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POLICY BRIEF

DOMESTIC VIOLENCE LAWS IN THE SPOTLIGHT: ENHANCING PROTECTION SERVICES FOR SURVIVORS IN MEXICO

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This brief was developed by the authors as part of the ELLA Programme. It was developed based on a Regional Evidence Paper [Beyond Domestic Violence Laws in Latin America: Challenges for Protection Services for Survivors](#) by the same authors, which contains an overview of regional evidence, as well as original data collection and analysis, on a particular research topic. All publications can be found in the [ELLA programme website](#).

DOMESTIC VIOLENCE LAWS IN THE SPOTLIGHT: ENHANCING PROTECTION SERVICES FOR SURVIVORS IN MEXICO

SUMMARY

The Latin American convention on gender-based violence, known as Belém do Pará, creates obligations for individual countries to address domestic violence. Therefore, almost all countries in the region have legislative frameworks on domestic violence, but many face challenges in implementing them. This brief analyses the Mexican domestic violence law's implementation and sets out some recommendations to improve it. It shows that, although a comprehensive law exists in Mexico, in practice, institutions should review and transform their mandate in order to fulfill the States' obligation to prevent, protect and punish domestic violence.

Policy recommendations:

- The Mexican protection model's premises should be reviewed so that domestic violence is recognized and tackled as a problem which is rooted in society, and is not seen merely as a problem within individual households.
- The staff at the institutions forming part of the protection model – the police, public health services and CAVI [*Centro de Apoyo de Violencia Intrafamiliar* for its acronym in spanish] – must be trained and sensitized on domestic violence and women's rights, so that they can perform their duties adequately and survivors receive effective attention and protection at an early stage. The CAVI are centres of the Special Prosecutor Office which have been created to assist women with legal, psychological and medical services. These spaces are failing to provide adequate protection services to women and should be urgently assessed so they can fulfil its' mandate.
- Since shelters' specialized services are highly valued by survivors, public funds and policies aimed at supporting them should be continued and strengthened.
- Shelters' confidentiality policies should be reviewed as many survivors consider that isolation from the external world during their stay at the shelter is a barrier in their recovery process.



Bridging the gap between policy design and implementation

A recent wave of reforms (Box 1) to address the high incidence of domestic violence in Latin America has led to comprehensive state responses throughout the continent. These strategies focus on a range of measures including prevention, protection, attention and the sanction of domestic violence. However, they are confronted with serious institutional challenges when it comes to implementation.

The 2007 Mexican General Law on Women's Access to a Life Free of Violence is a good example of this. The Law recognizes various forms of violence (physical, emotional, economic and sexual) as being interrelated; it depends heavily for its implementation on coordination between different state institutions; and addresses protection at two different stages. The Special Prosecutor Office (CAVI), public health institutions, the police, and the National Women's Institute (Inmujeres) should provide immediate and basic protection for women that seek assistance right after the violence has occurred (known as the 'first and second' levels of protection). If after this phase, the violence continues and/or escalates and the women's life is at risk, they can resort to specialized attention, provided by shelters

(the 'third level' of protection). This Policy Brief explores how the implementation of the Mexican Law and whether it is effective in providing protection for domestic violence survivors.

Box 1: Towards comprehensive state responses in Latin America

State responses to tackle domestic violence over the last two decades in Latin America have been strongly focused on conciliation strategies and criminalization of the aggressor. Both of these approaches are influenced by the surge of the neoliberal agenda and human rights during the 1990s on the continent. This led to a focus of state interventions on the individual level, by arguing that every individual case of domestic violence could be reconciled (mediation strategy) or sanctioned (criminalization). These strategies fail to take into account the social dimension of domestic violence in Latin American countries, and the relation with the persistent levels of gender inequality within male-dominated societies.

Through a second wave of reforms over the last decade, however, more comprehensive forms of legislation have been adopted. The aim of these approaches is to understand the social nature of the violence and tackle it.

The brief identifies the obstacles and limitations of the state's responses and provides policy makers with specific steps.

Methodology

A twofold methodology was used for this study. Major existing academic and policy debates about state responses in Latin America were analyzed through a review of literature. To complement this, a series of interviews were carried out with survivors of domestic violence and shelter staff during their stay at a facility in Mexico City. At the heart of these interviews was a simple question: based on your experience, what barriers does the current model of protection face? It is worth noting that this is an innovative approach, since it has not been applied before to women living in a shelter in Mexico. Giving voice to these women as the desired beneficiaries of the Mexican strategy to address domestic violence is key to understanding what protection means in practice and how they experienced these services. The full research report is published under the following title: *Beyond Domestic Violence Laws in Latin America: Challenges for Protection Services for Survivors*.

Why are institutions failing in protecting domestic violence survivors?

The evidence and literature suggests that many countries in Latin America are struggling with the right approach to tackle domestic violence. Countries that promote methods of conciliation and mediation, such as Chile, Colombia and Peru, are being

criticized because they do not tackle the vulnerability of women when dealing with state institutions, nor do the approaches deal adequately with the profound power inequalities between men and women. Many countries focus on the criminalization of domestic violence, including Brazil and Mexico, and thereby implicitly look at domestic violence as an individual problem that must punish the aggressor and not as part of a broader phenomenon embedded in society.

In relation to the Mexican protection model for women who survived domestic violence, the literature and interviews revealed that the system does not always lead to greater protection and that this is largely due to institutional failures. The main objective of working with different levels of protection in the Mexican Law is to be able to detect domestic violence at an early stage. However, those institutions providing first and second level of attention, particularly the CAVI and the Police, do not perform their duties adequately, treating domestic violence as though this was the 'normal' state of affairs.

From the interviews, it became clear that none of the women who tried to access the protection services through the justice system (**Police and CAVI**) obtained any proper protection. Police and CAVI personnel sometimes reproduce social and gender stereotypes that translate into blaming women for the violence they suffer, they do not respecting survivors' decisions to report (or not to report) their aggressor, and they



discourage them from receiving attention or going to a shelter.

At the same time, **public health institutions** and their staff do not always detect and address cases of domestic violence – as the legal framework mandates – and can inflict institutional violence against victims.¹ In not a single case in the shelter that we visited, had the violence experienced by the interviewed women been detected by the health sector.

As stereotypes deeply embedded in society are currently reproduced by the institutions involved, this not only hinders women from breaking the cycle of violence, but also creates huge pressure on **shelters**, the third level of specialized services, where survivors of extreme violence end up. Furthermore, because of the lack of protection at health institutions and in the justice system, women who do end up seeking *direct* access to a shelter were only able to do so because of an intervention by a relative, close friend or a good willing acquaintance.

As for the services provided at the shelter, all interviews made clear that they are highly valued by survivors because of their comprehensive model that addresses the range of needs of women and their children (physical, psychological and legal) and because they help women to understand the

cycle of violence they are experiencing and how to overcome this.

However, the study revealed that the confidentiality issues in shelters, - which stipulates that the women and their children must leave their house for three months, cannot receive visitors and are not allowed to make their location known - is an important barrier for many survivors. Many do not want to be isolated from their families and community for such a long period.

What can policy-makers do about it?

Based on the evidence, we recommend that the concepts on which the protection model are founded and its implementation are reviewed. The model treats domestic violence as an individual household problem and addresses it by punishing the aggressor. This prevents the issue from being properly understood and tackled as one that is deeply rooted and reproduced in society.

Second, the state and its institutions are dealing with domestic violence too late. There is a reliance on the shelters, but the **CAVI, the police and the health systems need to get in earlier** before the recourse to shelters is necessary. Third, the interviews with the women revealed that all of those who went to the various institutions of the first and second level of the protection model, were victimized and did not receive proper attention from the

¹ Institutional violence is when public servant discriminate and obstruct the exercise of human rights – in this case, for example by not taking

women's claims seriously or not dealing with them fully.

staff. We therefore suggest that **the police, public health services and CAVI are trained and sensitized on domestic violence viewed from a gender and human rights perspective**, which recognizes that domestic violence is a reflection of a broader social problem. In this way, attitudes towards domestic violence, which treat it as 'normal', can be eliminated. The status of women as citizens whose rights should be protected has to be a priority within this training. This might ensure that these institutions perform their duties adequately and proactively, so that victims of violence receive effective attention and information about their rights at an early stage. These are crucial elements for breaking the cycle of violence, and if attended well, could make the next step of women having to access a shelter, unnecessary.

Fourth, as for the CAVI, the study revealed that this institution, which is part of the prosecution system, blames survivors for the violence that they have suffered and is failing in its responsibility to protect them. For example, one of the protection mechanisms that CAVI could offer to women, are restraint orders. This mechanism that could prevent the violence from escalating at an earlier stage, is currently not being presented as an option to women. It is therefore **urgent to assess whether CAVI can become an adequate authority** to provide protection and assistance to women, and if so what changes should be implemented in order for it to fulfil its mandate.

The women that were interviewed for this study highly valued the comprehensive and

specialised services provided at the shelter. As such, **public funds and policies aimed at supporting shelters should be continued and strengthened**, since this is the only part of the protection model that responds to the needs of survivors.

At the same time, it is **important to review the confidentiality policies of shelters**, as many survivors find it isolating and a barrier in their recovery process. Shelters could take a more flexible approach so that they can be more open to the outside and not demand that women suspend their lives – and that of their sons and daughters – during their stay at the shelter.

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