

Alternative report to the Committee of the United Nations' Convention on the Elimination of All
Forms of Discrimination against Women (CEDAW)

Republic of Rwanda

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Section A: Introduction to the Report

This alternative report was compiled and submitted by UNPO on the occasion of the 66th session of the CEDAW (henceforth, “the Convention”). UNPO is an international membership organization devoted to the promotion of democracy, non-violence, human rights, tolerance and environmental protection among indigenous peoples, oppressed communities and minority groups worldwide.

This report evaluates the compliance by Rwanda with the Convention and the implementation of the provisions of the Convention, with specific regard to the case of the Batwa (Twa) community.

During the UN periodic review concerning the International Convention on the Elimination of All Forms of Racial Discrimination, which took place in April 2016, Rwanda was under review. The Committee on the Elimination of Racial Discrimination (CERD) pled in favour of the Batwa community and the necessity for the Rwandan government to put in place a special framework in order to better protect them and address their issues.¹ Rwanda has countered these arguments referring to the recent traumas of the country with ethnic classification. UNPO is concerned about the absence of a mention of the Batwa – and the way in which issues of marginalized and underprivileged interact with those of gender equality altogether – both in Rwanda’s own contribution to this session (CEDAW/C/RWA/7-9), and in the list of issues and questions resulting from the pre-session in spring 2016 (CEDAW/C/RWA/Q/7-9).

Following a brief introduction to the Batwa community, this report will address specific provisions of the Convention, commenting on their implementation by the government and on the effect that the lack of implementation has on Batwa women. The final section of the report summarises these allegations through recommendations for the Rwandan Government on how to rectify and prevent further discrimination, in order to offer a synthesis that can be useful during the discussions between the Committee and the delegation of Rwanda at the 66th Session.

Section B: Introduction to the Batwa

The Twa² are the oldest recorded inhabitants of the Great Lakes Region in Central Africa. While many people in this area have histories of migration, the Batwa emphasize they have no origins elsewhere, but are indigenous to this region. Today they are found in the territories of Rwanda, Burundi, Uganda and the eastern part of the Democratic Republic of Congo. The Batwa are sometimes alternatively called Pygmies.

The estimated number of Batwa living in Rwanda lies between 33,000 and 35,000 people, i.e. around 0.4% of the population, although nowadays it is difficult to obtain exact numbers, as no official classification in ethnic groups is permitted. They live dispersed over Rwanda in small groups, often at the periphery of mixed communes. Discrimination, extreme poverty and lack

¹ CERD Report: Rwanda, 12 December 2014: Paragraph 17

² The term “Twa” refers to the ethnic group; “Mutwa” designates a Twa individual; and “Batwa” indicates a group of Twa and the community.

of access to health services led to a sharp and quick decrease of the Batwa population. According to a micro study by Minority Rights Group international (MRG), a comparison of census figures from 1978 and 1991 indicates a 40% drop in the Batwa population, as opposed to a 50% rise in the population of other Rwandans. Additionally, the 1994 genocide has severely affected the Batwa. Rough estimates based on a census carried out by UNPO in late 1994³ indicate that up to 10,000 Batwa died and that another 8,000 to 10,000 fled, eventually decreasing the Batwa population in Rwanda by at least another 30%.

The Batwa have a distinct culture and used to live mainly from hunting and gathering. As a result of the creation of national parks and economic development, a part of the community was displaced from the forest without compensation, making it the poorest and most marginalized section of Rwandan society. Post-independence Rwandan governments evicted thousands of Twa from their forest homes during the 1970 and 1980s for conservation and commercial projects, and gave them little or no compensation⁴. Some Batwa, referring to themselves as 'Impunyu', still follow the traditional lifestyle. However, most of them lack regular access to forests and are often described as squatters or tenants on their ancestral lands, turned into farmland. Many Batwa today have turned to begging to survive.

Section C: Compliance with the Convention on the Elimination of all Forms of Discrimination Against Women

- Article 3: "States Parties shall take in all fields, in particular in the political, social, economic and cultural fields, all appropriate measures, including legislation, to ensure the full development and advancement of women, for the purpose of guaranteeing them the exercise and enjoyment of human rights and fundamental freedoms on a basis of equality with men."

Following the 1994 genocide, Rwanda embarked on a nation-building programme designed, inter alia, to create unity by resisting the attribution of minority or ethnic categories within Rwanda. For the Batwa, the effect is to render their claims as indigenous mute⁵. UNPO finds the Rwandan authorities' decision to dissuade the use of ethnic terms from official documents has been conflated at times with the outright denial that different ethnic groups such as the Batwa exist.

In many official spheres, the term Batwa has been replaced with one or more of the terms "historically marginalised communities", and "people disadvantaged throughout history". This is commonly understood to relate solely to the Batwa, even though other vulnerable groups can equally fall into such a wide category, if the wording is taken literally. This term, devised

³ UNPO Mission 1994: Batwa Final Report

⁴ Nick Ashdown, The Batwa: Rwanda's Invisible People, IC Magazine, June 4 2013

⁵ QUT Law Review: Volume 15 Issue 1 Pg.51

to be neutral and objective, becomes instead a stigma for members of the community. Children are told that they are part of a “marginalised” community, rather than simply part of a specific ethnic group with its history, culture and traditions.

This stigma reduces the Batwa’s chances to find employment and leave the vicious circle of disadvantage. They experience higher levels of poverty and consequently have worse social indicators than the general population.⁶ This affects women disproportionately, as in many cases they are in charge of the well-being of both themselves and dependent children and elderly. Batwa women suffer the most as a result of the on-going discrimination and lack of development of their community. The conjunction of a patriarchal society, extreme poverty and widespread discrimination has resulted in them being the most targeted victims of gender based violence.

During a visit to a Batwa community in the district of Nyabihu in 2013, in the Western Province of Rwanda, UNPO encountered that with no means of sustenance and no access to education, this community is forced to live in substandard conditions. As a consequence, frustrated by their living conditions, several of the men show a tendency towards alcoholism, which is one of the main causes behind gender based violence in Batwa communities. Another visit to a community in the Muhanga district left a more positive impression. Thanks to the work of civil society, several Batwa women were financially independent from their husbands, having been able to structure their own means of income. This has strengthened confidence and determination among these women. It also reaffirmed UNPO’s conviction that violence against Batwa women is not inevitable, and that prevention is possible and essential.

- Article 10(h): “States Parties shall take all appropriate measures to eliminate discrimination against women in order to ensure to them equal rights with men in the field of education and in particular to ensure, on a basis of equality of men and women access to specific educational information to help to ensure the health and well-being of families, including information and advice on family planning.”

Sexuality remains a taboo topic in Rwanda and those asking about it are considered promiscuous. In Rwanda, sex education programmes mainly mention the negative aspects of sexual intercourse such as STIs and unintended pregnancies, as a means of promoting abstinence⁷. For Rwandan Health Development Initiative (HDI) coordinator Aflodis Kagaba, adolescents in Rwanda are often forced to seek knowledge about sex and sexual reproductive health from unconventional sources. This reality is certainly a major contributing factor to the low level of sexual education and awareness among the majority of Rwandan youth⁸.

While the government suggests that most Rwandan teens are sexually active at the age of 14, HDI argues that it is 12 and says that distributing contraceptives in schools can contribute a lot in preventing teen pregnancies through the promotion of safe sex. To programme manager Telesphore Nambajimana, “there is a lot of sexual activity in schools and among teens but this should be done with safety, teenagers should get a comprehensive package in sexual and reproductive health services, including condoms⁹”. HDI, however, does not take into account the fact that in the Batwa community, teenagers usually drop out of formal schooling between

⁶ MINALOC *National Social Protection Strategy* (draft), (2010)

⁷ African Journal of Reproductive Health: Vol. 16, No. 3, Sept. 2012

⁸ Donah Mbabazi, “Why Sex Education is your Responsibility”, All-Africa, 12 March 2015

⁹ Daniel S Ntwari, “Teen pregnancy threatens Rwandan families”, the East African, 7 Feb 2015

the ages of 12 and 14, before they could benefit from this progressive programme. Therefore, although this particular problem affects in particular women from disadvantaged backgrounds, the proposed solution would probably not reach many young women in Batwa communities.

As a result, women in the West and East provinces on average have one more child than women in City of Kigali¹⁰. This compares to the fact that male condoms are available in 93.2% of Rwanda's urban facilities compared to 55.6% of rural areas (both free and paying). Condom use is at 19.7% for females and 40.9% for males¹¹.

- Article 12.1: "States Parties shall take all appropriate measures to eliminate discrimination against women in the field of health care in order to ensure, on a basis of equality of men and women, access to health care services, including those related to family planning."

As also pointed out by the Centre for Reproductive Rights (CRR), fulfilling the right to gender equality in the context of health may require amending Rwandan legislation and administrative regulations, so that they may permit full equality. In article 21 of the 2015 revised Rwandan constitution, all Rwandans have the right to good health¹². This does not take into account cuts to social welfare programs that have disproportionately harmed women, especially single mothers. What's more, it does not address non-legal barriers that affect access to reproductive healthcare, such as the high cost of contraceptive services and supplies, and transportation barriers for women in rural areas. They have noted that young, poor, rural, and minority women often face additional obstacles to reproductive health care, and recommended that states take extra measures to ensure their access to health¹³. As most Batwa live in rural areas, women from this community are significantly disadvantaged in having access to these products and services.

- Article 12.2: "(...) States Parties shall ensure to women appropriate services in connection with pregnancy, confinement and the post-natal period, granting free services where necessary, as well as adequate nutrition during pregnancy and lactation."

The CRR reported the high incidence of maternal mortality and post-pregnancy diseases, both being violations of women's and girls' rights to health and life. Concerning Rwanda, while multiple treaty monitoring bodies have recommended that the State take measures to reduce the rate, it still remains high, and problems with accessing maternal health services remain. A 2015 report from the World Health Organization (WHO) indicates that Rwanda reduced the maternal mortality ration (MMR) from the 2010 rate of 381 deaths per 100,000 live births to 290 deaths per 100,000 live births¹⁴, achieving the UN Millennium Development Goal of reducing the MMR by 75% by 2015¹⁵. While this trend is positive, this rate is still high and a factor that we believe remains a considerable burden on the status of the Batwa ethnic group.

¹⁰ National Institute of Statistics of Rwanda: Demographic and Health Survey 2014-15 Pg.86

¹¹ UNPFA Rwanda Publication: "HIV Prevention for Girls and Young Women" Pg.4

¹² Constitution for the Republic of Rwanda 2015: Article 21

¹³ Centre for Civil and Political Rights: Human Rights Commission Submission 12 February 2016 Pg.2

¹⁴ Global Health Observatory (GHO): World Health Statistics 2016: Monitoring health for the SDGs: Annex B

¹⁵ Centre for Civil and Political Rights: Human Rights Commission Submission 12 February 2016 Pg.62

- Article 14.1: “States Parties shall take into account the particular problems faced by rural women and the significant roles which rural women play in the economic survival of their families, including their work in the non-monetized sectors of the economy, and shall take all appropriate measures to ensure the application of the provisions of the present Convention to women in rural areas.”

A 2009 report of the Community of Potters of Rwanda¹⁶ (COPORWA) called the Twa “the most vulnerable and poor group in the country¹⁷”. According to the report, 77% of the Twa are illiterate (compared to 33% for the general population), 51% have never attended school, 47% have no farmland (four times the national average), and 30% are unemployed (less than 2% nationally). This situation is even more extreme in the case of Batwa women, who are often limited in their studying and employment opportunities by early pregnancies and family duties.

One of the most common occupations of Batwa women is pottery. It has been a traditional occupation of the Batwa community to the point that in Rwanda, the job is generally associated with the ethnic group. Unfortunately, especially in the past few years, it has not been a very profitable activity, putting a number of Batwa women in financial strain. According to COPORWA, the average potter only makes \$10 per month, which is not enough to raise a family on¹⁸.

- Article 14.2 (b): “States Parties shall take all appropriate measures to eliminate discrimination against women in rural areas in order to ensure, on a basis of equality of men and women, that they participate in and benefit from rural development and, in particular, shall ensure to such women the right to have access to adequate health care facilities, including information, counselling and services in family planning.”

According to a survey by the BMC Pregnancy and Childbirth Journal, 32% of women with a live birth in the last two years found the distance to a health facility being a considerable problem and 61% found getting medical help or the money needed for insurance/treatment to be a considerable problem. In addition, reported figures in national household surveys assume that women who delivered at a facility were provided a post-natal check-up before discharge. However, anecdotal evidence observed by co-author Jean-Paul Semasaka, a practicing clinician in Rwanda, suggests that full post-natal care (PNC) services are not consistently or fully provided at delivery discharge¹⁹.

- Article 14.2 (h): “To enjoy adequate living conditions, particularly in relation to housing, sanitation, electricity and water supply, transport and communications.”

The 2009 CEDAW report’s conclusion deemed that the main challenge to achieving gender equality in Rwanda were the cultural and traditional beliefs that grant men of value higher than that of women. Rwandan women in general are discriminated against in the job market for fear of pregnancy; they are further discriminated against once they do become pregnant; rates of girls dropping out of school or not passing national exams are higher than their male

¹⁶ Local NGO working for the well-being of the Batwa people.

¹⁷ Minority Rights Group Rwanda 7-4-2016

¹⁸ US 2014 Human Rights State Gov. Report Pg. 42

¹⁹BMC Pregnancy and Childbirth: 2016 16:122

counterparts; and there is a lack of national awareness and understanding surrounding the trafficking of women and girls. In this sense, women from the Batwa community are suffering from double discrimination. Their marginalised position and their already low participation in the job market and in schooling leave them especially vulnerable to the issues mentioned above.

- Article 24: “State parties undertake to adopt all necessary measures at the national level aimed at achieving the full realization of the rights recognized in the present Convention”

Evelyne Hohoueto Afiwa-Kindena, OHCHR Committee Member and Country-Rapporteur for Rwanda for the CERD Committee, confirmed how the “historically marginalized groups” are not seen as a specific group in Rwanda, and given no special consideration. On that occasion, the OHCHR reaffirmed the Committee’s view that vulnerable groups had to be targeted by special affirmative measures addressing their specific needs and allowing them to have the same access to Governmental policies as others²⁰.

Section D: Conclusion

The Rwandan nationality laws and policies themselves adopted following the Rwandan genocide, which were used to instil a sense of unity in the country, have negatively affected the situation of the Batwa. Already at the time a very small, poor and marginalised community, such legislation helps deny their existence as a separate group or the consequent need for distinct solutions to their problems.

In general, women of the Batwa community have very little access to health facilities, due to their lack of insurance; to schools, as they cannot afford to pay the costs of materials and canteen services; and to the job market, where they are severely discriminated in view of persisting prejudgments and stereotypes.

Members of the community still face casual discrimination in their daily life, being considered by many fellow citizens as dirty, backwards and unintelligent. Our conclusion is therefore that Batwa women face a double-discrimination. In addition to the disadvantages faced by fellow Batwa men, they also have to face the difficulties of being a woman in a society that, albeit improved, still struggles to achieve gender equality and even possibilities for men and women.

Section E: Recommendations

1. UNPO urges for the Rwandan government to recognise the double discrimination women of the Batwa community face due to lingering ethnic discrimination, as well as to the normal disadvantages faced by women
2. UNPO calls upon the Rwandan government to address the problems that are specific to the Batwa community and give better opportunities especially to Batwa women, for them to be able to leave the vicious circle of extreme poverty, economic dependency, discrimination, gender-based violence and exclusion.

²⁰ CERD Examination Report of Rwanda, 29 April 2016

3. UNPO supports the CERD recommendation that the State party take all necessary steps, in consultation with and with the agreement of the Batwa, to offer them adequate land, so that they can retain their traditional lifestyle and engage in income-generating activities²¹.
4. UNPO urges the State party to take special measures to encourage and promote the participation of women of the Batwa community in local and national political and public life through awareness-raising campaigns and trainings for members of the community.
5. UNPO calls for an improvement of healthcare services, particularly in rural areas, as well as an awareness campaign to spread knowledge and information about PNC services available in medical centres.
6. UNPO recommends a Rwandan programme focused on closing disparities in access to maternal health care services based on geography, ethnicity and socio-economic status, particularly targeted to include members of the Batwa community.
7. UNPO recommends that sexual education and contraceptive distribution programmes be rearranged when targeting the Batwa community, by taking into account, among others, the high school leaving rate linked with the community.

²¹ CERD Report: Rwanda, 12 December 2014: Paragraph 17