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Women of the World:

Laws and Policies Affecting Their Reproductive Lives



Latin America and the Caribbean

The Center for Reproductive Law and Policy
DEMUS, Estudio para la Defensa de los Derechos de la Mujer

In collaboration with partners in

Argentina

Bolivia

Brazil

Colombia

El Salvador

Guatemala

Jamaica

México

Perú

WOMEN OF THE WORLD: LAWS AND POLICIES
AFFECTING THEIR REPRODUCTIVE LIVES:
LATIN AMERICA AND THE CARIBBEAN

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Glossary

Frequently used abbreviations

HIV:

Human Immunodeficiency Virus

AIDS:

Acquired Immunodeficiency Syndrome

STI:

Sexually transmissible infection

NGO:

Nongovernmental organization

Frequently used terms

Aborto culposo (unintentional abortion):

Unintentional abortion is an abortion caused without the direct intention of doing so. An unintentional abortion is a crime if the abortion was the foreseeable result of a person's actions.

Civil law:

Civil law, which derives from Roman law, describes a legal system in which statutes provide the principal source of rights and obligations.

Common law:

Common law refers to a legal system deriving from early English law based on principles, customary norms, or court decisions. Today, it is the body of law that develops from judicial decisions, as distinguished from laws brought forth through legislative enactments.

Estupro (Statutory rape):

The Spanish word *estupro* comes from the Latin *stuprum*, meaning abominable behavior. It is a crime defined as having sexual relations with an underage girl with her consent. In some countries, there must also be an element of deceit for the sexual relations to be criminal; in others, the girl must be a virgin or be known for "decent" sexual conduct. Anyone who has sexual relations with a prepubescent girl is guilty not of *estupro* but of rape of a minor, which carries more severe penalties.

Imprudencia, impericia and negligencia (negligence):

In civil law systems, there are three different kinds of negligence: negligence proper, lack of skill (*impericia*), and recklessness (*imprudencia*). In this report, all three terms are collectively referred to by the English term negligence.

Jurisprudencia (jurisprudence):

Jurisprudencia is the accumulated body of court decisions on a given issue. In civil law systems, prior court decisions generally have no precedential value for courts.

Nonpenalized abortion:

In this report, nonpenalized abortions are those exceptional cases of abortion that are not punishable by law, even where abortion is illegal.

Rapto (abduction for sexual purposes):

Rapto is the crime of taking a person away for romantic or sexual purposes by means of fraud, violence, or threats. This crime incurs a smaller penalty than kidnapping. In some countries the crime is not punished if the victim consents to marriage with the aggressor.

Roman Law:

This term refers to the legal system codified and applied during the era of the Roman Empire. The diverse legal texts written during the Roman Empire are collectively called *Corpus Juris Civilis*, and constitute a body of law that is distinct from English common law and canon law. Roman law constitutes the framework for all of the civil legal systems.

Social Security:

Many Latin American countries have a social security system that includes insurance coverage for health services, disability benefits, retirement benefits, and death benefits for contributing employees or other eligible citizens and their families.

Sociedad Conyugal (Community property):

Community property is a property regime that, unless otherwise agreed in writing by both partners, determines property rights in marriage. Under this regime, all the property acquired by each spouse, as well as the interest and income from inherited property or property acquired before marriage, belongs to both in equal shares. This property is thus divided equally upon legal separation, death, divorce or by contractual agreement between the spouses.

Separación (separation):

Separation refers to the court-ordered dissolution of community property; it is an intermediate stage between marriage and divorce in which the marriage is still valid, but conjugal rights and duties are suspended. In separation proceedings, the court also assigns custody of the children, and establishes the child support and alimony obligations to be paid.

Uniones de Hecho (Domestic partnerships):

Domestic partnerships are stable unions between a man and a woman that resemble a marriage and that generate rights and obligations similar to those of marriage. The law in each country determines the necessary conditions to legally recognize the union as valid. Domestic partnerships are roughly similar to the concept of common law marriage in common law legal systems. Generally, in common law such marriages are contingent on an explicit mutual agreement between the couple, whereas *uniones de hecho* merely require that the couple cohabitates in fact.

Foreword

It is with great pleasure that I present *Women of the World: Laws and Policies Affecting Their Reproductive Lives, Latin America and the Caribbean*. This report is unique in many ways. It is the first publication on Latin America and the Caribbean that describes and analyzes the content of all formal laws and policies that affect women's reproductive lives. The book presents a panoramic view of the region's laws and policies so as to provide some guidance regarding the arenas in which changes beneficial to women's reproductive health can be wrought. The information contained in this report highlights regional trends while indicating the differences that exist among the nine nations discussed. Moreover, the report is the product of a successful collaboration between national-level women's rights nongovernmental organizations located all over the Americas. Both the Center for Reproductive Law & Policy and our regional coordinator for Latin America, DEMUS, Estudio para la Defensa de los Derechos de la Mujer, worked closely and intensely for more than a year to produce this book. Finally, we seek to inform the world outside Latin America and the Caribbean of the legal and policy trends of this region. This report is thus being produced in Spanish and English.

Women of the World: Laws and Policies Affecting Their Reproductive Lives, Latin America and the Caribbean is the second regional report in a global series being produced by the Center for Reproductive Law and Policy. Future reports will focus on East and Southeast Asia, Eastern and Central Europe, the Middle East and North Africa, South Asia and West and Central Africa. We are attempting to enhance knowledge of the vast range of formal laws and policies that govern the actions of billions of people, both women and men, around the world. While there are numerous problems associated with the content and selective implementation of such laws and policies, there remains little doubt that laws and policies are powerful government tools. By making such information available to international, regional and national audiences, we hope to promote worldwide legal and policy advocacy to advance reproductive health and the status of all women. Ultimately, we seek a world in which women and men can be equal participants.

Anika Rahman

Director

International Program

The Center for Reproductive Law and Policy

November 1997

Introduction

Reproductive rights are internationally recognized as critical both for advancing women's human rights and for promoting development. In recent years, governments from all over the world have acknowledged and pledged to advance reproductive rights to an unprecedented degree. Such governmental commitments — at major international conferences, such as the Fourth World Conference on Women (Beijing, 1995), the International Conference on Population and Development (Cairo, 1994), and the World Conference on Human Rights (Vienna, 1993) — have set the stage for moving from rhetoric to reality in the arena of women's rights. But for governments and nongovernmental organizations (NGOs) to work toward reforming laws and policies and implementing the mandates of these international conferences, they must be informed about the current state of laws and policies affecting reproductive rights at the national and regional levels.

Within the global human rights framework, reproductive rights encompass a broad range of internationally recognized political, economic, social, and cultural rights, at both the individual and collective levels. Hence, understanding the laws and policies that affect the reproductive lives of women requires knowledge of the legal and political situation of any given country, because this reality is a key factor affecting women's reproductive choices and their legal, economic, and social situations. All these facts are crucial to the efforts of advocates seeking to promote national and regional legislative reforms that would enhance protection of women's rights and their reproductive health. This knowledge may also assist in the formulation of effective government policies by providing information on the different aspects of women's reproductive lives as well as on their needs and general concerns. The objective of this report is to ensure that women's concerns are reflected in future legal and policy efforts.

Laws are essential tools by which to promote women's reproductive health, facilitate their access to health services, and protect their human rights as users of such services. However, laws can also restrict women's access to the full enjoyment of reproductive health. For example, laws may limit an individual's choice of contraceptive methods, impose penalties on health providers who treat women suffering from abortion complications, and discriminate against specific groups, such as adolescents, by denying them full access to reproductive health services. Laws that discriminate against women or that subordinate them to their spouses in marriage or to their partners in domestic partnerships (*uniones de hecho*), undermine the right to reproductive self-determination and serve to legitimize

unequal relations between men and women. The absence of laws or procedures to enforce existing laws may also have a negative effect on the reproductive lives of women and men. For example, the absence of laws regulating the relationship between health providers and users of reproductive health services may contribute to arbitrary decision making, which may affect the rights and interests of both parties. At the same time, the absence of antidiscrimination laws and of laws promoting equality among diverse sectors of society undermines equal access to reproductive health services, affecting low-income women in particular.

Reproductive health policies are of special importance because they reflect a government's political positions and perspectives on health and women's rights. Some governments treat women as central actors in the promotion of reproductive health. Others view women as a means by which to implement demographic goals set by different economic and cultural imperatives. Public policies can either facilitate global access to reproductive well-being or exclude specific groups by establishing economic barriers to health services. In the latter situation, women who are the poorest, the least educated, and the least empowered are hurt the most. Furthermore, the absence of reproductive health and family planning policies in some countries demonstrates the need for greater effort to assure that governments live up to the commitments they assumed at the international conferences of Vienna, Cairo, and Beijing.

This report sets forth national laws and policies in key areas of reproductive health and women's empowerment in nine Latin American and Caribbean countries: Argentina, Bolivia, Brazil, Colombia, El Salvador, Guatemala, Jamaica, Mexico,

and Peru. This legal analysis examines constitutional provisions and laws and regulations enacted by each country's legislative and executive branches. Moreover, this report discusses ethical codes approved by professional associations whenever the country's legal system recognizes them as being equivalent to law. The government programs and activities examined include those that directly or indirectly involve reproductive health. In addition, this report describes the entities charged with implementing these policies and the mechanisms that enable people to participate in the monitoring of government reproductive programs and activities. This book also includes a description of the civil and socioeconomic rights of women and the status of adolescents in each country. It concludes with an analysis of the regional trends in population, reproductive health, and family planning policies and a description of the existing legal standards in reproductive rights.

This introduction seeks to provide a general background to the Latin American and Caribbean region, the nations profiled in this report, and the information presented on each country. The following section provides an overview of the regional context of Latin America and the Caribbean and places a special emphasis on the legal system and on the principal regional indicators of women's status and reproductive health. This description provides an overall perspective on the Latin American and Caribbean region in terms of the key issues covered in this report. A review of the characteristics shared by the nine countries profiled herein follows. Finally, this chapter includes a description of the content of each of the national-level profiles presented in this report.

I. An Overview of the Latin American and Caribbean Region

Latin America and the Caribbean — comprising South America, Central America, and the English, French and Spanish-speaking Caribbean — represent just over 8% of the world's population. Of the 40 million indigenous people living in the region, 59% are women. Latin America and the Caribbean are often considered a single region not only because of their geographical proximity but also because the nations within this region have experienced similar historic, economic, and structural processes.

A. A SHARED LEGAL TRADITION

Latin American legal systems generally derive from ancient Roman law, which some refer to as a civil legal system because of the common reliance on the important compilation of Roman laws, *Corpus Juris Civilis*. Spain and Portugal introduced

this system into South America during their colonial rule. In this system, legislation is the principal source of the rule of law. It is also important to note that in Latin American countries the customary norms and authorities of indigenous populations exist alongside the formal legal systems. In several countries, the Constitution recognizes these customary laws and authorities. These laws primarily govern issues such as land-holding in the indigenous communities, property inheritance, and marital life. They also establish the usage and customs that determine the status of women in the community.

The legal system of Jamaica derives from common law, which originated in England. This legal system's series of principles and rules derives solely from usage and long-held customs based primarily on unwritten law and has often been adopted by countries that were colonized by England. The primary difference between the common law system and the Roman legal system is the role of courts. In common law regimes, judicial decisions create binding legal norms. In the Roman legal system, legislation is the principal source of law, and judicial decisions establish legal norms only in the rare cases where legislative enactment or constitutional provisions so mandate.

B. REPRODUCTIVE HEALTH PROBLEMS:

A COMMON AGENDA

During the 1980s and the early 1990s, structural adjustment policies throughout the region of Latin America and the Caribbean had a dramatic adverse impact on people's, especially women's, health and quality of life. As government expenditures in health and other social policies were drastically reduced, these adjustments caused economic recession and an increase in poverty throughout the region. Health system reforms in the region resulted in a sudden shift of the governmental role: the government went from being a key provider of health services to being a promoter of either private or public general health insurance. Adjustment programs forced governments to pursue strategies that would allow public health services to become self-financing by taking actions such as charging fees to service users and transferring the responsibility for health provision to private or mixed public and private health care systems. Recent evaluations of the implementation of such measures in the region have shown that they have had an adverse impact on the ability of low-income groups, especially rural and indigenous people, to gain access to health care services.

Latin America and the Caribbean face similar reproductive health problems. The United Nations Population Fund has established that the region requires US\$1.79 billion to ensure universal access to reproductive health and population programs by the year 2000. The average rate of maternal mortality in the region is 194 for every 100,000 live births, the

fourth-highest rate in the world after Africa, Asia, and Oceania. Clandestine abortion is the principal cause of maternal death of Latin American women. In Latin America, approximately four million clandestine abortions are performed annually, of which 800,000 require hospitalization for subsequent complications. Six thousand women die every year from abortion-related complications in Latin America and the Caribbean. In the Caribbean, 30% of all maternal deaths are attributable to unsafe abortions. However, abortion-related hospitalizations are decreasing in the region, as the average rate of contraceptive prevalence among women has increased to about 60%. The governments of Barbados and Guyana have enacted laws that facilitate access to abortion services. However, the overall trend in Latin America is toward restrictive abortion laws. In some countries in the region, liberal policies that commit the government to provide services for women suffering from abortion-related complications coexist with harsh and restrictive laws against health care providers and patients. These contradictions have perpetuated high maternal mortality rates.

Teenage pregnancy in Latin America and the Caribbean now constitutes one of the region's most serious public health problems. Between 1990 and 1995, 15% of women in the region under the age of 20 had at least one child. The English-speaking countries of the Caribbean have higher average rates of teenage pregnancy than Latin America. In the former countries, nearly every female between the ages of 15 and 19 will have a child before turning 20. In Latin America, only 11% of that age group will do so. While some Caribbean countries provide reproductive health services to adolescents more consistently than those in Latin America, in both cases there are few sex education programs and specific policies aimed at adolescents' reproductive health. The average age of first sexual experience or marriage ranges from 18.4 to 23 in the Latin America and the Caribbean region. In the Caribbean, suicide is the principal cause of death among adolescent girls.

The following statistics indicate the status of women's reproductive health in Latin America and the Caribbean. The average number of children per woman is between 2.93 and 3.03 in the Caribbean and 3.13 in Latin America. In the Caribbean, 53% of women who live with their spouse or partner use some contraceptive method, while in Latin America the average is 56%. More specifically, in South America, the contraceptive prevalence rate is 63%, while in Central America it is 49%. The incidence of HIV/AIDS among women in the English-speaking Caribbean is 132 cases for every million women. In Latin America and the French- and Spanish-speaking Caribbean, it is 196 cases for every million women. Blood transfusions are the main means of HIV/AIDS transmission to women in Latin America. In the Caribbean, however, only

0.4% of those infected with the virus contracted it by a blood transfusion. Hence, in the Caribbean, HIV/AIDS is primarily sexually transmitted and the high rates of such transmission are attributable largely to the low social status of Caribbean women and their problems with assuring monogamous relationships with their partners and/or ensuring that their partners use condoms. Although information in the region about the prevalence of sexually transmissible infections (STIs) is very sketchy, there are some indications that STIs are increasingly prevalent in the Caribbean, particularly among adolescents. Recent statistics for Latin America and the Caribbean indicate that for every year of premature death and illness that a man suffers due to STIs, a woman suffers nine.

C. WOMEN'S LEGAL AND SOCIAL STATUS

In the early 1990s, the Inter-American Development Bank published a survey on women's legal status and conditions of equality in sixteen countries in the region, including the nine countries covered in this book. Based on an analysis of constitutional provisions and government commitment to implementing international treaties relating to equality, this report found that there is more inequality, both in legal and social terms, between men and women in the Caribbean than in the other Latin American countries. It is also not surprising that, with 35% of all households headed by women, the Caribbean has the highest percentage of women heads of household in the world. The figure for Latin America is 21%. When the poverty rate of households headed by men and those headed by women are compared, it has been shown that the latter are consistently poorer. These facts relate to the predominance of domestic partnerships (*uniones de hecho* or *concubinato*, concubinage), which are engaged in by 54% of women in the region. Throughout the Latin American and Caribbean region, domestic partnerships receive either less protection than marriage or no protection at all. In those legal systems where such partnerships receive legal recognition, women in general have fewer rights than they do in marriage. In Latin America, the trend is toward the gradual establishment of national laws that recognize and protect these unions.

The disadvantages of women in the labor market and salary discrimination exacerbate the problem of women heads of households. The unemployment rate among women in Latin America and the Caribbean was 13.45% in the first half of the 1990s — 30% higher than the rate for men. Employment is often segregated by sex. Of all Latin American and Caribbean women who work, 77% are employed in the service sector, 15% in the industrial sector, and 9% in the agricultural sector. The woman worker's average salary is equivalent to 67% of a man's. This difference is higher in Caribbean countries than in

Latin American countries. Latin American and Caribbean women spend an average of sixty and fifty-five hours per week, respectively, on unremunerated domestic work.

Other important indicators of women's status are their educational levels and their participation in government. While women in the Latin American and Caribbean region have higher educational levels than in many other regions of the world, in 1995, approximately 13% were illiterate. Rural women in the region are two to three times more likely than urban women to be illiterate. In 1994, women's participation in official positions of decision making was higher in Central American countries (77%) than in South America (49%) and the Caribbean (73%). However, even if women's participation in the executive and legislative branches of government is increasing, considerable inequality in these leadership positions continues.

II. Features of the Selected Nations

The nine countries analyzed in this report represent 50.2% of the population of Latin America and the Caribbean, of which 78% is women. Brazil is the largest and most populous country in the region, with 163 million inhabitants, while Bolivia and El Salvador are the least populated countries, with 8 million and 5.8 million people, respectively. Jamaica, with a population of 2.5 million, is one of the most densely populated countries in the Caribbean. Guatemala's population growth rate of 2.8% is the highest of all nations surveyed, while Jamaica has a growth rate of 0.9%. The eight Latin American countries profiled in this book are Christian, primarily Roman Catholic. Brazil has the highest number of Roman Catholics in the world. All the nations described in this report were categorized by the World Bank as low- to middle-level income countries. Bolivia has the third-lowest gross domestic product ("GDP") per capita in Latin America (\$770), while Argentina has the highest per capita annual income in Latin America and the Caribbean (\$8,629). Jamaica has a GDP per capita of \$1,540, the second highest in the English-speaking Caribbean.

All nine countries that are the subject of this report currently have democratically elected governments. Argentina, Brazil, and Mexico are politically and administratively divided into provinces or states with their own constitutions and select representatives for their own executive, legislative, and judicial branches. Jamaica's legal, political, and economic tradition is similar to the majority of Caribbean countries that comprise the Caribbean Community ("CARICOM"), an association of Commonwealth Caribbean nations. The description of Jamaica's laws and policies in this report provides a crucial tool

for comparative analysis. Moreover, official and statistical information on health issues, desegregated by sex, is available for Jamaica; such reliable information does not exist in other English-speaking Caribbean countries, and was an important factor in the decision to include Jamaica in this report.

The countries selected for this report reflect the features of the different subregions in which they are located. Their similarities and differences reflect their shared heritage as well as the diversity that characterizes the region. For the purposes of this report, the nine Latin American and Caribbean nations being discussed have three critical features in common: a shared legal tradition; similar reproductive health programs; and similar issues regarding the legal status of women, especially rural and indigenous women.

A. SHARED LEGAL TRADITION

All Latin American nations share the same legal tradition, because they derive from the ancient Roman law system. Jamaica, however, follows the English-derived common law system. In addition, in most Latin American countries, formal legal systems coexist with customary judicial systems that regulate native and indigenous communities. Only some countries recognize the juridical value of these norms and forms of administering justice. The Constitution of Bolivia, the country with the largest native population in the region, comprising about 55% of the population, establishes that the authorities of indigenous communities have the right to administer justice. They can do so according to their own norms, customs, and procedures, as a form of "alternative dispute resolution," as long as these norms are not contrary to the Constitution or to national laws. In Guatemala, through the Peace Accords, the government agreed to develop norms that permit the indigenous communities to rule themselves according to their customary laws. Peru recognizes the "customary law" of peasant and native populations, as well as the power of their authorities to apply it. In both cases, the law establishes that neither customary laws nor their application can be inconsistent with fundamental human rights recognized in national laws. Guatemalan law explicitly provides that customary law must not conflict with internationally recognized human rights. These legal limitations are important for the protection of native and indigenous women's rights, since customary laws are often based on gender stereotypes and roles that adversely affect women's human rights and relegate them to inferior social and economic status within the community. For example, in many cases, land-distribution and inheritance laws often benefit only men.

B. REPRODUCTIVE HEALTH PROBLEMS:
A SHARED AGENDA

Although the average fertility rate of the nine countries described in this report is 3.4 children per woman, there are marked differences among nations. Bolivia and Guatemala have an overall fertility rate of 5 children per woman. However, Jamaica has an average fertility rate of 2.4, while Brazil's average is 2.5 children. On average, health professionals assist with 71% of all births. However, there are notable differences between countries. In Guatemala and Bolivia, health professionals assist only 35% and 46%, respectively, of all births, while the rate is 96% and 92%, respectively, in Argentina and Jamaica.

Maternal mortality is very high in all nine nations. It ranges from annual rates of 48 to 600 maternal deaths for every 100,000 live births. In South America, the highest maternal mortality rate is in Bolivia, with 600 maternal deaths per 100,000 live births. Peru has the second-highest rate of maternal mortality — 265 maternal deaths per 100,000 live births. In Central America, El Salvador, with 300 maternal deaths per 100,000 live births, has the highest rate of maternal mortality. The principal causes of maternal mortality in these countries are complications relating to pregnancy, childbirth, postpartum, and abortion. In Jamaica, the rate of maternal mortality has increased in the last few years to 115 per every 100,000 live births, 38% of which are related to abortions. Jamaica also has the highest rate of death from cervical cancer — 41.8 per 100,000 women — in the Caribbean. Eighty percent of all clandestine abortions in Latin America and the Caribbean occur in eight of the countries discussed in this report. Brazil and Mexico have the highest rates of clandestine abortions, which are estimated to be between 800,000 and two million annually.

The Latin American and Caribbean region shares other common reproductive health problems. Among the nine countries examined in this report, the countries with the highest prevalence of contraceptive use are Brazil (77%), Colombia (72%), and Jamaica (67%). Guatemala (35%) and Argentina (43%) have the lowest rates of contraceptive prevalence. Statistical information about HIV/AIDS and STIs is scarce in the region, and there are no consistent standards for collecting data. Brazil has one of the highest rates of HIV/AIDS infection in the world; at the end of 1996, among the 500,000 Brazilians infected with HIV/AIDS, approximately 146,000 are expected to develop AIDS. STI statistics also indicate that this is a problem urgently requiring attention. Official statistics reveal that in El Salvador in 1995, there were only 18,319 cases of STIs reported, while in Brazil between 1987 and 1995 the Ministry of Health reported 451,708 cases of STIs. Pregnancy rates among adolescents are high in most countries. In Jamaica,

one-third of all births are to adolescent mothers, while in Peru, Colombia, and El Salvador, 13% or 14% of women between 15 and 19 are already mothers.

C. WOMEN'S LEGAL AND SOCIAL STATUS

To contextualize women's reproductive health and rights, it is critical to understand their social and legal status. Women's legal situations have a direct effect on their ability to exercise their reproductive rights. Spousal and familial relations, educational level, and access to economic resources and legal protection all determine a woman's ability to make choices about her reproductive health needs and her access to health services.

Violence against women is a serious problem in almost all the countries analyzed in this report. Yet it is also one of the least-documented women's problems. In the countries in which such information is available, the main forms of violence against women include sexual violence, domestic violence, and other forms of physical and psychological violence. In Bolivia, 76.3% of the acts of violence against women were physical acts of violence; 12% were sexual violence, most of which took place in the victim's home. In Peru, only 6,244 complaints of violence against women were brought before a special Lima-based police force; rape and other sexual assaults represent the third most commonly reported crime in the country. In Jamaica, 1,108 cases of rape were reported to the police in 1992. None of the countries examined in this report has specific legislation to protect women against sexual harassment. Argentina and Peru have minimal provisions against sexual harassment in the workplace. El Salvador and Mexico regulate sexual harassment through provisions incorporated within the sexual crime sections of their penal law.

Illiteracy rates in the nine countries examined in this report vary between 4% in Argentina and 50.3% in El Salvador. With the exception of Jamaicans and Argentines, women have higher illiteracy rates than men. Moreover, women who live in rural areas have higher illiteracy rates than those who live in urban areas. In Guatemala, for example, 13% of urban women, compared with 49% of rural women, are illiterate.

III. National-Level Information Discussed

This report presents an overview of the content of the laws and policies that relate to specific reproductive health issues as well as to women's rights more generally. It discusses each country separately, but organizes the information provided uniformly in four main sections to enable regional comparisons.

The first section of each chapter briefly lays out the basic legal and political structure of the country being analyzed, providing a critical framework within which to examine the laws and policies affecting women's reproductive rights. This background information seeks to explain how laws are enacted, by whom, and the manner in which they can be challenged, modified, or repealed. It also lays the foundation for understanding the manner in which countries adopt certain policies.

In the second part of each chapter, we detail the laws and policies affecting specific reproductive health and rights issues. This segment describes laws and policies regarding those major reproductive health issues that have been the concern of the international community and of governments. The report thus reviews governmental health and population policies, with an emphasis on general issues relating to women's status. It also examines laws and policies regarding contraception, abortion, sterilization, HIV/AIDS, and other STIs.

The next section of each chapter provides general insights into women's legal status in each country. To evaluate women's reproductive health and rights, it is essential to explore their status within the society in which they live. Therefore, this report describes laws and policies regarding marriage, divorce, custody of children, property rights, labor rights, access and rules regarding credit, access to education, and the right to physical integrity, including laws on rape, domestic violence, and sexual harassment.

The final section of each chapter focuses on the reproductive health and rights of adolescents. Discrimination against women often begins at a very early age and leaves women less empowered than men to control their sexual and reproductive lives. Women's unequal status in society may limit their ability to protect themselves against unwanted or coercive sexual relations and thus from unwanted pregnancies as well as from HIV/AIDS and STIs. The segment on adolescents focuses on laws and policies relating to reproductive health, marriage, sexual crimes, and sex education.

This report is the product of a collaborative process involving the following institutions: the Center for Reproductive Law and Policy, based in New York; DEMUS, Estudio para la Defensa de los Derechos de la Mujer (Office for the Defense of Women's Rights), based in Lima, Peru; and eight NGOs committed to advancing women's reproductive rights in Latin America and the Caribbean.