 years in prison. In Rosemary's case, after more than

eight years in prison, a judge ordered her release, acknowledging that a mistake had been made. Nevertheless, the government never compensated Rosemary for the grievous rights violations. Manuela died in prison; she had suffered from Hodgkin's lymphoma—a form of cancer—before she even became pregnant, but she received treatment only after it was too late to save her.

The Committee has previously emphasized the importance of ensuring due process in criminal proceedings.¹² As discussed in the context of item #8, below, ensuring that basic due process standards are in place is particularly important given that the majority of the women prosecuted are members of marginalized groups within El Salvador.

Articles 12¹³ and 13¹⁴

- 3. Please describe complaint mechanisms, if any, that the State party has in place or plans to put into place to address the CIDT experienced by women in the State party's medical and detention facilities. If such mechanisms exist, please provide information and data on their use, particularly how the security of detainees is guaranteed if they lodge complaints against the personnel in whose custody they are under.*

As described in greater detail with respect to #6 below, women who seek post-abortion or emergency obstetric care after giving birth prematurely or having an otherwise complicated birth that results in the death of the fetus in state-run or private hospitals in El Salvador, do not receive medical care that meets WHO guidelines or basic human rights standards. Furthermore, as described in greater detail with respect to item #7 below, women who are incarcerated following accusations of obtaining illegal abortions are forced to live in inhuman conditions. In both scenarios, women and girls are subject to treatment that constitutes CIDT under the Convention.

The absence of effective complaint mechanisms at both health care and detention facilities have contributed to the prevalence of CIDT in El Salvador. As previously stated, States parties to the Convention have positive obligations with respect to the protection of human rights; such positive obligations include providing effective remedies for violations of fundamental rights, such as those under the Convention.¹⁵ To this end, they must provide meaningful remedies for victims of torture and CIDT.¹⁶

Article 16(1)¹⁷

- 4. What steps has the State party taken to review and reform its legislation on abortion, as recommended by the HRC, the Committee on the Elimination of Discrimination against Women (the "CEDAW Committee") and the Committee on Economic, Social and Cultural Rights ("ESCR Committee") in their latest concluding observations? Has the State party considered amending its legislation to include exceptions such as therapeutic abortion?*

El Salvador's legislation with respect to abortion is one of the most restrictive in the world. Although El Salvador's Penal Code previously included certain exceptions, including for therapeutic abortion,¹⁸ a new Penal Code entered into force in 1998, eliminating such

exceptions.¹⁹ In addition, the State party's Constitution, as revised in 1999, protects life from the moment of conception.²⁰ In practice, the State party's restrictive legislation has had grave consequences because women in El Salvador continue to undergo clandestine abortions in unsafe conditions that put their lives at risk.²¹ Furthermore, women are often prosecuted under the legislation regardless of whether they have had an illegal abortion or a miscarriage, infusing fear into the decision to access medical treatment, as women are subjected to prosecution regardless of the conditions resulting in the emergency obstetric event.²²

In El Salvador, the percentage of women that required hospitalization for reasons relating to abortion increased from 75% in 1998 to 85% in 2002, the period following the State party's new restrictive legislation.²³ In 2005, abortion was the second leading cause of women's mortality in El Salvador.²⁴ Because access to abortion is entirely curtailed in El Salvador, women that require abortion services to save their lives and women that become pregnant as a result of rape or incest have no other option that to continue with their pregnancy in spite of both physical and mental suffering.²⁵

The HRC, the ESCR Committee and the CEDAW Committee have each previously recommended that El Salvador review its legislation which criminalizes abortion.²⁶ In its concluding observations with respect to Chile,²⁷ Peru,²⁸ Nicaragua²⁹ and Ireland,³⁰ the Committee has recommended that states with similarly restrictive legislation review and revise such legislation. According to the Committee, "States parties ... have the obligation continually to keep under review and improve their national laws and performance under the Convention in accordance with the Committee's concluding observations and views adopted on individual communications."³¹ The HRC has elaborated in the context of the ICCPR's prohibition on CIDT,³² stating "[i]t is the duty of the State party to afford everyone protection through legislative and other measures as may be necessary against the acts prohibited by article 7, whether inflicted by people acting in their official capacity, outside their official capacity or in a private capacity."³³ The HRC has also specifically requested information regarding whether States parties to the ICCPR provide access to safe abortion to women who have become pregnant as a result of rape to ensure compliance with article 7.³⁴ Furthermore, the prohibition on CIDT relates to acts that cause mental suffering to the victim in addition to acts that cause physical pain.³⁵ In *L.C. v. Peru*, the failure to provide effective access to therapeutic abortion and the resulting mental suffering have been recognized as a violation of the right to health under the CEDAW Convention, which requires nondiscriminatory access to health care services, including reproductive health services.³⁶ Furthermore, the CEDAW Committee found that the denial of a necessary surgery was a violation of article 5 of the CEDAW Convention, stating "the decision to postpone the surgery due to the pregnancy was influenced by the stereotype that protection of the foetus should prevail over the health of the mother."³⁷ Similar stereotypes are prevalent throughout El Salvador and heavily influence whether women receive appropriate medical care.

In *K.L. v. Peru*, the HRC recognized a violation of article 7 of the ICCPR in the context of withholding abortion care:

- "The fact that [K.L.] was obliged to continue with the pregnancy amounts to cruel and inhuman treatment, in her view, since she had to endure the distress of seeing her daughter's marked deformities and knowing that her life expectancy was short. She

- states that this was an awful experience which added further pain and distress to that which she had already borne during the period when she was obliged to continue with the pregnancy, since she was subjected to an ‘extended funeral’ for her daughter, and sank into a deep depression after her death.”³⁸
- “The omission on the part of the State in not enabling the author to benefit from a therapeutic abortion was, in the Committee’s view, the cause of the suffering she experienced. The Committee has pointed out in its General Comment No. 20 that the right set out in article 7 of the Covenant relates not only to physical pain but also to mental suffering, and that the protection is particularly important in the case of minors. ... Consequently, the Committee considers that the facts before it reveal a violation of article 7 of the Covenant.”³⁹

5. *What mechanisms does the State party have in place to gather reliable statistical information regarding the prevalence of illegal abortions throughout the State, as well as the level of mortality and morbidity resulting therefrom?*

The CEDAW Committee has previously expressed concern regarding the lack of information provided by El Salvador with respect to death and illness resulting from or related to illegal abortion.⁴⁰ Reliable statistics regarding the extent of clandestine abortions, the level of maternal mortality resulting therefrom, the number of suicides of women and girls as a result of unwanted pregnancies and the number of women prosecuted for such abortions would allow the Committee to more adequately understand and address the violations of the Convention described herein.

6. *Does the State party ensure compliance with WHO guidelines to ensure the immediate and unconditional treatment of all persons seeking emergency medical care? What measures has the State party taken to prevent women treated for spontaneous abortion or emergency obstetric care in public hospitals from being reported by the medical or administrative staff for the offence of abortion or homicide? What measures has the State party taken to guarantee medical care for women who have not committed a crime?*

Health care providers commonly deny care to women who have severe pregnancy-related complications, or withhold such care until they confess to having had an illegal abortion, as a result of the fear of being persecuted as accomplices to abortion or homicide.⁴¹ Furthermore, health professionals in El Salvador report women who have had both spontaneous and induced abortions, under pressure by the government to notify the police immediately upon seeing a patient with the relevant symptoms.⁴² However, there is not an explicit requirement under El Salvadoran law that health care providers must make such notifications.⁴³ According to one report, immediately following the passage of El Salvador's more restrictive Penal Code in 1998, the Attorney General distributed a document throughout the country's hospitals stating that anyone who does not report a violent crime will be considered complicit in that crime.⁴⁴

The HRC has previously expressed concern regarding the treatment of women seeking medical care in state-run hospitals: "The Committee remains concerned that women seeking treatment in public hospitals have been reported to the judicial authorities by medical staff who believe they

have been involved in abortions. ... The State party should take measures to prevent women treated in public hospitals from being reported by the medical or administrative staff for the offence of abortion."⁴⁵ As previously stated by the Committee in the context of post-abortion care in Chile, "[i]n accordance with World Health Organization guidelines, the State party should ensure immediate and unconditional treatment of persons seeking emergency medical care."⁴⁶ The Committee also recommended that Chile stop "extracting confessions for prosecution purposes from women seeking emergency medical care as a result of illegal abortion."⁴⁷ Furthermore, the United Nations General Assembly has issued a resolution with respect to medical ethics and the Convention, including the following key principle: "It is a gross contravention of medical ethics, as well as an offence under applicable international instruments, for health personnel, particularly physicians, to engage, actively or passively, in acts which constitute participation in, complicity in, incitement to or attempts to commit torture or other cruel, inhuman or degrading treatment or punishment."⁴⁸

7. *Please describe the conditions in prisons for women who have been incarcerated for violating the State party's prohibition on abortion. What measures, if any, has the State party taken to ensure that such women receive medical care that meets basic standards such as those set forth by the WHO?*

Prison conditions in El Salvador are notoriously poor and the women's prisons are commonly overcrowded. In a 2011 report regarding El Salvador, the United Nations Special Rapporteur on Violence against Women expressed particular concern regarding the poor conditions in women's prisons throughout the country, including "humiliating" body searches, as well as overcrowding and unsanitary conditions.⁴⁹ For example, the Ilopango rehabilitation center, which has space for 220 inmates and 25 – 30 children, currently has 1,344 female prisoners, including 24 pregnant women, 25 boys and 25 girls, primarily babies.⁵⁰ Furthermore, the Center's research has shown that incarcerated women do not receive adequate health care, and that in many instances, the failure to provide basic health care services constitutes CIDT. Reports have shown pregnant women sleeping on the floor or in otherwise unsanitary areas of facilities, which also often have limited ventilation and toilet facilities.⁵¹ Estimates vary, but according to one source, there are currently at least 70 women incarcerated for abortion-related crimes,⁵² many of whom have not yet been convicted.

The Committee has previously expressed concern with respect to harsh prison conditions in a variety of contexts.⁵³ In Australia, the Committee noted with particular concern the "harsh conditions of detention of unconvicted...prisoners,"⁵⁴ as well violence against women in prisons.⁵⁵ Furthermore, the Committee has recommended that positive steps be taken to ensure the treatment of prisoners in compliance with the Convention. For example, with respect to Bulgaria, the Committee recommended "that the State party ensure independent, effective and regular monitoring of all places of detention by independent non-governmental bodies."⁵⁶ The Committee has also made specific recommendations with respect to the handling of searches of detainees in police custody⁵⁷ and the provision of health care in state prisons.⁵⁸

8. *Please describe special measures, if any, the State party has enacted to protect victims of torture and CIDT that are also members of marginalized groups, such as adolescent girls and women living in rural areas.*

In practice, the implementation of El Salvador's restrictive abortion law primarily affects those women who belong to vulnerable social classes, as well as those who live in rural areas with minimal access to health services and basic education.⁵⁹ Such issues are particularly problematic given the pervasive socio-economic inequality in El Salvador,⁶⁰ as well as deeply rooted stereotypes with respect to the proper "roles and responsibilities of women and men" in a variety of social contexts.⁶¹ As previously set out in item #5, it is difficult to draw conclusions from limited statistics; however, in one report, the majority of women who are actually brought to trial for violations of the relevant sections of the Penal Code are young, including adolescents, with little education and limited resources.⁶² In addition, El Salvador's restrictive laws disproportionately affect adolescents given the country's high teen pregnancy rate; 30% of births in El Salvador are among adolescents.⁶³

The principle of non-discrimination is fundamental to any interpretation and analysis under the Convention.⁶⁴ Furthermore, "gender is a key factor" because "[b]eing female intersects with other identifying characteristics or status of the person such as race, nationality, religion, sexual orientation, age, immigrant status, etc. to determine the ways that women and girls are subject to or at risk of torture or ill-treatment and the consequences thereof."⁶⁵ The Committee has specifically requested that measures be taken to punish and prevent violations of the Convention in the context of gender discrimination and other forms of discrimination.⁶⁶

We hope that this information will be useful for the Committee in addressing the list of issues for El Salvador's third periodic review and that the Committee will consider raising the aforementioned issues.

Sincerely,



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¹ Each State Party shall ensure that education and information regarding the prohibition against torture are fully included in the training of law enforcement personnel, civil or military, medical personnel, public officials and other

persons who may be involved in the custody, interrogation or treatment of any individual subjected to any form of arrest, detention or imprisonment.

² *General Comment No. 20: Replaces general comment 7 concerning prohibition of torture and cruel treatment or punishment*, General Comment No. 20, Human Rights Committee, 44th Sess., ¶ 10, U.N. Doc. HRI/GEN/1/Rev.1 (1992) [hereinafter "General Comment 20"].

³ Heath Luz McNaughton, Ellen M.H. Mitchell, Emilia G. Hernandez, Karen Padilla and Marta Maria Blandon. Patient Privacy and Conflicting Legal and Ethical Obligations in El Salvador, *Am. J. Public Health*, 96(11) (2006) [hereinafter Patient Privacy and Conflicting Legal and Ethical Obligations in El Salvador].

⁴ See U.N. General Assembly, *Principles of Medical Ethics*, Principle 2, U.N. Doc. A/RES/37/194 (December 18, 1982) [hereinafter *Principles of Medical Ethics*].

⁵ CAT Committee, *Concluding observations of the Committee against Torture: Bulgaria*, ¶11, U.N. Doc. CAT/C/BGR/CO/4-5 (December 14, 2011) [hereinafter "Bulgaria Concluding Observations"]; CAT Committee, *Concluding observations of the Committee against Torture: Ghana*, ¶18, U.N. Doc. CAT/C/GHA/CO/1 (June 15, 2011) [hereinafter "Ghana Concluding Observations"]; CAT Committee, *Concluding observations of the Committee against Torture: Sri Lanka*, ¶16, U.N. Doc. CAT/C/LKA/CO/3-4 (December 8, 2011) [hereinafter "Sri Lanka Concluding Observations"].

⁶ See Report of the Special Rapporteur on violence against women, its causes and consequences, Rashida Manjoo, Human Rights Council, 17th Sess., Agenda Item 3, U.N. Doc. A/HRC/17/26/Add.2, ¶ 68 [hereinafter "Report of the Special Rapporteur"]; Citizen Working Group On The Decriminalization Of Therapeutic, Eugenetic And Ethical Abortion (El Salvador), *et al.*, Report on Violations of Women's Human Rights due to the Complete Criminalization of Abortion in response to the Periodic Report of El Salvador, 2 (October 2010), available at http://www2.ohchr.org/english/bodies/hrc/docs/ngos/JointSubmission_ElSalvador100.pdf [hereinafter "2010 Shadow Report on El Salvador"].

⁷ Report of the Special Rapporteur, ¶ 68.

⁸ See Morena Soledad Herrera Argueta and Ana Landa Ugarte, Balance de Cuatro Experiencias Mesoamericanas en Torno a la Despenalización/ Penalización del Aborto: Informe de El Salvador, 26 (2009) [hereinafter "Informe de El Salvador"]: "Una vez instalada la legislación sobre aborto y su maquinaria de aplicación, en la práctica las mujeres pierden desde este momento el derecho a la presunción de inocencia. La Fiscalía General de la República se instala en los hospitales de maternidad, instando al gremio médico y personal hospitalario a denunciar a cualquier mujer que llegue a los centros hospitalarios con sospecha de haber abortado."

⁹ 2010 Shadow Report on El Salvador, 5.

¹⁰ The Center for Reproductive Law and Policy, *Persecuted: Political Process and Abortion legislation in El Salvador: A Human Rights Analysis*. The Center for Reproductive Rights, formerly the Center for Reproductive Law and Policy, is currently conducting further research on the subject that is not yet finished.

¹¹ Rosemary has also been previously referenced as Carmen. Center for Reproductive Rights, *Right to Life Toolkit 14* (2012).

¹² See Bulgaria Concluding Observations, ¶ 9; Ghana Concluding Observations, ¶ 10; Sri Lanka Concluding Observations, ¶ 7; CAT Committee, *Concluding observations of the Committee against Torture: Cambodia*, ¶ 15, U.N. Doc. CAT/C/KHM/CO/2 (January 20, 2011) [hereinafter "Cambodia Concluding Observations"].

¹³ Each State Party shall ensure that its competent authorities proceed to a prompt and impartial investigation, wherever there is reasonable ground to believe that an act of torture has been committed in any territory under its jurisdiction.

¹⁴ Each State Party shall ensure that any individual who alleges he has been subjected to torture in any territory under its jurisdiction has the right to complain to and to have his case promptly and impartially examined by its competent authorities. Steps shall be taken to ensure that the complainant and witnesses are protected against all ill-treatment or intimidation as a consequence of his complaint or any evidence given.

¹⁵ Convention against Torture, art. 14 ("Each State Party shall ensure in its legal system that the victim of an act of torture obtains redress and has an enforceable right to fair and adequate compensation, including the means for

as full rehabilitation as possible. In the event of the death of the victim as a result of an act of torture, his dependants shall be entitled to compensation.”)

¹⁶ *Implementation of article 2 by States parties*, General Comment No. 2, Committee Against Torture, ¶ 18, U.N. Doc. CAT/C/GC/2 (2008) [hereinafter General Comment 2]. *See also* Cambodia Concluding Observations, ¶ 16.

¹⁷ Each State Party shall undertake to prevent in any territory under its jurisdiction other acts of cruel, inhuman or degrading treatment or punishment which do not amount to torture as defined in article 1, when such acts are committed by or at the instigation of or with the consent or acquiescence of a public official or other person acting in an official capacity. In particular, the obligations contained in articles 10, 11, 12 and 13 shall apply with the substitution for references to torture or references to other forms of cruel, inhuman or degrading treatment or punishment.

¹⁸ CÓDIGO PENAL [PENAL CODE] art. 169 (1973) (El. Sal.).

¹⁹ CÓDIGO PENAL [PENAL CODE] arts. 133 – 137 (1998) (El. Sal.).

²⁰ CONSTITUCIÓN DE LA REPÚBLICA DE EL SALVADOR [CONSTITUTION] art. 1.

²¹ *See* Report of the Special Rapporteur, ¶ 65: "With regard to access to health care for women, the area of reproductive rights remains one of particular concern. While induced abortion has always been an unlawful act in El Salvador, therapeutic abortion, abortion following rape and abortion on eugenic grounds have been illegal since 1999, when the Constitution was amended to recognize the human person from the moment of conception. The interpretative conflict between the constitutional provisions and those of the Penal Code protecting the right to life of embryonic human beings has led to the criminalization of abortion. This has a direct impact on the current high rates of maternal mortality and adolescent pregnancies, and thus denies women and girls the right to control over their bodies and lives."

²² *See supra* Item #2.

²³ Procuraduría para la Defensa de los Derechos Humanos, *Informe Especial del Señor Procurador para la Defensa de los Derechos Humanos, Licenciado Oscar Humberto Luna, Presentado al Comité para la Eliminación de la Discriminación contra la Mujer de la Organización de las Naciones Unidas (ONU), relacionado al cumplimiento de la Convención Internacional sobre la Eliminación de todas las Formas de Discriminación contra la Mujer, CEDAW 135 (2008) available at* <http://www.pddh.gob.sv/menudocs/publicaciones?start=10>.

²⁴ Report of the Special Rapporteur, ¶ 66.

²⁵ *See id.* ¶ 66: "The absolute prohibition of abortion means that women and girls are condemned to continue pregnancies and to face revictimization by family and society."

²⁶ Committee on Economic, Social and Cultural Rights, *Concluding Observations of the Committee on Economic, Social and Cultural Rights: El Salvador*, ¶ 44, U.N. Doc. E/C.12/SLV/CO/2 (June 27, 2007): "The Committee urges the State party to reform its abortion legislation and to consider exceptions to the general prohibition of abortion, in cases of therapeutic abortion and pregnancy resulting from rape or incest." Human Rights Committee, *Concluding observations of the Human Rights Committee: El Salvador*, ¶ 10, U.N. Doc. CCPR/C/SLV/CO/6 (November 18, 2010): "The Committee expresses its concern that the current Criminal Code criminalizes all forms of abortion, given that illegal abortions have serious detrimental consequences for women's lives, health and well-being. ... The Committee reiterates its recommendation that the State party should amend its legislation on abortion to bring it into line with the Covenant. ... The State party should open a national dialogue on the rights of women to sexual and reproductive health" [hereinafter HRC Concluding Observations: El Salvador]. CEDAW Committee, *Concluding Observations of the Committee on the Elimination of Discrimination against Women: El Salvador*, ¶ 36, U.N. Doc. CEDAW/C/SLV/CO/7 (November 7, 2008): "The Committee urges the State party to facilitate a national dialogue on women's right to reproductive health, including on the consequences of restrictive abortion laws" [hereinafter CEDAW Committee Concluding Observations: El Salvador].

²⁷ CAT Committee, *Concluding observations of the Committee against Torture: Chile*, ¶ 7(b) and (m), U.N. Doc. CAT/C/CR/32/5 (June 14, 2004) [hereinafter "CAT Concluding Observations: Chile"].

²⁸ CAT Committee, *Concluding observations of the Committee against Torture: Peru*, ¶ 23, U.N. Doc. CAT/C/PER/CO/4 (July 25, 2006).

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- ²⁹ CAT Committee, *Concluding observations of the Committee against Torture: Nicaragua*, ¶ 16, U.N. Doc. CAT/C/NIC/CO/1 (June 10, 2009): "The Committee urges the State party to review its legislation on abortion ... and to consider the possibility of providing for exceptions to the general prohibition of abortion for cases of therapeutic abortion and pregnancy resulting from rape or incest" [hereinafter "CAT Concluding Observations: Nicaragua"].
- ³⁰ CAT Committee, *Concluding observations of the Committee against Torture: Ireland*, ¶ 26, U.N. Doc. CAT/C/IRL/CO/1 (June 17, 2011) [hereinafter "CAT Concluding Observations: Ireland"].
- ³¹ General Comment 2, ¶ 4.
- ³² ICCPR, art. 7.
- ³³ General Comment 20, ¶ 2.
- ³⁴ *General Comment No. 28: Equality of rights between men and women (article 3)*, General Comment No. 28, Human Rights Committee, ¶ 11, U.N. Doc. CCPR/C/21/Rev.1/Add.10 (2000).
- ³⁵ General Comment 20, ¶ 5.
- ³⁶ *L.C. v. Peru*, Communication No. 22/2009 ¶ 8.15 (2011), U.N. Doc. CEDAW/C/50/D/22/2009.
- ³⁷ *Id.*
- ³⁸ *Karen Noelia Llantoy Huaman v. Peru*, Communication No. 1153/2003, ¶ 3.4 (2005), U.N. Doc. CCPR/C/85/D/1153/2003.
- ³⁹ *Id.* ¶ 6.3.
- ⁴⁰ CEDAW Committee Concluding Observations: El Salvador, ¶ 35: "The Committee is ... concerned at contradictory statistics available on the issue of maternal mortality which did not allow it to gain a precise understanding of the situation." *Id.*, ¶ 36: "[The Committee] ... requests the State party to include information in its next report on death and/or illness as a result of or related to illegal abortion." *See also* Report of the Special Rapporteur, ¶ 69 – 74; Informe de El Salvador, 64 – 65.
- ⁴¹ Patient Privacy and Conflicting Legal and Ethical Obligations in El Salvador.
- ⁴² 2010 Shadow Report on El Salvador, 3.
- ⁴³ *See* Patient Privacy and Conflicting Legal and Ethical Obligations in El Salvador.
- ⁴⁴ Informe de El Salvador, 61.
- ⁴⁵ HRC Concluding Observations: El Salvador, ¶ 10.
- ⁴⁶ CAT Concluding Observations: Chile, ¶ 7(m).
- ⁴⁷ *Id.*
- ⁴⁸ *Principles of Medical Ethics*, Principle 2.
- ⁴⁹ Report of the Special Rapporteur, ¶ 39 - 40.
- ⁵⁰ *Id.* ¶ 40.
- ⁵¹ *Id.*
- ⁵² Guadalupe Cruz Jaimes, *Procesan a 70 mujeres por abortar en El Salvador*, International Consortium for Medical Abortion (August 25, 2011).
- ⁵³ *See* Bulgaria Concluding Observations, ¶ 21; Cambodia Concluding Observations, ¶ 19; Ghana Concluding Observations, ¶ 15 - 16; Ireland Concluding Observations, ¶ 11 - 12; Sri Lanka Concluding Observations, ¶ 14-15.
- ⁵⁴ CAT Committee, *Concluding observations of the Committee against Torture: Australia*, ¶ 10, U.N. Doc. CAT/C/AUS/CO/3 (May 22, 2008).
- ⁵⁵ Cambodia Concluding Observations, ¶ 15: "[T]he Committee is ... concerned at numerous allegations of cases of sexual violence against women in detention by law enforcement and penitentiary personnel. The Committee is also concerned that such allegations are seldom investigated and prosecuted."
- ⁵⁶ Bulgaria Concluding Observations, ¶ 11. *See also* Ghana Concluding Observations, ¶ 18; Ireland Concluding Observations, ¶ 18 (highlighting the importance of complaint mechanisms); Sri Lanka Concluding Observations, ¶ 16.
- ⁵⁷ CAT Committee, *Concluding observations of the Committee against Torture: Hong Kong*, ¶ 10, U.N. Doc. CAT/C/HKG/CO/4 (January 19, 2009).

⁵⁸ CAT Concluding Observations: Ireland, ¶ 14.

⁵⁹ 2010 Shadow Report on El Salvador, 5.

⁶⁰ *See* Report of the Special Rapporteur, ¶ 9.

⁶¹ *See id.* ¶ 11.

⁶² The Center for Reproductive Law and Policy, *Persecuted: Political Process and Abortion legislation in El Salvador: A Human Rights Analysis*, 8.

⁶³ Loida Martinez Avelar, "El 30% de partos son adolescentes," *La Prensa Grafica* (May 11, 2010).

⁶⁴ General Comment 2, ¶ 20.

⁶⁵ *Id.* ¶ 22.

⁶⁶ *Id.*