

THE INTERNATIONAL MOVEMENT AGAINST ALL FORMS OF DISCRIMINATION AND RACISM

IMADR Oral Statement: 32nd session of the Human Rights Council

Item 3: Clustered Interactive Dialogue with the Working Group on Discrimination Against Women

17 June 2016

Together with International Dalit Solidarity Network (IDSN) and Feminist Dalit Organization (FEDO), IMADR welcomes the thematic report of the Working Group, which includes consideration for the health and safety for women affected by caste-based discrimination. The Working Group rightly states that women from caste-affected groups present the worst health outcomes in terms of life expectancy and access to maternal care, nutrition and incidence of infections.

The working group also refers to the report by the Special Rapporteur on minority issues on "minorities and discrimination based on caste and analogous systems of inherited status". The report stands as a landmark for documenting the global and intersecting nature of caste-based discrimination, and addresses the right to health for caste affected communities and the situation for caste affected women and girls.

On a global scale, caste-systems and untouchability practices creates a massive barrier for women's health and safety; this form of discrimination and social exclusion affects the health of women and children, who are often denied access to health services, help from medical professionals and are forced to take on dangerous jobs with high risks of infections and injuries such as manual scavenging.

In its latest examination of Japan, in February 2016, the Committee on the Elimination of Discrimination Against Women made several recommendations for the State Party to pursue efforts aimed at eliminating the multiple and intersecting forms of discrimination experienced by Buraku women in Japan, which has an effect on women's health, education, employment and participation in public life, as well as in their experiences with the health and education services and at the workplace.

In Nepal, the intersection of caste and traditional practices favouring men's access to for example education and property rights, further the marginalization and high poverty rates among Dalit women restricts their access to basic healthcare, sanitation and maternity health. Continuously find themselves at the bottom of development statistics measuring education, poverty and health.

We therefore urge states to take on the recommendations by the Special Rapporteur on minority issues and include caste specific indicators in the implementation of the 2030 SDGs. Caste-affected states are encouraged to collect and apply data disaggregated by gender and caste in order to ensure that the targets set under Goal number 5. and Goal number 3. are effectively achieved in respect of the 130 million women subjected to caste- and intersecting forms of discrimination: "Leave no one behind"!

Thank you.