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Gender and Inclusive Development Assessment (GIDA)

Dominican Republic

Final Report

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ACRONYMS

ACRONYIVIS					
AFP Administradora de Fondos de Pensiones					
ARS	Administradora de Riesgos de Salud				
ARV	antirretroviral				
ASA Amigos	Siempre Amigos				
ASFL	asociaciones sin fines de lucro				
ASOLSIDA	Alianza Solidaridad por la Lucha Contra el Sida				
CAD	Centros de Atención a la Diversidad				
САР	Centros de Antirretroviral				
CASCO	Coordinadora de Animación Socio-cultural				
ССС	Comunicación para el Cambio de Comportamiento				
CDI	consumidores de drogas inyectables				
CEDAW	Convention on the Elimination of all Forms of Discrimination Against Women				
CEPAL	Comisión Económica para América Latina				
CEPROSH	Centro de Promoción y Solidaridad Humana				
CESDEM	Centro de Estudios Sociales y Demográficos				
CIAC	Centro de Investigación Y Apoyo Cultural				
CIANI	Centros Infantiles de Atención Integral				
CIMUDIS	Círculo de Mujeres con Discapacidad				
CDCS	Country Development Cooperation Strategy				
CDCS-RD	Dominican Republic Country Development Cooperation Strategy				
CITIM	Comisión Interinstitucional de Combate a la Trata de Personas y el Tráfico Ilícito de Migrantes				
CMS	Colectiva Mujer y Salud				
CND	Consejo Nacional de Drogas				
CNSS	Consejo Nacional de Seguridad Social				
CONAVIHSIDA	Consejo Nacional para el VIH y el SIDA				
CONDOR	Conferencia Dominicana de Religiosos y Religiosas				
CONADIS	Consejo Nacional sobre Discapacidad				
CONANI	Consejo Nacional de Niños, Niñas y Adolescentes				
CONDEI	Consejo Nacional de Estancias Infantiles DIDA Dirección de Información y Defensa de los Afiliados a la Seguridad Social				
DGCP	Dirección General de Compras y Contrataciones Públicas				
DGTT	Dirección General de Tránsito Terrestre				

ECLAC	Economic Commission for Latin America and the Caribbean					
END 2030	Estrategia Nacional de Desarrollo 2030					
ENDESA	Encuesta Demográfica y de Salud FAMEAA					
ENHOGAR	Encuesta Nacional de Hogares					
FAO	Food and Agriculture Organization					
FGD	focus group discussion					
FLACSO	La Facultad Latinoamericana de Ciencias Sociales					
GBV	Gender-based violence					
GIDA	Gender and Inclusive Development Analysis					
GEWE	Gender Equity and Women Empowerment					
GODR	Government of the Dominican Republic					
HIV/AIDS	human immunodeficiency virus/acquired immunodeficiency syndrome					
IDDI	Instituto Dominicano de Desarrollo Integral					
IDESCOOP	Instituto de Desarrollo Cooperativo					
IDN	Índice de Desarrollo de la Niñez					
INAP	Instituto Nacional de Administración Pública					
INDOTEL	Instituto Dominicano de las Telecomunicaciones					
INFOTEP	Instituto Nacional de Formación Técnico-Profesional					
INSALUD	Instituto Nacional de la Salud					
INTEC	Instituto Tecnológico de Santo Domingo					
ITS	Infecciones de transmisión sexual					
KII	key informant interview					
LGBTI	Lesbian, Gay, Bisexual, Transgender and Intersex					
MEPyD	Ministerio de Economía, Planificación y Desarrollo					
M&E	monitoring and evaluation					
MINERD	Ministerio de Educación de la República Dominicana					
MIREX	Ministerio de Relaciones Exteriores					
MODEMU	Movimiento de Mujeres Unidas					
MSM	men who have sex with men					
MSP	Ministerio de Salud Pública					
NGO	nongovernmental organization					
NNyA	niños, niñas y adolescentes					
OBMICA	Centro para la Observación Migratoria y el Desarrollo Social en el Caribe					
OECD	Organization for Economic Co-operation and Development					
OIM	Organización Internacional de la Migración					
ONDA	Observatorio de los Derechos de la Niñez y Adolescencia					

ONUSIDA	Programa Conjunto de las Naciones Unidas sobre el VIH/Sida				
РАНО	Pan-American Health Organization				
PEA	Población Económicamente Activa				
PETT	Procuraduría Especializada en Tráfico y Trata				
PLANEG	Plan de Igualdad de Género				
PROFAMILIA	Asociación Dominicana Pro-Bienestar de la Familia				
PROSOLI	Progresando con solidaridad				
PWDs	people with disabilities				
RD	Dominican Republic				
REVASA	Red de Voluntarios Amigos Siempre Amigos				
SAI	Servicios de Atención Integral				
SDSS	Sistema Dominicano de Seguridad Social				
SENASA	Seguro Nacional de Salud				
SFS	seguro familiar de salud				
SIGI	Social Institutions and Gender Index				
SIDA	síndrome de inmunodeficiencia adquirida				
SNS	Sistema Nacional de Salud				
TARV	tratamiento con antirretrovirales				
TRSX	sex workers				
UNESCO	United Nations Educational, Scientific and Cultural Organization				
UNICEF	United Nations Children's Fund				
UPR	Universal Periodic Review				
USAID	United States Agency for International Development				
USAID/DR	United States Agency for International Development/ Dominican Republic				
USG	United States Government				
WHO	World Health Organization				
UNFPA	United Nations Population Fund				
UNODC	Oficina de las Naciones Unidas contra la Droga y el Delito				
UTELAIN	Unidad Técnica Laboral de Atención Integral/Ministerio de Trabajo				
VIH	Virus de Inmunodeficiencia Humana				

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The GIDA team values, recognizes and hopes this report highlights the insights from numerous members from the civil society, advocacy groups, governmental organizations and local actors and voices of those with lived experiences of multiple intersectional discrimination. We hope that the voices are heard from those who experience social exclusion on a daily basis, and the assessment contributes to USAID's efforts to reduce social exclusion, stigma, discrimination of its people and enhance the accessibility and equitability of its programs in the Dominican Republic for the coming years.

EXECUTIVE SUMMARY

USAID/Dominican Republic is currently developing its new Country Development Cooperation Strategy (CDCS) for the period from 2021-2026. USAID's Automated Directives System (ADS) 201 and 205, require Missions to conduct a gender analysis to inform the development of the CDCS. In addition to the mandatory gender analysis, an Inclusive Development Analysis was conducted on the following six vulnerable groups: 1) persons with disabilities 2) at-risk children, youth and orphans 3) persons of Haitian descent 4) victims of human trafficking and smuggling 5) persons living with HIV/AIDS and 6) Venezuelan migrants. The analysis reports on the gender/inclusive development situation in the Dominican Republic and identifies areas of concern, entry points and priorities for action, and informs programmatic decisions in the context of the implementation of the CDCS.

The Gender and Inclusive Development Analysis (GIDA) employs a mixed-methods approach including a document review, key informant interviews (questionnaires), focus group discussions (FGDs), testimonials and participant observation. The quantitative aspect is based on data and recent surveys and studies that provided information about gender, LGBTI persons and the six vulnerable populations. The qualitative aspect is based on information collected through testimonials, interviews, focus groups and field observations conducted in Santo Domingo, Dajabón, Santiago and Puerto Plata. Over sixty interviews were conducted and eight focus group discussions, with over one hundred and fifty participants.

For the analysis of the national context for the social inclusion of women, LGBTI persons, persons affected by human trafficking and smuggling, persons of Haitian descent, Venezuelan migrants, persons with disabilities, persons living with HIV/AIDS and at risk children, youth and orphans, an intersectional approach is essential to comprehend the lived experiences of exclusion, discrimination and marginalization for these populations. There are different levels of discrimination towards these populations within the family, community spheres and public spaces and they face barriers to participate and exercise equal rights in different productive, educational, social and political participation activities.

The analysis found multiple intersectional discrimination towards persons with multiple identities. There are different forms of multiple discrimination to which they are subjected from childhood for reasons of gender, sexual orientation, disability, age, race, statelessness, migrant status, etc. Gender is a cross-cutting factor which interplays with LGBTI identities, race, age, disabilities, victims of human trafficking, stateless persons and migrants. The intersectional approach allows one to examine the various forms of inequality and how they operate together and exacerbate each other. One cannot talk about one inequality separately, as some people are subject to all or most of these inequalities. Greater efforts must be made to design and implement programs that address the gender and social inclusion dynamics at play and the barriers that create differential impacts. Gender norms, cultural biases and stigmatization, power imbalances, unequal control and lack of prioritization of resources, and gaps in institutional support have a detrimental impact on all vulnerable groups.

GENDER

The Dominican Republic is characterized by persistent gender-based constraints that are constraining socioeconomic development, despite strong national policies, strategies and action plans for gender equality and women's empowerment and increased participation of women in politics and reduction of gender gaps in education. The assessment found the most critical domains for this group to be the domain of cultural beliefs and norms, and personal safety and security. The culture of "machismo" in this country sustains multiple forms of discrimination and violence against women and girls.

MAIN FINDINGS

- An entrenched culture of "machismo" is the main barrier to achieving gender equality and women's/girls' empowerment.
- One of the most relevant social issues in the country is gender-based violence.
- Despite a reduction in gender gaps in education, only fifty percent of women are in the workforce, compared to eighty percent of men.
- The gender wage gap is large, with women receiving on average forty-four percent of male incomes, while women also dedicate 3.25 times more than men to unpaid work, mainly caregiving.
- The education system plays a fundamental role in either promoting or overcoming sexism and prejudices and can be either a major barrier or an effective tool for achieving social change.
- There is a lack of political will and commitment for gender equity, which is evidenced by the 2019
 expenditures for policies to promote gender equity, which are allocated only 0.04% of the general
 state budget. This is the second lowest line of social investment in the entire central administration
 after youth.
- It has not been possible to have the legislature enact a comprehensive draft law for the prevention, care, and punishment of gender-based violence in the country.
- Institutional weaknesses impact women's rights, whether because of the absence or weak application of sets of legal rules, failure to punish violations and lack of mechanisms to enforce compliance with policies.
- There are positive trends for women's political participation, with women elected to thirty-five percent of seats in the Chamber of Deputies in 2016, at the provincial level at twenty-eight percent in 2016 and at forty percent within the Superior Electoral Court and Central Electoral Board. But women make up only nine percent of the Senate and twelve percent of mayoral posts.
- There are gaps in maternal health, the risks for Dominican mothers during pregnancy and childbirth remain very high and there is limited sex education and the management of sexual and reproductive rights.
- There has been significant progress made in the integration of women into education with the
 enrollment rate in secondary education for females at over seventy percent, compared to sixty-two
 percent for males, in tertiary education rates are over seventy-five percent for females, compared to
 only forty-one percent for males. Although university enrollment is mostly female, there are still
 low rates of enrollment of women in engineering and computer sciences degrees.

KEY RECOMMENDATIONS

1. Partner with the newly created Gender Equity and Development Offices in State Secretariats, applying journey to self-reliance (J2SR) principles, to support gender policies throughout the public sector.

- 2. Scale up USAID/DR's innovative approaches to men's engagement and education on gender-based violence, and a major increase in prevention programs on a large scale at the grassroots levels, with families, educational centers, with community organizations and churches.
- 3. Create new programs in line with USAID's Women's Entrepreneurship and Economic Empowerment Act of 2018, especially for rural women, young women, women with disabilities, Venezuelan migrant women and women of Haitian descent.
- 4. Support the Ministry of Health to effectively apply the standards on violence against women and to train their personnel and to record and collect statistics, ensure VAW is systematically registered in health services and diagnosed.
- 5. Support the Ministry of Education to implement its gender policy, by strengthening the training efforts of teachers and technicians.
- 6. Support capacity building for full implementation of the National Strategic Plan for the Reduction of Maternal Mortality, National Plan for the Prevention of Adolescent Pregnancies, the National Plan for Gender Equality and Equality, and the National Plan Against Gender Based Violence.
- 7. Support advocacy and mobilization for enactment and implementation of legislative reforms such as: enactment of a comprehensive law for the prevention, care and punishment of gender violence, the approval of a sexual and reproductive health law, recognition of the equal rights of domestic workers, comprehensive education policies on sexuality, and women's political participation.
- 8. Address the obstacles that remain for women in accessing electoral justice and promote knowledge of the internal rules and procedures of political parties and of electoral content, knowledge of legislation and electoral jurisprudence for women lawyers.
- 9. Support organizations that advocate for allocation of budgets for programs for gender equity at the national and sub-national levels and create a mechanism to monitor gender equality policies and their financing.
- 10. Support advocacy for a gender focus in higher education that contributes to overcoming obstacles, barriers and stereotypes that work against women's participation in STEM fields.

LGBTI PERSONS

The assessment found that there is a pattern of discrimination in the country against members of the LGBTI community and those interviewed believe that it is somehow normalized in society. But their fight for equal treatment under the law and human rights has achieved visibility. There is also awareness and the creation of a political debate that has led to some social change, with some of their civil rights being recognized. For LGBTI persons the three domains that are most critical are laws, policies, regulations and institutional practices, access to and control over resources and personal safety and security.

Main Findings

- Trans women are particularly vulnerable to violence and have been historically discriminated against, marginalized and even murdered.
- Those interviewed believe there is no political will to pass the "no to discrimination law."
- There is widespread stigma against homosexuality and ignorance about gender identity in all sectors.

- There are promising actions with the national human rights plan 2018-2020, the Attorney General's Human Rights Unit, the office for public advocacy and the Ombudsman office and NGOs that provide legal assistance.
- There are also positive efforts to ensure inclusion of LGBTI persons in the labor market and to put an end to all forms of discrimination.

KEY RECOMMENDATIONS

- 1. Support legal reforms such as an equality and non-discrimination law that protects and promotes the rights of LGBTI people, changes to the labor code to prohibit discrimination based on sexual orientation, sexual characteristics, identity and gender expression and reforms to the criminal code to criminalize hate crimes or aggravating murder based on sexual orientation, sexual characteristics, identity and gender expression of the victim and to prohibit incitement to hatred for reasons of sexual orientation, sexual characteristics, identity and gender expression.
- 2. Scale up innovative forms of action through various cultural and artistic activities and the successful experiences of organizations like COIN and CEPROSH with religious leaders across the country.
- 3. Support efforts to ensure that all suspected homophobic killings and other instances of homophobic violence and discrimination towards LGBTI persons are thoroughly and independently investigated and the perpetrators brought to justice.
- 4. Support civil society organizations to design and scale up campaigns to fight against discrimination and to do the necessary work around stigma n access to health services, education and other areas.
- 5. Invest in more studies to highlight the reality of exclusion and violence against LGBTI people. It is important to produce more systematic measures of the crimes being committed against the LGBTI community, so that responses can be improved, and progress can be evaluated.
- 6. Support more research or interventions in relation to the health of transgender men and collect data, too, on the situations faced by bisexual people.
- 7. Engage police across the country in community relations and improving their response to vulnerable populations and to reduce levels of violence, extortion and revictimization.
- 8. Ensure that all suspected homophobic killings and other instances of homophobic violence and discrimination towards LGBTI persons are thoroughly and independently investigated and the perpetrators brought to justice.

HUMAN TRAFFICKING AND SMUGGLING

The occurrence of trafficking in persons depends on a set of socio-economic factors and also on a set of political, cultural and legal factors, such as economic growth and income, poverty, cultural and traditional practices that violate human rights, and the complicity of authorities, among others. The assessment found the most critical domain for human trafficking and smuggling is personal safety and security. A main cause of trafficking is the situation of children who live in a cycle of violence and sexual abuse by family members or relatives from their childhood to adulthood, which pushes them to abandon the home and places them in situation of increased vulnerability and at risk of being trafficked.

MAIN FINDINGS

- Vulnerable populations affected by human trafficking and smuggling include women, girls, and boys, working children and street children, migrant workers, Venezuelan women migrants, and undocumented or stateless women and children of Haitian descent.
- One of the fundamental strategies of traffickers is to deprive the victim of any possibility of having resources, they are subjected to violence as a part of an exercise of power.
- Areas of progress in combating trafficking include: greater visibility of trafficking as an issue, increased number of convictions of traffickers, imposition of serious penalties, preparation of a new national action plan for human trafficking, initiatives to combat forced labor, and proposed modification of Law 137-03 on trafficking of migrants and other issues.
- Weaknesses are: insufficient investigations and legal proceedings, lenient sentences imposed on convicted traffickers, lack of specialized, comprehensive and sufficient protection and social services for all victims of trafficking, the failure to detect the signs of trafficking/smuggling, the lack of remission of victims to care centers, and the difficulties for collecting data.

KEY RECOMMENDATIONS

- 1. Design and disseminate tools and training for families and other relatives so they are better equipped to identify when their sons and daughters could be victims of exploitation or trafficking.
- 2. Investigate, prosecute and rigorously convict traffickers who engage in forced labor and sexual trafficking activities, including complicit government officials.
- 3. Provide a specific budget to fully implement the national action plan, to fully implement the protocols to identify adult or minor victims of trafficking and sufficient human and financial resources, as well as training for law enforcement, prosecutors and judges to combat trafficking, particularly outside Santo Domingo.
- 4. Provide and finance comprehensive and specialized services for victims and increase efforts to detect and combat cases of sexual trafficking of minors.
- 5. Proactively detect signs of trafficking among Venezuelan citizens and other undocumented or stateless persons at risk of deportation, including those of Haitian descent.
- 6. Strengthen the data collection around the issue of trafficking, smuggling and the numbers as the data is precarious and insufficient.

PERSONS OF HAITIAN DESCENT

The majority of persons of Haitian descent reside in marginal urban areas, and face obstacles to access education, health and social protection services. In the absence of documentation, they do not have access to formal employment opportunities, and receive wages below the legally established minimum wage. The assessment found that the most critical domains for this group are the laws, the access to and control over resources and personal safety and security. The vulnerability of young women/girls of Haitian descent is an area of major concern. They face multiple forms of discrimination for reasons of gender, age, race and statelessness, which impact their access to education, healthcare, work, any prospects for power and decision making and especially put their personal safety and security at risk.

MAIN FINDINGS

- The Supreme Court Judgment 168-13 has deprived thousands of Haitian migrants and descendants of migrants of their right to Dominican nationality and increased their state of vulnerability.
- Gender and racial discrimination represent additional factors of vulnerability for many women in the country.
- There are high levels of violence against women, young women, adolescents and children of Haitian descent
- The situation for persons of Haitian descent generates great frustration and helplessness, as those without identification are not able to study and they do have access to formal employment.
- This situation has lasted for decades and there is no political will to solve this problem, due to the pressure exerted by conservative, nationalist sectors, which portray Dominicans of Haitian descent as an invasion. Economic interests have benefited from this situation in obtaining cheap labor.

KEY RECOMMENDATIONS

- 1. Support efforts to speed up the process for persons of Haitian descent to be legalized in the country. The regularization process has left many people in limbo and measures need to be taken for the thousands of people whose foreigner identification card expires next year and for the problem for children from mixed couples.
- 2. At the local level, build capacity for the members of the protection networks, so that they can identify minors who are victims of trafficking.
- 3. Support advocacy and mobilization to ensure the commitment of the Dominican state to address access to health, education, social protection and labor rights for this population.
- 4. Improve provision of free legal assistance and document management for persons of Haitian descent by building organizational and human capacity as well as financial and technical resources.

VENEZUELAN MIGRANTS

Most Venezuelan migrants have illegal immigration status, are single and mostly women, they have limited access to labor rights, no access to health care and they are highly educated. The assessment found that the most critical domains for this group are laws, policies, regulations and institutional practices, and personal safety and security.

Main Findings

- Government officials and NGOs report an increase in the number of Venezuelan women brought to the country to dance in strip clubs, where they are subjected to forced prostitution.
- The lack of legal documentation has caused many Venezuelan women and adolescents to fall into networks of traffickers, which means they are victims of gender-based violence.
- In the new context with the visa requirement for the entry of Venezuelan migrants, it means that many families will now remain separated.

KEY RECOMMENDATIONS

1. Support advocacy for policies that take into account the political crisis in Venezuela and grant humanitarian refugee status and work permits and policies for the protection of migrants.

2. Campaigns for better access for migrants to justice, education, health and social security and to provide efficient procedures for validating their work experience and academic degrees.

PERSONS WITH DISABILITIES

There are important advances in the national regulatory framework, for the rights of persons with disabilities and conventions to prevent and eradicate all types of discrimination based on disability. However, this legal framework does not yet translate into inclusive public policies. There is a generalized failure to comply with the letter of the laws. CONADIS also faces barriers linked to limited financial resources, limited coordination with the different sectors of the central government, the judiciary, local governments and the nonprofit sector. The assessment found that the most critical domains for this group are access to and control over resources, and personal safety and security. There are greater risks for the personal safety of disabled people, both in their homes and on the streets.

Main Findings

- The analysis identified high levels of exclusion that affect women and youth with disabilities in greater proportion, especially limitations in labor inclusion and the absence of job opportunities.
- For women, young women and girls with disabilities, subordination is magnified by their gender and by their disability and they experience unique forms of violence, which makes them very vulnerable.
- There is a lack of vigilance by the authorities to ensure compliance with rules for accessibility to public spaces such as schools, buildings, sidewalks, streets, and elevators, among others.
- There are low levels of sex education for persons with disabilities, including education about HIV transmission and prevention, putting women at risk, especially adolescents.
- About forty percent of this vulnerable population does not have access to health insurance.

KEY RECOMMENDATIONS

- 1. Promote public policies for the inclusion of people with disabilities in different fields: education, employment, infrastructure, security, health, and social security.
- 2. Support the strengthening of coordination between CONADIS and NGOs that are specialized in gender equality.
- 3. Support the increase of public officials' capacities to perform intersectional analysis on gender and disability, as a basis for the definition and implementation of public policies.
- 4. Promote that variables related to disability be included in the records and estimates made in the different studies, surveys and administrative records of the different state agencies.
- 5. Address gender-based violence, where women with disabilities are the most vulnerable group, ensuring that they are included in prevention and protection services.

PEOPLE LIVING WITH HIV/AIDS

The assessment found a close relationship between gender and a higher prevalence and/or risk of HIV/AIDS: higher prevalence of HIV among women victims of gender-based violence, women without education, poorest women, women who had their first sexual relation before the age of sixteen, and young women with low levels of education. The critical domains for this group are personal safety and security, and access to and control over resources. People living with HIV/AIDS experience violence in

their homes, in their neighborhoods, and on public transportation, which limits their participation in community activities. In schools they are often victims of harassment, bullying and violence.

Main Findings

- Women living with HIV are the most affected by unemployment, a situation that makes them economically dependent on others.
- There are gaps in equitable access to health care and health-related interventions.
- There is a broad legal and institutional framework that protects and guarantees human rights for people living with HIV/AIDS.
- A high concern is that about sixty percent of men and women living with HIV do not have health insurance.
- Key populations report experiences of discrimination by the National Police, through physical abuse such as threats, raids, physical abuse, sexual abuse, extortion, among others.

KEY RECOMMENDATIONS

- 1. Support advocacy actions to increase and raise the political will to promote the legal reforms necessary, such as Law 135-11 on HIV, law on drugs and controlled substances, social security law and labor code.
- 2. Formulate and implement a gender and HIV policy that includes strategies and actions to address family and community factors that increase the risks and vulnerability of women and girls to HIV/AIDS, such as sexual violence, marriage at an early age, sexual exploitation, among others.
- 3. Strengthen sex education programs in schools, reinforcing the focus on rights and gender equality in the areas of HIV, health and sexual and reproductive rights.
- 4. Promote and support capacity development, coordination processes and resolution of situations of HIV/AIDS, violence and discrimination that occur at the community level.
- 5. Support civil society organizations to work in addressing and eradicating stigma, discrimination and violations of the rights of HIV-positive people.

AT RISK CHILDREN, YOUTH AND ORPHANS

The findings for at risk children, youth and orphans are alarming, especially the prevalence of different forms of violence. The most critical domains for this group are cultural norms and beliefs and personal safety and security. There has been progress in the care and protection of this population group, but much remains to be done. One of the greatest challenges is the scarce availability of information and research.

Main Findings

- Poverty affects a significant number of children and youth and increases risk factors and vulnerabilities.
- There are high rates of gender-based violence in: family, school, community, among others. From 2015 to September 2019, more than 400 women died at the hands of partners or ex-partners, and in that same period a greater number of children and youth remained in orphanages, of which there are no complete records.

- There is weak application of the laws for the protection of children and young people. There are many young people without documentation.
- There are very high rates of teenage pregnancy; rates are higher in rural areas, among young women with low levels of education, from low income households, or in early unions. Women with disabilities, young migrants and young women of Haitian descent are more vulnerable.
- Gender-based violence is a factor in driving young women and girls out of their homes, increasing vulnerability to teenage pregnancy, HIV and STIs and risk to trafficking and smuggling for sexual and commercial exploitation.
- The Dominican Republic has the highest rates of child marriage and early unions in Latin America and the Caribbean. There is a high tolerance and social complicity with relationships between young women/ adolescents and adult men.
- Males have the highest risk in terms of dropout rates, as a result of gender roles in managing and generating resources.

KEY RECOMMENDATIONS

- 1. Promote a greater allocation of the public budget to guarantee the application of the child and youth code.
- 2. Support the strengthening of the institutions such as the National Council for Children, the Ministry of Women and the Ministry of Youth, as well as the sector organizations directly linked to the child and youth protection.
- 3. Support prevention programs with families, educational centers and have more popular education through community organizations, designing and implementing non-sexist programs from a human rights approach at all educational levels.
- 4. Promote the expansion and strengthening of local child and youth protection mechanisms, especially the establishment of local protection boards in municipalities where they do not exist.
- 5. Support the expansion of sexual and reproductive health services and improve capacities of the technical staff at the health centers for the care of youth with disabilities, young pregnant women, regular drug users, among others.
- 6. Support the construction of infrastructure and safe public spaces to guarantee the right to play, sports, recreation and permanent spaces for survivors of violence, LGBTI persons and for at risk youth.
- 7. Prioritize implementing the National Plan for the Reduction of Pregnancies in Adolescents, 2019-2030 (PREA), updating the National Roadmap for the Prevention and Elimination of Violence against Children and Adolescents and develop comprehensive plans and policies for the prevention of adolescent/child marriage.
- 8. Generate more quantitative and qualitative evidence on violence against children and adolescents, the problems of child marriage and early unions, risks to criminality and micro-trafficking, drug users, children with disabilities and orphans.

Sui	Summary: Vulnerable Groups and the Most Critical Domains for Analysis					
	Laws/ Policies / Regulation S	Cultural Beliefs and Norms	Gender Roles / Responsibilities / Time Use	Access to and Control Over Assets and Resource s	Patterns of Power and Decision Making	Person al Safety and Securit y
LGBTI persons	Х			Х		Х
Persons that are trafficked / smuggled						Х
Persons of Haitian Descent	Х			Х		Х
Venezuelan Migrants	Х					Х
Persons with Disabilities				Х		Х
Persons Living with HIV/AIDS				Х		Х
At Risk Children/Youth Orphans		х				Х

INTRODUCTION

PURPOSE OF THE REPORT

This gender and inclusive development analysis provides an overview of the most significant issues related to gender and inclusive development, the findings of the field work and recommendations for gender responsive programming and operations for USAID over the next five years. The Dominican Republic has made progress on gender equality, women's empowerment and inclusive development, but there are still obstacles. The gender analysis identifies the root causes of inequalities and obstacles to achieving gender equality and women's empowerment and makes recommendations on how to reduce gender disparities, how to reduce gender-based violence, how to increase the capability of women and girls to realize their rights, determine their life outcomes, and influence decision-making in households, communities, and societies.

The inclusive development analysis examines constraints, opportunities, and entry points for narrowing social gaps and empowering marginalized groups. The analysis will enable USAID to develop innovative solutions to assist marginalized groups and their advocates to achieve inclusion. Both the gender and inclusive development analyses utilize USAID's six domains for inclusive development: overview of laws, policies, regulations, and institutional practices, cultural beliefs and norms, gender roles, responsibilities, and time use, access to and control over assets and resources, patterns of power and decision-making and personal safety and security in the Dominican Republic.

The gender assessment portion of the report builds upon the gender/inclusive development analysis to assess USAID/DR's attention to gender/social inclusion integration. The gender assessment examined the Mission Results Framework: DO1: Crime and Violence Prevention Strengthened, DO2: Community Resilience to Adverse Impacts of Environmental Threats Increased, DO3: HIV/AIDS Epidemics Controlled and projects for Vulnerable Populations. The assessment highlights the advances made since the last CDCS and includes recommendations for better addressing the gender/inclusive development gaps in programming and operations for the next five years.

GENDER AND INCLUSIVE DEVELOPMENT FRAMEWORK

This analysis complements USAID mandatory gender analysis, which stems from the gender equality and female empowerment policy which informs all activities under design. The policy mandates that USAID-supported programs examine constraints, opportunities, and entry points for narrowing social gaps and empowering marginalized groups. It provides specific recommendations on how to address the needs of marginalized groups through USAID programming. USAID defines inclusive development as "promoting a non-discriminatory, inclusive, and integrated development approach that ensures that all people, including those who face discrimination and thus may have limited access to a country's benefits, legal protections, or social participation, are fully included and can actively participate in and benefit from development processes and activities."²

¹ Suggested Approaches for Integrating Inclusive Development Across the Program Cycle and in Mission Operations Additional Help for ADS 201 Authored by DCHA/DRG/HR July 2018:

https://usaidlearninglab.org/sites/default/files/resource/files/additional help for ads 201 inclusive development 180726 final r.pdf, page

² https://usaidlearninglab.org/sites/default/files/resource/files/additional help for ads 201 inclusive development 180726 final r.pdf, page 1.

Consistent with this focus, USAID has issued policy guidance detailing their commitment to gender and inclusive development including, but not limited to: disability policy, gender equality and female empowerment policy, the national action plan on women, peace and security, the strategy to prevent and respond to gender based violence globally, the global strategy to empower adolescent girls, the action plan on children in adversity, the counter trafficking in persons policy, the vision for ending child marriage and meeting the needs of married children, the C-TIP Code of Conduct, the youth in development policy, the democracy, human rights and governance strategy, LGBT Vision for Action, the Women's Entrepreneurship and Economic Empowerment Act of 2018, and the non-discrimination for beneficiaries policy.³

USAID further believes that investing in gender equality and women's empowerment can help eradicate extreme poverty, build vibrant economies, and unlock human potential on a transformational scale. On February 7, 2019, the White House launched the Women's Global Development and Prosperity (W-GDP) Initiative, which will bring women's economic empowerment to the forefront of the U.S. Government's development agenda. The initiative focuses on three pillars: advancing workforce development and vocational education to ensure women have the skills and training necessary to secure jobs, promoting women's entrepreneurship and providing women with access to capital, markets, technical assistance and networks, striving to remove the legal, regulatory and cultural barriers that constrain women from being able to fully and freely participate in the economy.

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https://www.usaid.gov/what-we-do/gender-equality-and-womens-empowerment/womens-economic-empowerment

I. SUMMARY OF FINDINGS AND ANALYSIS ON GENDER

A. LAWS, POLICIES, REGULATIONS AND INSTITUTIONAL PRACTICES

There is a legal framework that protects women and girls in the Dominican Republic, but there are limitations to the current laws and regulations and problems with implementation and enforcement. There are a few formal laws that explicitly exclude or penalize women and girls and persons who identify as LGBTI from the Dominican society. The Dominican Republic ranks 86th out of 153 countries in the 2020 Global Gender Gap Index from the World Economic Forum.⁴ The country was ranked 74th out of 149 countries in 2018.⁵ This change in ranking on the index shows that the magnitude of gender-based disparities has either increased in the Dominican Republic or has lagged behind improvements in other countries included in the index—or both.

The country has a National Gender Equality and Equity Plan 2020-2030 which contains a chapter on the eradication of all forms of violence against women. Abortion is a crime under Article 37 of the Constitution. The criminalization of abortion affects young women, specifically poor women and girls living in vulnerable conditions. Yet, there is widespread rejection of contraceptive use on religious grounds. There are draft laws awaiting legislative passage that can combat inequalities: integral law for the prevention, attention, sanction and eradication of violence against women, the no discrimination law and the law to regulate sex work. More details on the laws for gender and LGBTI persons can be found in tables in Annex C.

During the field work, most stakeholders consulted agreed that the country has strong national policies, strategies and action plans for gender equality and women's empowerment. But there is a lack of awareness of the National Plan on Gender Equality PLANEG II/III. The consultations with stakeholders also revealed a lack of awareness and application of the Ministry of Health's protocol for attention for women who experience violence. Stakeholders highlighted the limited budget available to the Ministry of Women. Gender equality and women's empowerment are important for the Dominican Republic as it supports the country's constitutional commitment and vision of inclusion and equality.

The Dominican Republic has made commitments to gender equality, which are demonstrated by the many policies, strategies and guidelines that recognize the need to address gender equality issues programmatically and institutionally to achieve sector objectives. There are policy mandates and practices, sector strategies that make it mandatory to address gender equality, social diversity issues and combat gender-based violence as a cross cutting theme. There are also various coordinating committees in the Senate: Committee on Family Affairs and Gender Equality and in the Chamber of Deputies: Standing Committee on Affairs Gender Equality and the Committee for Gender Equity in the Attorney General's Office. There is also an observatory for gender and justice.

A gender mainstreaming approach is evidenced by the Ministry of Public Health (MSP) Office of Gender Equity and Development, which is responsible for ensuring the incorporation of the gender approach in the policies and plans of the sector. However, this Office lacks budget line item allocations for the execution and monitoring of its mandated programs in order to guarantee that women have access to

⁴ World Economic Forum, Global Gender Gap Index 2020: http://www3.weforum.org/docs/WEF GGGR 2020.pdf

⁵ Ibid. page 83-84

⁶ OECD SIGI Country Report 2019: https://www.genderindex.org/wp-content/uploads/files/datasheets/2019/DO.pdf, page 6.

quality health services for adequate care in cases of violence. The Ministry of Education also has a body aimed at promoting gender approaches in educational policies, the Department of Education in Gender and Development. The Ten-Year Education Plan 2003-2013 incorporated a cross-cutting gender criteria in all areas of education policy. Likewise, Curriculum Reform 95-6, as of 2004, formally incorporated gender education in the curriculum into the educational system. But there is still very limited sex education in schools.

The Supreme Court of Justice has two specialized institutional mechanisms for matters of gender and human rights: The Gender Commission of the Judiciary and the Directorate of Family, Childhood, Adolescence and Gender (DIFNAG), the latter coordinates the gender and justice observatory, and it has an internet portal that offers information about the processes, documents and protocols related to violence against women. Another resource of the Ministry of Women are the shelters, created by Law 88-03 with the purpose of providing protection to women victims of violence, along with their children. Currently, only two of these houses are operational and cannot meet the demand from all over the country.

There is a National Commission for the Prevention and Response to Domestic Violence (CONAPLUVI), a national model for the prevention and care of domestic violence. Law 24-97 on domestic violence law reformed the Dominican Criminal Code achieving recognition of violence against women, family and sexual violence. There are fourteen offices of Comprehensive Attention to Gender, Family and Sexual Violence, twelve of them located in municipalities of different provinces and two in the National District. These offices do not offer twenty-four-hour services; there are problems regarding the investigation and evidence in crimes of violence against women, difficulties in obtaining Protection Orders and there is no Public Defender's Office for the victim. Only two of these offices provide limited services for treatment of perpetrators located in the National District and in Santiago, which limits the possibilities of preventing repeated occurrence of cases of violence against women. The National Directorate of Attention to Victims provides training for justice system personnel.⁷

Violence against women is often not registered in health services, nor diagnosed, which results in consistent underreporting of cases. The country does not have a comprehensive health and sexual rights and reproductive rights policy and there is a lack of application of sexual and reproductive health protocols. Comprehensive sexuality education remains almost non-existent in the country. There is a lack of regulations for equality and recognition of the rights of people with diverse sexual identities. For the year 2019, the expenses computed to "gender equity" barely represent 0.04 percent of the general state budget. With DR \$ 410.5 million allocated, it is the second lowest line of social investment in the entire central administration, behind youth. In proportion to GDP, it barely stands at 0.01 percent.⁸

Some of the main legislative reforms needed to overcome the persistent gaps that affect women and limit the exercise of their human rights are:

- Enactment of a comprehensive law for the prevention, care and punishment of gender violence
- Approve a sexual and reproductive health law that promotes the exercise of sexual and reproductive rights.

⁷ Sistema de atención a la violencia contra las Mujeres: Alcances y Desafíos. República Dominicana, 2013 Instituto Tecnológico de Santo Domingo, INTEC Área de Ciencias Sociales y Humanidades Centro de Estudios de Género, CEG-INTEC 5 de marzo, 2013, pp. 3-4

⁸ Macro de Proyecciones Macroeconómicas oficiales, 2018-2022; MEPyD, 2018: https://bit.ly/2DhFYfv

- Enact legislation concerning the conciliation between the labor and family sphere, particularly the recognition of the equal rights of domestic workers.
- Implement comprehensive education policies in sexuality.
- Overcome weaknesses in the application of existing norms and the regulation of women's political participation in conditions of parity.⁹

A promising new development is the creation of Gender Equity and Development Offices in State Secretariats through Decree No. 974-01 and the associated regulations. There is a Gender Commission; the Ministry of Women has led GODR policy; there is the quota law for political parties; a gender strategy for violence prevention and an action plan; there is work being done on the construction of new masculinities and there is the Public Ministry School, with education, awareness and awareness for gender issues. There is also attention to violence with Article 181, Law 76-02 criminal procedure code, a Specialized Directorate for the Care of Women and Domestic Violence at the National Police, an emergency telephone Line 2417 and the 212-Women's Line run by the Attorney General's Office.

1. LGBTI PERSONS

There are several non-discriminatory laws in the Dominican Republic and a few examples of laws that mention the category of sexual orientation. There are no laws criminalizing consensual sexual relations between adults of the same sex. The laws that mention the category of sexual orientation include Law 49-00¹⁰ that prohibits discrimination based on sexual orientation and gender identity for LGBTI youth, Law 33-18 for no type of discrimination based on sexual preference in Political Parties Law¹¹ and Law 172-13 that prohibits the collection of information on the preference or sexual orientation of a person. ¹² A detailed table of laws can be found in Annex C. The National Human Rights Plan 2018-2020 includes commitments for actions to eliminate discrimination based on sexual orientation and gender identity. The Attorney General's Human Rights Unit also has made efforts for the prevention and prosecution of crimes against LGBTI persons. The Office for Public Advocacy and the Ombudsman Office provide legal assistance for LGBTI persons. There are also NGOs that provide legal assistance for cases of violence and discrimination for LGBTI persons.

There is no equality and non-discrimination law that protects and promotes the rights of LGBTI people. There are no laws to: allow the change of gender for trans people in identity documents or civil registry (identity card, passport and birth certificate), permit legal unions between people of the same sex, affiliate same-sex couples to health insurance, place same-sex couples as the beneficiary of death pensions, permit adoption of children and adolescents by same-sex couples. The current Labor Code does not prohibit discrimination based on sexual orientation, sexual characteristics, identity and gender expression. The current Criminal Code does not criminalize hate crimes or aggravating murder based on sexual orientation, sexual characteristics, identity and gender expression of the victim. The current Criminal Code does not prohibit incitement to hatred for reasons of sexual orientation, sexual

⁹ Ciclo de Vida de las Mujeres Expresion de la Exclusion Social en la Republica Dominicana, Instituto Tecnologico de Santo Domingo (INTEC) Área de Ciencias Sociales y Humanidades Centro de Estudios del Genero Santo Domingo, 5 de marzo, 2018.

¹⁰ El Congreso Nacional, Secretaría de Estado de la Juventud, Ley 49-00, Artículo 2, page 3, found at: https://www.poderjudicial.gob.do/documentos/PDF/leyes/LEY 49 00.pdf

¹¹ Ley núm. 33-18, de Partidos, Agrupaciones y Movimientos Políticos. G. O. No. 10917 del 15 de agosto de 2018. EL CONGRESO NACIONAL, page 1, found at: http://www.opd.org.do/images/PDF ARTICULOS/Partidos politicos/Ley-num-33-18-de-Partidos-Agrupaciones-y-Movimientos-Politicos.pdf

 $^{^{12}}$ El Congreso Nacional, Ley 172-13, G. O. No. 10737 del 15 de diciembre de 2013, page 25, found at: https://indotel.gob.do/media/6200/ley 172 13.pdf

characteristics, identity and gender expression. ¹³ Please refer to more details in the table on existing laws and action plans for LGBTI persons in Annex C.

A promising advance has been the country's first LGBTI National Dialogue which was held in Santo Domingo between May 7-8, 2019. One hundred forty participants attended from civil society, government, academia, private sector, international cooperation agencies, embassies, media, representatives from churches and political parties. It was organized by the regional project "Being LGBTI in the Caribbean" in partnership with USAID and UNDP. The LGBTI National Dialogue aimed to promote actions in favor of social inclusion and effective access to all human rights of LGBTI people.¹⁴

The UN Universal Periodic Review succinctly describes the gaps in national legislation provisions prohibiting discrimination based on sexual orientation or gender identity and how the state needs:

- To ensure that all suspected homophobic killings and other instances of homophobic violence and discrimination towards LGBTI persons are thoroughly and independently investigated and the perpetrators brought to justice.
- To establish and implement policies and initiatives to address discrimination based on sexual orientation or gender identity.

The Americas Barometer in the Dominican Republic 2018/19 includes variables measuring public opinion for the and support for legal recognition of couples from the same sex. With regard to the right to marry for same-sex couples, the level of approval is low in the Dominican Republic and shows that, in 2019, twenty-three percent of Dominicans approve this right and there is an increase in the level of approval of same-sex marriage between 2014 and 2016, from eighteen percent to twenty-three percent and this percentage remained stable in 2019. ¹⁶

B. CULTURAL NORMS AND BELIEFS

The "machista" mentality in the country is the main barrier to achieving gender equality and social inclusion according to all those interviewed for this assessment. Many girls grow up learning that marriage and motherhood are forms of emancipation and a way into adulthood. There is a traditional gender role division that assigns men the role of provider and women have a reproductive role. The degree of machismo in the country ignites violence. Staff were interviewed that work directly with

¹³ UNDP, Dialogo Nacional LGBTI, Hoja de Datos, Panel 1, Promoviendo el acceso a la justicia, legislación inclusiva y una vida sin violencia, May 7-8, 2019, pages, 1-2, found at: https://www.do.undp.org/content/dominican republic/es/home/library/human development/dialogo-nacional-lgbti-en-rd-2019-.html

¹⁴ UNDP, Dialogo Nacional LGBTI, Hoja de Datos, Panel 1, Promoviendo el acceso a la justicia, legislación inclusiva y una vida sin violencia, May 7-8, 2019, found at: https://www.do.undp.org/content/dominican republic/es/home/library/human development/dialogo-nacional-lgbti-en-rd-2019-.html

Dominican Republic A long way ahead: reproductive rights, discrimination of Dominicans of Haitian descent and the reform of the police Amnesty International Submission to the UN Universal Periodic Review 18th Session of the UPR Working Group, January – February 2014, page 12, found at: https://www.refworld.org/pdfid/5257b0b94.pdf

¹⁶ Cultura política de la democracia en la República Dominicana y en las Americas 2018/19: Tomandole el pulso de la democracia, Resumen ejecutivo, November 2019, page 217, found at: https://www.vanderbilt.edu/lapop/dr/AB2018-19 Dominican Republic Country Report V6 W 11.21.19.pdf

 $^{^{17}\, \}text{Girls Not Brides Dominican Republic:} \, \underline{\text{https://www.girlsnotbrides.org/child-marriage/dominican-republic/}}$

¹⁸ OECD SIGI Country Report 2019: https://www.genderindex.org/wp-content/uploads/files/datasheets/2019/DO.pdf, page 2.

women that have survived gender-based violence in Santiago and they stated how women tend to have an emotional and economic dependence on men.

A recent Profamilia study on masculinities and gender-based violence highlights: "The population interviewed has a high level of internalization of the woman as a sex object. The infatuation and the relations of couples are mediated by the body from the stereotypes of attractiveness and beauty that have been commercialized, which legitimizes harassment and the lack of control of the man in his relationships with women. Self-control as a strategy to contain male violence and sexual assault is weak." A woman survivor of gender-based violence voiced how: "There is a lot of pressure to have a perfect figure, standard body in our country. If the man is not given sexual access, he does not give you food, he does not give you money, the fathers do not pay single mothers to keep the children, and nobody obliges them, we continue living with the violence." Fathers are generally absent in the domestic realm. This can be seen, too, in the a lack of parental support for learning, which is demonstrated in the UNICEF Multiple Integrated Cluster Survey (MICS), that shows the percentage of children whose biological father has participated in activities to promote learning and school readiness in the previous three days at a very low 6.4 percent.²⁰

There are other spaces that strengthen the heteronormative masculinity and the exercise of power in the country, namely in the family, school, groups of friends-peers, religions and political parties. As mentioned in the Profamilia study: "These spaces generate a control system and reinforce the symbols of sexist roles, power competition, authoritarian exercise and blaming women for violence and gender inequality." Those interviewed called for more education on gender, changing roles and working more with positive masculinities in the beliefs of men and women. A psychologist interviewed stated: "We have to change this macho mentality in schools, create a new generation that has respect. You have to work with the root cause of the problem, not the result, we need to educate the whole family, not to focus only on the victim, but on the root of the problem."

In the Profamilia study, the majority group has a vision of masculinity from hetero-normativity with emphasis on the exercise of power, justified from biblical and religious interpretations, as well as the role of provider of man and aggressiveness. This model of violent and authoritarian man is presented in the discourse of men, adolescents and young adults from across all social strata. The study identified a smaller group of adolescents and young adults who question heteronormativity, dismantling the difference between men and women and who find that there are no differences, only genital and biological, or that men and women have equal capacity and exercise of power.²² The masculinities constructed by homosexuals and transsexuals represent an alternative perspective as well. Transsexuals deny masculinity considering themselves women and question the definition of man from genitality, so do transsexuals who identify as men from the psycho-affective dimensions and object to the reduction

¹⁹ Tahira Vargas, Profamilia, Masculinidades y Violencia de Genero en zonas rurales y urbano-marginales de cuatro provincias del país, Executive Summary, page 15, found at: https://profamilia.org.do/wp-content/uploads/2019/11/Informe-Masculinidades-resumen-ejecutivo.pdf

²⁰ Encuesta Nacional de Hogares de Propósitos Múltiples ENHOGAR-MICS 2014 Encuesta de Indicadores Múltiples por Conglomerados Año del trabajo de campo: 2014. Informe final, May 2016, UNICEF and ONE, page 13, found at: https://mics.unicef.org/files?job=W1siZilsIjIwMTYvMDcvMjcvMTgvNTQvMTkvNzQyL0RvbWluaWNhbl9SZXB1YmxpY18yMDE0X01JQ1NfU3BhbmlzaC5wZGYiXV0&sha=075bac503cccb85f

²¹ Ibid, page 15.

²² Tahira Vargas, Profamilia, Masculinidades y Violencia de Genero en zonas rurales y urbano-marginales de cuatro provincias del país, page 54, found at: https://profamilia.org.do/wp-content/uploads/2019/11/Informe-Masculinidades.pdf

of the masculine to the biological. Homosexuals also build a different masculinity from their sexual practice. They break with heteronormativity, establishing sexual practice from the same sex.

1. EXPERIENCES OF DISCRIMINATION AGAINST LGBTI PERSONS

The assessment found that a pattern of discrimination in the country. According to a 2018 Gallup poll sixty-five percent of people polled stated that LGBTI persons are one of the most discriminated against in the country. Many LGBTI persons interviewed voiced how there was a high degree of discrimination in public education, limited access to public services, little access to justice and difficulties in finding housing as "some people think we will bring problems." Those with experiences of discrimination feel some do it unconsciously and others do it on purpose. LGBTI persons interviewed in Santo Domingo voiced how it is very common to be called derogatory terms such as "pájaro" or "maricón", and how these common threats and prejudices are experienced and somehow normalized within their own families and their communities. However, six LGBTI youth in Puerto Plata reported that they have learned to voice to their families and people in their neighborhoods that they are being discriminated against. These youth reported how they were able to successfully change peoples' discriminatory attitudes and behaviors through dialogue and taking the time to educate others.

It was clear how civil society has very limited resources to campaign and fight against discrimination and to do the necessary work around stigma. The vulnerable populations interviewed experienced daily discrimination from women, men, the police, in hospitals, clinics, universities, and on public transportation. Those with lived experience of discrimination felt anger, frustration and helplessness. The root cause of this discrimination was described as ignorance, how there is little tolerance for diversity in the country. Some key informants that were interviewed had hope and voiced how if passed the "No to Discrimination law" could bring transformational change in the country. But many are afraid that the law will not be passed anytime soon, as there is no political will to do so with the upcoming elections.

C. GENDER ROLES, RESPONSIBILITIES, AND TIME USE

There are traditional roles and responsibilities for women to do most of the caregiving, unpaid work. These roles affect women from benefiting from entering the formal labor market. There is a differential burden of unpaid work for women, especially rural women when compared to men. This burden also restricts their autonomy and freedom of movement within a community and their access to social, economic, and political benefits and/or participation in programs. The sexual division of labor and the assigned roles limit the political participation of women, within the parties, and this in turn limits the nomination to elective positions. Women face major obstacles in accessing electoral procedures, because of these socially assigned care roles for women, this turn limits possibilities for political participation.²⁴

The National Statistics Office has conducted its first study on unpaid work. The gaps and inequalities between men and women and the impact of the inequitable distribution of work carried out within households is highlighted. The study makes visible the gender gaps regarding the use of time dedicated to unpaid work. For example, a woman dedicates 3.25 times more to unpaid work, with women on

²³ UNDP, Dialogo Nacional LGBTI, Panel 1, Promoviendo el acceso a la justicia, legislación inclusiva y una vida sin violencia, 2019, found at: https://www.do.undp.org/content/dominican_republic/es/home/library/human_development/dialogo-nacional-lgbti-en-rd-2019-.html

²⁴ Las Deudas Sociales del Pais con las Mujeres, Intec-GEC, European Union, Profamilia, January 2019, page 12, found at: https://www.intec.edu.do/downloads/documents/CEG/Las deudas sociales del pais con las mujeres.pdf

average spending 21 hours more than men. Women spend more than double the time compared to men on caregiving. Rural women spend the most time on unpaid work and women from the regions of El Valle, Enriquillo and Valdesia are those that have the greatest burden of unpaid work. Women ages twenty-five to forty-five years spend the largest number of hours dedicated to unpaid work.²⁵

The Profamilia study on masculinities discussed above also describes how: "the male role as the provider marks his life since childhood. The male insertion in economic activities either from a 'job learning' perspective or to contribute financially to the family generates an intense childhood with few spaces for fun, recreation and emotional spaces." However, in this cultural construction of patriarchy, fathers tend to be absent in children's lives, and do not maintain a relationship with their children. Tying this to the discussion on gender roles, this construction is reflected in the lack of time dedicated to caregiving.

D. ACCESS TO AND CONTROL OVER ASSETS AND RESOURCES

Resources are part of people's identities and livelihoods. Access and control over assets and resources are also important to advance autonomy, agency, and rights. Access to economic resources such as work, income, food, and clothing are necessary to live a dignified life.²⁶

1. ECONOMIC AUTONOMY FOR WOMEN

Economic autonomy is the ability of persons to generate income and own resources from access to paid work on equal terms as men and to the assessment of the use of time and the contribution of women to the economy. The number of discouraged job seekers is staggering at seventy percent for females and nearly thirty percent for males. Despite a reduction in gender gaps in education, women are significantly underrepresented in the job market. Just fifty percent of women participate in the workforce, compared to eighty percent for men. The gender wage gap is forty-four percent in the Dominican Republic, leaving many women without economic agency.²⁷

Women and marginalized groups have limited access to the formal land market, especially rural women.²⁸ Rural and urban women's economic autonomy in 2017 also lags behind men, with twenty-two percent of urban women without incomes and twenty-seven percent of rural women, compared to thirteen percent urban men and ten percent of rural men.²⁹ The decision making power of women over their own income and their family 's is an important dimension of economic autonomy. ENDESA 2013 reports that only half of the women decide on the fate of their income and forty-five percent say they make this decision together with their husband or partner.³⁰ According to the statistics of the Unique System of Beneficiaries (SIUBEN) which targets social subsidies to the poorest households in the

²⁵National Statistics Office, Trabajo no remunerado en República Dominicana: un análisis a partir de los datos del Módulo de Uso del Tiempo de la ENHOGAR 2016: https://oig.cepal.org/sites/default/files/uso_del_tiempo_rep_do.pdf, page 83.

²⁶ http://www.forum.awid.org/forum12/about-the-forum-theme/access-to-control-of-resources/

²⁷ World Economic Forum, Global Gender Gap Index 2018: http://www3.weforum.org/docs/WEF GGGR 2018.pdf, page 83-84

²⁸ FAO Gender and Land Rights Database: http://www.fao.org/gender-landrights-database/country-profiles/countries-list/customary-law/en/?country_iso3=DOM

²⁹ Gender Equality Observatory for Latin America and the Caribbean, Statistical Database: https://oig.cepal.org/en/countries/21/profile

³⁰ Instituto Tecnologico de Santo Domingo (INTEC) Centro de Estudios del Género Brechas de género: entre el dicho y el hecho de la autonomía de las mujeres en la República Dominicana Santo Domingo, March 7, 2016, page 9, found at: https://ceg.intec.edu.do/publicaciones/item/brechas-de-genero-entre-el-dicho-y-el-hecho-de-la-autonomia-de-las-mujeres-en-la-republica-dominicana

country, as of August 2015, sixty-two percent of beneficiaries were female headed households, which confirms the feminization of poverty and high vulnerability of these households in the country.³¹

The numbers from the ILO Women in Business and Management study do show some positive trends: the proportion of female employment in managerial positions reached forty-one percent in 2017; female employment in middle and senior management in 2016 was fifty-five percent and women's share of business owners has increased from eight percent in 1991 to twenty-two percent in 2018. As of 2017, the unemployment rate for women was almost twenty-three percent and for men it was estimated at eleven percent.³² There is still a high degree of inequality in land ownership – one of the main productive assets. According to the National Agricultural Pre-census of 2015, eighty-four percent of landowners nationwide are men, while only sixteen percent are women.

ACCESS AND CONTROL OVER ECONOMIC RESOURCES FOR LGBTI PERSONS

During the interviews, labor market discrimination and access to property came up as issues for LGBTI persons. In general, their access to assets, resources, opportunities, and services, compared to the general population is hard to assess, as there are limited statistics available. But there are gender equality policies for the inclusion of LGBTI people in the labor market. There are efforts to ensure inclusion in the labor market and to put an end to all forms of discrimination that affect LGBTI people. For example, there is the Diversity Service Unit of the Ministry of Labor that currently carries out actions to reduce the discrimination towards LGBTI people in the work environment. There are private sector companies such as AVIANCA airline that has shown good practices that are inclusive and since 2016, the LGBT Chamber of Commerce of the Dominican Republic has been in operation. Some of the statistics available show the difficulties that trans people face:

- Forty-three percent of trans people receive monthly income below DR \$5,000, that is, less than half of the legal minimum wage.
- Twenty-six percent of trans people reported that as a source of employment they exercised sex work.
- Seventy-nine percent of trans people have been denied employment or fired from a job because of their gender identity.³³

3. Access to education opportunities for women

Significant progress has been made for the integration of women into education, which has women exceeding men at both the university and postgraduate levels. For example, where there are 102 girls for every 100 boys for primary level age groups, the enrollment rate in secondary education for females is over seventy percent, compared to sixty-two percent for males. There is a significant gender gap for enrolment in tertiary education, with women representing almost two thirds of total enrollment. While university enrollment is mostly female, women are mostly enrolled in disciplines such as humanities, education, health sciences, administration, economics, business and social sciences. It is mostly men enrolled in engineering and computer sciences degrees. This highlights the need to promote public

³¹ Ibid, page 14.

³² INTEC-CEG, Las desigualdades de género que se experimentan en República Dominicana, frenan el aumento de los índices de desarrollo humano, page 3, found at: https://ceg.intec.edu.do/publicaciones/item/mujer-dominicana-enfrenta-desigualdades-durante-todas-las-etapas-de-su-vida

UNDP, Dialogo Nacional LGBTI, Hoja de datos Panel 4 Inclusion Laboral, found at: https://www.do.undp.org/content/dominican-republic/es/home/library/human-development/dialogo-nacional-lgbti-en-rd-2019-.html

policies with a gender focus in higher education that contribute to overcoming obstacles, barriers and stereotypes that expand women's participation in these fields.³⁴

School is a socializing institution with its social patterns and values being transmitted to help the student population integrate into society respecting its rules, laws and values. Schools transmit social constructions/inequalities through curriculum content, teaching aids, teaching attitudes, languages, images and schools can also contribute to reversing gender stereotypes. But attempts to eradicate patriarchal practices and sexist contents of education have been met with resistance in the country, led by religious groups. The education system plays a fundamental role in overcoming sexism and prejudices but has been difficult in the face of the rise of religious discourses. The opposition to rightsbased integral sexual education shows the political role that churches play in the educational system and deprives Dominican society of one of the more effective tools for achieving social change.³⁵

Since Resolution 3599 in 2004 there has been an official policy to incorporate gender criteria into the design of the curriculum in primary and secondary education. This policy, termed the "Gender Axis in Education", has not yet been reflected in changes to the official curriculum³⁶ There is a need to act for a transformative education to eliminate gender inequalities, but this involves designing and implementing non-sexist programs from a human rights approach at all educational levels; changes in the curriculum at all levels; the inclusion of sexuality education and reproductive health in the levels of initial, basic and secondary education, the training of teachers from this new approach, among other actions. These policies would need to involve management, technical and teaching staff in public and private schools.

4. Access to education for LGBTI persons

Many LGBTI persons interviewed experienced discrimination within the education system. They had experienced being bullied in the education system at the primary, secondary and university levels, by their peers, teachers and professors. The Ministry of Education's policy, called "Norms of the Dominican Educational System for Harmonious Coexistence in Public and Private Educational Centers" prohibits discrimination based on sexual orientation. There are several private sector educational institutions that have shown good practices in favor of LGBTI students. Several NGOs as well carry out awarenessraising activities on the LGBTI population within educational institutions. Some statistics from the National Dialogue on LGBTI persons in May 2019 revealed the following situation:

- UNDP carried out a survey on sexist attitudes and practices in public and private school contexts with 7,768 students at the secondary level in public and private schools and found that seventy-two percent of Dominican students have respect for people with different sexual orientations.
- Fifty seven percent of trans people complete secondary education.
- Fourteen percent of gay and trans people who have sex with the men population in Santo Domingo have studied tertiary education.

³⁵ Instituto Tecnológico de Santo Domingo (INTEC) Área de Ciencias Sociales y Humanidades Centro de Estudios de Género, CEG-INTEC Históricas barreras socioculturales y político-económicas coartan desarrollo integral de las mujeres en la República Dominicana Santo Domingo, R.D 05 de marzo, 2019, pages 5-7, found at: https://ceg.intec.edu.do/publicaciones/item/historicas-barreras-socioculturales-y-politicoeconomicas-coartan-desarrollo-integral-de-las-mujeres-en-la-republica-dominicana

³⁶ El enfoque de género en la educación en República Dominicana, marco legal y realidad en las escuelas. La ejecución presupuestaria del MINERD del 2017, April 2018, found at: http://forosocioeducativo.org.do/phocadownload/boletin foro socio educativo%2018.pdf

- Sixty-four percent of gay and trans people, who have sex with the men population in Santiago expressed that they had been bullied in school and university.
- Eleven percent of trans people have gained access to higher education.³⁷

5. Access to and use of health services for women

Although progress has been made in the country for legal frameworks and in the elaboration of strategic plans for the improvement of the health situation, the policies applied have not achieved the expected results. Basic health indicators show that the country lags in health matters compared to the average for Latin American and Caribbean region. About half of those interviewed spoke about the importance of the health sector and how it needs to develop more capacity to apply the norms and plans to improve the health of women and men on equal terms. Women face social and economic disadvantages, with repercussions on health. There is a lack of mechanisms to enforce compliance with agreed policies and programs, especially the norms/protocol around how to treat women who have experienced violence. Violence against women is not recorded by the Ministry of Health and this in turn ensures the problem has no visibility. Women who experience violence most often end up in hospitals and clinics.

Women face risks associated with maternal health, for which the prevention and care services related to this area of health are regularly insufficient and of poor quality. Maternal mortality rate is 107.3 per 100 thousand live births, fifty percent higher than the Latin American and Caribbean average. The highest rates of mortality are in Azua at 202.6, in Valverde at 214.1, in San Pedro Macrorís at 239, and the highest in Pedernales at 257.7. There is a need to address the gaps in maternal health. The risks of Dominican mothers during pregnancy and childbirth remain very high. Different studies and analyses carried out highlight how the quality of care further aggravates the risks. There is limited consideration of the economic, social and cultural inequalities in which women and particularly young women face in motherhood. Abortion is recognized as one of the causes of maternal deaths in the country, as indicated by the Dominican Society of Obstetrics and Gynecology, which reveals how one in five maternal deaths are the result of unsafe abortions.³⁸

Another gap identified is the lack of access to social security, which is needed to ensure adequate health protection. Health insurance coverage is quite low for women, as is the pension system, which are achieved through contributions based on formal employment contracts. The female population has much fewer opportunities for paid employment than men, and their average salary is significantly lower. This puts women at an even greater risk during pregnancy and childbirth. One of the country's goals is to guarantee universal access to sexual and reproductive health services, including family planning, information and education, and the integration of reproductive health into national strategies and programs. There are delays in the implementation of the comprehensive care model within the primary health care units. Women face other health issues in relation to breast cancer, violence, chronic diseases, sexual health, mental health, menopause and women's well-being.³⁹

³⁷ UNDP, Dialogo Nacional LGBTI, Hoja de datos Panel Acceso a la educacion, found at:

https://www.do.undp.org/content/dominican republic/es/home/library/human development/dialogo-nacional-lgbti-en-rd-2019-.html

38 INTEC-CEG, Las desigualdades de género que se experimentan en República Dominicana, frenan el aumento de los índices de desarrollo humano, page 3: https://ceg.intec.edu.do/publicaciones/item/mujer-dominicana-enfrenta-desigualdades-durante-todas-las-etapas-de-su-vida

39 Instituto Tecnologico de Santo Domingo-INTEC- Área de Ciencias Sociales y Humanidades Centro de Estudios de Genero -CEG INTEC- La salud y la seguridad social, otras fuentes de desigualdes de genero en la República Dominicana Estado de situación al 2017 Santo Domingo, D.N. Marzo, 2017, page 7, found at: https://ceg.intec.edu.do/publicaciones/item/la-salud-y-la-seguridad-social-otras-fuentes-de-desigualdades-degenero-en-la-republica-dominicana

The statistics on access to services show that sixty-six percent of women without an education and fifty-five percent of the poorest women do not have access to health care. Even among those with access, there are still barriers, with unsatisfied needs of eleven percent in access to contraceptive methods, and forty percent in detection of uterine cancer and seventeen percent in cases of breast cancer. The lack of accessible and free services forces women to perform abortions in unsafe and clandestine conditions, especially women living in poverty and in conditions of vulnerability. The rates for abortions are reported between sixteen and thirty-nine percent among university students.⁴⁰

There is a high coverage of prenatal care, with over ninety-eight percent in 2015. The high proportion of cesarean deliveries stands out (fifty-eight percent of deliveries), which places the Dominican Republic as the country with the highest rate of cesarean deliveries in the world. The ENHOGAR MICS 2014 reports that sixty-nine per cent of married women (or with partners) of childbearing age use some form of contraception .ENDESA 2013 reports significant gaps in family planning coverage, mainly in young women aged 15-19 (twenty-seven percent) and for those aged 20-24 (twenty-one percent) and in a smaller proportion (eleven percent) in married women or with partners. There are needs to expand sex education and the management of sexual and reproductive rights and to promote the access to contraceptive methods.⁴¹

6. Access to and use of health services for LGBTI persons

There are health disparities for LGBTI people in the country with evidence of the widespread stigma against homosexuality and ignorance about. gender identity. In all the interviews with LGBTI persons, all reported discrimination in accessing health services. But they mentioned, too, that they did feel comfortable to go to the clinic run by COIN in Santo Domingo and to CEPROSH in Puerto Plata. .At the National Dialogue for LBGTI persons there were several statistics information sheets produced and that highlighted the following:

- Ninety-seven percent of public health personnel expressed that they preferred not to provide services to trans people because they engage in immoral behavior.
- Fifty-eight percent of medical staff, fifty percent of nursing staff and fifty percent of psychology staff prefer not to provide services to the MSM/gay population.
- Twenty-two percent of trans people reported trying to commit suicide.
- Discrimination and violence contribute to the marginalization of LGBTI people and their vulnerability to diseases, including HIV infection.
- Gay men and other men who have sex with men have an HIV prevalence of five percent, which represents a quarter of the country's new HIV infections.
- The prevalence of HIV in trans women in the Dominican Republic is eighteen percent.
- Discrimination against lesbian women in the Dominican Republic may prevent them from accessing sexual and reproductive health services.
- Intersex people are often stigmatized and subjected to multiple violations of their human rights, including violations of their rights to health and physical integrity.

⁴⁰ Profamilia, European Union, Intec-CEG, Las Deudas Sociales del país con las mujeres, Dominican Republic, January 2019, page 5, found at: https://www.intec.edu.do/downloads/documents/CEG/Las deudas sociales del país con las mujeres.pdf

⁴¹ Instituto Tecnologico de Santo Domingo (INTEC) Área de Ciencias Sociales y Humanidades Centro de Estudios del Género Brechas de género: entre el dicho y el hecho de la autonomía de las mujeres en la República Dominicana Santo Domingo, 7 de marzo, 2016, page 17, found at: https://ceg.intec.edu.do/publicaciones/item/brechas-de-genero-entre-el-dicho-y-el-hecho-de-la-autonomia-de-las-mujeres-en-la-republica-dominicana

• There is little research or interventions in relation to the health of transgender men and few studies have collected solid data on bisexual people.⁴²

E. PATTERNS OF POWER AND DECISION MAKING

In 1997, the new Electoral Law was enacted No. 275-97, which replaced Law 5884 from 1962, establishing a minimum quota for women of twenty-five percent in elective positions in the Chamber of Deputies and the Chapter Rooms. In 2000, Law 12-2000 was promulgated, which increased the quota of women candidates to the Chamber of Deputies to thirty-three percent and Law 13-2000, which mandated that a woman candidate be taken to the position of trustee or vice-syndicate. The current law mandates a quota of thirty-three percent for the political representation of women in provincial and municipal councils. The quotas and reserved seat allocation for women appears to be working at the legislative and municipal levels, with thirty-five percent women elected in 2016. There is also a positive trend with an increase of women in provincial level councils from fifteen percent in 2002 to twenty-eight percent in 2016. However, only twelve percent of municipal mayors are women, and only nine percent of the Senate are women.⁴³ But, within the Superior Electoral Court and Central Electoral Board, forty percent are women.

Despite these positive changes, there are obstacles and limitations of socio-economic and cultural nature that limit the equitable participation of women in politics. The law does not regulate the order of placement of women on the lists of candidates, which allows the parties to place them in the bottom positions, which makes it difficult for them to win. Candidates for the senate are not regulated, which leaves them without affirmative measures that guarantee quotas for women. Also, there are obstacles for women in accessing electoral justice. There is lack of knowledge of the internal rules and procedures of political parties and of electoral content, lack of lawyers with knowledge of legislation and electoral jurisprudence for women, lack of economic means and harassment and violence towards gender policies. ⁴⁴ Jacqueline Montero, a former sex worker, who has made it to congress, stated how people say they want to get "the prostitute out of Congress," but she makes decisions and she has initiated programs for women's leadership. She is an example that it can be done. ⁴⁵

More broadly, the stereotypes and cultural schemes in relation to women's roles and capacities seems to be changing in a positive way with opinions changing in favor of women in politics according to the Americas Barometer. The study shows how public opinion favors women over men as less corrupt in politics and people are more inspired to vote for a woman rather than a man. Since 2008 public opinion has changed significantly, where fifty-seven percent were of the opinion that men were better political leaders, compared with thirty-four percent in 2019. The 2019 Organic Law of the Electoral Regime

⁴² UNDP, Dialogo Nacional LGBTI, Hoja de datos Panel 2 Acceso a la salud, found at: https://www.do.undp.org/content/dominican-republic/es/home/library/human-development/dialogo-nacional-lgbti-en-rd-2019-.html
43 OECD SIGI Country Report 2019: https://www.genderindex.org/wp-content/uploads/files/datasheets/2019/DO.pdf, page 10.

⁴⁴ UNDP Infographic, Dialogo Politico de Genero, Acceso de la Mujeres a la Justicia Electoral, Elecciones 2016, Republica Dominicana, 2016.

⁴⁵ Programa de las Naciones Unidas para el Desarrollo; Junta Central Electoral y Tribunal Superior Electoral. (2018). Estudio sobre la participación política y el acceso a la justicia contenciosa electoral de las mujeres en las elecciones generales de República Dominicana del 2016: https://www.do.undp.org/content/dominican republic/es/home/library/womens empowerment/mas-mujeres--mas-democracia-desafios-para-la-igualdad-de-genero.html

⁴⁶ Cultura política de la democracia en la República Dominicana y en las Americas 2018/19: Tomandole el pulso de la democracia, Resumen ejecutivo, November 2019, page 203, found at: https://www.vanderbilt.edu/lapop/dr/AB2018-19 Dominican Republic Country Report V6 W 11.21.19.pdf

establishes a range of gender representation of sixty/forty percent. The quota and the search for parity have served to keep the issue of women's political representation on the public agenda.

1. LGBTI PERSONS AND ACCESS TO POWER AND DECISION MAKING

The political system in the Dominican Republic constitutes a society in which the nuclear family and religious traditions promote a single pattern of heterosexual behavior. LGBTI persons are marginalized in their ability to make decisions and there are factors that drive this marginalization. Heterosexual men and, to a lesser extent, women hold power within society at both the local and national levels. LGBTI persons are not restricted by law from running for office or representation in senior level-decision making positions. The exclusion from political decision-making of LGBTI persons has started to be addressed. In 2016, the Victory Institute began its partnership with the LGBTI rights organization *Diversidad Dominicana* with a political leadership school for LGBTI people. In collaboration with a Colombian partner *Caribe Afirmativo*, the five-module training school expanded in 2017. In April 2017, the third meeting of LGBTI Political Leaders for Latin America and the Caribbean was held in the Dominican Republic with three-hundred and twenty leaders from thirty-five countries.

The women's movement has had success with affirmative action for quotas for female candidates in national and local elections with the thirty-three percent quotas – and further quotas of forty percent coming in 2020.⁴⁷ The Americas Barometer measured public opinion on the right of LGBTI people to run for public office in the Dominican Republic. The approval level for homosexual candidates is relatively low, although there was an increase after 2010, reaching a peak of thirty-two percent in 2016 followed by a decrease between 2016 and 2019.⁴⁸

Despite their political exclusion, LGBTI persons have led innovative forms of action through various cultural and artistic activities. Their fight for sexual freedom and rights has achieved visibility, the formation of an awareness and the creation of a political debate that has led to a growing recognition of their civil rights and an open challenge to conservative ideologies, and greater presence in public debate. 49 LGBTI persons are attaining positions of political influence as advisors within the executive branch.

2. POWER OF CATHOLIC AND EVANGELICAL CHURCHES

Religion leads society in the Dominican Republic. Media coverage of Catholic and evangelical leaders enables them to propagate their conservative agendas. Both Catholics and evangelicals ignore the design and application of public policies aimed at promoting women and minority rights. Most Dominican political parties in practice, whatever their position on the left-right spectrum, assume ultraconservative behaviors and permit churches to assume political and policy roles that are not conferred on them by constitutional or legal norms. ⁵⁰ Both Catholic and evangelical churches play important roles in society and politics. Some researchers suggest this is due to the weakness of

⁴⁷ UNDP, Dialogo Nacional LGBTI, Hoja de Datos, Panel 1, Promoviendo el acceso a la justicia, legislación inclusiva y una vida sin violencia, May 7-8, 2019, found at: https://www.do.undp.org/content/dominican republic/es/home/library/human development/dialogo-nacional-lgbti-en-rd-2019-.html

⁴⁸ Cultura política de la democracia en la República Dominicana y en las Américas 2018/19: Tomandole el pulso de la democracia, Resumen ejecutivo, November 2019, page 215, found at: https://www.vanderbilt.edu/lapop/dr/AB2018-19 Dominican Republic Country Report V6 W 11.21.19.pdf

⁴⁹ Diuris Betances, Observatorio Politico Dominicano, Unidad de Sociedad Civil, El orgullo gay en Republica Dominicana, August 5, 2013, Santo Domingo, found at: http://www.opd.org.do/index.php/temas-de-coyuntura-sociedad-civil/1109-el-orgullo-gay-en-republica-dominicana
⁵⁰ https://laicismo.org/religion-politica-y-conservadurismo-en-republica-dominicana/

Dominican democracy and the inability of political parties to reach significant agreements regarding political and economic reforms that can be sustained over time. Therefore, the presence of the clergy is necessary to mediate in political conflicts.

These circumstances have created the opportunity for the complete reintegration of the Catholic Church and of the evangelical movement as fundamental political institutions of the society. The trend from 2010-2018 for the percentage of people that are Catholic has dropped from sixty percent in 2010 to forty-nine percent in 2018, while the proportion of evangelicals and Pentecostals has increased from eighteen percent in 2010 to twenty-six percent in 2018. Over seventy-five percent of the population is religious. Doe interviewee stated bluntly: "Religion affects politics here." About half of those interviewed were of the opinions that some religious leaders teach hate, saying that they do not accept people as they are and that they discriminate. Stakeholders emphasized the need to raise awareness and to promote acceptance of social and gender differences in public schools, universities, social networks and churches.

Based on the interviews conducted, there appears to be some polarization/distance between churches and organizations working on gender and with vulnerable populations. However, the assessment also found good examples of local NGOs forming partnerships and working together with church leaders, such as CEPROSH in Puerto Plata with the churches inviting them to do workshops and presentations about contraception and sexual and reproductive rights. Another good practice was how COIN brings religious leaders together to discuss these differences and build awareness on vulnerable populations and human rights. These activities could be scaled up across the country with more dialogue to raise awareness, sensitize and inform the churches about gender policies and for their leaders to understand social inclusion.

F. Personal safety and security

Violence against women directly threatens the exercise of citizenship, their physical and emotional health and equal opportunities to exercise their rights, participate in public life, enjoy democratic freedoms, achieve economic autonomy and material comfort, and contribute to local and national development. Therefore, it is a security issue that must be addressed by the state. Gender based violence is a serious issue and an expression of power and control within the society.⁵³ It is one of the most relevant social issues in the country: gender-based violence is the most reported crime in the justice system. The numbers reported from the Attorney General's Office are shocking; in 2017, 59,391 complaints were made for gender-based and family violence and 5,808 for sexual crimes, with protection orders issued for 17,148. In that year, 117 femicides occurred that left 105 minors orphaned. Of the aggressors, thirty had a history of violence and forty-six percent of the women killed were already separated at the time of their death.⁵⁴

⁵¹ Emilio Betances, La Iglesia católica y la política del poder en América Latina El caso dominicano en perspectiva comparada, page 58, found at: https://www.gettysburg.edu/faculty-pages/betances/pdfs/ClaraIglesia5-6-2017.pdf

⁵² Cultura política de la democracia en la República Dominicana y en las Américas 2018/19: Tomandole el pulso de la democracia, Resumen ejecutivo, November 2019, page 63, found at: https://www.vanderbilt.edu/lapop/dr/AB2018-19 Dominican Republic Country Report V6 W 11.21.19.pdf

⁵³ OECD SIGI Country Report 2019: https://www.genderindex.org/wp-content/uploads/files/datasheets/2019/DO.pdf, page 5.

⁵⁴ Profamilia, European Union, Intec-CEG, Las Deudas Sociales del país con las mujeres, Dominican Republic, January 2019, page 7, found at: https://www.intec.edu.do/downloads/documents/CEG/Las deudas sociales del pais con las mujeres.pdf

Taking these figures from the AGO in a broader social context, the assessment found that the proportion of women who reported physical, emotional and sexual violence grew in the last ten years from twenty-eight percent to thirty-five percent, while only emotional violence increased from eighteen percent to thirty-one percent in the same period. Emotional violence is the most frequent of all with thirty-one percent of complaints, followed by physical (nineteen percent) and sexual (ten percent) violence. The incidence of violence is higher in separated, widowed or divorced women (forty-eight percent), those with five or more children (fifty percent), those with primary education between five-eight years (forty-two percent), those in the poorest quintile (forty percent), adolescent girls and youth (forty percent) and urban areas (thirty-six percent).⁵⁵ A survey on the situation of women (ENESIM-2018) aged fifteen years and older who have experienced some type of violence in public and private spheres throughout their lives, shows even higher percentages for rural women of physical violence at forty-eight percent; psychological violence at fifty-six percent; and economic violence for rural women at thirty-three percent.⁵⁶

Overall, the statistical tables in Annex D show how sixty-nine percent of women aged fifteen and over have experienced some type of violence throughout their lives, while in the twelve months prior to the survey fifty-six percent. Among women aged fifteen to twenty-nine the situation is worse still: seventy-seven percent experienced some episode of violence throughout their lives and sixty-seven percent in the twelve months prior to the survey.⁵⁷ There are also higher than average rates in several regions, and among divorced and separated women.

There has been a policy response to this growing issue. There are now nineteen specialized offices in the country's thirty-two provinces for violence prevention and attention. The district attorneys provide assistance and protection to victims of violence by referring them to institutions for legal, medical and counseling services. In 2017 the Attorney General announced funding for a "City of Women" to provide services for victims. There is a twenty-four hour domestic violence hotline and the attorney general also launched a "100-day challenge," for which his office opened 1,986 new domestic violence cases, nine times the number in the 100 days before the challenge and they resolved two hundred and fifteen cases. ⁵⁸ A woman interviewed who has been working in the women's movement for over thirty years spoke about how there have been changes in attitudes and how there is more collaboration and support for women seeking support because of violence.

Nevertheless, a focus group with women who have survived gender-based violence spoke about the discrimination women face, for example, always being blamed for provoking the violence, one survivor said: "When I was five years old, my stepfather abused me and my mother told me that I provoked it." Another woman survivor remembers as a child: "My father showed me a gun and said I have it to kill your mother." One of the gaps identified by an INTEC-CEG study, is how there is still little awareness of economic violence or street harassment suffered by women. There is little research on the links between violence at the family level and the link between harassment and insecurity on the streets and

Intec-CEG, Las desigualdades de género que se experimentan en República Dominicana, frenan el aumento de los índices de desarrollo humano, pages 3-5, found at: https://ceg.intec.edu.do/publicaciones/item/mujer-dominicana-enfrenta-desigualdades-durante-todas-las-etapas-de-su-vida

Encuesta Experimental sobre la Situación de las Mujeres (ENESIM-2018), Informe de resultados de la Encuesta Experimental sobre la Situación de las Mujeres (ENESIM-2018), ONE, Santo Domingo, República Dominicana Junio, 2019, found at: https://cne.one.gob.do/sei/pdf/Informes/Encuesta%20experimental%20sonre%20la%20situacion%20de%20la%20mujer%202018.pdf
Total pages 58-60.

⁵⁸ Country Reports on Human Rights Practices for 2018 United States Department of State Bureau of Democracy, Human Rights and Labor: https://www.state.gov/reports/2018-country-reports-on-human-rights-practices/dominican-republic/, Section 6.

women in public spaces. They are problematic, but not yet studied in the country, there are few interventions. A pending task is to develop this type of research to create evidence that supports public policy actions.⁵⁹

The Dominican Republic has one of the highest numbers of femicides in the region. Femicide figures are the most visible dimension of gender-based violence, and remain high with 177 femicides calculated on average per year between 2005-2017.⁶⁰ Between 2005 and November 2019, the Attorney General's Office accounted for 1,295 femicides, but these numbers differ the numbers by the Economic Commission for Latin America and the Caribbean (ECLAC) which, between January 2010 and September 2019, has reported 1,795 femicides. Another alarming trend was recently discovered in a study on masculinities. The study identified solidarity amongst men to conceal femicides. The study "shows a recurring phenomenon in femicides, the complicity between the friends of the man who commits homicide and the passivity by groups of men. There is a network of complicity that hides and strengthens femicides and gender-based violence in general."⁶¹

Those interviewed in the country from organizations working directly on gender-based violence highlighted how there is a need for a more extensive system of re-education of the perpetrators, that most of the time, the only option offered by the system is jail. There are three centers for Behavior Change for Men under the Attorney General's Office, however the therapy provided is optional and not mandatory and there are no studies on recidivism by the aggressors after completing the therapy. Lawyers interviewed for the analysis highlighted the need for continuous training for prosecutors. They also emphasized the need for a serious program to change sexist beliefs and continuous education on the severity of gender-based violence. They also stated there is a need to train more doctors, staff in hospitals and social workers on how to detect cases of gender-based violence. There are reports that the services are better for women, in that they can get some psychological assistance and a somewhat faster legal process, but the state cannot guarantee protection for women. Women are at risk until the accused are sentenced. All parties can spend three-five years waiting for a verdict and during this time the aggressor continues with threats, visits continue with children and there is little follow-up to ensure that men comply with their sentences.

1. VIOLENCE AGAINST LGBTI PERSONS

LGBTI persons interviewed reported how violence is perpetrated by local authorities and how there are cases of LGBTI persons being imprisoned and being harassed by the police. Trans women are particularly vulnerable and have been historically discriminated against, marginalized and murdered. In the last twelve years, there have been forty-four transgender murders of which only five cases have been convicted in the courts. ⁶² There are security risks for individuals from the LGBTI community and violence is regularly committed against those individuals. There is no legal and law enforcement

⁵⁹ Instituto Tecnologico de Santo Domingo (INTEC) Área de Ciencias Sociales y Humanidades Centro de Estudios del Género Brechas de género: entre el dicho y el hecho de la autonomía de las mujeres en la República Dominicana, Santo Domingo, March 7, 2016, page 20, found at: https://ceg.intec.edu.do/publicaciones/item/brechas-de-genero-entre-el-dicho-y-el-hecho-de-la-autonomia-de-las-mujeres-en-la-republica-dominicana

Las desigualdades de género que se experimentan en República Dominicana, frenan el aumento de los índices de desarrollo humano, pages 3-5, found at: https://ceg.intec.edu.do/publicaciones/item/mujer-dominicana-enfrenta-desigualdades-durante-todas-las-etapas-de-su-vida

⁶¹ Tahira Vargas, Profamilia, Masculinidades y Violencia de Genero en zonas rurales y urbano-marginales de cuatro provincias del país, page 115, found at: https://profamilia.org.do/wp-content/uploads/2019/11/Informe-Masculinidades.pdf

⁶² Informe de las violaciones de derechos humanos en contra de las mujeres Trans en República Dominicana., Observatorio de Derechos Humanos para Grupos Vulnerabilizados (ODHGV) Juan Alberto Francisco y Trans Siempre Amigas (TRANSSA), Cristhian King, page 8.

framework in place to respond to, report, and rectify this type of identity-based violence. This discrimination impacts their ability to participate in society, politically, socially, economically and to access vital public services such as health care and education. It is not considered family violence for a couple made up of two men or two women. One trans woman stated how: "The police will laugh if you go to the station with a domestic violence complaint."

II. SUMMARY OF INCLUSIVE DEVELOPMENT FINDINGS AND ANALYSIS

A. Persons that are Trafficked and Smuggled

Trafficking in persons refers to the recruitment, transportation, transfer, harboring or receipt of persons, by means of threat, force, coercion, abduction, fraud, deception, abuse of power or vulnerability, or the exchange of payments or benefits to achieve the consent of a person having control over another person, for the purpose of exploitation, for any form of sexual exploitation, pornography, debt bondage, forced labor or services, servile marriage, irregular adoption, slavery and/or practices similar to these, or for the removal of organs. Smuggling of persons refers to the facilitation of the illegal entry of a person into a State Party of which the person is not a national or a permanent resident for the purpose of obtaining, directly or indirectly, a financial or other material benefit. Women, children and adolescents are the primary victims.

1. LAWS, POLICIES, REGULATIONS AND INSTITUTIONAL PRACTICES

A summary table of the legal framework on trafficking and smuggling can be found in Annex C. Authorities consulted have made institutional efforts to counteract this crime and all government entities, international organizations and civil society organizations have coordinated actions to try and address human trafficking and smuggling. Many public and private institutions are developing individual and coordinated efforts for the prevention, prosecution and the care of victims. The recent advances include increased number of convictions of traffickers, imposition of serious penalties, preparation of a new national action plan for human trafficking, proposed modification of Law 137-0, initiatives to combat trafficking for the purpose of forced labor and greater visibility on the subject. The weaknesses include: few investigations and legal proceedings, insufficient sentences imposed on some of the convicted traffickers, lack of specialized, comprehensive and sufficient services for all victims of trafficking, failure to detect signs, lack of remission of victims to care centers and difficulties in data collection.

CULTURAL NORMS AND BELIEFS

The Dominican Republic is a country of origin, transit and destination for both migrants and traffickers and victims of trafficking. Out of 276 countries and territories, the presence of trafficked, treated, or involved Dominicans in the sex trade has been verified in 66th place (UNFPA 2013). Similarly, Haitian women are vulnerable to becoming trafficked into the Dominican Republic.⁶³ Trafficking in persons is a complex and multicausal problem linked to the effectiveness of rule of law, the legal framework that governs migration, labor and criminal prosecution policies, the distribution of resources, gender inequality, among other factors.⁶⁴

According to data from the Ministry of Foreign Affairs (MIREX) in the Annual Report of the Interinstitutional Commission to Combat Trafficking in Persons and Illicit Traffic in Migrants (CITIM), fifty-three traffic investigations were conducted during 2016 and 2017, forty-one cases were prosecuted, with seventy-nine sentenced persons. There was a significant increase in the number of

⁶³ OBMICA, Marzo de 2019. Investigación exploratoria sobre la trata interna, de mujeres, niñas, niños y adolescentes en la República

⁶⁴ Una Nueva Forma de Esclavitud: Las Trata de Personas Una guía para su derrota, Participación Ciudadana.

sentences that went from fifteen cases in 2016 to twenty-six cases in 2017. ⁶⁵ In 2016, some twenty-seven police investigations on trafficking were carried out and twenty cases were prosecuted which included forty people being charged, eight sentences for trafficking in persons and seven cases for smuggling of migrants. The main modality of human trafficking during 2016 was the sexual exploitation of adults and the sexual and commercial exploitation of minors. Some survivors affected by commercial sexual exploitation were rescued in operations carried out by the National Police in Montecristi, Independencia, Puerto Plata and San Juan.

Trafficking in persons depends on a set of socio-economic factors and also on a set of political, cultural and legal factors, such as the economic crisis, poverty, some cultural and traditional practices that violate human rights and the complicity of some authorities, among others. The assessment found that trafficking in persons for commercial sexual exploitation affects males and females and adolescents and adults. An important cause of trafficking is the situation of children in families who live in a cycle of violence and sexual abuse by family members or relatives from their childhood to early adulthood. This can push them to abandon the home and places them in a situation of increased vulnerability and at risk of being trafficked. The trafficking networks offer money through deception. Research by OMBICA found that sexual practices and taboos are impediments to denouncing the suspects and help to limit the visibility of the problem. This is reflected, too, in indifference and tolerance towards this type of crime. ⁶⁶

Networks of Haitian and Dominican traffickers operate with impunity along the border, operating as large networks, which take advantage of the poverty conditions of Haitian families and / or deceive fathers and mothers to take their minor sons and daughters to be exploited in commercial agricultural and sexual work, domestic servitude, begging and street sales. According to an interviewee, "between the Dominican Republic and Haiti, it is mainly women who are trafficked." Knowing the number of minors who are trafficked or treated is impossible to assess because it is difficult to identify them and there is an absence of records and indicators, lack of legal proceedings on the subject and a lack of complaints and reports on these types of crimes.

3. Access to and control over assets and resources

While it is true that poverty, inequality and discrimination are factors that contribute to vulnerability to human trafficking, they cannot be considered in isolation. Both exploitation and trafficking are only possible if there are elements of a market that demands the commercialization of people. The demand is an integral part of the phenomenon of trafficking and it is as diverse as the traffickers or the modalities of exploitation. The demand is classified according to the sex tourism market and the poverty tourism market. One of the fundamental elements of the traffickers is to deprive the victim of any possibility of having resources. It is part of the power and control and guarantees keeping the victim succumbed to extreme destitution to avoid his/her freedom. After conducting a thorough search and review of the budget of the entities responsible for the subject, we could not establish the state's investment in combating this scourge.

65 Informe anual de la Comisión Interinstitucional de Combate a la Trata de Personas y el Tráfico Ilícito de Migrantes (CITIM)

⁶⁶ OBMICA, marzo de 2019.- Investigación exploratoria sobre la trata interna, de mujeres, niñas, niños y adolescentes en la República Dominicana

4. GENDER ROLES AND RESPONSIBILITIES.

When discussing this issue, it is necessary to link it with other concepts such as sex, gender differences, discrimination and violence against women and children. The victims of human trafficking, for the most part, are women, girls and boys. Commercial sexual exploitation of Dominican children by tourists from the United States, Canada and Europe, and by Dominican nationals persists, particularly in areas of tourist centers located on the coast. Sex trafficking of adolescents aged fifteen to seventeen occurs on the streets, in parks and on beaches. According to the reports of the office of the specialist in Trafficking and Smuggling (PETT) for 2017, there were twenty-four minors among the rescued persons, whose ages range between six and sixteen years old.

The state needs to contextualize the conditions for these discriminated persons and how they cannot exercise their rights by themselves. They often do not have the information and resources necessary to access justice and even if they are able to exercise their rights, they do not. The justice operators in the country are socialized within a patriarchal system, which ignores the human rights of people in vulnerable situations. The regulations that persecute and punish traffickers must be interpreted from a gender perspective. It is important to highlight the asymmetrical power relations between men and women, boys and girls that are built in the process of socialization of people and by a system of patriarchal domination reflected in politics, policies and resources applied to address this problem.

5. PATTERNS OF POWER AND DECISION MAKING

Vulnerable populations affected by human trafficking and smuggling include women and girls, working children and street children, migrant workers, Venezuelan immigrants and undocumented or stateless persons of Haitian descent. Haitian women report that smugglers often become traffickers for the purpose of sexual exploitation along the border. Government officials and NGOs report an increase in the number of Colombian and especially Venezuelan women, brought to the country to dance in strip clubs and who are subjected to forced prostitution. A key informant describes how: "Trafficking in persons for the purpose of commercial sexual exploitation is generally directed by networks operating in the country and abroad, which deceive women by promising them a 'decent' job, but when they arrive at the businesses where they are located (bars and others) they retain their passports until they have to pay debts for air tickets, food and places to sleep, for which they are forced to market their bodies."

The Dominican authorities have documented cases of children forced into domestic service, street vendors, begging, agricultural work, construction and the transfer of illicit narcotics. There are reports of forced labor of adults in the construction, agriculture and other services sectors. Some observers point out that traffickers operate along the border with impunity and sometimes with the help of corrupt officials who accept bribes to allow crossings without documentation. Unofficial border crossings remain unsupervised and are porous, leaving migrants, including children recruited to work in the agricultural and construction sectors, vulnerable to trafficking. NGOs report on police complicity in areas known for child sexual trafficking.⁶⁷

6. Personal safety and security

There are children who are forced to work on the streets and who are often exposed to long hours of work. These are often exposed to violence and prohibited to go to school or out to play. Teenagers again are a particularly vulnerable group because they are expected to contribute to the family

⁶⁷ Informe Anual 2018 sobre la trata de personas, República Dominicana, elaborado por la Embajada de los Estados Unidos.

economy. They experience a lot of pressure and are vulnerable to job offers that promise the acquisition of fast money from traffickers.

The assessment found that family members and other relatives are presented with few tools to identify when their sons and daughters could be victims of exploitation or trafficking.⁶⁸ Children that are trafficked children are sexually exploited, they live with feelings of abandonment, rejection and abuse. All of these strongly impact a child's emotional well-being and greatly impacts their social relations in the future. In general, all victims of trafficking are subjected to violence. The trafficker exercises power and control to submit their will.

В. **PERSONS OF HAITIAN DESCENT**

The largest migratory flow to the Dominican Republic comes from Haiti.⁶⁹ The ENI-2017 Survey estimated a population of 570,933 immigrants and 277,046 descendants, for a total of 847,979 people. Of this figure, eighty-nine percent have ties to Haiti, while eleven percent have roots to other countries. Ninety-one percent of the descendants have at least one parent born in Haiti. Sixty-nine percent reside in urban areas, compared with thirty-one percent who live in rural areas. Men represent fifty-one percent and women are forty-nine percent of the migrant population. The highest number of descendants is recorded in the provinces that grow sugarcane, almost six percent and in the provinces along the border at almost five percent. The greatest number of descendants is found in Yuma (6.8 percent), Northwest Cibao (5.6 percent), El Valle (3.7 percent) and Higuamo (3.7 percent).

1. LAWS, POLICIES, REGULATIONS AND INSTITUTIONAL PRACTICES

Between 2013 and 2015, in the Dominican Republic there was an ongoing debate about application of migration policies aimed at regulating the presence of undocumented foreigners. During 2014, periodic meetings were held between the authorities of the two countries within the framework of what was called "DR-Haiti High Level Binational Dialogue" prioritizing issues of migration, trade, security and the environment. For immigration matters, the Dominican Republic has implemented the National Regularization Plan and the Special Law of Naturalization that establishes a special regime for people born in the country and who are registered in the Dominican civil registry. The Dominican Republic has a legal framework to deal with the issue of the children of migrants in the country and it is established by the Constitution, Law 285-2004 on Migration, with the implementing regulation decree No. 613-11 for entry visas, the Constitutional Court ruling No. 168-13, Decree 327-13 and Law 169-14.

In 2013, the Constitutional Court issued Judgment No. 168-13, which required the government to conduct an audit of the civil registry from 1929 to 2013, for the birth records of the Civil Registry of the Dominican Republic from June 21, 1929 to the present; prepare a list of "irregularly registered" foreigners; create special birth registration books for foreigners from June 21, 1929 until April 18, 2007; notify the Foreign Ministry of the irregular births of children of foreigners; send the lists to the Ministry of Interior and execute the National Regularization Plan.

Law 169-14 established two groups for descendants born in the Dominican Republic of parents in conditions of irregular immigration: Group A corresponds to descendants who were in the Dominican

⁶⁸Movimiento de Mujeres Dominico Haitiano – MUDHA, Estudio Cualitativo sobre víctimas de la trata interna en la República Dominicana y sus perfiles predominantes entre la población dominico-haitiana.

⁶⁹ ENI 2017 – Encuesta Nacional de Inmigrantes (estudio complementario).

Civil Registry and possessed a Dominican birth certificate, prior to Judgement No. 168-13. Group B is for descendants without any prior registration who could qualify for the Regularization Plan, enroll in the Foreigners Record Book, receive residence and subsequently opt for Dominican nationality. With this response, the Dominican State sought to solve the situation generated by Judgement No. 168-13. Laws and regulations that are established to the detriment of a certain group of people or that are applied to a group of people and not to another are classified as discriminatory, which is undoubtedly the case of Law 169-14.

Judgement No. 168-13 impacted the human rights and lives of people born in the country and has increased their state of vulnerability. These people consider themselves Dominican and only have a historical link through their parents or grandparents to Haiti. This is especially the case for teenagers and young people. These people were born in the Dominican Republic and face the problem of never having lived in Haiti, as well as the barrier of not speaking the language and much less identifying with their culture. Article No. 74 of the Dominican constitution requires the law to always be interpreted in favor of human rights and the law is never supposed to diminish these rights. The same is true within the country's Magna Carta and Article No. 110 that states that the laws have a retroactive effect only in cases that benefit the rights holder."⁷⁰

In the judgment, the court retroactively reinterpreted the scope that the *jus soli* principle had had since the Constitution of 1929. The criteria adopted by the Constitutional Court disproportionately affected people of Haitian descent and led to depriving persons who were previously Dominican of their nationality and rendering them stateless persons. After the 168-13 sentence was issued, there was an international uproar due to its consequences for a considerable segment of the population in the Dominican Republic. The government of President Danilo Medina was forced to take measures to mitigate these consequences for this vulnerable population. He put into effect the National Regularization Plan and submitted it to Congress for approval. Law 169-14 establishes a special regime for naturalization of people born in the country and whose records in the Dominican Civil Registry are incomplete or inaccurate.⁷¹

There was widespread criticism of the government for the violation of human rights of persons of Haitian descent. Complaints were made to the Interamerican Court of Human Rights (IACHR) which ruled that the government should "adopt, within a reasonable period of time, the measures necessary to void any rule of any nature, whether constitutional, legal, regulatory or administrative, as well as any practice, or decision or interpretation, that establishes or has the effect that the irregular stay of foreign parents motivates the denial of Dominican nationality to persons born in the territory of the Dominican Republic." The ruling rejected that "persons born in the Dominican territory and that in accordance with Dominican legislation they were entitled to Dominican nationality, be treated as foreigners" and that there was still no mechanism to fully restore their nationality to them and their descendants.⁷²

According to a key informant interviewed: "In the post-sentencing process, some 72,000 people were identified by the JCE for the restitution and regularization process. As of October 2019, they have registered 29, 392 people in Group A. These people have already been authorized by the Central Electoral Board to request their identification as Dominican nationals. For Group B group, 8,755 people have applied to the naturalization process and 4,176 people have been approved to withdraw their

 $^{^{70}}$ Article No. 74 of the Constitution of the Dominican Republic.

⁷¹ https://es.wikipedia.org/wiki/Sentencia 168.

⁷² CIDH, informe sobre la situación de derechos humanos en República Dominicana, 9 de febrero de 2016.

identity card. To date only 1,579 identity cards have been withdrawn. The identity card is a requirement in order to request naturalization from the Executive Branch, but there is no presidential decree granting naturalization. The number of people identified by the Central Electoral Board for Group A is very low when compared to the number of people who are directly affected by this judgement. Those interviewed stated that this is due to a lack of information, lack of guidance, lack of time, not having the required documentation and fear.

Another situation of concern for those consulted is the case of children of mixed couples, that is, those who have one Dominican parent and one parent of Haitian descent. The children of mixed couples have the same fate as their parents of Haitian descent, which is contrary to the legal provisions. The IACHR also draws attention to the cases for those born between 2007 and 2010, who never had a record of their birth and who did not apply for the procedure established by the law, as well as the children of mixed couples. The state acknowledged that there is no solution for this case and that the Central Electoral Board has set out to verify its data to corroborate its status. To date this has not been resolved.

2. **CULTURAL NORMS AND BELIEFS**

Most of the victims interviewed acknowledged having experienced discriminatory treatment, as well as aggressive treatment, in public venues, on the streets and in educational and health institutions. "This situation is part of the historical discrimination faced by persons of Haitian descent in various spheres," said the Rapporteur on the Rights of People of African Descent, Commissioner Margarette May Macaulay. "This historical discrimination is manifested in policies, laws, sentences and practices tending to deprive them of their right to Dominican nationality based on criteria such as skin color, national origin of their parents or ascendants, surnames or ability linguistics. This constitutes a violation of the right to equality and non-discrimination and leads to the violation of other rights," he said. During the visit, the IACHR verified the conditions of poverty, exclusion and discrimination under which the inhabitants of the *bateves* live.⁷³

The Gallup-Hoy survey (2018) shows that Haitian people were perceived among one of the most discriminated at 56.8 percent, followed by homosexual or transsexual people at 65.4 percent, and women at 65.3 percent.⁷⁴ The Americas Barometer reports show a hardening of attitudes towards the extension of rights to Haitian migrants and their descendants. While in 2014, 50.9 percent of Dominicans agreed that the children of Haitian immigrants born in the country are Dominican citizens. only thirty-four percent agreed. There was also a decline of ten percentage points in the proportion of Dominicans who agree with the government granting work permits to undocumented Haitian migrants.

3. **GENDER ROLES AND RESPONSIBILITIES**

Fifty-three percent of the male workforce of people of Haitian descent are in agriculture, livestock, forestry and fishing, twenty-two percent in construction, ten percent in manufacturing industries, six percent wholesale and retail trade and vehicle repair. The female workforce is concentrated in wholesale and retail trade at thirty-four percent and twenty-two percent are employees in households, nineteen percent in agriculture, livestock, forestry and fishing and twelve percent are working in accommodations and food services.

⁷³ Relatora sobre los Derechos de las Personas Afro-descendientes, Comisionada Margarette May Macaulay.

⁷⁴ Gallup-Hoy (2018), (Hoy 2018:13A).

The data show that the gender discrimination that continues to affect many women in the country represents an additional factor of vulnerability for persons of Haitian descent, in addition to their race and origin.⁷⁵ In the country there are also high levels of violence against women of Haitian descent, of various types: physical, sexual, economic, verbal and psychological. In addition, they face high risks of illicit trafficking of persons, including trafficking for the purpose of forced sex work.

4. ACCESS TO AND CONTROL OVER ASSETS AND RESOURCES

There are no recent studies on economic correlates of the population of Haitian descent. One study from 2012 showed that Haitian migration contributed five percent (DR \$ 115,920.9 million) of the added value of goods and services produced in the Dominican economy. Despite this, the majority of persons of Haitian descent reside in shacks, nurseries and sugar cane plantation settlements (*bateyes*). One young woman described the impact on her access to education because of this discriminatory law: "I was able to reach my third year of high school. But now I will be enrolled in the eighth grade because I do not have my documentation. My mother has had to sacrifice a lot for me to access an education. It hurts that I can no longer continue my studies. My mother is poor, and she has never done anything wrong. I am very angry about this situation."

There is limited access to education and health services and most often they only have basic medical coverage and no social security benefits. Being undocumented is a barrier for them to have access to loans and mortgages for housing, to acquire real estate and to have formal rental contracts. Access and control over resources for persons of Haitian descent can only happen if the issues of lack of documentation, discrimination, stigmatization, lack of access to justice and the lack of protection for this population are overcome.

5. PATTERNS OF POWER AND DECISION MAKING

Most persons of Haitian descent do not have any decision-making power in the country. Stateless persons are not able to obtain positions of power and decision making. There are some civil society organizations and international cooperation agencies that are supporting this population with volunteer promoters and Outreach Workers going into their communities to inform them on how to exercise their rights, to accompany them and teach them how to navigate the process to obtain their identification. These organizations have assisted with providing access to legal assistance and to obtain their identification. In most cases they receive a foreigner identification that states they are of Haitian nationality, even though they were born in the Dominican Republic. The foreigner ID at least allows them to resume their studies, it opens doors to more formal employment, to move freely in the country, to open a bank account at some banks, they can start the declaration process for their children and most importantly they no longer have to live in fear of being deported.

The assessment was able to obtain some qualitative data from one of the focus groups carried out with nine young women of Haitian descent born in Dominican Republic between the ages of twelve and twenty-nine years old. The data portrays a snapshot of some of the barriers that young women from this population face in the country in order to become future decision makers.

⁷⁵Ref. Situación de Derechos Humanos de las Personas Migrantes y sus Descendientes OBMICA.

⁷⁶ Fondo de Población de las Naciones Unidas (UNFPA) financiado por la Unión Europea (UE). Jefrey Lizardo y Carlos Gratereaux Hernández.

- They have limited access to education. Educational centers now require documentation in order to study, especially at the high school level. This means they will never be high school graduates.
- Some of the young women opted for the naturalization process. The naturalization process includes the issuing of a card, whose purpose is to avoid deportation, but it does not allow them to work.
- The young women reported how their movements are limited and how they cannot go out at night or travel freely as they are afraid of being deported.
- The young women reported receiving very limited services in hospitals.
- The young women voiced how they experience discrimination in all public places and bullying in schools.
- Several of the young women already have children.
- When the younger girls turn eighteen years old and even though they have birth certificates, they require new identification cards, or they can be deported.
- The young women voiced how they live in fear of being deported to Haiti because they have no family or cultural connections with the country.

6. Personal safety and security

Many of the persons of Haitian descent interviewed and representatives from organizations consulted stated that they face daily discrimination. Their emotional well-being is greatly impacted as they feel they are Dominicans, but they are being denied this right. Most informants interviewed described feeling anxious about the possibility of being deported. They also voiced how they suffer from exploitation in their workplaces and how they have feelings of helplessness about not being able to assert their rights and their children's rights. They voiced their lived experiences of great frustration and helplessness of not being able to study and to access formal employment. This population is trapped in poverty through informal and poorly paid jobs. According to some informants interviewed, in many cases they are also victims of police and military violence.

C. VENEZUELAN MIGRANTS

The economic, political and social crisis that Venezuela is currently experiencing has caused an estimated 150,000 migrants to flee each month, according to the Organization of American States. The deep political, economic and social crisis, which has worsened after two years of hyperinflation and economic sanctions, has created an unprecedented migration that has already reached over 4.5 million people. In the Dominican Republic, according to official data from the National Statistics Office (ONE), through the ENI survey, in 2012, there were 3,434 Venezuelans in the Dominican Republic and 25,872 in 2017.

Venezuelan migrants, although not facing barriers to entry, suffer from the limitations of irregular migration. They are not assumed to be illegal migrants, since most of the time they arrive in the country legally, but then their stay here makes them irregular. Venezuelans consulted said that if the authorities regulated their migration status, they could be active participants in the national economy/society. The study "Migratory Profile of the Venezuelan in the Dominican Republic" conducted by IOM in coordination with FLACSO, which included 761 interviews, reported that seventy percent of migrants are between the age of eighteen and thirty-five years old, fifty percent have a technical or university level of education, seventy-four percent are single women and ninety percent have an irregular migration status.

1. LAWS, POLICIES, REGULATIONS AND INSTITUTIONAL PRACTICES

The Dominican Republic has a legal framework to regulate aspects related to migration, including the current Constitution of 2015, Law 285-2004 on Migration and its Application Regulations, and Decree No. 613-11. The Dominican Republic has signed and ratified international agreements in the area of political asylum and for refugees with the 1951 Convention relating to the Status of Refugees and its 1967 Protocol. Article 3 of Regulation No. 631-11 corresponds to the application of Dominican Migration Act No. 285-05, which defines the concept of what is a refugee in legislation and indicates:

Refugee: For the purposes of the application of the Act and this Regulation, a refugee shall be any person who, owing to well-founded fear of being persecuted for reasons of race, religion, nationality, political opinion or membership of a particular social group, is outside the country of his nationality and is unable or, owing to such fear, is unwilling to avail himself of the protection of that country; or who, not having a nationality and being outside the country of his former habitual residence as a result of such events, is unable or, owing to such fear, is unwilling to return to it.

The procedure for granting refugee status in the country is very complex and it is very difficult to grant such a status. On the other hand, many of the Venezuelan people interviewed said that they do not take advantage of this procedure because if they are granted this status, they would not be able to return to their country.

Before entering the Dominican Republic Venezuelans did not require a visa and their entry was guaranteed with a passport and they were able to stay in the country as a tourist for thirty days. This provision means that most Venezuelans currently in the country are illegal migrants. In order to apply for a residence visa, the interested party had to travel to his/her country and apply. For many Venezuelans this is not possible, and they do not take the risk to be legalized. The situation recently changed for Venezuelans with Resolution 006-2019 being issued on December 16, 2019 by the Ministry of Foreign Affairs (MIREX). Nationals of Venezuela who now wish to enter the Dominican Republic are required to have a visa issued through the corresponding consular missions.

2. CULTURAL NORMS AND BELIEFS

The Venezuelans consulted consider that the Dominican Republic, like other Latin American countries, was not prepared for such an abrupt migration. Most of the Venezuelans interviewed voiced how they do not feel discriminated against, nor harassed and until now they have not been persecuted by migration officials. They expressed how the people of the DR have been for the most part very kind and supportive. Those consulted are of the opinion that they are welcomed due to the history of relations between the two countries. The same actors interviewed stated how the political situation in Venezuela has made many countries show solidarity and the DR is in a geopolitical position to help the thousands of Venezuelans that have fled their country. Dominican authorities have not been diligent in the application of norms to confront the illegal stay of Venezuelans in the country. For some key informants that were consulted, they stated that they had to leave the situation in their country, for some their goal is not to stay in the country and they intend to move on to another country where there are better economic conditions.

3. ROLES AND RESPONSIBILITIES

As illegal migrants, their work status has been limited to low-skilled and low paying jobs. After their tourist permits expire, migrants from Venezuela face limits to access formal jobs. There is also a gap or

absence of efficient procedures to validate their work experience and their academic qualifications. They tend to engage in activities that provide some level of income, but they cannot access social security. According to the interviewees, when it is necessary to select a Venezuelan person for certain occupation, "women are preferred for dealing with customers and that is due to the beauty of the Venezuelan woman." One can observe many Venezuelan women working in parking lots, in street sales, in stores and supermarkets in the DR.

4. **ACCESS TO AND CONTROL OVER ASSETS AND RESOURCES**

The Venezuelan population, "would have ease of insertion in the labor market," says IOM, although it warns that "it is linking into low-skilled jobs." Meanwhile, the Dominican economy loses part of the human capital that this immigrant population offers. Venezuelan migrants do not have access to purchase real estate, and they cannot obtain bank accounts. The study "Migratory Profile of the Venezuelan in the Dominican Republic" led by IOM in coordination with FLACSO found that:⁷⁷

- Ninety percent have irregular immigration status, eight percent have a valid tourist visa and only 0.4 percent have managed to get a work visa.
- Seventy-four percent are single and mainly women.
- Eighty-nine percent carry out some economic activity (sixty-one percent hired by an employer)
- They have limited access to labor rights due to their illegal immigration status.
- Eleven percent are unemployed.
- Seventy-seven percent admit they have no access to health care.
- Ninety-six percent have educational levels between secondary, technical, professional and postgraduate. 78
- There is an absence of efficient procedures for validating their work experience and academic degrees.

5. PATTERNS OF POWER AND DECISION MAKING

According to the Venezuelans consulted, nine people in total, 4 women, 5 men, the organization MOVERD represents Venezuelans and helps with legal registration and maintains good communication with the community. But this community does not want to attract attention. There is also support with the Migrants Table, a coalition of thirty-four institutions that do all the follow up support with migrants and work on promoting the human rights of migrants, including Venezuelans. There are two Venezuelan outreach workers working for the organization. Some Venezuelans have been able to legalize their immigration status and establish themselves in the country permanently, in more stable and influential jobs, such as in the media. But there are no Venezuelans who are in decision-making positions. An interview with a gay Venezuelan man revealed that due to his status as a migrant and his sexual orientation, renting an apartment has been difficult: "As a Venezuelan migrant, I experience a lot of the discrimination. I live in fear of expressing my gender identity. Being a homosexual without documentation, means that I live with a lot of problems. "

⁷⁷ OIM en coordinación con FLACSO, "Perfil Migratorio del Venezolano en la República Dominicana".

⁷⁸ OIM Perfil Migratorio del Venezolano en la República Dominicana.

Personal safety and security

According to the Declarations of the Office of the Attorney General of the Dominican Republic: "the crime of trafficking in persons has increased, has been aggravated as a result of the situation in Venezuela and they are the foreigners who are the most sexually exploited for commercial sex purposes in the country." The Office stressed that since the implementation of the CITIM plan and during the first half of this year, there has been a total of four hundred and seventy-one victims of trafficking rescued. The lack of legal documentation has caused many Venezuelan women and adolescents to fall into networks of traffickers, which means they are victims of gender-based violence. They run the risk of being deported and are often sexually exploited and victims of other types of abuse. The new visa requirement for the entry of Venezuelan migrants also has a negative impact on families being reunited. Many families will remain separated.

D. Persons with Disabilities

The Dominican Republic has an estimated population of 10,177,000 people, of which nearly 708,600 have some type of disability. This is equivalent to seven percent of the population at urban and rural levels. Out of the total number of people with disabilities, there is a greater number of men with disabilities at fifty-two percent compared with women at forty-eight percent. The largest number of people with disabilities live in urban areas at seventy-four percent. About seventy percent of persons with disabilities are forty years and older and one fifth of this population is under the age of twenty. The most common types of disability include: vision impairments (130,136 people), deafness (94,677 people), blindness (82,525 people), mute (27,429 people), hand injuries (25,998 people). When analyzing the types of disabilities and the sex of the person, there are some differences in the number of cases of women and men with visual impairments (forty-four percent versus thirty-two percent).

1. LAWS, POLICIES, REGULATIONS AND INSTITUTIONAL PRACTICES

The Dominican Republic has a legal framework that protects and guarantees the rights of persons with disabilities in the constitution under Articles thirty-nine, fifty-eight and sixty. The National Gender Equity Plan 2018-2030 includes recommendations for pensions for women with disabilities. CONADIS does not have specific programs aimed at women with disabilities in their different interventions and gender equality has not yet been mainstreamed in their work. There is a lack of compliance with the National Accessibility Plan for accessibility to schools, buildings, sidewalks, streets and elevators. Article eight of Law 5-13 establishes that the country has a system for the evaluation, registration and certification of disabilities, but this has not yet materialized. Most people with disabilities in the Dominican Republic have never been evaluated by a multidisciplinary team that identifies the type of disability they have, as well as the degree of their disability. The registry is currently in the design phase and a pilot is planned to be implemented in 2020.

2. CULTURAL NORMS AND BELIEFS

Being disabled is often viewed from a biomedical approach and consequently persons with disabilities are considered to be ill and in need of continuous support. Consequently, this generates public policies

⁷⁹, Ver Tabla 1 en anexo.

⁸⁰ Ver detalles Tabla 5 en anexo.

⁸¹ ONE. 2014. Encuesta Nacional de Hogares de Propósitos Múltiples (ENHOGAR 2013).

and actions from the private sector with a paternalistic and charitable approach. One informant from an organization that works with persons with disabilities explained: "In this society the dominant vision is that we are sick people and we cannot take care of ourselves and this limits our capacity to exercise our rights." But others interviewed stated how the social paradigm for persons with disabilities has been slightly changing in recent years. Women with disabilities experience higher levels of exclusion and this limits the development of their economic, political and physical autonomies. Their exclusion is further manifested by the limited data generated on this population. This data is important and necessary for the definition of policies and timely decision making for persons with disabilities.⁸²

3. GENDER ROLES AND RESPONSIBILITIES

The predominant sexual division of labor in the Dominican society establishes an important separation in the work carried out by men and women. Men typically work to provide for their families, while women are responsible for the care work. The analysis found that women with disabilities are more protected by their families compared to men with disabilities. Those interviewed reported how more men with disabilities participate in training for increased mobility and income generation. Those working on facilitating these training programs stated: "Most of the people who come to the association are men, due to mobility issues and gender roles. Families tend to think they are protecting women and they are not allowed to go out of the home, and this limits their ability to become independent."

4. Access to and control over assets and resources

Labor inclusion is a fundamental aspect for people with disabilities to acquire economic independence. Data from ENHOGAR 2013 indicate that sixty-four percent of this population is economically inactive. The remaining thirty-six percent is active in the labor market. The total number of people without paid work amounts to 467,674 people. ⁸³ The analysis of employment data by sex shows a greater vulnerability for women, with a total of seventy-eight percent unemployed. While fifty-five percent of men with disabilities are unemployed. The highest percentages of persons with disabilities without employment are among the youngest population, mainly for ten-nineteen years at eighty-nine percent, followed by over sixty years at ninety-eight percent and for persons ages twenty-twenty-nine years at fifty-three percent.

Persons with disabilities experience limitations to access employment due to accessibility and prejudices. But the Dominican Republic Includes program is making a difference by recognizing those companies and institutions that have implemented inclusive practices for persons with disabilities. Initiatives are recognized for universal accessibility, participation, education, justice, work, awareness, health and knowledge production. As of 2019, with the support of UNDP, about one hundred and seventy companies have been recognized.

5. ACCESS TO EDUCATION

One fifth of children with disabilities have not attended school. It is estimated that fifty-nine percent of children know how to read and write, with the proportion for girls at sixty-seven percent and fifty-three percent for boys.⁸⁴ When analyzing the educational levels of the population for over fifteen years old,

⁸² CIMUDIS, 2018.

⁸³ See Table 4 in Annex.

⁸⁴ Infograph by CONADIS based on the Encuesta Nacional de Hogares (ENHOGAR 2013) conducted by National Statistics Office (ONE).

twenty-four percent do not have literacy skills, presenting a level of illiteracy of twenty-three percent, which is almost four times higher compared with persons who do not have a disability at six percent. ⁸⁵ The Ministry of Education has formed the Centers for Attention to Diversity (DAC). According to key informants consulted, there are many challenges for people with disabilities to access schools. Most schools are not equipped to offer integrated education with the appropriate technology for inclusion, such as computers, the use of the Braille language, physical accessibility and trained teaching staff with the knowledge and expertise to work with children with different types of disabilities.

6. Access to health and social security

For women with disabilities, the areas of concern are for their sexual and reproductive rights, their access to health services and access to basic rehabilitation. Basic rehabilitation is not covered by health services. In the study conducted by CIMUDIS (2018), there were low levels of sex education reported, including education about HIV transmission and prevention. This places women with disabilities at a high risk of contracting this disease or another sexually transmitted infection. The study found that adolescents with disabilities have unprotected sexual relations and the majority do not use contraceptives. There is a lack of awareness and training for health personnel for how to provide service and care for women with disabilities based on their needs. As of 2013, only fifty-nine percent of persons with disabilities had access to health insurance. Consequently, forty-one percent of this population is very vulnerable because of their disability status.⁸⁶

7. PATTERNS OF POWER AND DECISION MAKING

Organizations representing persons with disabilities have been actively pressuring the state to develop inclusive policies for equal participation in all areas of society. Numerous civil society organizations that represent persons with disabilities participate in the National Directorate of CONADIS. CONADIS groups various networks or federations of institutions for persons with disabilities and gives them a voice, but they are not given the right to vote. Participating in organizations is an opportunity for women and men with disabilities to join efforts to defend their rights.

8. Personal safety and security

Women with disabilities report that they have faced experiences of violence since childhood. The impact and effects of this violence are usually greater, considering how these women face even more barriers to seek help and justice and they are often not aware of gender-based violence. As CIMUDIS (2018) states, women with disabilities' subordination is magnified by her disability, and the ways they experience violence makes them more vulnerable. It is important to bring awareness, address the violence against this group and to work towards the reduction of such violence.

The forms of violence experienced by women with disabilities are magnified by their social status, cultural prejudices and greater dependence on others. They face violence in multiple ways. Generally violence against women with disabilities is carried out by members of their immediate family at sixteen percent, their ex-partners at thirty-six percent, caregivers and friends at eleven percent and strangers at five percent.⁸⁷ Other examples of violence experienced by women with disabilities include depriving

 $^{^{85}}$ Data from CONADIS web page, Table 7.

⁸⁶ Ver detalles en Tabla 9 en anexo.

⁸⁷ CIMUDIS, 2018.

them of care, of medicines, of food, keeping them locked up and isolated and limiting their mobility by not providing them with their wheelchairs, crutches and canes.

E. PERSONS LIVING WITH HIV/AIDS

From mid-2000 to 2018, available data on HIV prevalence show few changes. The evolution in HIV prevalence, measured through ENDESA, indicates the following trends: 2002 at one percent (0.9% women and 1.1 percent men), in 2007, 0.8 percent for both sexes and in 2013, 0.9 percent were reported in men and 0.7 percent in women.⁸⁸ The national estimates from 2016 from the Ministry of Health reveal a prevalence rate of one percent, with a lower proportion for women at 0.9 percent versus 1.1 percent for men.⁸⁹

When analyzing the ENDESA 2013 data by sex and age groups, the HIV prevalence rate is higher in almost all age groups for men compared to women, except for the twenty-twenty-four years old age group with 0.8 percent for women versus a rate of 0.2 percent for men and for the thirty-thirty-four years old age group with a rate of 1.1 percent for women versus 0.7 percent rate for men. The highest prevalence rates for men are the twenty-five-twenty-nine years old and over forty-year old groups. The highest number of HIV cases were reported in Santo Domingo and the national district, Santiago, Puerto Plata, Duarte, La Vega, La Romana and Valverde. 90

The number of new HIV infections decreased by six percent between 2015 and 2018 (from 2,904 to 2,737 people annually), mainly in men older than fifteen years at thirty-five percent, in women at thirtythree percent and in sex workers at twenty-six percent. In the case of children, there was a reduction of nine percent and a reduction for trans people of two percent on new infections. In contrast, there was an increase in new infections in men who have sex with men (MSM) of fourteen percent and migrants at one percent in the same period. Trans people have a higher risk of contracting the disease, estimated at sixty-eight times higher than adults over fifteen years of age, while in MSM the risk is forty-nine times higher.91

The ENDESA 2013 data shows a close relationship between gender and a higher prevalence and/or risk of HIV in specific situations. The evidence highlights:⁹²

- A higher prevalence of HIV in women that are victims of gender-based violence, they are 2.6 percent more likely to become infected.
- Women without an education have a higher level of HIV prevalence at 5.4 percent, compared to 4.3 percent for men.
- There is a higher level of HIV prevalence in the group of poorest people at 1.5 percent for women and 2.1 percent for men.

⁸⁹ Ministerio de Salud y el Consejo Nacional del VIH y el Sida (CONAVIHSIDA). 2019. Plan Estratégico Nacional para la Respuesta a las ITS y al VIH y el Sida 2019-2023 (PEN). Santo Domingo, República Dominicana.

⁹⁰ Data fromCONAVIHSIDA. PEN, 2019-2023. Santo Domingo, República Dominicana.

⁹¹ Estimates from CONAVIHSIDA and ONUSIDA, presented in "De la producción del dato al uso de dato: Avanzando hacia las metas de acción acelerada del VIH y sida al 2020." ONUSIDA, CONAVIHSIDA, MSP, SNS. 2019. See Table 6 en Annex.

⁹² Data from ONUSIDA y CONAVIHSIDA. 2014. Diagnóstico de Género de la Respuesta Nacional Al VIH en la República Dominicana. Santo Domingo, República Dominicana.

- Women who had their first sexual intercourse before the age of 16 years registered a higher HIV prevalence at 1.1 percent compared to those who initiated sexual intercourse at an older age of twenty years or more at 0.3 percent.
- Young women between the ages of fifteen-twenty-four years with low school education have a higher prevalence of HIV at 1.3 percent compared to young men at 0.7 percent.
- Young and more impoverished women have a higher HIV prevalence rate when compared with men at 0.7 percent versus 0.2 percent.
- Higher rates of high-risk sexual behavior are verified in women without schooling than in men at the same level, twenty-eight percent versus fifty-six percent.
- There is a positive relationship between HIV and multiple partners, especially in younger women at seven percent, widows, divorced or separated at nine percent, and those in the lower wealth quintile at six percent.
- Young women between fifteen and twenty-four years of age protect themselves less than young people using a condom during sexual intercourse at forty percent versus fifty-seven percent.

1. LAWS, POLICIES, REGULATIONS AND INSTITUTIONAL PRACTICES

The Dominican Republic has a broad legal and institutional framework that protects and guarantees the human rights for people living with HIV. The country has committed to international instruments, agreements and conventions regarding HIV and for gender equality. The main barriers identified are:

- Articles 78 and 79 of Law 135-11 on HIV/AIDS criminalize the transmission of HIV, when the
 person living with HIV does not report his or her serological status to the couple with whom
 they will have sexual relations, there is a penalty of imprisonment of two-five years and twenty
 years if the transmission of HIV was intentional.
- Law 50-08 on Drugs and Controlled Substances criminalizes consumption, which limits interventions for the prevention of HIV in drug users.
- The Labor Code, Article 44 establishes the obligation of the worker to submit to medical examination at the request of the employer to verify that she/he does not suffer any incapacity or contagious disease that makes it impossible to perform her/his work.
- The Law on Migration, No. 285-04 and Article 27 orders the proof of HIV as a requirement to opt for legal residence in the country, affecting people who are in the process of legalizing their immigration status.
- Law 187-01 on social security requires the expansion of its coverage for ARV medications and other required care.

2. CULTURAL NORMS AND BELIEFS

The data from ENDESA 2013 reveals economic, social and cultural factors that influence the behavior of the population in terms of knowledge, skills and practices related to sexual health and HIV prevention. For the key populations, other social, cultural and/or economic determinants are added: i) alcohol consumption ii) drug use iii) sex work iv) monetary poverty and unsatisfied basic needs v) low level of schooling vi) high-risk sexual behavior and reduced condom use vii) limited knowledge about risks and

transmission of HIV.⁹³ The main experiences of discrimination experienced by PLHIV and key populations are summarized below:⁹⁴

- They experience violence in their neighborhoods, on public transportation and often are barred entry to participate in community activities.
- They are often rejected by their families and report experiences of neglect and domestic violence in all forms.
- In educational spheres, they are often victims of harassment, bullying and violence in all their different forms.
- In the work environment, they are often denied employment, they experience layoffs, they have limited access to benefits, they experience workplace harassment, they often receive requests for HIV testing.
- In health centers they are reports of lack of access to prevention, care-treatment, neglect, verbal abuse, HIV testing without consent, lack of privacy and confidentiality, obstetric violence and denial of services.

During the assessment, people living with HIV reiterated different types of discrimination also reported in previous studies. People belonging to key populations, who are generally discriminated against because of their sexual identity and choice, attribute that discrimination and prejudice towards people living with HIV is due to lack of knowledge.

3. GENDER ROLES AND RESPONSIBILITIES AND TIME USE

The Dominican Republic is a society in which a clear sexual division of labor persists, where men fundamentally assume paid work, while women are primarily responsible for the care work. This reality occurs in a context, where the increase in the participation of women in the labor market has not been accompanied by a greater participation of men in unpaid domestic work and care. Women dedicate 3.25 times more to unpaid work, with women on average spending 21 hours more than men and women spend more than double the time compared to men on caregiving. Rural women and women ages twenty-five to forty-five years spend the largest number of hours dedicated to unpaid work. The policies promoted by the state for early childhood care and the elderly care have had a very limited impact. The available data on paid and unpaid work are consistent with the pattern of sexual division of labor by gender (five percent of women HIV + 3.3 percent of HIV (-) perform unpaid work, a situation that only 1.3 percent records for men with HIV.

4. Access to and control over assets and resources

When analyzing the activity status of people, HIV status does not seem to influence their insertion into productive activity, although it does affect the occupational category and there are wide participation gaps according to gender. In this regard, ninety-three percent of men with HIV and fifty-one percent of women with HIV are employed in the labor market. Being HIV positive in the case of women, interferes

⁹³ Data from ONUSIDA y CONAVIHSIDA. 2014. Diagnóstico de Género de la Respuesta Nacional Al VIH en la República Dominicana. Santo Domingo, República Dominicana.

⁹⁴ Centro de Estudios de Género del INTEC. 2018. "Diagnóstico sobre las brechas que impiden el acceso a justicia de las poblaciones claves", en el marco del Programa "Apoyo a las Poblaciones Clave de Mayor Riesgo al VIH: 20162018" Subvención: DOM-H-CONAVIH – 904. (Preliminar). CONAVIHSIDA, Santo Domingo.

⁹⁵National Statistics Office, Trabajo no remunerado en República Dominicana: un análisis a partir de los datos del Módulo de Uso del Tiempo de la ENHOGAR 2016: https://oig.cepal.org/sites/default/files/uso del tiempo rep do.pdf, page 83.

with their insertion into self-employment activities.⁹⁶ Women living with HIV are also the most affected by unemployment at thirty-six percent, which makes them economically dependent on other people.

The data for salaries also show important differences according to HIV status and gender, where women receive lower average incomes than men despite their higher educational level. Men and women living with HIV earn on average seventy-two percent and sixty-six percent respectively compared to their peers who are HIV negative. ⁹⁷ It is a concern that about sixty percent of men and women living with HIV do not have health insurance. ⁹⁸ As of June 2017, some 47,686 PLHIV were identified in the public health network of the National Health System and the cost of diagnosis and treatment of these users is being covered. ⁹⁹

5. PATTERNS OF POWER AND DECISION MAKING

Organizations for PLHIV actively participate in processes to define and agree on plans, programs and projects and in monitoring and implementation for HIV/AIDS. There are various networks for HIV/AIDS in the country including: The Network of People Living with HIV (REDOVIH), the alliance for the fight against HIV and AIDS (ASOLSIDA), the Paloma Group, Clara Group, REDNACER and REVASA. They have all managed to maintain an active membership and they have mobilization capacity at the national level. The NGO Coalition for HIV/AIDS, represents forty-seven NGOs and it has played an important role in the country. There is a need for a larger presence of civil society organizations with human and financial resources to deepen the work for the defense of the rights of individuals and to address and eradicate stigma, discrimination and violations of the rights of HIV-positive people. 100

6. Personal safety and security

The most discriminated segments of the population of Dominican society, according to the opinion of sixty-five percent of the people interviewed by Gallup (2018) are homosexuals and trans people. ¹⁰¹ The key populations report experiences of discrimination by the national police through physical abuse such as threats, raids, physical abuse, sexual abuse, extortion, among others. Reportedly, trans people face significant levels of stigma and discrimination. More than twenty percent of sex workers have felt contempt for their family, between eighty-six percent and ninety-five percent said they experienced discrimination in accessing health services and one in ten have been forced to have sex. ¹⁰²

There are some NGOs like COIN and CEPROSH that offer support to address human rights issues for vulnerable groups and they also use a gender-sensitive approach. It is the NGOs that maintain a more direct and daily contact with people living with HIV in their communities, especially with key populations. It is important to highlight the innovative experiences developed by CEPROSH in prevention and attention to gender-based violence, through training, workshops, educational and motivational training modules for members of the care system (health personnel, police, prosecutors,

⁹⁶ See table "HIV status by occupation, 2013" in Annex D.

 $^{^{97}}$ See table "HIV status by monthly income, 2013" in Annex D.

 $^{^{98}}$ See table "Insurance availability according to sex and HIV status" in Annex D.

⁹⁹ CONAVIHSIDA. PEN 2019-2023.

¹⁰⁰ The members of the Committee are: ASA, TRANSSA, Mesón de Dios, Centro de Orientación e Investigación Integral (COIN), CEPROSH, REDOVIH, ASOLSIDA y la Coalición ONG SIDA.

¹⁰¹ CEG/INTEC: CONAVIHSIDA. 2018.

¹⁰² CONAVIHSIDA, PEN 2019-2023.

etc.). CEPROSH is also a key member of the technical table created for Prevention and Attention to Gender-based Violence in Puerto Plata, that includes: the Attorney General's Office, the hospital, the Ministry of Women, representatives from the key populations and 911 first responders. This is in addition to the work they do in the field of HIV prevention from a medical perspective. The work carried out by COIN and INSALUD with key populations in the communities, especially with MSM and drug users is remarkable.

F. AT RISK CHILDREN, YOUTH AND ORPHANS

According to the Observatory of the Rights of Children and Adolescents (ONDA), in 2019 the Dominican Republic had significantly improved its commitments for the rights of children and adolescents. The Child Development Index (IDN) ¹⁰³ indicated that the country has reached a medium level. But for children between the ages of zero and five years old the rating was 0.461, which is lower when compared to 0.587 for the six to twelve years old and in 0.548 for the thirteen to seventeen years old group. There are also high infant mortality rates. For the children and youth who live on the streets, those who have disabilities, children and youth who are in conflict with the law, teenage single mothers were all identified as highly vulnerable groups by key informants consulted. However, there is little data available on these groups.

1. LAWS, POLICIES, REGULATIONS AND INSTITUTIONAL PRACTICES

The Dominican Republic has legal instruments, policies, plans and programs to respond to the specific problems and to guarantee the protection of children, youth and orphans. The main legal instruments include: the Constitution with Article 39 on the right to equality and non-discrimination on the basis of age and gender and Article 56 for the "Protection of Minors," Act 1-12 on the National Development Strategy 2030 (END), Law 136-03 Code for the Protection of the Rights of Children and Adolescents, the General Youth Act, Act No. 49-2000, Act No. 550-14, Article 144 of the Civil Code, Act No. 24-97 on Domestic and Gender-based Violence, General Health Law (No. 42-01), Law No. 135-11 for the rights of people with HIV or AIDS, General Education Act, No. 66-97, Law 50-08 on Drugs and Controlled Substances, Gender Equality Plan 2019-2030 (PLANEG III) and the National Plan for Prevention and Care of Adolescent Pregnancy 2019-2023.

The Children and Youth Protection Code includes principles of equality and non-discrimination. This code establishes the obligation of the State to take all necessary and appropriate measures to ensure that children and youth fully enjoy their rights. Furthermore, the state may not invoke budgetary constraints to breach these established obligations. The State must ensure policies, programs and appropriate assistance and services for this population. All state agencies are responsible according to their roles. According to key informants from the government and NGOs the Protection Code for children and youth guarantees the human rights of these population groups, but its application is limited. The National Council for Children and Adolescents (CONANI) is the governing body of the National System for the Protection of the Rights of Children and Adolescents. Its mission is to guarantee the fundamental rights of children and adolescents in the Dominican Republic through the effective steering of policies on children and adolescents, for which it has regional and municipal structures in different parts of the country.

¹⁰³ IDN is calculated using indicators on health, mortality, chronic malnutrition, adolescent pregnancy, vaccinations, education, school attendance , income and poverty.

In order to guarantee the rights of children and adolescents and to promote their comprehensive development through the coordination of intersectoral and inter-institutional policies and actions, the National System for the Protection of the Rights of Children and Adolescents was created. This System is made up of a set of institutions, agencies and entities, both governmental and non-governmental, to formulate, coordinate, integrate, supervise, execute and evaluate public policies, programs and actions at the national, regional and municipal levels for the comprehensive protection of the rights of children and adolescents.

The Ministry of Youth is the governing body responsible for formulating, coordinating and following up on the Dominican State's policy on youth and ensuring compliance with the General Law on Youth, Law 49-2000. It develops various programs to support youth such as: i) Scholarships for studies ii) Let's talk about the whole DR, supporting awareness-raising, education and support for young people to address the issues of interest and problems which young people are currently experiencing (bullying, problematic consumption, gender and sexuality, sexually transmitted infections, HIV/AIDS, gender violence, eating disorders, prevention of adolescent pregnancy, political participation, etc.) (iii) Youth Volunteer Program (iv) Adolescent Pregnancy Prevention Program (iv) Disability Program (iv) Youth Houses (v) Pension House; and (vi) Youth Take Off (Entrepreneurship Initiative).

There are contradictions between the Constitutional text and the Code of Protection for Children and Youth. The Civil Code establishes differences for the minimum age for marriage, eighteen years for men, and fifteen years for women and below these ages one can legally marry, with parental authorization plus a judicial dispensation. This provision constitutes a guarantee for the unions of adult men with minors, which constitutes a serious violation of the human rights for children and youth. Cultural factors, social and gender norms make the practices of child marriage and early unions normalized.

Key informants consulted emphasize that Law 55-88, which regulates the consumption and sale of drugs, has been drafted under a very backward approach, where consumption is criminalized with imprisonment. It lacks a focus on prevention and care for people who consume, who are now classified as being ill. In this sense, a revision of the law is needed, so that it is centered on people and with a focus on health, which guarantees their rights and further penalizes the selling. There is some tension between the Criminal Code and the Children's Code, which makes it possible for minors to be used for the trafficking of drugs, a situation that constitutes a risk for this population.

Other regulatory shortcomings have been submitted to the National Congress, among which the following stand out: the Integral Law for Attention to Gender-based violence, Law for Equality and Non-Discrimination and the Law on Sexual and Reproductive Rights. It is argued that there is a lack of commitment to approve these proposed laws, as well as to modify the Civil Code to increase the age of marriage for girls to eighteen years old.

2. POLICY SUPPORT FOR ORPHANS

The main public policy to care for orphans due to femicide¹⁰⁵ is the extension of the Protocol for Attention to Orphaned Children, which is a tool for the comprehensive protection and to guarantee the

¹⁰⁴ Plan International, Dominican Republic. (2017). Caracterización de la problemática de niñas adolescentes en matrimonio y uniones forzados a temprana edad en República Dominicana: Provincias de Azua, Barahona, Pedernales, Elías Piña y San Juan. Plan International, Dominican Republic.

¹⁰⁵This protocol was developed in 2016 to organize state intervention in cases of care for children or adolescents (NNyA) orphaned by

rights of children in vulnerable situations and to protect them from poverty, discrimination, exclusion, abandonment, exploitation and abuse. This protocol is applied by the Ministry of Women through its fifty-two Provincial Care Units throughout the country and the Vice Presidency of the Republic (through the Unit for Support and Monitoring of Orphaned Children and Adolescents for Femicides of PROSOLI. Other institutions involved in the implementation of this protocol are the Public Ministry, the National Council for Children and Adolescents (CONANI), the Ministry of Public Health, the National Health Insurance (SENASA), the National Police and non-governmental organizations.

This comprehensive care includes the services of social assistance programs, ensures that this population is welcomed by families, ensures that they receive psychological and socio-educational care, and legal assistance. It also includes follow-up support for the families that receive the children after an evaluation by CONANI to help each member of the household to heal from the emotional wounds left by the tragedy and provide them with the necessary tools to move forward. There were reports from some interviewed that the orphans did not always continue to access psychological services once they were placed in their new homes. *Hogares de Paso* (Transition Homes) were designed to accommodate children and adolescents who for reasons of neglect, physical violence and emotional abuse. Through their services, support was provided to 312 boys and 336 girls in 2018 and mainly children between the ages of seven and eighteen.

3. ADOLESCENTS IN CONFLICT WITH THE LAW AND DRUG CONSUMERS.

According to key informants, young people are the most vulnerable to involvement in crime. Data from the Attorney General's Office as of December 2018 indicate that ninety-four percent of adolescents deprived of liberty were men, mostly between the ages of fifteen and seventeen years old. The data collected by the ONE indicates that the main imputation for adolescents is linked to drug trafficking (twenty-eight percent in 2016), followed by physical aggression (eighteen percent) and theft (sixteen percent). According to key informants, it is common that in the neighborhoods and marginalized urban areas children and youth are high-risk populations in the face of the operations carried out by the drug trafficking networks. Security agencies play a very important role in the violation of the rights of young people, especially young men, with checkpoints and raids in the neighborhoods.

4. CULTURAL NORMS AND BELIEFS

According to Tineo (2014), the Dominican Republic is an adult-centric society that sees adulthood as the peak process of the identity process, based on a culture that defines age for the beginning of the productive and reproductive age. Society appreciates adults over all other age groups, so being young is a challenge, but being a young woman is an extra challenge. Masculinity is centered on the idea of control, independence, not showing affection, being a provider and having material goods, money, and their women under their control, a situation that coexists with a culture where male infidelity is normalized. While femininity is related to the role of caregiver, submission, it is built to be recognized by a man and whose fundamental aspiration is to marry and be a mother, since her recognition and social legitimacy is based on motherhood.¹⁰⁶

femicides, establish reference mechanisms to address their protection in an appropriate and coordinated manner and define the roles of the different actors that get involved in this process.

¹⁰⁶ Tineo Durán, Jeannette. 2014. Imaginarios de Género en juventudes dominicanas: aportes para el debate desde la colonialidad del poder". Instituto Tecnológico de Santo Domingo. Santo Domingo, República Dominicana.

Key informants consulted in this study suggest that the predominant cultural norms in the country are very entrenched, therefore, they determine behaviors at all levels of society. These norms limit the effectiveness of the interventions that are promoted from NGOs and international cooperation agencies to promote the rights of children and youth. There is a high tolerance and social complicity, a system of values and beliefs that leads to normalize and accept relationships between adolescents and adult men. Similarly, cultural beliefs lead to discriminatory practices in public spaces that limit the exercise of the rights of children and youth, among which: i) significant pressures to adhere to a certain dress code and hairstyles in order to have access to public services and employment ii) higher levels of violence against adolescent girls and young women because of how they behave and dress iii) girls' hyper sexualization iv) the standardized practice in the society of adult men with couple relationships with minors v) the girls' life project focuses on finding a husband to support her, which deepens in the face of consumer pressure, in addition to having her children.

5. HIGH RATES OF CHILD MARRIAGE AND UNIONS AT AN EARLY AGE

In the Dominican Republic, child marriage and early unions continue to be a reality and constitute violations of rights that put the health and development of adolescent girls at risk. According to ENDESA (2013), only fourteen percent of women between fifteen and forty-nine years have marital status, while forty percent are in free unions. Between fifteen and nineteen years, twenty percent are in unions, compared to 0.5 percent married and 8.5 percent separated. The highest proportion, fifty-one percent, of the unions of girls and young women are concentrated in regions where there are high incidences of poverty such as health region VI (Azua, Elías Piña and San Juan) and in region VII (Barahona and Pedernales), with forty-six percent of these early unions.

The Dominican Republic has the highest rates of underage marriage in Latin America and the Caribbean, well above the regional average of adolescents under eighteen married or united (twenty-three percent) and more than double the average in adolescents under fifteen years (five percent). Early unions are a practice that is part of the culture of the country according to key informants consulted. The data show that it especially affects girls who live in the most impoverished sectors: those from rural and peri-urban areas, considering that fifty-nine percent of girls in the poorest quintile marry before eighteen years old and twenty-three percent do so before their fifteenth birthday. 107

The causes of child marriage and early unions are related to: poverty, the limited opportunities for training and empowerment of girls and adolescents, the existence of a legal framework that legitimizes the practice of child marriage, social norms and gender-based violence that originates in cultural patterns that favor its occurrence. Other risk factors of early unions are low educational levels, living in rural areas and marginalized urban areas and not having protection from the family environment, social, institutional and legal levels. 108

As mentioned, a major concern for this population is the significant percentage of girls and adolescents fifteen-nineteen years old who are married or in unions with men five or ten years older than them at sixty percent and twenty-four percent for twenty-twenty-four years old. All of this occurs even when the Dominican legislation classifies relations with minors in which there is an age difference of five years

¹⁰⁷ United Nations Children's Fund (UNICEF), oficina de país de la República Dominicana. 2019. Resumen 30 años de la Convención sobre los Derechos del Niño en la República Dominicana. Fondo de las Naciones Unidas para la Infancia (UNICEF). República Dominicana.

¹⁰⁸ Programa Progresando con Solidaridad (PROSOLI); Fondo de las Naciones Unidas para la Infancia (UNICEF). 2019. El matrimonio infantil y las uniones tempranas. Resumen del estudio de conocimientos, actitudes y prácticas en seis municipios de la República Dominicana. Santo Domingo, República Dominicana.

or more (Law 136-03 in Article 396) as sexual abuse. This harmful cultural practice affects poor girls and adolescents, limiting their opportunities for development, exposing them to violence, sexual abuse and early pregnancy. It is therefore considered a type of gender-based violence. Among the consequences of this practice for women are: they significantly reduce the level of education they could achieve, they have fewer opportunities for development, they reduce their chances of finding stable, formal employment and earn less throughout their lives, they become pregnant earlier and have more children, they face greater health problems during pregnancy and childbirth and they are more exposed to violence from their partners.

At the social level, there is an internalization and institutionalization of oppression due to gender and age, which operate through four dynamics linked to the conditions of inequality and exclusion in which adolescent girls live: (i) their self-esteem and levels of empowerment, where independence, self-management and autonomy do not exist in their imaginations (ii) the mechanisms of decision-making and family negotiations (iii) the loving arrangements, the formation of bonds or couple relationships and (iv) the pressure or support exerted by the community.

6. GENDER ROLES AND RESPONSIBILITIES AND TIME USE

According to institutions that work with children who live on the streets of marginal urban centers, there is an important differentiation in the work carried out by each gender and they are exposed to many risks. While boys tend to sell different products, clean shoes and engage in micro-trafficking, girls work in domestic service and are often sexually exploited. Girls and adolescents assume from a very young age the care roles associated with the social norm and tradition of women = mother/wife. These roles are acquired through the process of socialization such as games, the roles assigned to them in their families, caring for brothers and sisters and part of the care work. According to the research carried out by Plan International on early marriage, adolescents who are not married say that in addition to studying, they spend their time on domestic work, which they usually spend between three and seven hours a day. The brothers and other family members do not carry out these activities. This demonstrates gender inequality in the family context. Furthermore, many of the activities carried out by girls, relieve or complement the work carried out by mothers within the home.¹⁰⁹

7. ACCESS TO AND CONTROL OVER ASSETS AND RESOURCES

In the youth population there are few opportunities for employment. The economically active population (PEA) grows with age. A risk factor for the population aged fifteen-nineteen and twenty-twenty-four years is the limited access to quality employment. The unemployment rate for young men aged fifteen-nineteen is twenty-three percent and for young women it is fifty percent. The insertion in the labor market of young people aged fifteen-twenty-four represents a challenge for this country, especially for young women. In 2017 according to the MEPYD, thirteen percent of young people did not work or study, a percentage that nearly doubles in the case of young women at twenty-five percent. This reality has not improved throughout the past decade.

The ENHOGAR MICS 2014 survey shows that thirteen percent of the population between the ages of five and seventeen worked in the labor market, which affects thirteen percent of boys and eight percent of

¹⁰⁹ Plan International, República Dominicana. (2017). Caracterización de la problemática de niñas adolescentes en matrimonio y uniones forzados a temprana edad en República Dominicana: Provincias de Azua, Barahona, Pedernales, Elías Piña y San Juan. Plan International, República Dominicana. Santo Domingo, República Dominicana.

¹¹⁰ Data from Ministerio de Economía Planificación y Desarrollo. See Table 3 in Annex.

girls.¹¹¹ Child labor affected seventeen percent of boys and nine percent of girls and they come from the poorest regions, rural areas and from households with lower educational levels amongst mothers (twenty-five percent among mothers without education compared to eight percent in households with mothers with higher education). In 2017, 14,299 boys and 6,117 girls aged ten-fourteen years were part of the economically active population, representing 0.5 percent of the male PEA and 0.3 percent of the female PEA. When compared to data for 2016, this population decreased for boys by -7.4 percent, but it increased for girls by 1.9 percent.

8. Access to education

In the Dominican Republic there have been improvements in education for ages six-thirteen years, ages fourteen-seventeen years and at the university level. But there are still gaps for early childhood education and there are high numbers of school dropouts. The main indicators for the education sector show the following for the 2010-2017 period:¹¹²

- The illiteracy rate among the population aged fifteen-twenty-four was reduced from 3.9 percent to 2.2 percent and for young women from 2.0 percent to 1.6 percent.
- For basic education for six-thirteen years, there was a slight reduction with the net enrollment rate going from ninety-five percent to ninety-three percent.
- For the secondary education level (population aged fourteen-seventeen), there was an increase of fifty-five percent to seventy percent, with adolescent girls at seventy-five percent, compared to adolescent men at sixty-five percent.
- For the eighteen-twenty-four age group in higher education, there was an increase of 0.9 percentage points. There was a decrease for men of -1.7 percentage points and an increase for women of 3.6 percentage points.

The causes for school dropout vary by gender and are based on gender roles, poverty and deficiencies in public policies to meet the needs of this population. Adolescents and young people generally drop out of school because of the need to generate income and the social mandate for men to be the provider. For women, the main cause of dropping out of school is pregnancy and / or early unions and the need to generate income. People consulted in this study argue that the male population is at the highest risk in terms of school dropouts.

9. ACCESS TO SOCIAL PROTECTION

For children and adolescents, social protection has improved somewhat since 2005, through the Progressing with Solidarity (PROSOLI) program, made up of three conditional cash transfer programs, accompanied by family socio-educational programs: i) Eating is First, for the purchase of food and essential items, for 850,000 homes in 2018 and covers eighteen percent of the total population of people under the age of eighteen; ii) Incentive for School Attendance, for basic education, for 236,000 households, and iii) School Bond Studying Progress, for secondary education, which reached 115,774

¹¹¹ Fondo de las Naciones Unidas para la Infancia (UNICEF), oficina de país de la República Dominicana. 2019. Resumen 30 años de la Convención sobre los Derechos del Niño en la República Dominicana. Fondo de las Naciones Unidas para la Infancia (UNICEF). República Dominicana.

¹¹² See Table 1 in Annex.

¹¹³ Plan Internacional en República Dominicana. 2017. Caracterización de la problemática de niñas adolescentes en matrimonio y uniones forzados a temprana edad república dominicana. Provincias de Azua, Barahona, Pedernales, Elías Piña y San Juan. Plan Internacional. Santo Domingo, Dominican Republic.

households. The socio-educational programs that accompany these transfers include activities to work on gender relations, the constructions of femininity and masculinity and issues of gender-based violence.

The coverage of the social security system through the Family Health Insurance (SFS) of the child and adolescent population has also grown. Between 2007 and 2018, the number of girls, boys and adolescents (up to nineteen years old) covered by the FSS increased from 849,000 (twenty-two percent of that population), to almost 2.2 million (fifty-seven percent). In 2018, forty-three percent of the population aged nineteen and under was not covered by any social security health scheme.

10. Access to health services

In relation to the prevalence of HIV, 69,000 people in 2014, 3,000 are boys and girls aged fourteen years or less. Vertical transmission of HIV remains high, from mother to son or daughter with new cases estimated at 5.4 percent. In order to reduce this level of vertical transmission, it needs to be integrated into prenatal care performed by health personnel. As of 2013, it is estimated that the prevalence of HIV in the fifteen to twenty-four-year-old group was 0.14 percent, which is equivalent to 2,600 young people living with HIV.¹¹⁴

Child malnutrition shows a downward trend from 7.2 percent in 2007 to 5.2 percent in 2013. Despite these advances, there are still more than 65,000 girls and boys suffering from chronic malnutrition in the country. Another gap identified in the assessment is the number of children without identification. Thirteen percent of the population under the age of five do not have a birth registration (ENHOGAR MICS 2014). In absolute terms, it means that in 2014 there were more than 116,000 children that had not been registered. These children are mainly from the poorest strata (twenty-eight percent of the children of the poorest socio-economic quintile had no record) and whose mothers have a lower level of education forty-three percent, this percentage contrasts greatly with those of the richest quintile, which represented only 1.6 percent.¹¹⁵

11. ACCESS TO SEXUAL AND REPRODUCTIVE HEALTH SERVICES

The unmet demand for family planning is estimated at one in ten women of childbearing age, a figure that increases to three in ten women for the adolescent population. This is due to the lack of comprehensive sexual and reproductive health care services within the Primary Health Care Units (UNAP). There has been opposition from conservative groups in the country for the implementation of the Sexual Education Program within the education system. Key informants consulted for this study reported that teenage girls that are pregnant also experience discrimination from staff. This leads to teenage girls not wanting to attend the centers. There are also cultural barriers to access contraceptives, especially in rural areas. In the case of young men, they tend not to access services. The key informants expressed concern with regards to a trend of the increasingly early onset of girls' sexual relations with adult men. This type of relationship is seen more as a seduction, which is a widely accepted practice in the society, but it is a violation of the Child and Youth Protection Code.

¹¹⁴ United Nations Children's Fund (UNICEF), Dominican Republic Country Office. 2019. Resumen 30 años de la Convención sobre los Derechos del Niño en la República Dominicana. UNICEF. República Dominicana.

¹¹⁵ Ibid.

12. Pregnancy in Adolescents

In the Dominican Republic, the proportion of teenagers who have been pregnant ranks fifth in Latin America and the Caribbean. In 2014, twenty-one percent of women between twenty and twenty-four years old had at least one child before they turned eighteen years old. Young women tend to leave school and they have difficulties in finding employment. The data indicates that thirty-five percent of adolescents aged fifteen to nineteen from families of the poorest quintile had become pregnant or were already mothers before their twentieth birthday, compared with 8.6 percent in the richest quintile. Fifty percent of adolescents who had become pregnant had low levels of education, in contrast to 8.6 percent in the case of adolescents with a higher education. The highest percentages of abortions in 2017 occurred in Salcedo, followed by Elías Piña, Bahoruco and Puerto Plata. The national average is twenty-three percent for abortions attended in the adolescent population, of which seven percent corresponds to the population under fifteen years old. 117

According to Pérez Then (2015), the analysis of ENDESA surveys indicates the following trends and correlations: the highest percentage of pregnant teenage mothers corresponds to the age of 17, teenage pregnancy rates are higher in rural areas, the higher the level of instruction, the lower the probability of being a mother, the higher the income, the lower the probability of pregnancy, when compared with the non-adolescent of the same socioeconomic group, the probability of becoming pregnant is almost three times higher in young women who had their first sexual relationship before the age of fifteen than those women who began sexual relations at a later age (sixteen-nineteen years), and pregnancy increases considerably with early age unions, which is socially accepted in the most impoverished sectors and rural areas.¹¹⁸

Family violence has also been identified as an expeller of women and girls from their homes, which increases their vulnerability to becoming pregnant, increases HIV and STIs rates and also increases their risk to human trafficking and smuggling for the purpose of sexual and commercial exploitation. ¹¹⁹ In addition, there are specific populations in situations of greater vulnerability to teenage pregnancies, such as young women with disabilities, young migrant women and young women of Haitian descent. In the case of young women with disabilities, the prevalence is estimated to be 2.03 percent for people zero-nineteen years old (men: 2.24 percent and women: 1.82 percent). ¹²⁰

13. PATTERNS OF POWER AND DECISION MAKING

An adult-centered vision predominates in the Dominican Republic, where children and adolescents are seen as lacking the capacity to analyze their surroundings, the problems that affect them, and to make decisions about their lives. In general terms, when they are integrated into decision-making spaces in the communities, it is assumed that their participation is more of a supportive role. According to key informants, the adolescent population and young people are generally not consulted in the processes of defining public policies, nor for their execution and monitoring. In the family environment, decision

¹¹⁶ Ihid

¹¹⁷ Gabinete de Coordinación de Políticas Sociales. Diagnóstico de Situación del Embarazo en Adolescentes en República Dominicana 2018. Gabinete de Coordinación de Políticas Sociales. Santo Domingo, República Dominicana.

¹¹⁸ Pérez Then, Eddy Nelson. 2015. El embarazo en adolescentes en la República Dominicana. Tendencias observadas a partir de las Encuestas Demográficas y de Salud ENDESA 1986-2013. PROFAMILIA y Fondo de Población de las Naciones Unidas. Santo Domingo..

 ¹¹⁹ Gabinete de Coordinación de Políticas Sociales. Diagnóstico de Situación del Embarazo en Adolescentes en República Dominicana 2018.
 Gabinete de Coordinación de Políticas Sociales. Santo Domingo, República Dominicana.
 120 Ibid.

making is determined by gender relations. The predominant culture indicates this role for men, who generally make important decisions within the family, especially those related to asset and income management.

The social and political participation of teenagers and young people is promoted by non-governmental organizations and international cooperation organizations through the projects they carry out in communities. The Young Alert Project is a good example of training young leaders and youth networks on how to defend their rights and to make an impact on the public agenda. An important element of these networks promoted by NGOs and cooperation agencies is the promotion of female leadership and awareness and training in gender analysis to identify the specific issues and interests for young men and young women. There is also the creation of the Provincial Youth Councils that are promoted by the Ministry of Youth.

14. **PERSONAL SAFETY AND SECURITY**

The Public Ministry has implemented mechanisms so that minors can express their concerns and complain about how they are treated without risk of reprisals (Life Line). Gender-based violence preventative actions are also being carried out, including prevention guidelines for students and teachers at the primary and secondary level, in coordination with the MINERD. There are also community plans to change behaviors of toxic masculinities and there are education programs in universities that focus on gender-based violence. There are also awareness campaigns that are being promoted by justice operators, health center personnel and agents for the detection and attention to potential cases of violence.

UNICEF (2019) states that violence remains one of the main violations of the rights of children in the Dominican Republic. The 2014 ENHOGAR MICS reports the prevalence of violent discipline in most homes as a method of discipline and parenting. Sixty-three percent of children between one and fourteen years old have experienced psychological aggression or physical punishment at least one month before the survey. Adolescent girls are the main victims of rape, reaching thirty-one percent in 2017. This data is alarming, despite the underreporting and poor reporting of these facts, especially when the victim is a minor. 121 Similarly, the records of the office of the Attorney General published for the period January-September 2019, indicate a significant proportion of sexual crimes reported against minors, with twenty-nine percent and five percent were incest.

Children and adolescents suffer from experiences of violence at home, at school, within justice systems, in the workplace and in the community. They are more vulnerable due to their lack of autonomy and their young age and their high levels of emotional, economic and social dependence on adults or institutions. This makes it difficult for them to face the situation they suffer, ask for help or report the facts. The cultural patterns allow for the violation of the rights of children in the country. In education, there is widespread violence by teachers towards the students and between students, by school personnel towards students.

One of the main conclusions of the study, conducted by Tahira Vargas in three of the poorest provinces of the country (Azua, San Juan and Bahoruco) is that violence is not a concern for the main actors in the education sector and it is seen "Like something normal." 122 Sexism and the macho culture are the main

¹²¹ Gabinete de Coordinación de Políticas Sociales. 2018. Diagnóstico de Situación del Embarazo en Adolescentes en República Dominicana. Vicepresidencia de la República Dominicana. Santo Domingo, República Dominicana.

¹²² Vargas, Tahira. 2010. Violencia en las Escuelas. Estudio cualitativo 2008-2009. Plan Republica Dominicana. Santo Domingo, República

factors that continue to perpetuate and even increase school violence. The study carried out by UNFPA to assess attitudes and practices about gender-based violence in the school population, referenced by the Cabinet of Social Policies (2018), shows that eight out of ten male schoolchildren indicated that aggression towards women was justified based on their behavior, pointing out that it is women who are looking for abuse and aggression.¹²³

There is institutional violence in the field of sexual and reproductive health. Violence against women in clinical practice is not registered regularly in health services, nor diagnosed unless the young woman or woman is at vital risk, therefore, there are no statistics on this type of violence. There is no possibility of quantifying the magnitude of the problem, typifying the profile and the environment that allows the aggression and violation of the right, and thus to be able to address it, sanction it and prevent it in the networks providing health and education services.

G. ORPHANS

ENHOGAR-MICS 2014 reports that five percent of children and youth between zero-seventeen years old do not have one or both biological parents. Within this group, there is a subgroup whose orphan status is a consequence of gender-based violence, a growing reality in the country, whose most extreme manifestation is femicide. Statistics show those who are the main witnesses of domestic violence in many cases also become violent. From 2015 to September 2019, a little more than four hundred women died at the hands of partners or ex-partners, according to the Attorney General's Office. In that same period, a greater number of children and youth became orphaned. of Women.

There is no single organization in the country that maintains records for orphans. It is reported that 398 minors were left orphans due to femicides, two hundred and twenty-three are male and one hundred and seventy-five are female. It is the most stressful and traumatic of all experiences, which puts them in a situation of emotional helplessness and influences them to see the world as a dangerous place. Specialists report they experience post-traumatic stress, they tend to have sleep and mood alterations, they often suffer from nostalgia, fear, they have problems with concentration, irritability, nightmares, images and constant and involuntary memories.

¹²³ Op cit.

III. GENDER AND INCLUSIVE DEVELOPMENT IN USAID PROGRAMS SINCE LAST CDCS

A. ADVANCES SINCE THE LAST CDCS

- 1. Mission Order on Inclusive Development was signed and made effective on May 13, 2016. 124
- 2. There is one Inclusive Development Specialist in the USAID/DR Mission.
- 3. USAID/DR established an Inclusive Development Working Group (IDWG) in 2018 which consists of one representative from each technical and support office and had quarterly meetings and coordinated activities around youth, gender-based violence and persons with disabilities.
- 4. There is mandatory online training for all Mission staff in place for LGBTI inclusion in USAID's Workplace and Programming, Disability Inclusive Development 101, and Gender Equality. The executive office monitors compliance with this provision.
- 5. In 2015 there was mandatory gender training and more in-depth training on social inclusion in 2018.
- 6. Good examples of programming for LGBTI persons: to increase economic inclusion and democratic participation of LGBTI people, LGBTI persons being trained on how to run a successful campaign, strengthening the management and institutional capacity of LGBTI organizations, launch of the Dominican Republic LGBT Chamber of Commerce, and work with CSOs and health facilities to address discrimination of key populations at the community and health service delivery levels, development of Anti-Discriminatory Legislation, increased adherence to antiretroviral therapy, increase condom use among clients and regular partners and HIV testing among partners and integration of new cohort of ninety women across three facilities providing HIV treatment and care.
- 7. Good examples of programming for people with disabilities (PWDs): Accessible Tourism Guide, the "Baseball Cares" for the improved access to education for children with disabilities, civic education and community mobilization activity focused on increasing the participation of people with disabilities in the electoral process, strengthened the capacity of PWD service delivery organizations and the assistance of 916 special needs learners.
- 8. Good examples of programming for gender: procurement transparency activity to improve access to small and women owned enterprises to government contracts, gender, inclusion and safe schools (GISS) component to prevent gender-based violence in ninety schools, sample-based study with questions for gender stereotypes and the links with gender-based violent behaviors at school, violence and bullying reduction strategies and work on acceptance of diversity, teaching teachers how to create inclusive environments that value diversity and training families in violence prevention, positive discipline and non-violent forms of child rearing, 105 cacao farmers (31 women, 74 men) applying climate smart agriculture practices in their farms, crime prevention strengthened works to address gender-based violence through basic education and criminal justice activities, eight community justice houses supported by the program provide legal and psychological services to victims of domestic violence, training for police on responding to gender-based violence calls (scale

¹²⁴ USAID/DR Mission Order on Inclusive Development, May 13, 2016.

- up), public awareness campaigns to change norms and behaviors (scale up), men's behavior change units (scale up), training of judges on gender-based violence cases.
- 9. Good examples of programming for youth: basic and vocational education, job placements, teen pregnancy prevention and access to legal documentation, reaching a significant number of youth 139,000 in 500 neighborhoods, reaching youth at risk of HIV/AIDS, school drop outs, former offenders, youth of Haitian descent, integrated education/health and employability services which can be duplicated for other vulnerable groups, advocacy intervention for youth rights, youth crime and violence prevention, focus on gender-based violence, employment for young mother and formal schooling.
- 10. Good practice to utilize case studies and success / life stories / testimonials for GIDA, e.g., Chocal for rural women's economic empowerment and life stories from Christian Aid.
- 11. Reporting of performance data on activities is disaggregated by sex/age.
- 12. There are indicators that focus on gender-based violence and IRs for public understanding of human rights, discrimination reduction and legal protection of vulnerable populations and information and community outreach campaigns developed and implemented to raise awareness on family and gender-based violence and increase access to information and supportive resources for victims and witnesses.

IV. RECOMMENDATIONS TO BOLSTER GENDER AND INCLUSIVE DEVELOPMENT

A. RECOMMENDATIONS FOR USAID/DR OPERATIONS

- 1. Develop an Inclusive Development Action Plan for the Mission. Consider disaggregation for a third gender, such as Gender X for LGBTI, only disaggregated by male/female.
- 2. Hiring a gender advisor to assist the Mission, as having only one Inclusive Development Specialist to cover gender equality, women's empowerment and all vulnerable groups is a lot of work for one person. Or it is recommended that this specialist should not be managing projects in addition to this role.
- 3. With the support of the gender advisor, develop a Gender Action Plan; conduct an in-depth gender audit of the Mission; review best practices for incorporating gender into project appraisal documents (PADs); and train AORs/CORs on gender sensitive indicators and compliance.
- 4. Provide capacity development for DO teams to improve and reflect inclusion of Gender, LGBTI and PWD more within contract and grant solicitations, performance reporting, data quality assessments, portfolio reviews, and other procurement and reporting mechanisms.
- 5. Participation in the IDWG should not be voluntary and should be added to the employee performance appraisal.
- 6. Consider how USAID/DR could improve/capture more of its GIDA results if more outcome indicators were utilized.
- 7. Conduct knowledge testing by trainers before and after training to look for trends in knowledge change among participants, monitoring of knowledge retention for gender/social inclusion.
- 8. Promote a coordinated USG voice, hire a government relations person/advisor, to promote better partnerships and coordination.
- 9. Collect and disseminate the evidence on best practices for gender and social inclusion.
- 10. Capture how the training supported by USAID creates long term changes in institutional responses to gender-based violence.

B. RECOMMENDATIONS FOR USAID/DR PROGRAMMING

1. Gender

- 1. Partner with the newly created Gender Equity and Development Offices in State Secretariats, applying Journey To Self-Reliance (J2SR) principles, to support gender policies throughout the public sector.
- 2. Scale up USAID/DR's innovative approaches to men's engagement and education on gender-based violence, and a major increase in prevention programs on a large scale at the grassroots levels, with families, educational centers, with community organizations and churches.
- 3. Create new programs in line with USAID's Women's Entrepreneurship and Economic Empowerment Act of 2018, especially for rural women, young women, women with disabilities, Venezuelan migrant women and women of Haitian descent.
- 4. Support the Ministry of Health to effectively apply the standards on violence against women and to train their personnel and to record and collect statistics, ensure VAW is systematically registered in health services and diagnosed.
- 5. Support the Ministry of Education to implement its gender policy, by strengthening the training efforts of teachers and technicians.

- 6. Support advocacy and capacity building for full implementation of the National Strategic Plan for the Reduction of Maternal Mortality, National Plan for the Prevention of Adolescent Pregnancies, the National Plan for Gender Equality and Equality, and the National Plan Against Gender Based Violence.
- 7. Support advocacy and mobilization for enactment and implementation of legislative reforms such as: enactment of a comprehensive law for the prevention, care and punishment of gender violence, the approval of a sexual and reproductive health law, recognition of the equal rights of domestic workers, comprehensive education policies on sexuality, and women's political participation.
- 8. Address the obstacles that remain for women in accessing electoral justice and promote knowledge of the internal rules and procedures of political parties and of electoral content, knowledge of legislation and electoral jurisprudence for women lawyers.
- 9. Support organizations that advocate for allocation of budgets for programs for gender equity at the national and sub-national levels and create a mechanism to monitor gender equality policies and their financing.
- 10. Support advocacy for a gender focus in higher education that contributes to overcoming obstacles, barriers and stereotypes that work against women's participation in Science, Engineering, Technology and Mathematics (STEM) fields.

2. LGBTI PERSONS

- 1. Support legal reforms such as an equality and non-discrimination law that protects and promotes the rights of LGBTI people, changes to the labor code to prohibit discrimination based on sexual orientation, sexual characteristics, identity and gender expression and reforms to the criminal code to criminalize hate crimes or aggravating murder based on sexual orientation, sexual characteristics, identity and gender expression of the victim and to prohibit incitement to hatred for reasons of sexual orientation, sexual characteristics, identity and gender expression.
- 2. Scale up innovative forms of action through various cultural and artistic activities and the successful experiences of organizations like COIN and CEPROSH with religious leaders across the country.
- 3. Support efforts to ensure that all suspected homophobic killings and other instances of homophobic violence and discrimination towards LGBTI persons are thoroughly and independently investigated and the perpetrators brought to justice.
- 4. Support civil society organizations to design and scale up campaigns to fight against discrimination and to do the necessary work around stigma n access to health services, education and other areas.
- 5. Invest in more studies to highlight the reality of exclusion and violence against LGBTI people. It is important to produce more systematic measures of the crimes being committed against the LGBTI community, so that responses can be improved, and progress can be evaluated.
- 6. Support more research or interventions in relation to the health of transgender men and collect data, too, on the situations faced by bisexual people.
- 7. Engage police across the country in community relations and improve their response to vulnerable populations and to reduce levels of violence, extortion and revictimization.
- 8. Ensure that all suspected homophobic killings and other instances of homophobic violence and discrimination towards LGBTI persons are thoroughly and independently investigated and the perpetrators brought to justice.

3. HUMAN TRAFFICKING AND SMUGGLING

- 1. Design and disseminate tools and training for families and other relatives so they are better equipped to identify when their sons and daughters could be victims of exploitation or trafficking.
- 2. Investigate, prosecute and rigorously convict traffickers who engage in forced labor and sexual trafficking activities, including complicit government officials.
- 3. Provide a specific budget to fully implement the national action plan, to fully implement the protocols to identify adult or minor victims of trafficking and sufficient human and financial resources, as well as training for law enforcement, prosecutors and judges to combat trafficking, particularly outside Santo Domingo.
- 4. Provide and finance comprehensive and specialized services for victims and increase efforts to detect and combat cases of sexual trafficking of minors.
- 5. Proactively detect signs of trafficking among Venezuelan citizens and other undocumented or stateless persons at risk of deportation, including those of Haitian descent.
- 6. Strengthen the data collection around the issue of trafficking, smuggling and the numbers as the data is precarious and insufficient.

4. Persons of Haitian Descent and Venezuelan Migrants

- Support efforts to speed up the process for persons of Haitian descent to be legalized in the
 country. The regularization process has left many people in limbo and measures need to be
 taken for the thousands of people whose foreigner identification card expires next year and for
 the problem for children from mixed couples.
- 2. At the local level, build capacity for the members of the protection networks, so that they can identify minors who are victims of trafficking.
- 3. Support advocacy and mobilization to ensure the commitment of the Dominican state to address access to shelters, health, education, social protection and labor rights for this population.
- 4. Improve provision of free legal assistance and document management for persons of Haitian descent by building organizational and human capacity as well as financial and technical resources.
- 5. Support advocacy for policies that consider the political crisis in Venezuela and grant humanitarian refugee status and work permits and policies for the protection of migrants.
- 6. Campaigns for better access for migrants to justice, education, health and social security and to provide efficient procedures for validating their work experience and academic degrees.

5. Persons with Disabilities

- 1. Promote public policies for the inclusion of people with disabilities in different fields: education, employment, infrastructure, security, health, and social security.
- 2. Support the strengthening of coordination between CONADIS and NGOs that are specialized in gender equality.
- 3. Foster new leadership in the groupings of people with disabilities and the NGOs that work on the issue, in order to encourage greater participation in decision-making spaces.
- 4. Develop new programming to promote personal and collective empowerment of people with disabilities, emphasizing women.

- 5. Support the increase of public officials' capacities to perform intersectional analysis on gender and disability, as a basis for the definition and implementation of public policies.
- Promote that variables related to disability be included in the records and estimates made in the different studies, surveys and administrative records of the different state agencies.
- 7. Address gender-based violence, where women with disabilities are the most vulnerable group, ensuring that they are included in prevention and protection services.
- Implement a unique system for the valuation, registration and certification of disability, as established in article 8 of Law 5-13 on disability, so it is possible for persons with disabilities to be evaluated by a multidisciplinary team that identifies the type of disability they have, as well as the degree of the disability.

6. PEOPLE LIVING WITH HIV/AIDS

- 1. Support advocacy actions to increase and raise the political will to promote the legal reforms necessary, such as Law 135-11 on HIV, law on drugs and controlled substances, social security law and labor code.
- 2. Formulate and implement a gender and HIV policy that includes strategies and actions to address family and community factors that increase the risks and vulnerability of women and girls to HIV/AIDS, such as sexual violence, marriage at an early age, sexual exploitation, among
- 3. Strengthen sex education programs in schools, reinforcing the focus on rights and gender equality in the areas of HIV, health and sexual and reproductive rights.
- Promote and support capacity development, coordination processes and resolution of situations of HIV/AIDS, violence and discrimination that occur at the community level.
- Support civil society organizations to work in addressing and eradicating stigma, discrimination and violations of the rights of HIV-positive people.

7. AT RISK CHILDREN, YOUTH AND ORPHANS

- 1. Promote a greater allocation of the public budget to guarantee the application of the child and
- 2. Support the strengthening of the institutions such as the National Council for Children, the Ministry of Women and the Ministry of Youth, as well as the sector organizations directly linked to the child and youth protection.
- 3. Support prevention programs with families, educational centers and have more popular education through community organizations, designing and implementing non-sexist programs from a human rights approach at all educational levels.
- 4. Promote the expansion and strengthening of local child and youth protection mechanisms, especially the establishment of local protection boards in municipalities where they do not exist.
- 5. Support the expansion of sexual and reproductive health services and improve capacities of the technical staff at the health centers for the care of youth with disabilities, young pregnant women, regular drug users, among others.
- 6. Support the construction of infrastructure and safe public spaces to guarantee the right to play, sports, recreation and permanent spaces for survivors of violence, LGBTI persons and for at risk
- 7. Prioritize implementing the National Plan for the Reduction of Pregnancies in Adolescents, 2019-2030 (PREA), updating the National Roadmap for the Prevention and Elimination of Violence

- against Children and Adolescents and develop comprehensive plans and policies for the prevention of adolescent/child marriage.
- 8. Generate more quantitative and qualitative evidence on violence against children and adolescents, the problems of child marriage and early unions, risks to criminality and microtrafficking, drug users, children with disabilities and orphans.

ANNEX A: METHODOLOGY

A. METHODOLOGY

The gender and social inclusion assessment focuses on the "Six Domains of Gender/Inclusive Development Analysis", a format often used in USAID missions world-wide: 1.) Laws, policies, regulations, and institutional practices that contain explicit or implicit bias against marginalized groups; 2.) Cultural norms and beliefs and perceptions for marginalized groups; 3) Roles, responsibilities, and time use; 4.) Patterns of power and decision making; 5.) Access to and control over assets and resources and 6.) Personal safety and security. The methodology for the assessment is based on a multi-method approach that combines quantitative and qualitative elements in the triangulation of findings and conclusions. The quantitative aspect is based on data and recent surveys and studies that provided information about the vulnerable populations. The qualitative aspect is based on information collected through testimonials, interviews, focus groups and field observations conducted in different provinces in Santo Domingo, Dajabón, Santiago and Puerto Plata. Over 60 interviews were conducted, and eight focus group discussions with over 150 participants, and the data was analyzed for incorporation into a final country gender and inclusive development assessment report. The interviews and focus groups with diverse stakeholders were conducted with full respect for the unique identity, culture, dignity, livelihood systems and human rights of marginalized groups.

B. INTERSECTIONAL APPROACH

Gender is a social variable that crosscuts with other social variables such as age, ethnicity, class, religion, disability, sexual orientation and others. These social variables interact and an intersectional approach "examines the ways which diverse socially and culturally constructed categories interact in different ways to produce different forms of power relations and inequities." ¹²⁵ An intersectional approach was applied throughout the analysis in data collection, analysis, and reporting. During the data collection process, the GIDA team: 1) protected the anonymity of participants, 2) asked for permission prior to conducting an interview, and 3) respected cultural, socio-economic, and physical limitation differences and 4) encouraged participants to share their personal experiences of discrimination.

C. DATA COLLECTION METHODS

The GIDA team collected secondary data through desk research, which involved collecting, reviewing and analyzing already existing data, research and documents that are relevant to gender and inclusive development in the Dominican Republic. This method was useful for gathering background information and to review the present state of knowledge on the topic.

D. LITERATURE REVIEW

During the initial phase of the analysis and prior to the arrival of the Team Lead in the DR, the team conducted a review of background documents related to gender and inclusive development and its implementing environment. These documents provided the team with an understanding of the

¹²⁵ Swedish International Development Cooperation Agency Gender Analysis-Principles and Elements, March 2015, page 4.

situation on gender equality, female empowerment and inclusive development in the DR. These documents included, but were not be limited to, the following:

- 1. Country Development Cooperation Strategy for the Dominican Republic (CDCS)
- 2. USAID Gender Assessment LAC 2012 and Gender analysis 2013 USAID/DR
- 3. Other studies and assessments conducted by USG
- 4. USAID policy documents
- 5. USAID project evaluation reports
- 6. USAID/DR Fact Sheets describing its portfolio interventions
- 7. Relevant GODR policy and strategy documents and technical reports
- 8. Relevant reports from other international agencies on gender and inclusive in the DR (UNFPA, UNDP, UNICEF, UNHCR, OIM, UNAIDS, WHO, BID
- 9. Reports from Human rights observatories in the country
- 10. Relevant studies and reports from academia and think tanks INTEC-CEG, OMBICA.
- 11. Relevant studies, manuals, reports from implementing partners: CEPROSH, COIN, TRANSSA, Participación Ciudadana, Entrena, PACAM, etc.

E. REVIEW OF AVAILABLE STATISTICS

The statistics team person examined existing national, regional and international data sources to determine the existing gender and inclusive development and organized them in a table format. The existing data is from reliable sources and is disaggregated where possible by sex, age, disability and geography. Close attention was paid to the validity of statistics and studies quoted. The data examined includes: ENHOGAR 2013, ENDESA 2013, Time use survey 2016/ONE 2018, MIREX, Americas Barometer 2018-2019, UNDP 2018, CONAVIHSIDA/COIN/UNIBE, Human rights Observatories, Amnesty International 2019, MMUJER, Attorney General Office (PGR) and Precenso Nacional Agropecuario 2015, CEPAL, among others.

F. KEY INFORMANT INTERVIEWS (KIIS)

Five gender and inclusive development instruments for data collection were developed according to different stakeholders: USAID/DR staff, technical teams of implementing partners, government, victims of discrimination/affected groups. The GIDA team conducted 8 KIIs with the USAID/DR staff, key GODR officials interacting with gender and inclusive development, local and international NGOs, donors and with persons from the identified six vulnerable groups with lived experiences of social exclusion: UNDP, UNFPA, UNICEF, OIM, UNHCR, Profamília, Tu Mujer, ASA, Diversidad Dominicana, CEPROSH, Alerta Joven, TRANSSA, World Vision, Plan International, Christian Aid, Chemonics International, REDDOM, COIN, MAIS, Acción Callejera, Caminante, MUDHA, MOSCTHA, MINERD, IDDI, Casa Rosada, Casa Abierta, Entrena S.A., Asociación de Ciegos de Cibao, CONADIS, ASODIFIMO, Red Iberoamericana de Personas con Discapicidad, Children International and APRENDE. See the KII summary table below and the detailed list in Annex E.

G. FOCUS GROUP DISCUSSIONS

FGD Protocol was developed to guide focus group discussions, which were semi-structured. Over 8 focus groups were conducted with people of Haitian Descent (including youth who live in *bateyes*), LGBTI youth/staff/migrants, women survivors of gender-based violence, youth living with HIV/AIDS and

with Venezuelan migrants. The GIDA team conducted the focus groups in Dajabon, Puerto Plata, Santiago and Santo Domingo. These focus groups covered as broad a sample to ensure that as many perspectives as possible were recorded. Notes and audio recordings were taken, and a summary report was prepared of each KII/FGD/Testimonial prepared afterwards. Some interviews were conducted by WhatsApp or Skype where a face to face meeting was not possible.

H. WHEEL OF DISCRIMINATION / TESTIMONIALS

The Wheel of Discrimination was used in key informant interviews and in focus group discussions to unfold personal stories and experiences of gender discrimination and discrimination based on race, age, disability, sexual orientation, migrant status etc. The GIDA team learned a lot from listening to testimonies of marginalized group members and especially more on the multiple intersectional discrimination. The team asked participants about an experience when they felt discriminated against and explain: a.) what was the act of discrimination b) who or what was responsible c) how they felt and d) how they reacted and e) what they think is the root cause of this discrimination and f) what needs to be done to move towards a more tolerant and respectful society in the Dominican Republic. 126

The GIDA team analyzed the qualitative data gathered through the KIIs, FGDs and testimonials. The analysis identified and responded to information sought in the key assessment questions. The team members worked together in the analysis process. The respondents' sex, age, disability, sexual orientation, if they are a person of Haitian descent, if they are a person living with HIV/AIDS, if they are a Venezuelan migrant, if they were a survivor of gender-based violence and geographic location was identified.

I. GENDER AND INCLUSIVE DEVELOPMENT ASSESSMENT

The gender and inclusive development assessment carried out a review, from a gender/inclusive development perspective, of USAID's programs and its ability to effectively address gender issues in technical programming from the 2014-2019 period. The assessment includes a gender analysis and inclusive development analysis at the country level. The gender assessment is not a gender audit which addresses not only gender in programming issues, but also in the practices and policies of the Mission as a whole, such as human resource issues, budgeting, and management, to provide a comprehensive picture. This was not possible due to time constraints to carry out an in-depth gender audit, but the assessment examined the progress made since the last gender analysis in July 2013.

The Team Lead reviewed evaluations/mid-term evaluations of projects, PADs, success stories, case studies, M&E plans and the Standard Key Issue Narratives for vulnerable populations and had regular check ins and in depth discussions with the Inclusive Development Specialist in the Mission to verify information, make any necessary clarifications and address logistical issues. There were entry and exit briefings at USAID/DR with the Office Director, Deputy Director and Program Office, meetings with technical teams on sectors and areas of interest, and a final presentation on initial finding where the GIDA Team received feedback from USAID/DR, answered questions and has incorporated this into the final report.

¹²⁶ The Gender impact assessment and monitoring tool, WECF 2018, Women 2030, page 32, found at: http://www.wecf.org/wp-content/uploads/2019/01/FINAL-GIM-Tool-Jan-19.pdf

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ANNEX C: TABLES ON KEY LAWS FOR GENDER / LGBTI

Dominican Republic's Key GEWE Laws, Policies, Strategies and Action Plans						
Title	Description					
UN Resolution 70/1 "No one left behind" Sustainable Development Goals: SDG 4, SDG 5, SDG 10, SDG 16.	SDG 4: Inclusive and equitable education, SDG 5: gender equality and empowerment of women and girls, SDG 10: on reducing inequalities within and between countries, SDG 16: promote peaceful and inclusive societies for sustainable development.					
National Development Strategy 2012-Law 1-12, Article 12, January 25, 2012 and April 9, 2014 for Article 12.	Establishes the focus on gender equality as a cross cutting theme in all the institutions of the state. All the plans, programs, projects and public policies must incorporate a gender focus in their respective areas, to identify discriminatory situations between men and women and adopt actions to guarantee gender equality.					
National Human Rights Plan 2018-2022, Ministry of Foreign Affairs.	The objective is to continue strengthening the protection of people's fundamental rights and respect for human dignity as the central axis and guiding principle of public policies. 127					
Ley General de Salud/General Health Law (42-01), 2001. Protocol for the Comprehensive Health Care of Intrafamily Violence against women - National norms for comprehensive health care of intrafamily violence and violence against women, 2007. Ministerial provision No. 0000042 issued on December 3, 2010. 128	The providers have the responsibility of offering humanized and quality care to the victims of domestic violence and against women, which must be offered in all three levels of care of the National Health System, through the axes of promotion, prevention, detection, registration and attention to the affected people, according to the National Norms of Attention to Domestic Violence and violence against women. ¹²⁹ Ministry of Health Protocols/norms for the provision of comprehensive care for survivors of domestic and other gender-based violence.					
Gender Equality Policy of the Dominican Judiciary Supreme Court, Resolution 3041-2007, November 1st, 2007. Resolution 1924-2008, June 19th, 2008, Plenary Session of the Supreme Court of Justice, which creates the Commission for Gender Equality of the Judiciary.	Gender Equality Policy, an instrument that will act as rector of the institution's actions in favor of the rights of women. The policy reflects the commitment of the Judiciary to the principles of equity, respect for human rights and the exercise of citizenship, also an expression of the institutional determination to strengthen the effectiveness and efficiency of this right.					

¹²⁷ Plan Nacional Derechos Humanos 2018-2022, page 16.

¹²⁸ Normas Nacionales para la Atención Integral a la Violencia Intrafamiliar y Contra la Mujer, 2007, Ministry of Public Health.

¹²⁹ Ministry of Public Health, Guía y Protocolo para la atención integral en salud en la violencia intrafamiliar y contra la mujer, 2010, page 9.

Dominican Republic's Key GEWE Laws, Policies, Strategies and Action Plans						
Title	Description					
Resolution 2751-2010, October 21, 2010.	Approves the Regulations for the application of the Gender Equality Policy in the Judiciary.					
La Ley Orgánica para la prevención, atención, sanción y erradicación de la violencia contra la mujer, 133-11, June 7, 2011	Facilitates the Access to justice for women victims of violence and have access to a Social Worker and Family therapist. It has not yet been approved.					
Nacional de Igualdad y Equidad de Género, PLANEG	PLANEG III, focuses on: Economic autonomy, autonomy in decision-making and physical autonomy. 130					
Ley 86-99-created the Ministry of Women with the legislative mandate to design and monitor this national plan.						
Decree N0 974-01	Creates the offices of Gender Equity and Development with a seat in each Ministry (OEGD). ¹³¹					

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¹³⁰ Plan Nacional de Igualdad y Equidad de Género, Ministerio de la Mujer (PLANEG III), República Dominicana, page 38.

Government of the Dominican Republic State Secretariat for Women Dominican Republic Report on Implementation of the Beijing Platform or Action (1995–2004) and the Outcome of the Twenty-Third Special Session of the General Assembly (2000) Dominican Republic, April 2004, page 3, found at: https://www.cepal.org/mujer/noticias/paginas/8/53218/Informe Republica Dominicana ENG Beijing 10.pdf

Overview of Key GEWE Laws						
TITLE	DESCRIPTION					
Universal Declaration of Human Rights, December 10th, 1948	Establishes that every person has the right of access, on equal terms, to the public services of his country.					
International Covenant on Economic, Social and Cultural Rights, December 16th, 1966, ratified November 14th, 1977.	States Parties shall take all appropriate measures to eliminate discrimination against women in the field of employment in order to ensure women equal rights.					
American Convention on Human Rights (B-32), November 22, 1969, approved April 19, 1978.	States that all people are equal before the law and they have the right, without discrimination, to equal protection of the law.					
Interamerican Convention to prevent, sanction and eradicate Gender Based Violence, (Belem do Para Convention), A-61, June 9, 1994, approved by national congress March 7 th , 1996.	Duty of the States Parties: a) to promote the knowledge and observance of the right of women to a life free of violence and the right of women to respect and protect their human rights; b) promote the education and training of personnel in the administration of justice, police and other law enforcement officials, as well as the personnel in charge of the implementation of policies for the prevention, punishment and elimination of violence against women.					
CEDAW, B4/180, UN General Assembly, December 18, 1979, ratified September 2, 1982.	Establishes the legal protection of women's rights on a basis of equality with those of men and guarantee, through competent national courts and other public institutions, the effective protection of women against any act of discrimination.					
Fourth World Conference on Women, Beijing Platform for Action, September 1994 and June 10, 2000	Sought to promote the human rights of women through the full application of all human rights instruments, especially those that guarantee equality and non-discrimination. Platform for action based on three fundamental principles for women's equality: a) Enabling women; b) Promotion of women's human rights; c) Promotion of women's equality.					
United Nations Millennium Declaration, held September 2000.	Millennium Development Goal 3 promotes gender equality and empower women, seeking to eliminate inequalities.					
Constitution: Article 39, June 13, 2015	Right of equality between men and women before the law that guarantees the eradication of gender inequalities and discrimination.					
Law 13-00	Law for minimum quota of 33% of women in the list of the positions of election of the congressional and					

	municipal candidacies.						
Political Parties Law 33-18	That all people deserve equal treatment before the law, in order to have the same protection and treatment of institutions and their authorities, without having to be subject to any discrimination based on gender, color, age, disability, nationality, family ties, language, religion, social or personal condition. ¹³²						
Law 88-03, 2003	Establishment of Halfway House and shelters (only 2 functional shelters have been established by authorities under this law.						
Education Law No 66-97 Article 5 and Resolution 3599-2004	Educate for the knowledge and dignity of equality of rights between men and women. Order for gender to be in all programmatic areas in education.						
Law 24-97, January 1997	Defines and passes the family violence and violence against women law, protection order for victims.						
National Strategic Plan for Gender Mainstreaming in the Health Sector 2012- 2017 (PTGS)	Health sector policy aimed at promoting and effectively incorporating the gender perspective in the different functions of the National Health System, coordinating its implementation through the Office of Gender Equity and Development.						
Law 176-07, July 17, 2007	National District and the municipalities, the strengthening of capacity of women to attain local power.						
General Law for Equality and No Discrimination (This law is in draft and has not yet been passed.)	The purpose of this law is to prevent and eliminate discrimination exercised against people in a general sense or group and emphasizes women, children and adolescents, at-risk youth, people with disabilities, the elderly, people of various sexual orientations and gender identities, sex workers, migrants, people of African descent, people who use drugs, people living with HIV / AIDS.						

¹³² Ley núm. 33-18, de Partidos, Agrupaciones y Movimientos Políticos. G. O. No. 10917 del 15 de agosto de 2018. EL CONGRESO NACIONAL, page 1, found at: http://www.opd.org.do/images/PDF ARTICULOS/Partidos politicos/Ley-num-33-18-de-Partidos-Agrupaciones-y-Movimientos-Politicos.pdf

Existing Laws and Action Plan for LGBTI Persons					
Title	Description				
SDG 16, Target 16.B	Promote and enforce non-discriminatory laws and policies for sustainable development. 133				
Article 37 of the Constitution	Right to life				
Article 38 of the Constitution	Human dignity				
Article 39 of the Constitution	Right to equality				
Article 40 of the Constitution	Right to liberty and personal security				
Article 42 of the Constitution	Right to personal integrity				
Article 43 of the Constitution	Right to free personal development				
Article 27, Law 49-00	Gender equality-all Dominican youth cannot be discriminated against for their sex or sexual orientation-law created by the Youth Secretariat of the State. 134				
Article 11, Criminal procedure code of the Dominican Republic	Equality before the law-all persons are equal before the law.				
Article 25, number 2, Law 33-18	No type of discrimination based on sexual preference in Political Parties Law. 135				
Labor Code (Law 16-92)	Principle VII (non-discrimination)				

 $^{^{133} \}text{Sustainable Development Goals Knowledge Platform, found at: } \underline{\text{https://sustainabledevelopment.un.org/sdg16}}$

¹³⁴ El Congreso Nacional, **Secretaría de Estado de la Juventud, Ley 49-00, Artículo 2, page 3, found at:** https://www.poderjudicial.gob.do/documentos/PDF/leyes/LEY 49 00.pdf

¹³⁵ Ley núm. 33-18, de Partidos, Agrupaciones y Movimientos Políticos. G. O. No. 10917 del 15 de agosto de 2018. EL CONGRESO NACIONAL, page 1, found at: http://www.opd.org.do/images/PDF ARTICULOS/Partidos politicos/Ley-num-33-18-de-Partidos-Agrupaciones-y-Movimientos-Politicos.pdf

Existing Laws and Action Plan for LGBTI Persons					
Title	Description				
Article 66, number 10, Law 172-13	Law for protection of personal information, prohibits the collection of information on the conduct, preference or sexual orientation of a person. 136				
National Human Rights Plan 2018-2022	Commits to realize different actions to eliminate discrimination based on sexual orientation and gender identity. ¹³⁷				
PLANEG III	Recognizes the intersectionality of discrimination and includes sexual orientation and gender identity. Establishes as a transversal axis sexual diversity and includes actions to promote respect for the human rights of LGBTI people. Promotes the bill on equality and anti-discrimination. Implement actions for the eradication of discriminatory practices against women and LGTBI population and other key populations in the context of HIV. evelop policies for the recognition of women's rights in their life cycles and conditions: Racial, disability, age, sexual orientation (LGTBI), including intersectionality. Develop policies, strategies and support mechanisms that allow expanding the presence of women living with disabilities, excluded by their race, age, sexual orientation and any other type of discrimination in organizations and management positions. Visibility of Violence against Women in groups made vulnerable by society, girls, adolescents and young women, as well as older women, rural women, those living with disabilities, in extreme poverty, migrants and				

 $^{^{136}}$ El Congreso Nacional, Ley 172-13, G. O. No. 10737 del 15 de diciembre de 2013, page 25, found at: https://indotel.gob.do/media/6200/ley 172 13.pdf

¹³⁷ Plan Nacional Derechos Humanos 2018-2022, page 16.

¹³⁸ Plan Nacional de Igualdad y Equidad de Género, Ministerio de la Mujer (PLANEG III), República Dominicana, found at: https://oig.cepal.org/sites/default/files/2019 planeg iii dom.pdf

ANNEX D: INDICATORS

	How strongly do you approve or disapprove of giving same sex couples the right to marry?														
		2010			2012			2014		2016			2018/2019		
	Men	Wome n	Total	Men	Wome n	Total	Men	Wome n	Total	Men	Wome n	Total	Men	Wome n	Total
1 Strongly			67.6												
Disapprove	35.68	31.99	7	32.93	31.58	64.51	32.36	28.33	60.69	32.21	23.29	55.5	30.56	24.51	55.07
2	2.52	2.32	4.84	2.7	2.43	5.13	3.84	3.44	7.28	2.48	3.15	5.64	2.89	2.82	5.71
3	1.36	1.91	3.27	1.75	1.48	3.24	2.12	2.38	4.5	1.95	1.88	3.83	1.95	2.01	3.96
4	1.23	1.36	2.59	0.81	1.75	2.56	1.26	1.85	3.11	1.54	1.61	3.15	1.34	2.08	3.43
5	2.59	1.98	4.57	2.16	2.16	4.32	1.72	2.45	4.17	2.35	3.09	5.44	1.88	3.36	5.24
6	0.75	1.5	2.25	1.62	1.89	3.51	1.13	1.19	2.32	1.07	2.01	3.09	1.61	1.88	3.49
7	0.75	1.5	2.25	0.54	1.62	2.16	1.26	1.46	2.71	1.61	2.62	4.23	1.81	2.42	4.23
8	1.16	1.84	3	0.67	1.21	1.89	1.32	2.18	3.51	0.74	2.95	3.69	1.01	2.35	3.36
9	0.61	1.3	1.91	0.67	1.62	2.29	0.66	1.19	1.85	1.07	1.68	2.75	1.21	1.81	3.02
10 Strongly															
Approve	3	4.64	7.64	4.32	6.07	10.39	3.97	5.89	9.86	5.03	7.65	12.68	5.57	6.92	12.49
Total	49.66	50.34	100	48.18	51.82	100	49.64	50.36	100	50.07	49.93	100	49.83	50.17	100

Source: Latin American Public Opinion Project. Cultura política de la democracia en la República Dominicana y en las Américas 2018/19: Tomándole el pulso de la democracia, Resumen ejecutivo, November 2019.

Average hours per week dedicated to unpaid work, men and women < 10 years of age									
Looption		Total			Men			Women	
Location	Total	Paid	Unpaid	Total	Paid	Unpaid	Total	Paid	Unpaid
Total	48.8	27.9	20.9	46.7	37.1	9.6	50.6	19.5	31.2
				Urban/R	Rural				
Urban	48.9	28.5	20.4	46.5	37.5	9	51	20.7	30.3
Rural	48.3	26.1	22.2	47.3	36.2	11.1	49.4	15.4	33.9
				Cities/Urba	n/Rural				
Santo Domingo	51.1	30.2	20.9	48.9	39.6	9.4	53	22.1	30.9
Large cities	47.3	28.2	19.1	44	35.6	8.4	50.1	21.8	28.4
Other urban	47.4	26.7	20.6	45.3	36.3	9	49.2	18.3	30.9
Rural	48.3	26.1	22.2	47.3	36.2	11.1	49.4	15.4	33.9
				Regio	on				
Cibao North	48.4	25.3	23.1	44.4	33.2	11.1	51.8	18.4	33.4
Cibao South	48.7	25	23.7	45.3	34.3	10.9	51.9	16	35.9
Cibao Northeast	44.1	27.4	16.7	45.4	36.5	8.9	42.6	17.2	25.3
Cibao Northwest	46.8	27.5	19.3	48.1	37.9	10.1	45.6	17.6	28
Valdesia	50.6	27.5	23.1	47.2	37.9	9.4	53.8	18	35.8
Enriquillo	49.1	25.6	23.5	45.8	35.6	10.2	52.4	15.4	37
El Valle	49.9	24.4	25.5	43.4	32.1	11.2	56.5	16.5	39.9
Del Yuma	45.9	32	13.9	47.2	40.6	6.6	44.6	23.5	21.1
Higuamo	44.7	27.6	17.1	44.5	36.3	8.1	44.9	19.1	25.8
Metropolitan	50.6	29.9	20.7	48.8	39.4	9.4	52.1	21.7	30.4

Source: National Statistics Office, Trabajo no remunerado en República Dominicana: un análisis a partir de los datos del Módulo de Uso del Tiempo de la ENHOGAR 2016.

Average time per week dedicated to caregiving > 10 years of age							
	Men	Women					
Total	3.1	15.7					
	Urban/Rural						
Urban	3.5	15.3					
Rural	2.3	17					
	Cities/Urban/Rural						
Santo Domingo	3.8	15.8					
Large cities	3.3	14					
Other Urban	3.2	15.7					
Rural	2.3	17					
	Region of Residence						
Cibao North	3.5	16.4					
Cibao South	3.9	18.9					
Cibao Northeast	1.6	8.4					
Cibao Northwest	2.5	12.2					
Valdesia	3.1	19.9					
Enriquillo	3.3	21.4					
El Valle	3	23					
Del Yuma	1.6	9.5					
Higuamo	2.1	13.5					
Metropolitan	3.7	15.4					

Source: National Statistics Office, Trabajo no remunerado en República Dominicana: un análisis a partir de los datos del Módulo de Uso del Tiempo de la ENHOGAR 2016.

Women and Men elected to Legislature and Municipal Councils, 1998-2016							
Year	Year Women						
1998	22.50%	77.50%					
2002	30.70%	69.30%					
2006	29.50%	70.50%					
2010	34.90%	65.10%					
2016	35.40%	64.60%					

Women in Ele	ected Positions, 2016
Senators	9.38%
Deputies	27.89%
Mayors	12.03%

Source: PNUD; JCE and TSE. 2018. Mas mujeres, mas democracia. Desafíos para la igualdad de mujeres en la política. Santo Domingo. PNUD.

Institution	Women		Men		Total
	N	%	N	%	N
Cabinet	4	17.39%	19	82.61%	23
Provincial Governors	5	16.13%	26	83.87%	31
Supreme Court	3	18.75%	13	81.25%	16
Constitutional Tribunal	3	23.07%	10	76.92%	13
Central Electoral Board	2	40.00%	3	60.00%	5
Superior Electoral Tribunal	2	40.00%	3	60.00%	5
Chamber of Accounts	1	20%	4	80%	5
National Judicial Council	1	12.50%	7	87.50%	8
Central Bank	0	0%	9	100%	9

Source: PNUD; JCE and TSE. 2018. Mas mujeres, mas democracia. Desafíos para la igualdad de mujeres en la política. Santo Domingo. PNUD.

Women in business and management in the Dominican Republic	
Female labor participation rate (average 1990-2018)	48.67
Women as a share of total occupations (average 1991-2018)	33.85
Women as a share of total employers (average 1991-2018)	19.5
Female employment in managerial positions (last year of information, 2017)	41.1
Female employment in middle and senior management (last year of information, 2016)	55.5
Women as a share of total employers (1991)	7.92
Women as a share of total employers (2018)	22.48
Percentage of businesses with women managers (average of reporting businesses, Year 2016)	21.2
Businesses in which women participate in the ownership (% of businesses), Year 2016	32.2

Sources: Oficina Internacional del Trabajo (2019): https://www.ilo.org/global/about-the-ilo/multimedia/maps-and-charts/enhanced/WCMS_698027/lang--es/index.htm [09-12-2019], and Banco Mundial. Indicadores de género del Banco de datos del Banco Mundial. https://datos.bancomundial.org/indicador [09-12-2019]

Percentage of households in situation of poverty (Methodology IPM-AL) by sex of head of household							
Year	Total	Sexo					
fear	Total	Women	Men				
2010	31.8	32.5	30.5				
2011	30.9	31.9	29.0				
2012	31.5	33.0	28.8				
2013	30.4	31.7	28.1				
2014	26.3	27.1	24.7				
2015	22.8	23.4	21.8				
2016	20.7	21.5	19.4				
2017	18.6	20.3	15.9				

Source: Ministerio de Economía, Planificación y Desarrollo 2017

Education Levels of Trans People, 2016						
Preschool	-					
Primary completed	-					
Secondary	68%					
University	18%					
None	-					

Employment Status of Trans Peop	le, 2016
Currently employed	48%

Sources of Income of Trans People, 2016						
Salaried employment	31.60%					
Sex worker	16%					

Monthly Income Trans People, 2016							
Less than RD\$ 3,500	24%						
RD\$ 3,501 to \$6,000	18%						
RD\$ 6,001 to \$10,000	17%						
More than RD\$ 10,000	26%						
No income/don't know	14%						

Demographic and social indicators by sex, 2015-2020						
Indicator		Period	Total	Men	Women	
		010-2015	72.3	70.0	74.8	
Life expectancy at birth (Years)	2	015-2020	73.6	71.1	76.2	
Rate of illiteracy < 15 years			6.8	6.6	6.9	
Rate if illiteracy 15 to 24 Years			1.9	2.2	1.6	
Number of years of education < 15 years			9.1	8.7	9.4	
Net preschool enrollment (3-5 Years) Net primary enrollment (6-13 Years)		2017	49.6	49.2	50.0	
		2017	93.2	94.4	91.9	
Net high school enrollment (14-17 Years)			69.9	64.8	75.2	
Net university enrollment (18-24 Years)			26.7	18.7	34.9	
Neither study nor working (15 a 24)			19.2	13.3	25.3	
Total population in poverty or indigence		Indigent	382,748	185,534	197,215	
		Poor	2,600,036	1,239,009	1,361,027	

Source: Ministerio de Economía, Planificación y Desarrollo. Sistema de Indicadores Sociales de la República Dominicana 2017

Bahoruco Barahona Dajabón Duarte Elias Piña El Seibo Espaillat Independencia La Altagracia La Romana La Vega Maria T. Sánchez Monte Cristi Pedernales Peravia Puerto Plata Hermanas Mirabal Samaná San Cristóbal San Juan de la Maguana San Pedro Macorís Sánchez Ramírez Santiago Santiago Rodríguez	
National District Azua Bahoruco Barahona Dajabón Duarte Elias Piña El Seibo Espaillat Independencia La Altagracia La Romana La Vega Maria T. Sánchez Monte Cristi Pedernales Peravia Puerto Plata Hermanas Mirabal Samaná San Cristóbal San Juan de la Maguana San Pedro Macorís Sánchez Ramírez Santiago Santiago Rodríguez	Tasa
Azua Bahoruco Barahona Dajabón Duarte Elias Piña El Seibo Espaillat Independencia La Altagracia La Romana La Vega Maria T. Sánchez Monte Cristi Pedernales Peravia Puerto Plata Hermanas Mirabal Samaná San Cristóbal San Juan de la Maguana San Pedro Macorís Sánchez Ramírez Santiago Santiago Rodríguez	95.7
Bahoruco Barahona Dajabón Duarte Elias Piña El Seibo Espaillat Independencia La Altagracia La Romana La Vega Maria T. Sánchez Monte Cristi Pedernales Peravia Puerto Plata Hermanas Mirabal Samaná San Cristóbal San Juan de la Maguana San Pedro Macorís Sánchez Ramírez Santiago Santiago Rodríguez	68.2
Barahona Dajabón Duarte Elias Piña El Seibo Espaillat Independencia La Altagracia La Romana La Vega Maria T. Sánchez Monte Cristi Pedernales Peravia Puerto Plata Hermanas Mirabal Samaná San Cristóbal San Juan de la Maguana San Pedro Macorís Sánchez Ramírez Santiago Santiago Rodríguez	202.6
Dajabón Duarte Elias Piña El Seibo Espaillat Independencia La Altagracia La Romana La Vega Maria T. Sánchez Monte Cristi Pedernales Peravia Puerto Plata Hermanas Mirabal Samaná San Cristóbal San Juan de la Maguana San Pedro Macorís Sánchez Ramírez Santiago Santiago Rodríguez	0.0
Duarte Elias Piña El Seibo Espaillat Independencia La Altagracia La Romana La Vega Maria T. Sánchez Monte Cristi Pedernales Peravia Puerto Plata Hermanas Mirabal Samaná San Cristóbal San Juan de la Maguana San Pedro Macorís Sánchez Ramírez Santiago Santiago Rodríguez	115.2
Elias Piña El Seibo Espaillat Independencia La Altagracia La Romana La Vega Maria T. Sánchez Monte Cristi Pedernales Peravia Puerto Plata Hermanas Mirabal Samaná San Cristóbal San Juan de la Maguana San Pedro Macorís Sánchez Ramírez Santiago Santiago Rodríguez	0.0
El Seibo Espaillat Independencia La Altagracia La Romana La Vega Maria T. Sánchez Monte Cristi Pedernales Peravia Puerto Plata Hermanas Mirabal Samaná San Cristóbal San Juan de la Maguana San Pedro Macorís Sánchez Ramírez Santiago Santiago Rodríguez	99.0
Espaillat Independencia La Altagracia La Romana La Vega Maria T. Sánchez Monte Cristi Pedernales Peravia Puerto Plata Hermanas Mirabal Samaná San Cristóbal San Juan de la Maguana San Pedro Macorís Sánchez Ramírez Santiago Santiago Rodríguez	109.7
Independencia La Altagracia La Romana La Vega Maria T. Sánchez Monte Cristi Pedernales Peravia Puerto Plata Hermanas Mirabal Samaná San Cristóbal San Juan de la Maguana San Pedro Macorís Sánchez Ramírez Santiago Santiago Rodríguez	49.8
La Altagracia La Romana La Vega Maria T. Sánchez Monte Cristi Pedernales Peravia Puerto Plata Hermanas Mirabal Samaná San Cristóbal San Juan de la Maguana San Pedro Macorís Sánchez Ramírez Santiago Santiago Rodríguez	105.2
La Romana La Vega Maria T. Sánchez Monte Cristi Pedernales Peravia Puerto Plata Hermanas Mirabal Samaná San Cristóbal San Juan de la Maguana San Pedro Macorís Sánchez Ramírez Santiago Santiago Rodríguez	135.8
La Vega Maria T. Sánchez Monte Cristi Pedernales Peravia Puerto Plata Hermanas Mirabal Samaná San Cristóbal San Juan de la Maguana San Pedro Macorís Sánchez Ramírez Santiago Santiago Rodríguez	40.0
Maria T. Sánchez Monte Cristi Pedernales Peravia Puerto Plata Hermanas Mirabal Samaná San Cristóbal San Juan de la Maguana San Pedro Macorís Sánchez Ramírez Santiago Santiago Rodríguez	87.7
Monte Cristi Pedernales Peravia Puerto Plata Hermanas Mirabal Samaná San Cristóbal San Juan de la Maguana San Pedro Macorís Sánchez Ramírez Santiago Santiago Rodríguez	124.4
Pedernales Peravia Puerto Plata Hermanas Mirabal Samaná San Cristóbal San Juan de la Maguana San Pedro Macorís Sánchez Ramírez Santiago Santiago Rodríguez	90.7
Peravia Puerto Plata Hermanas Mirabal Samaná San Cristóbal San Juan de la Maguana San Pedro Macorís Sánchez Ramírez Santiago Santiago Rodríguez	84.2
Puerto Plata Hermanas Mirabal Samaná San Cristóbal San Juan de la Maguana San Pedro Macorís Sánchez Ramírez Santiago Santiago Rodríguez	257.7
Hermanas Mirabal Samaná San Cristóbal San Juan de la Maguana San Pedro Macorís Sánchez Ramírez Santiago Santiago Rodríguez	97.0
Samaná San Cristóbal San Juan de la Maguana San Pedro Macorís Sánchez Ramírez Santiago Santiago Rodríguez	51.0
San Cristóbal San Juan de la Maguana San Pedro Macorís Sánchez Ramírez Santiago Santiago Rodríguez	58.9
San Juan de la Maguana San Pedro Macorís Sánchez Ramírez Santiago Santiago Rodríguez	142.5
San Pedro Macorís Sánchez Ramírez Santiago Santiago Rodríguez	127.9
Sánchez Ramírez Santiago Santiago Rodríguez	99.6
Santiago Rodríguez	239.0
Santiago Rodríguez	0.0
· · ·	64.4
Valverde	0.0
Valvelae	214.1
Monseñor Nouel	98.1
Monte Plata	53.1
Hato Mayor	186.5
San José de Ocoa	94.3
Santo Domingo	93.9

Source: Ministerio de Economía, Planificación y Desarrollo. Sistema de Indicadores Sociales de la República Dominicana 2017

Percentage of women aged 15 and over who have experienced some type of violence in the public and private spheres throughout their lives, by type of violence									
		TI	Throughout her life In the 12 months prior to the survey						ırvey
		Psychological	Physical	Sexual	Economic	Psychological	Physical	Sexual	Economic
Tota		50.8	40.1	51.3	29.1	32.7	19.9	32.8	21.5
Location	Urban	49.7	38.5	51.4	28.4	31.9	19	32.6	20.6
255461011	Rural	56.2	48	51.1	32.9	36.5	24.4	33.6	25.8

Source: Oficina Nacional de Estadística (ONE); Ministerio de la Mujer. (2019) Encuesta Experimental sobre la Situación de las Mujeres (ENESIM-2018)

Percentage of women aged 15 and over who have experienced some type of violence in the public and private spheres throughout their lives, by location, age, marital status							
			In the 12 months prior to the				
		Throughout her life	survey				
Total		68.8	55.9				
Location	Urban	68.1	54.8				
Location	Rural	71.9	61				
	15-29	76.9	67.3				
Age group	30-64	68.7	54.7				
	65 and over	51.9	36.2				
	Married or in union	68.1	56.2				
Marital status	Separated	75.4	61.8				
	Divorced	78.8	59				
	Widow	51	35.5				
	Single	74	61.1				

Source: Oficina Nacional de Estadística (ONE); Ministerio de la Mujer. (2019) Encuesta Experimental sobre la Situación de las Mujeres (ENESIM-2018)

Homicides of LGBTI people by country, January 2014 to June 2019								
País	2014	2015	2016	2017	2018	2019	Total	%
Colombia	100	113	99	110	109	11	542	42%
México	64	53	75	92	89	29	402	31%
Honduras	25	37	23	35	27	17	164	13%
Perú	15	4	16	2	14	6	57	4%
El Salvador	5	5	15	12	11	5	53	4%
Dominican Republic	6	2	6	7	5	2	28	2%
Guatemala	2	0	3	5	10	6	26	2%
Paraguay	0	1	4	1	6	0	12	1%
Bolivia	0	0	4	0	4	0	8	<1%
Totals	217	215	245	264	275	76	1,292	

Source: El prejuicio no conoce fronteras. Homicidios de lesbianas, gay, bisexuales, trans e intersex en países de América Latina y el Caribe 2014 – 2019

Homicides of transgender women in Dominican Republic	
Documented homicides of transgender women in Dominican Republic since 2006	47
Judicial sentences in documented homicides	5

Source: Amnisty International. 2019. "Si ellos pueden tenerla, ¿por qué uno no?" Tortura y otros malos tratos por razón de género contra trabajadoras sexuales en República Dominicana

Profile of Haitian migrants and descendants		
	Men	Women
Sex	60%	40%
Youth/young adults 15 to 44 years (%)	78.6%	56.4%
Years of education	4.79	4.83
Rate of illiteracy (%)	27.5%	29.8%
Health insurance (%)	9%	7%
Access to public health centers	70.5%	79.2%
Access to public health services free of charge (%)	77.1%	79%
Economically active (%)	93%	53%
Economic sector	53% Agriculture 22% Construction 10% Industry 6.3% Commerce	19.4% Agriculture 34.3% Commerce 21.5% Domestic workers 12% Hotels and restaurants

Source: Oficina Nacional de Estadísticas. (2018). Segunda Encuesta Nacional de Inmigrantes en la República Dominicana (ENI 2017)

Profile of Venezuelan migrants, 2017			
General Aspects	Men	Women	
Sex	47%	53%	
Youth/young adults 15 to 44 years	65.6	68%	
Years of education	11.18	11.65	
Rate of illiteracy	0.0%	0.7%	
Health insurance	67.6%	70% have no health insurance 15% is the policy holder 15.5% is a dependant on a policy	
Access to health centers	40.8% in private clinics 39% in public clinics	41.2% in private clinics 41.2% in public clinics	
Access to public health clinics free of charge (%)	40%	46%	
Economically active (%)	93%	75%	
Economic sector	24% Hotels and restaurants 18% Commerce 10% Industry 6% Arts, entertainment and recreation 6% Transport and warehousing	37% Hotels and restaurants 18% Commerce 8% Arts, entertainment and recreation 8% Other services	

Source: Oficina Nacional de Estadísticas. (2018). Segunda Encuesta Nacional de Inmigrantes en la República Dominicana (ENI 2017)

Undocumented migrants arrested at the land border by nationality, sex and age		
Nationality	Number	
German	6	
Colombia	3	
Korea	2	
Cuba	14	
Haiti	52348	
Mexico	2	
United States	3	
Puerto Rico	1	
Venezuela	14	
Vietnam	1	
Total	52394	
Victims of trafficking		
Nationality	Number	
Dominican/minor	25	
Dominican/adult	3	
Other/adult	68	
Total	96	
Investigations		
Type of crime	Number	
Trafficking for sex work	11	
Sexual exploitation	10	
Child pornography	1	
Procuring	2	
Total	24	

Source: Ministerio de Relaciones Exteriores. (2019). Informe del Gobierno de la República Dominicana sobre acciones en materia de la trata de personas y el tráfico ilícito de migrantes durante el Year 2018

Persons with disability by location, 2013			
Location	Total	Disabled	
Total	10,177,007	708,597	
Urban	7,566,047	524,503	
Rural	2,610,960	184,094	
Cities/Urban/Rural			
Santo Domingo	3,142,762	230,058	
Large cities	1,763,555	109,486	
Other Urban	2,659,730	184,959	
Rural	2,610,960	184,094	
Region of residence			
Cibao North	1,635,817	85,847	
Cibao South	765,256	52,142	
Cibao Northeast	672,513	42,338	
Cibao Northwest	424,523	34,931	
Valdesia	1,108,883	78,904	
Enriquillo	399,355	25,819	
El Valle	318,710	22,522	
Yuma	650,923	52,107	
Higuamo	604,928	53,747	
Metropolitan	3,596,099	260,240	

Source: Encuesta Nacional de Hogares de Propósitos Múltiples (ENHOGAR- 2013)

Persons with disability working / not working by location, sex and age, 2013 Working Not working Number 708,597 34.0 66.0 Location Santo Domingo 230,058 32.5 67.5 Large cities 109,486 35.9 64.1 Other urban 184,959 31.7 68.3 Rural 37.1 62.9 184,094 Sex Men 366,622 44.7 55.3 Women 341,975 22.5 77.5 Age 0-9 25,294 0 100 10-19 58,075 11.2 88.8 20-29 59,999 47.2 52.8 30-39 71,765 57.8 42.2 40-49 40.5 85,986 59.5 50-59 50.7 104,786 49.3 60-69 105,735 31.5 68.5 70-79 104,643 18.2 81.8 80 and above 92,314 8.6 91.4 Education None 118,661 20.5 79.5 Primary 425,202 31.8 68.2 Secondary 107,951 49.9 50.1 University 4,355 55.1 44.9 Graduate 2,942 50.2 49.8 Don't know 5,923 31.4 68.6

Source: Encuesta Nacional de Hogares de Propósitos Múltiples (ENHOGAR) 2013 (ONE).

Number of disabled people by disability and region, 2013					
Region	Limited visual acuity	Blind	Deaf	Mute	Limb anomalies
Total	130,136	82,525	94,677	27,429	25,998
Cibao North	10,420	9,762	15,332	5,457	4,898
Cibao South	7,598	6,456	7,742	2,647	1,526
Cibao Northeast	7,772	6,225	6,486	1,562	1,332
Cibao Northwest	7,363	4,697	5,712	1,210	984
Valdesia	15,365	9,041	12,242	2,985	3,577
Enriquillo	4,874	2,262	3,745	1,318	1,012
El Valle	4,911	3,029	3,998	1,049	907
Yuma	10,234	5,602	5,317	1,636	1,656
Higuamo	14,047	7,096	7,123	2,262	2,407
Metropolitan	47,552	28,355	26,980	7,303	7,699

Source: Encuesta Nacional de Hogares de Propósitos Múltiples (ENHOGAR) 2013 (ONE).

Number of disabled persons by type of disability, 2013		
Disability type	Number	
Physical/motor impairment	402,661	
Intellectual disabilities	268,594	
Visual	150,397	
Auditory	97,735	
Mute	84,259	

Source: CONADIS

Educational status of disabled and non-disabled persons >15 Years, 2013			
Status	Yes	No	
Read and write (%)			
Disabled	76	24	
Non disabled	91.4	8.6	
Literacy (%)			
Disabled	76.7	23.3	
Enrollment in educational institution	94	6	
Attended educational institution (%)			
Disabled	84	16	
Non disabled	94.4	5.6	
Educational attainment (%)			
Education Level	Disabled	Non disabled	
Preschool	1	3.5	
Special literacy	2.6	1.1	
Primary	70	50.8	
Secondary	18.4	28.3	
University	7.3	15.5	
Post University	0.5	0.7	
Source: CONADIS			

Source: CONADIS

Disabled persons, economically active/inactive, 201	3	
Status	Economically active (%)	Inactive (%)
Disabled	64.1	35.9
Non disabled	52.5	47.5

Source: CONADIS

Disabled persons access to health insurance, 2013			
Condition	Yes (%)	No (%)	
Disabled	58.8	41.2	
Not disabled	53.8	46.2	
Insured/dependent	Dependent	Insured	
Disabled	36.9	63.1	
Non disabled	56.9	43.1	
Type of insurance of disabled person			
Regulated private insurance	46.6		
SENASA	45.8		
Non regulated private insurance	2.9		
Others	1.4		

Source: CONADIS

Prevalence of HIV, 2002-2013 (%)			
Cov	Year		
Sex	2002	2007	2013
Men	1.1	0.8	0.9
Women	0.9	0.8	0.7

Source: ENDESA 2002,2007,2013 (CESDEM)

Prevalence of HIV by age and sex 2013. (%)			
Age	Women	Men	
15 -19 Years	0.1	0.2	
20-24 Years	0.8	0.2	
25-29 Years	0.5	1.7	
30-34 Years	1.1	0.7	
35-39 Years	0.8	1.1	
40-44 Years	1	1.8	
45-49 Years	1	1.9	

Source: ENDESA 2013 (CESDEM)

Deaths attributed to HIV/AIDs		
Year Number		
2010	3,043	
2015	2,083	
2018	2,737	

Source: ONUSIDA, CONAVIHSIDA, MSP, SNS. 2019

Change in HIV infections by key populations, 2015-2018							
Group	Change %						
General Population Men 15+	-35%						
General Population Women 15+	-33%						
Children	-9%						
MSM	14%						
TRANS	-2%						
TRSX	-26%						
Migrants	1%						

Source: Estimaciones Nacionales y Carga de Enfermedad, 2018

New HIV infections by year									
Year	Total	Adults	Children						
2010	3,169	2,933	236						
2015	2,903	2,797	106						
2018	2,738	2,642	96						

Source: ONUSIDA, CONAVIHSIDA, MSP, SNS. 2019

			HIV statu	s by educa	ation 2013					
Highest level of			HIV	status				Total		
Highest level of Education Achieved	I	HIV negativ	e		HIV positiv	ve		TOtal		
Education Acineved	No.	Col %	Cum %	No.	Col %	Cum %	No.	Col %	Cum %	
				Men						
Total	9,872	100.0		118	100.0		9,990	100.0		
Preschool or none	543	5.5	5.5	17	14.4	14.4	560	5.6	5.6	
Primary	4,495	45.5	51.0	73	61.9	76.3	4,568	45.7	51.3	
Secondary	3,493	35.4	86.4	24	20.3	96.6	3,517	35.2	86.5	
University	1,170	11.9	98.3	2	1.7	98.3	1,172	11.7	98.3	
Specialization	12	0.1	98.4	0	0.0	98.3	12	0.1	98.4	
Masters	18	0.2	98.6	0	0.0	98.3	18	0.2	98.6	
Doctorate	3	0.0	98.6	0	0.0	98.3	3	0.0	98.6	
ND	138	1.4	100.0	2	1.7	100.0	140	1.4	100.0	
				Women						
Total	9,006	100.00		82	100.0		9,088	100.0		
Preschool or none	246	2.70	2.70	9	11.0	11.0	255	2.8	2.8	
Primary	2,973	33.00	35.70	49	59.8	70.7	3,022	33.3	36.1	
Secondary	3,554	39.50	75.20	21	25.6	96.3	3,575	39.3	75.4	
University	2,166	24.10	99.30	3	3.7	100.0	2,169	23.9	99.3	
Specialization	17	0.20	99.40	0	0.0	100.0	17	0.2	99.4	
Masters	20	0.20	99.70	0	0.0	100.0	20	0.2	99.7	
Doctorate	5	0.10	99.70	0	0.0	100.0	5	0.1	99.7	
ND	25	0.30	100.00	0	0.0	100.0	25	0.3	100.0	

	HIV status by employed/unemployed 2013										
			HIV	status							
Employment	ŀ	HIV negative	e		HIV positive	9		Total			
	No.	Col %	Cum %	No.	Col %	Cum%	No.	Col %	Cum %		
	Men										
Total	4,631	100.0		55	100.0		4,686	100.0			
Employed	3,952	85.3	85.3	51	92.7	92.7	4,003	85.4	85.4		
Unemployed	257	5.5	90.9	2	3.6	96.4	259	5.5	91.0		
Unemployed (not											
seeking)	422	9.1	100.0	2	3.6	100.0	424	9.0	100.0		
				Womer	า						
Total	3,588	100.0		39	100.0		3,627	100.0			
Employed	2,027	56.5	56.5	20	51.3	51.3	2,047	56.4	56.4		
Unemployed	404	11.3	67.8	5	12.8	64.1	409	11.3	67.7		
Unemployed (not								·			
seeking)	1,157	32.2	100.0	14	35.9	100.0	1,171	32.3	100.0		

HIV status by occupation, 2013

2013									
			HIV s	tatus				Total	
Occupation	ŀ	IIV negative	2		HIV positive				
	No.	Col %	Cum %	No.	Col %	Cum %	No.	Col %	Cum %
				Men					
Total	3,950	100.0		51	100.0		4,001	100.0	
Public sector employee	358	9.1	9.1	1	2.0	2.0	359	9.0	9.0
Private sector employee	1,659	42.0	51.1	25	49.0	51.0	1,684	42.1	51.1
Domestic worker	14	0.4	51.4	0	0.0	51.0	14	0.3	51.4
Self employed	1,775	44.9	96.4	22	43.1	94.1	1,797	44.9	96.3
Unpaid employee	76	1.9	98.3	0	0.0	94.1	76	1.9	98.2
Member of cooperative	1	0.0	98.3	1	2.0	96.1	2	0.0	98.3
Employer	67	1.7	100.0	2	3.9	100.0	69	1.7	100.0
			W	omen					
Total	2,024	100.0		20	100.0		2,044	100.0	
Public sector employee	305	15.1	15.1	1	5.0	5.0	306	15.0	15.0
Private sector employee	819	40.5	55.5	3	15.0	20.0	822	40.2	55.2
Domestic worker	194	9.6	65.1	1	5.0	25.0	195	9.5	64.7
Self employed	618	30.5	95.7	14	70.0	95.0	632	30.9	95.6
Unpaid employee	66	3.3	98.9	1	5.0	100.0	67	3.3	98.9
Member of cooperative	1	0.0	99.0	0	0.0	100.0	1	0.0	99.0
Employer	20	1.0	100.0	0	0.0	100.0	20	1.0	100.0
ND	1	0.0	100.0	0	0.0	100.0	1	0.0	100.0

HIV status by monthly income (\$RD), 2013										
Status	Se	Sex								
Status	Men	Women	Total							
Total	11,105.41	8,501.16	10,228.35							
HIV negative	11,147.10	8,530.30	10,263.85							
HIV positive	7,990.55	5,582.63	7,327.50							

Source: ENDESA 2013

	HIV status by health insurance cover, 2013									
					Total					
Health insurance		HIV negative				HIV positive			TOLAT	
	N	0.	Col %	Cum %	No.	Col %	Cum %	No.	Col %	Cum %
Men										
Total	4	,985	100.0		60	100.0		5,045	100.0	
Insured	1	,477	29.6	29.6	21	35.0	35.0	1,498	29.7	29.7
Dependent	1	,022	20.5	50.1	3	5.0	40.0	1,025	20.3	50.0
Non insured	2	,453	49.2	99.3	36	60.0	100.0	2,489	49.3	99.3
ND		33	0.7	100.0	0	0.0	100.0	33	0.7	100.0
				Wor	men					
Total	4,473		100.0		47	100.0		4,520	100	
Insured	1,394	31.2		31.2	15	31.9	31.9	1,409	31.2	31.2
Dependent	1,219	27.3		58.4	4	8.5	40.4	1,223	27.1	58.2
Not insured	1,845	41.2		99.7	28	59.6	100.0	1,873	41.4	99.7
ND	15		0.3	100.0	0	0.0	100.0	15	0.3	100

Mair	n educatio	on indicat	ors by sex	, 2010-20	17 (percent	tage)				
		2010			2015		2017			
Indicator	Total	Men	Women	Total	Men	Women	Total	Men	Women	
Illiteracy rate 15+ Years	9.7	9.8	9.7	7.0	7.2	6.8	6.8	6.6	6.9	
Illiteracy rate 15 to 24 Years	3.0	3.9	2.0	2.2	2.5	1.9	1.9	2.2	1.6	
Completed years of education 15+ Years	8.5	8.2	8.8	9.1	8.8	9.4	9.1	8.7	9.4	
Completed years of education 15 -24 Years	9.7			10.1				10.2		
Net enrollment preschool (3-5 Years)	33.2	34.2	32.2	32.5	31.0	34.3	49.6	49.2	50.0	
Net enrollment primary (6-13 Years)	94.6	94.6	94.6	94.9	95.2	94.7	93.2	94.4	91.9	
Net enrollment secondary (14-17 Years)	55.2	49.5	61.3	59.6	52.8	66.6	69.9	64.8	75.2	
Net enrollment superior (18-24 Years)	25.9	20.3	31.4	24.8	18.9	31.1	26.7	18.7	34.9	
Completed primary (15- 19 Years)	75.3	69.3	81.8	79.0	73.5	84.6	83.5	78.3	89.1	
Completed secondary (20 - 24 Years)	54.1	46.2	61.8	59.2	51.7	67.3	62.7	54.2	71.0	
Gender parity index preschool	0.9			1.1			1.0			
Gender parity index primary	0.9			1.0			1.0			
Gender parity index secondary	1.2			1.2			1.1	·		
Gender parity index superior	1.7			1.7			1.8	·		
Neither study nor work (15-24 Years)	20.8	14.4	27.4	20.5	14.7	26.6	19.2	13.3	25.3	

Source: Ministerio de Economía, Planificación y Desarrollo. Sistema de Indicadores Sociales de la República Dominicana 2017

	_abor Mai	rket India	cators by	sav 10-2	1 Vaars 2	0010-201	7			
	2010	2011	2012	2013	2014	2015	2016	2016*	2017*	
Unemployed										
Total	14.5	14.8	14.8	15.2	14.6	14.2	13.4	14.1	12.7	
Men	10.1	10.6	10.1	10.0	9.0	8.6	8.4	8.9	8.4	
Women	21.3	21.2	21.6	22.6	22.4	21.9	20.3	21.2	18.6	
Women's income as a percer	ntage of m	nen's inco	ome							
Total	85.2	78.8	86.9	85.2	80.2	82.4	83.4	79.5	80.9	
10-14	60.8	52.5	123.4	122.9	93.9	78.2	41.8	72.8	113.1	
15-19	93.1	88.9	86.3	94.7	91.8	81.4	84.9	83.4	87.6	
20-24	103.1	85.6	97.2	90.9	88.4	85.7	88.2	84.8	80.3	

Source: Ministerio de Economía, Planificación y Desarrollo. Sistema de Indicadores Sociales de la República Dominicana 2017

	Summ	ary of Interne	es in t	he Cen	ters f	or Int	egrat	ed Att	ention	(Caipac	I)			
Contars	Internoos	Canacity	Se	ex					A	\ge				Sub-
Centers	Internees	Capacity	М	F	13	14	15	16	17	18	19	20	21	Totals
Caipacl Ciudad Del Niño	152	155	152	0	0	0	31	27	68	22	4	0	0	152
Caipacl Batey Bienvenido	57	80	57	0	9	15	22	11	0	0	0	0	0	57
Caipacl Cristo Rey	68	63	68	0	0	4	9	12	36	7	0	0	0	68
Caipacl Villa Consuelo	28	26		28	0	3	6	5	11	3	0	0	0	28
Caipacl San Cristobal	45	63	45	0	5	7	11	8	6	7	1	0	0	45
Caipacl Higüey	17	16	17	0	0	2	4	1	10	0	0	0	0	17
Caipacl La Vega	72	79	72	0	0	5	9	16	26	11	5	0	0	72
Caipacl Santiago	66	90	66	0	0	7	7	10	26	15	1	0	0	66
Totals	505	572	477	28	14	43	99	90	183	65	11	0	0	505

Source: Estadísticas de la Procuraduría General de la República

ANNEX E: LIST OF KEY INFORMANT INTERVIEWS

Category	Affiliation						
	USAID Youth, Education and Security (YES)						
	Office of Health and HIV						
USAID/DR	Office of Sustainable, Economic and Environmental Development (SEED)						
	USAID Inclusive Development						
	Citizen Security Rule of Law and Justice						
	Ministry of Women Main Office (MMUJER)						
	Attorney's General Office, Human Rights/Procuraduria General de la República						
	Núcleo de Apoyo a la Mujer (Santiago)						
	Casa Acogida (Santiago)						
	Fiscalia Santiago						
	Ministry of Education-Gender Department						
	Fundación Mujeres Empoderadas Abriendo Caminos-Focus Group						
	Trans Siempre Amigas (TRANSSA)						
	Amigos Siempre Amigos (ASA)						
	Deputy for Haina Municipality and Movimiento de Mujeres Unidas (MODEMU)						
Contra	Asociación Dominicana Pro-Bienestar de la Familia (PROFAMILIA)						
Gender	Patronato de Ayuda a la Mujer Maltratada (PACAM)						
	Tu Mujer						
	CEPROSH						
	Diversidad Dominicana						
	Mesa Nacional para las Migraciones y Refugiados en República Dominicana (Menamird)						
	Fundación REDDOM-Rural Economic Development Dominicana						
	Chemonics International Criminal Justice System Strengthened Project (CJSSP)						
	Casa Comunitária de Justicia						
	Iglesia Evangélica Dominicana						
	Iglesia Episcopal						
	Centro de Investigación para la Acción Femenina (CIPAF)						

	CEPROSH
HIV/AIDS	
	COIN

	Investigadoras independentes
	ONUSIDA
	Ministerio de Educación
	Investigadora en temas de Género y VIH
	Instituto Nacional de Salud (INSALUD)
	Then Oceans in Health
	Programa de Prevención de enfermedades de trasmisión sexual y VIH, Ministerio de Salud
Persons with Disabilities	Asociación de Ciegos del Cibao, Director General y Profesores
	Consejo Nacional de Discapacidad CONADIS
	Asociación de Personas con Discapacidad Físico Motoras (ASODIFIMO)
	Red Iberoamericana De Personas con Discapacidad
At Risk Youth	ENTRENA, SA
	Investigadora Grupos vulnerables y NNyA y jóvenes en riesgos
	DREAM Project
	Centro de Atención Familiar Acción Callejera
	Alerta Joven Children Internacional
	Fondo de Naciones Unidas para la Niñez (UNICEF)
	Plan Internacional en República Dominicana
	Casa Abierta
	Coordinación Nacional de la Dirección NNA y Familia de la Procuraduría General de la República
	Fondo de Población de Naciones Unidas (UNFPA)
	Gabinete de Políticas Sociales
	APRENDE (Independent group of youths of Haitian descent that live in bateyes)

Human Trafficking, Persons of Haitian Descent and Venezuelan Migrants	Mais
	Movimiento de Mujeres Dominico Haitiana (MODHA)
	Movimiento sociocultural para los trabajadores haitianos (MOSCTHA)
	Servicio Internacional de Justicia
	IDDI
	Caminante
	Acción Callejera
	Independent
	UNDP
	UNHCR
	Solidaridad Fronteriza Centro Puente
	Comisión Interinstitucional de Combate a la Trata de Personas y el Tráfico Ilícito de Migrantes (CITIM)
	Dirección de Migración o Ministerio de Interior y Policía
	Ministerio Público – Procuraduría Especializada contra Tráfico Ilícito de Migrantes y Trata de Personas
	Ministerio De Interior y Policía
	Independent, Venezuelan representative
	World Vision
	MONDHA Focus Group
	Grupo focal con jóvenes Iddi – Entrena
	Grupo focal con venezolanos
	OIM
	Christian Aid
	Panagora Group