Honour Killings of Women in Pakistan	
Facilitators	**General information**
Gender	
Amendments in 2004 and the Protection of Women Act of 2006 intended to enact laws to end the honour killings.	As a result of these amendments, judges have the discretion to sentence the accused, if the crime is established as "honour killing".[i]
Among the increasing number of educated and professional women in Pakistan there is a growing awareness of constraints placed on them because of their gender.	One recurrent theme in the representative feminist discourse in Pakistan is that honour killing and other forms of extreme violence are a manifestation of the structurally imposed inequities forced on women as a gender gap. This strand of feminism advocates agency for the women and attempts to interrupt the hegemonic discourses in order to facilitate the evolution of new roles for women and the new modes of relationships between men and women, ushering a more just, equitable society.
A number of local non-profit organizations and shelters are working in Pakistan to raise awareness about honour killings and to provide legal support and physical protection to women who are at risk. For example *Dastak* an organization in Lahore provides shelter and legal support for women who seek help from them.	Generally, there is a lack of emotional and physical support for young women who remain at the mercy of punishments exacted by family members.
Barriers	**General information**
Legal Issues/Statistics	
Many of these crimes are committed by and/or with the consent and knowledge of the close family members. There are loopholes in the legal system that allows perpetrators to go scot-free by getting pardon from a family member of the victim, as in most cases the victim is a wife, daughter, sister or mother.[ii]	The honour crime laws got new life with the Islamization of Penal Code during the Zia era, and then introduction of Qisas and Diyat Act of 1997. Hussain (2006) argues, "until the Qisas and Diyat Ordinance is removed from the PPC, the perpetrators of honour killings need not fear retribution because many of these crimes are committed by and with the consent of family members." (Cited in Palo, 2008).[iii]

Hussain (2006) notes that the underlying reason for honour crime is related to management of financial resources such as property.[iv]	There were 1,184 cases of honour crimes that were reported in 2015. Of these, 1,096 were females and 88 were males, and at least 170 were minors. The HRCP (2016) notes the main reasons for these killings include alleged illicit relations, domestic disputes, and choosing a partner for marriage.
Self-stigma of young women who feel that they are disobeying norms by going against the wishes of their family members.	Research on young people's perceptions about gender norms in Pakistan show that majority of young men and women believe that girls and women should take care of the household chores, while men and boys are responsible for making a living to support the family.[v]
Inability of young women to report a crime that may or may not happen.[vi]	The statistics about honour crime are based on offences that are reported and hence the actual scope and number of these crimes are considered much higher than what we come to know about.

[i] However, the amendments were not able to close "all" the gaps that allowed the family members to protect the perpetrator.

[ii] From behaviour change point of view the 'killing' makes behaviour change too late. However, it's possible to use an honour killing as an **igniting incident** that causes a community to review its behaviour around norms and 'acceptance' of honour killings. Stories need to reflect the contradictions and local dynamics that would encourage individuals (leaders and decision makers), families and community structures to adopt a more compassionate approach to regulating marriage, choice and the role of women.

[iii] The idea of consent is equivalent of support. In most cases, the perpetrator(s) of honour crimes is family member of the victim, and is supported by the rest of the family to carry out the violence.

[iv] It is important to identify drivers of honour killing as it will be these dynamics like gender power relations, property, economic and social security that are foundational to the treatment of women.

[v] Sathar, Z. A., Lloyd, C. B., Diers, J. A., & Faizunnissa, A. (2003). Adolescents and youth in Pakistan 2001-2002: a nationally representative survey.

[vi] There can be a number of possible reasons; Outcome expectation – perhaps victims and their supporters feel that "nothing will be done" or, worse, their ordeal will simply be replayed and they will go through a second and possible worse ordeal, Fear or reprisals and Cultural appropriation of female body i.e. the idea that a woman belongs to the community or family or hierarchy that determines what role she must play.

Family Planning in Pakistan	
Facilitators	**General information**
Contraception/ Consistent Use	
Almost all women knew at least one method of contraception according to the PHDS 2012-13. Knowledge of female sterilization, pill and injectables, is widespread and 9 out of 10 women know at least one of these three methods.	Of the users of contraceptives, 26 percent are users of any modern method and 9 percent are users of any traditional method. The most widely used modern methods are female sterilization (8.7%) and condoms (8.8%). Combined use of other modern, reliable methods such as pill, IUD or injectable is quite low at less than 10 percent. Among traditional methods, withdrawal is used by 8.5 percent of married women.
Modern methods are better known than traditional ones.	
A fifth of the currently married women of reproductive age have unmet need for family planning. They want to either space their next child or stop having more children, but are not using any family planning (FP) method.	
Most of the contraceptives are bought from government outlets/service providers (46%).	
Users of contraception are role models for the efficacy of modern family planning methods, though their influence is limited.	Family planning usage is linked with various socio-economic characteristics. Women whose husbands have higher level of education are more likely to be users. Similarly, residents of Punjab province are more likely to be FP users. Women who are doing "paid" work are also more likely to use family planning.
In a small number of cases where a family already has a sufficient number of living sons, women may be persuaded to use FP.[i]	
Families with a higher education levels tend to respond more favorably to the idea of family	Contraceptive use differs by social, economic and demographic status. Urban families and

planning and child spacing.	those from higher income groups are more likely to be users. However, cultural norm of having a child soon after marriage puts pressure on newly married couple to not use any family planning before having at least one child.
Women who know how many children their husband want are more likely to be a contraceptive user than those women who are not aware of this.	When the couple has discussion on shared vision of family size, there is more chance of FP use. Moreover, having easy access to methods, i.e. visit of health worker at home, having a clinic/health centre in the community also facilitate use.
Barriers	**General information**
Married women do not feel it is their place to discuss family planning with their spouses, as family planning is seen as a women's issue.	Current contraceptive prevalence rate (CPR) in Pakistan is only 35 percent (NIPS 2014). Women want to use a family planning method, *but are not using, due to various reasons.* These main reasons for this include *actual and perceived side effects, access, and perceived and actual disapproval of spouse.*
There is a lack of communication between couples, and discussions about sexuality and family planning are seldom broached.	Negative gender norms are instrumental in helping couples decide on Family Planning. When relations are more equitable, there is generally more couple communication, more understanding of the need for shared decision making between partners. The underlying issues in making Family Planning choices are often related to gender balances or, negatively speaking, imbalances.
Contraception is seen to be against God's will and design.	In Pakistan, despite decades of Family Planning Programmatic efforts to promote smaller family norms, the mean ideal family size remains about 4 children. Family size is not just dependent on total number of children but also their sex composition, which in Pakistan's case is preference for sons. Hussain, Fikree and Berende (2000) suggest that the underlying reasons for son preference is expectations from sons to meet the "economic, social and emotional needs of parents in their old age and carrying on the family name." The authors conjectured that daughters on the contrary are considered

	burden, as they have to be provided with dowries.
There is some ignorance and many misconceptions about the ill effects of modern family planning methods, largely because 'open' discussion of sexual and reproductive health matters is taboo.	
Married women do not want to be seen as rebellious or go against the prevailing norm by seeming to be too independent and wayward as wives.	Gender norms – whether they are equitable or not – are major drivers of FP decision-making.
More than a third (37%) of contraceptive users discontinued use within 12 months, according to the PDHS 2012-13. They cited side effects as a reason for discontinuing. Around a third of those who discontinued cited side effects as the main reason.	Side effects as a reason to discontinue were highest for pill, injectables and IUD. Of those women who discontinued a method, only 8 percent switched to another method.
There is a lack of education to counter myths and misconceptions.	
Casterline, Sathar and Haque (2001) have argued that "number of living sons, which is known to be a strong predictor of contraceptive use in Pakistan." The findings of PDHS 2012-13 show that women with two or more sons are more likely to not want any more children as opposed to women with no sons, regardless of the number of daughters they already have.[ii]	
Husband's disapproval of using family planning methods.	

[i] Couples looking to produce sons to fulfil gender/ inheritance requirements in family and society will only see gender as a reason to use family planning. This is not a solution. It perpetuates the notion of devaluing the girl child and women.

[ii] This barrier in certain limited circumstances is also a facilitator to using family planning. Women who already have sons may be more susceptible to limiting family size through FP use.

Child Sexual Abuse	
Facilitators	**General information**
Factors affected by legal and societal frameworks:	
According to SAHIL's 2016 Annual Report "The issue of child sexual abuse had never been openly discussed before at the community level. Sahil broke this silence."	In Pakistan, Sahil, a local non-governmental organization that works in the area of child abuse, regularly compiles and shares information about sexual abuse in order to raise public awareness.
The government of Pakistan amended the Pakistan Penal Code, in March 2016 criminalizing various acts of abuse including rape, trafficking of children, abduction for marriage, child marriage and child prostitution (Sahil, 2017).	This law is first of its kind in Pakistan to criminalize sexual abuse of 'children.' This law is purported to be a result of the largest scandal of child sexual abuse in Pakistan, when 400 videos surfaced in 2014 from the village of Hussain Khanwala, Kasur district, showing more than 280 children under the age of 14 being forced to have sex. (Javed, 2015).
Barriers	**General information**
Reported cases do not accurately reflect the number of child abuse events, which go largely unreported.	Sahil (2014) report, 3,508 cases of sexual abuse in Pakistan were reported in 2014. Or in other words, 10 children are abused every day in the country. There was an increase of 17 percent from 2013.[i] A total of 142 victims were murdered after sexual assaults.
Children are not empowered within social and family frameworks to speak up about abuse, nor to report on abuse by an older member of the same family.	Mostly, child abuse is committed by people known to the children, especially in the case of girls.[ii]
Young people are fearful and ashamed to admit to being abused in case they are punished again for perceived complicity in a sexual act.	While the highest percentage of vulnerable age group among both girls and boys was 11-15 years.
Social and institutional frameworks to deal with sexual abuse do no exist in Pakistan.[iii]	One half the children were victims of abuse once, whereas in 16 percent cases they were abused multiple times.

There is a total lack of awareness or understanding of the abuse of boys, especially in rural areas.	Majority of the cases (2,054) were reported from Punjab, followed by 875 cases reported from Sindh, 297 from Balochistan, 152 from Khyber Pakhtunkhwa 90 from Federal Capital Islamabad, 38 from Azad Jammu Kashmir, one case from Gilgit Baltistan and one case was reported from FATA. The urban-rural distribution of the cases shows that they are proportional to the respective population.
Overcrowding in situations of poverty can exacerbate the incidence of child sexual abuse. Research shows that all children are equally likely to get sexually abused. However, children who work in the street and those working as sex workers are the most vulnerable.	
Even where abuse of a minor is 'known' about the family covers up the act out of shame, or because 'outing' the abuser may bring untold retribution on the household/ family.	Many aspects of sexual abuse can be associated with shame, as discussion around sexuality is linked with such notions. This inhibits disclosure about the abuse, due to the possible perception of viewing of the victim as the initiator of the crime (Fontes and Plummer, 2010).[iv] The idea of shame is exploited by the perpetrators. Majority of mother researched by Khan (2005) noted that they would not peruse a case against the perpetrator of child sexual abuse, as they do not want their child's shame to be public.[v] Moreover, for girls families worry for their marriage prospects if they are found out to be victim of sexual abuse, and hence try to keep it under wraps or deny it (Ibid).
Early marriage and sexualisation tends to blur the abuse.	Though the official age of marriage for girls in Pakistan is 16, a significant proportion still gets married before that.[vi] The practice of early marriage is more prevalent in rural areas of Sindh province.[vii] Overall, among the 20-24 year old women, only three percent of girls were married before the age of 15 and 21 percent before the age of 18 (PDHS 2012-13). A small number of girls are married off early to settle family feuds and/or to get bride price.

	Notion of sexualisation through exposure to child sexual abuse has been noted as "premature sexualisation of a child, which is an unhealthy and unnatural occurrence leading to long-term complications in his/her development" by (Khan, 2005).[viii]
Child rights are not taken seriously.	There are various laws for protection of children but their implementation is weak.[ix]

[i] Reported cases usually represent a fraction of sexual abuse incidents. Generally speaking not reporting is, in fact, a major barrier, as it denotes massive stigma around identifying abuse and speaking out against it.

[ii] Overall, 2,141 girls and 1,367 boys were abused, according to Sahil (2014) report.

[iii] There is a lack of resources and training at medical, police or other facilities to deal with traumatized victims of abuse.

[iv] Fontes, L. A., & Plummer, C. (2010). Cultural issues in disclosures of child sexual abuse. Journal of child sexual abuse, 19(5), 491-518.

[v] Khan, N. R. (2005). Social Class and Its Impact on Maternal Awareness of Child Sexual Abuse in Pakistan.

[vi] Age at marriage is a provincial subject. Sind government has risen the age of marriage for girls to be 18 years.

vii Sindh has recently legislated to increase the age at marriage for girls to be 18 years. The law also punishes those who facilitate, contract or perform such marriages with up to three years in jail and a fine of 45,000 rupees (US$450).

[viii] Another notion of sexualisation related to child sexual abuse is that exposure to abuse creates "traumatic sexualisation" in the child, which is related to distorted feelings and attitudes towards sex (Everson, M. D., & Faller, K. C. (2012). Base rates, multiple indicators, and comprehensive forensic evaluations: Why sexualized behavior still counts in assessments of child sexual abuse allegations. *Journal of Child Sexual Abuse*, *21*(1), 45-71.)

[ix] The National Assembly passed a child protection law in early July 2017. Since child protection is a provincial matter, each province has its own laws related to this area.

Child Corporal Punishment in Pakistan	
Facilitators	**General information**
Law & Cultural influences	
Pakistan is signatory to the Convention on the Rights of the Child (CRC), which categorically renounces any kind of violence against children.	
Corporal punishment of children in schools was first prohibited in Pakistan in late 1990s to 2000s through directives that ordered teachers to avoid harsh treatment of students.	After the 18th amendment, the provinces have passed their own set of laws banning corporal punishment in schools. Only in recent years, various provinces and territories have enacted laws prohibiting the practice in educational institutions. These laws, however only apply to harsh treatment of children in schools, not at home or workplaces.
"Complete prohibition" of corporal punishment (in all settings such as home, workplace, alternate care, juvenile system) has been achieved in the Gilgit-Baltistan region.	
In Sindh and Capital Territory, the prohibition of has been achieved in educational places, alternative care setting, day-care and prisons as well.[i,ii]	
Barriers	**General information**
Article 33, Section 89 of Pakistan Penal Code allows use of punishment by parents.[iii]	Despite these laws, corporal punishment is rampant due to weak implementation and cultural acceptance of using violence to discipline children.
Lack of awareness. There is a body of literature that shows that parents are not aware of the devastating effects of corporal punishment on children at home and school.[iv]	In Pakistan, corporal punishment is one of the most common kinds of violence that children encounter at their homes, schools & workplaces.

This form of violence kills thousands of children, many sustain injuries and impairments, according to a review by Global Initiative to End All Corporal Punishment of Children.[v]	
According to a survey, a third of the parents believe that due to corporal punishment the children improve their behaviour (UNICEF, 2015).	
In a study for UNICEF (2015), two thirds of the adolescents interviewed, reported having been beaten at home.	Fifteen percent adolescents reported injuries due to beating at home. The injuries sustained include bruises (24%), cuts (5%) and fractured arm/limbs (4%). The main reason cited for such punishment includes not listening to parents/elders (77%), followed by being mischievous (42%) or being rude (34%). Around a quarter also noted, 'annoying others at home', as a reason.
"Life is hard." Children are expected to literally to take the hard knocks that life serves. It is a common perception that corporal punishment teaches a child about life.	
In patriarchal societies it is accepted as a norm that husbands should 'discipline' their wives. Parents see no wrong in using similar corporal punishments on their children.	
Cultural/traditional practices support and even encourage corporal punishment.	"South Asian values toward family and parenting are marked by patriarchal beliefs and child indulgence; however, parenting emphasizes strict obedience, being socialized quickly into an adult, and often stringent expectations, which may make for harsh treatment of children." [vi, vii]
Facilitators	**General information**
Discipline in schools	
The law prohibits corporal punishment in schools, federal areas, Sind, Punjab and KP.	
In several studies, teachers have pointed out	

the need for training in alternate forms of discipline, so that they don't have to resort to violence.[viii]	
Schools where teaching methodology is based on child psychology are purported to be more effective thus preventing dropouts, as corporal punishment is one of the main reasons for it.	
In several public schools in Punjab, there is mechanism for complaint about corporal punishment and according to the teachers of these schools, have reduced the incidence of corporal punishment there.[ix]	
Barriers	**General information**
According to a study, parents shared that "teachers have full right to give corporal punishment to their students," (NCCR, 2001). In another study, parents were asked about their opinion on use of corporal punishment in schools, only 29 percent consider it wrong.	There is a strongly held view that schools should instil their own disciplinary codes, including corporal punishment – without 'interference' from parents.
Parents don't feel empowered to intervene in school matters, including the punishment of their children. Parents see the schools as their children's keepers. What happens at school stays at school.	
There is little guidance as to what connotes excessive force or unduly harsh punishment.	

[i] Global Initiative to End All Corporal Punishment of Children. (2017). Country report for Pakistan. URL: http://www.endcorporalpunishment.org/progress/country-reports/pakistan.html.

[ii] "In Balochistan, a Child Welfare and Protection Bill which would prohibit corporal punishment in children's homes and a Corporal Punishment Bill which would prohibit it in education institutions and possibly in care settings are under discussion" (Ibid).

[iii] The corporal punishment law of 2003 is applicable only in federal areas, after the devolution. Moreover, the law with the exception of Gilgit-Baltistan does not specify corporal punishment at "home" to be a crime.

[iv] JPMS. (2016). In Focus: Impact of Corporal Punishments on a Child's Personality Development. JPMS Blog. URL: http://blogs.jpmsonline.com/2016/01/12/in-focus-impact-of-corporal-punishments-on-a-childs-personality-development/ Accessed: December 23, 2016.

[v] Global Initiative to End All Corporal Punishment of Children. (2016). Country report for Pakistan. URL: http://www.endcorporalpunishment.org/progress/country-reports/pakistan.html.

[vi] Segal, U. A. (1995). Child abuse by the middle class? A study of professionals in India. Child Abuse & Neglect, 19(3), 217-231.

[vii] Maker, A. H., Shah, P. V., & Agha, Z. (2005). Child physical abuse: prevalence, characteristics, predictors, and beliefs about parent-child violence in South Asian, Middle Eastern, East Asian, and Latina women in the United States. Journal of interpersonal violence, 20(11), 1406-1428.

[viii] Mirza, M. S., & Ali, A. (2014). Effectiveness of Training Program in Changing Teachers' Attitude towards Students' Corporal Punishment. Journal of Research & Reflections in Education (JRRE), 8(2).

[ix] Mercury Transformations (2015). Evaluation Report: National Campaign on End Violence against Children with a focus on harmful effects of physical abuse/corporal punishment. Mercury Transformations: Islamabad.

Sexual and Reproductive Health of Pakistani Youth	
Facilitators	**General information**
Awareness/puberty	
The main source of information for girls about bodily changes associated with puberty are their mothers, and for boys, their friends.	According to the official definition of Government of Pakistan, youth age bracket is between 15-29 years, which is a third of Pakistan's population amounting to around 65 million.
These young people have access to a multitude of sources such as internet, films and peers to learn more about puberty and sexual and reproductive health.	
Barriers	**General information**
The information on the internet may or may not be authentic. Limited reliable and trustworthy information.	
According to a national survey of 15-24 year olds, only a third (31%) of girls and close to one half (41%) of the boys had knowledge about physical changes and related to puberty.[i]	
According to a study in Karachi, about half the girls reported first menstrual experience as shocking. In the same survey, there is considerable amount of guilt and confusion about masturbation and nocturnal emissions.[ii]	
The regular school curricula do not cover these topics.	
At home there are cultural proscriptions on discussing such topics with unmarried boys and girls.	
The attitude of public health providers is discriminatory and discouraging towards young people and their SRH needs. [iii]	
Barriers	**General information**
Spread of HIV and other Sexually Transmitted	

Infections (STIs)	
According to a study in Karachi, only around half the girls were able to mention the names of various Sexually Transmitted Diseases (STDs).[iv]	Though Pakistan is low prevalence country for HIV, however it is considered to be at high risk for HIV and STIs. It is critical for youth to be aware of the modes of sexually transmitted infections including HIV.
A study on youth, in Karachi, found serious gaps in knowledge and awareness among young Pakistanis regarding the modes of spread and ways of preventing the further transmission of the HIV/AIDS virus.[v]	
Barriers	**General information**
Sexual activity/Law and Culture	
In a study of university students in Islamabad, a small proportion of young male students reported unprotected premarital sex.[vi]	Data on pre and extra marital sexual relations is hard to find for Pakistan. However, evidence from various small-scale studies (due to rising age at the time of marriage, greater mobility of young people and changes in social norms about relationships and globalization) experts believe that a significant proportion of youth engage in premarital sex, but without knowledge of "safe-sex". Culturally, men are more likely to engage in premarital sex than women. It is suggested that young men should be counseled and informed about sexually transmitted infections (STIs), their modes of spread, and ways to avoid them."[vii]

Premarital sex is not just a social taboo but also has legal ramifications. The Pakistan Penal Code considers fornication and adultery a crime, which is punishable with a fine and imprisonment. Under the Hudood Ordinance, the religious-legal code parallel to the PPC also considers sex outside marriage, a crime.[viii] Since, discussion and practice of sexual and reproductive health is a moral, legal and religious proscription, there is massive stigma and fear attached to seeking any help and support related to this.[ix]	
Barriers	**General information**
Marriage / Childbearing / Family Planning	
A significant proportion of young girls get married in their teens leading to early motherhood that in turn has severe implications for the health of young mothers and their children.	The latest PDHS (2012-13) found 15 percent of the cohort who are currently 15-19 year olds, to be married. This practice is however declining with time.[x]
Early marriage is more likely to affect girls who belong to the lowest economic strata.	
There is evidence that children born in marriages between first cousins have double the risk of congenital anomalies.[xi] And around half of all marriages occur between first cousins (49%) in Pakistan. Only a third of the married couples are not related to each other.	Cousin marriages are common in Pakistan. Most marriages in Pakistan are decided by families and are arranged between cousins.
Among the youth, use of family planning methods is lower than the national average, as they are in the process of family formation. PDHS 2012-13 reports around a fifth of currently married young females (15-24) are using any modern contraceptive method	Data about family planning usage among youth is available only for girls (and sometimes married boys), as large level national surveys do not ask interview unmarried youth for their sexual activity and use of contraception.

[i] Population Council (2003) Adolescents and Youth in Pakistan 2001-02: A Nationally Representative Survey. Islamabad: Population Council.

[ii] Qidwai, W. (1999). Sexual knowledge and practice in Pakistani young men. JPMA. The Journal of the Pakistan Medical Association, 49(10), 251-254.

[iii] Rutgers WPF (2014). An Assessment on Sexual and Reproductive Health of Young People in Pakistan 2013. Islamabad; Rutgers WPF.

[iv] Ali, T. S., Ali, P. A., Waheed, H., & Memon, A. A. (2006). Understanding of puberty and related health problems among female adolescents in Karachi, Pakistan. *Journal-Pakistan Medical Association*, *56*(2), 68.

[v] Farid-ul-Hasnain, S., Johansson, E., & Krantz, G. (2009). What do young adults know about the HIV/AIDS epidemic? Findings from a population based study in Karachi, Pakistan. BMC infectious diseases, 9(1) 1.

[vi] Faizunnisa, A. and A. Ikram (2004). Sexual behaviour of male students of Islamabad, Pakistan: is it a matter of concern? Population Association of Pakistan Annual Meeting, Karachi

[vii] Mir, A. M., Wajid, A., Pearson, S., Khan, M., & Masood, I. (2013). Exploring urban male non-marital sexual behaviours in Pakistan. Reproductive health, 10(1), 22.

[viii] Pakistan Penal Code (Act XLV of 1860).

[ix] For example, if the story were about teenage sexual health, the information would deal with family, domestic, community structures and influences as well as the provision of health facilities and how individuals and community view support services.

[x] National Institute of Population Studies and Macro International. (2014) Pakistan Demographic and health survey 2012–2013. Islamabad: National Institute of Population Studies.

[xi] Chintahpalli, K. (2013). First cousin marriages can double the risk of birth defects, finds study. *British Medical Journal* 347:f4374.