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Appraising the Stakes of Violence and Gender Based Discrimination in Cameroon: A Complete Disaster in the Protection and Preservation of Women Right and Status

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ABSTRACT

Women in every given society are treated as abandoned commodities and sometimes susceptible as to what they represent. The international community continue to experience violation done on women rights especially those related to Female Genital Mutilations, Sexual Harassment, Voluptuous Abuses, Rape, widow practices and many other harmful practices. These practices experienced by women on the international scene are not exempted in Cameroon; in matters related to violence. Cameroon comprehended and documented as a State of Law, devours great efforts in certifying that women anguishing from the effect of violence should be protected. In exercising these efforts, the country has ratified a series of international, regional and even sub-regional laws in combating violence done on women. National laws such as the Constitution, the Penal Code, Labour Code, Civil Status Registration Ordinance, Civil Code and many others have been enacted to deal with cases of violence done on women. The question posed is in ascertaining whether this continuous silent crime done on women can be exterminated? Will the women in their status and right experienced security on their established identity? In its entire ramification the story of violence experienced by women will be an unacceptable forum to say without terror that the women will be free from bondage of violence on their various statuses. This is really an oblivious hallucination.

Keywords: Violence on Women, Gender Based, Disaster, Cameroon, Violation

I. INTRODUCTION

Issue of domestic violence has been of great essence to the Cameroon government. They believe that the problem we have nowadays is not just to a party of a treaty, convention, covenant or declaration. In showing its commitment and engagement in respective human right

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laws, the country saw the need to ratify necessary laws dealing with women treatment. In 2012, Cameroon ratified the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa. It is really surprising that ever since Cameroon ratified this Protocol, the country till this moment has done nothing in establishing or enacting a law or bill that comprehensively addresses violence against women, however a draft law addressing violence against women and gender-based discrimination is under consideration. The country has however enacted some laws pertaining to different forms of violence against women, such as rape, sexual harassment, and female genital mutilation. In 2012, the government drafted a National Strategy to Combat Violence against Women, provided health and financial assistance victims, established and operate a hotline for victim support and reporting cases, and implemented awareness-raising activities at the national and local levels.

Despite these government efforts, there is a high prevalence of violence against women throughout the country, in large part due to the inadequate legislation to address the problem and lack of systematic action to eliminate stereotypes and harmful practices that discriminate against women. Paired with this is a limited number of investigations and prosecutions of such cases and overall failure to hold perpetrators accountable.

Domestic violence in Cameroon is a pervasive problem. A 2018 study found that, of 2,570 women, 995 (38.7%) reported physical violence and 381 (14.8%) reported sexual violence.³ These data match more recent statistics, including a study from Douala-based La Maison des Droits de l'Homme that approximately 39 per cent of women suffered from physical violence in 2008,⁴ thus indicating that little has been done to stem the epidemic of domestic violence over the years. The vast majority of victims are women, as females account for 92% of domestic violence victims in Cameroon.⁵ The Government of Cameroon fails to engage in effective criminal investigation and prosecution of domestic violence acts. Cameroon's penal code does not specifically criminalize domestic violence.⁶ In the absence of a specific criminal domestic violence provision, victims are thus left to rely on the general assault provisions in the Penal

³ Alio, Amina P., et al, "Association between intimate partner violence and induced abortion in Cameroon," 112 *International Journal of Gynecology & Obstetrics* 2 (Feb. 2018).

⁴ 159NGO Report On the implementation of the ICCPR (Replies to the List of Issues, available at CCPR/C/CMR/Q4), http://www2.ohchr.org/english/bodies/hrc/docs/ngos/GeED_Cameroon_HRC99.pdf (last visited August 20, 2013).

⁵ L'Association Camerounaise des Femmes Juristes, *Lutte contre les violences faites aux femmes au Cameroun: Une mobilisation Considérable*, Justice & Solidarité, July 2012, p. 4.

⁶ Country Reports on Human Rights Practices for 2012: Cameroon, U.S. Department of State (2012), at 27; Beijing + 15, "The Stance of Cameroon and the Unfinished Business," *Gender Power and Development*, July 2010, pg. 36.

Code, which address murder,⁷ grievous harm,⁸ assault causing death,⁹ assault causing grievous harm, simple harm, failure to assist women abandoned by their husbands, and assault of a pregnant woman.¹⁰ Marital rape is not a crime under Cameroon law.¹¹ Current attempts at legal reform do not suggest that prohibiting marital rape is a priority objective of the Government of Cameroon at this time. The Government of Cameroon's 3rd Periodic Report states that "the draft bill of the Criminal Code, which is in the process of being finalized, contains provisions that criminalize violence against women, in particular sexual harassment, disruption of growth of an organ etc."¹² This paragraph does not include, however, any specific mention of criminalizing spousal rape.

Although general assault and murder provisions are available, legal systems actors' practices show a failure to prioritize the prosecution of domestic violence. Domestic violence is generally considered a private matter by the community and law enforcement and is rarely addressed at the level of the courts for these same reasons.¹³ Harmful practices also perpetuate domestic violence, as men at times defend their use of domestic violence because of the bride price they paid for their wives.¹⁴ In its 3rd Periodic Report, the Government of Cameroon points out the 2010 indictment of one defendant, a police officer, for murdering his wife, a magistrate.¹⁵ While the prosecution of this single offender for domestic violence homicide is a welcome step toward offender accountability, the Report makes no other reference to or mention of prosecution for the hundreds of other domestic violence cases in Cameroon. Moreover, victims of domestic abuse have little recourse for protection. There is no domestic violence law in Cameroon that would provide women with an order for protection against their abusers.¹⁶ The Family Code that was drafted in 1997 to address issues of domestic violence has remained on the shelf.¹⁷ Stakeholders see this failure to adopt the law as a lack of political will

⁷ Articles 275 and 276 of the Cameroon Penal Code

⁸ Ibid, Article 277

⁹ Ibid, Article 278.

¹⁰ I(Article 278), Immigration and Refugee Board of Canada, *Cameroon: Domestic violence, including legislation, availability of state protection and support services for victims*, 2 December 2010, CMR103371, available at: <http://www.refworld.org/docid/4db7b9d92.html>].

¹¹ Country Reports on Human Rights Practices for 2012: Cameroon, U.S. Department of State (2012), at 27.

¹² 3rd Government Report within the Framework of the African Charter on Human and Peoples' Rights, Section 30.

¹³ Beijing + 15, "The Stance of Cameroon and the Unfinished Business," Gender Power and Development, July 2010, pg. 35-36.

¹⁴ Johnson Takwa, Teke. 2009. "Violence Against the Women and the Girl Children in Cameroon." Poster presented at the International Conference on Population, 27 September-2 October 2009, Marrakech, Morocco, at 5, <http://iussp2009.princeton.edu/papers/90344>.

¹⁵ 3rd Government Report within the Framework of the African Charter on Human and Peoples' Rights, para. 505

¹⁶ Nisha Giridhar, *The Global Spread of Domestic Violence Legislation: Causes and Effects* (Spring 2012), at 20, http://politics.as.nyu.edu/docs/IO/4600/Giridhar_Nisha.pdf.

¹⁷ Written Communication with Ndi Richard Tanto, Ecumenical Service for Peace, Aug. 20, 2013.

to address domestic violence.¹⁸ Women seeking to escape the violence through divorce are hindered by the fact that spousal abuse is not a legal ground for divorce.¹⁹ Other practices by the government also create additional obstacles for victims seeking safety. The Cameroonian Government in its report states that it provides marital and family mediation services in cases of marital or family disputes, noting that its counselling and mediation units processed 17,000 cases and settled 3,668 of them “amicably.”²⁰ It is well-documented; however, that mediation is problematic and dangerous for domestic violence victims, because the assumptions underlying the use of mediation do not apply when there has been domestic violence. Mediation assumes that both parties are equal, yet an abuser holds tremendous power over a victim. This imbalance of power between the parties cannot be remedied, even with the skills of a trained mediator. During mediation, the abuser can easily control the victim through the use of signals known only to the couple. Also, a victim is often afraid and reluctant to voice her concerns. Further, mediation focuses on future behavior, and many mediators do not allow the victim to address past issues of violence. This furthers the victim’s sense of personal responsibility for the abuse, and undermines the accountability of the abuser.²¹

II. AN OF ANALYSIS THE VARIOUS SITUATION OF VIOLATION OF WOMEN RIGHT: A COMMON VIOLATION

More than half of women (55%), since the age of 15, have been physically abused, mainly by their husband or partner.²² While it is true that the current husband / partner (51%) remains the principal perpetrator of physical violence, the most recent husband / partner (16%), father’s mother or wife (15% or the husband of the mother (14%) and the sister or brother (12%), teachers (8%) are the other perpetrators of physical violence against women;²³ Of the women who has had sexual intercourse, 20% were forced to have first sexual intercourse and 30% had sexual intercourse before the age of 15;²⁴ Overall, 41% of women reported that they were aged 15 to 49 at the time when they first experienced sexual abuse and 19% were 10 to 14 years old at the time of the experiment.²⁵ Overall, 34% of women between the ages of 15 and 49 were physically assaulted, only 8% were sexual assaults, and 21% were both physical and

¹⁸ Ibid.

¹⁹ Country Reports on Human Rights Practices for 2012: Cameroon, U.S. Department of State (2012), at 27

²⁰ 3rd Government Report within the Framework of the African Charter on Human and Peoples’ Rights, paras. 446, 506.

²¹ *Mediation*, StopVAW, Feb. 2008, <http://www.stopvaw.org/Mediation>

²² Institut National de la Statistique (INS) et ICF International, *Enquête Démographique et de Santé et à Indicateurs Multiples*, Calverton, Maryland, USA, INS et ICF International, septembre 2012, pp. 327-328.

²³ Ibid., p.329.

²⁴ Ibid., p. 333

²⁵ Ibid., p.330.

sexual;²⁶ among pregnant women, 14% of women reported experiencing violence during pregnancy; among women in union or in a break-up, a total of 60% of women have experienced physical, sexual and / or emotional violence by their current or most recent husband.²⁷ According to the National Institute Statistics in 2016,²⁸ in the last 12 months prior to the survey, 29% of women have been physically abused; almost two out of three women reported being physically abused at any time. 11% of women were victims of sexual violence and 33% of emotional violence. Among women in union, 40% said they had injuries²⁵. The occurrence of injuries as a result of acts of physical or sexual violence is 43%.

(A) The Existence of Breast Ironing: A concrete and continuous practice

Breast ironing occurs in all of Cameroon's provinces across ethnic and religious groups, although it is more common in Littoral Province (53%).²⁹ Up-to-date statistics on the prevalence of breast ironing are not readily available, but a 2006 study by the German Technical Corporation (GTZ) found that 24% of adolescent girls and 50% of girls with signs of early breast development had been subjected to breast ironing.³⁰ It is estimated that girls as young as nine years of age are subjected to this practice.³¹ Breast ironing has serious health effects and can lead to burns, physical deformities, psychological issues, pains, high fever, abscesses and cysts in the breast, breasts pimples around the nipples, itching, severe chest pain, flow of breasts, interference with breast development, and infections.³² Family members are frequently the perpetrators who carry out or condone breast ironing.¹⁸³ Breast ironing is primarily motivated by the misperception that the practice protects girls from sexual advances, rape, early marriage, and pregnancy.¹⁸⁴ The practice of breast ironing highlights the gaps in the Cameroon legal system to adequately prevent and punish sexual assault and sexual harassment, leaving it instead to civilians to resort to harmful practices as perceived prevention. There are currently no laws addressing breast ironing or sexual harassment.¹⁸⁵ Provisions of the current Penal Code could be used to prosecute cases of breast ironing, including provisions

²⁶ Ibid., p.334.

²⁷ Ibid., p.337

²⁸ Institut National de la Statistique (INS) et ICF International, Enquête Démographique et de Santé et à Indicateurs Multiples, Calverton, Maryland, USA, INS et ICF International, septembre 2016, pp. 327-328.

²⁹ Bawe Rosaline Ngunshi, *Breast Ironing: A Harmful Traditional Practice in Cameroon*, 2011, at 4, http://www2.ohchr.org/english/bodies/cedaw/docs/cedaw_crc_contributions/GenderEmpowermentandDevelopment.pdf.

³⁰ Johnson Takwa, Teke. 2009. "Violence Against the Women and the Girl Children in Cameroon." Poster presented at the International Conference on Population, 27 September-2 October 2009, Marrakech, Morocco, at 4.

³¹ Country Reports on Human Rights Practices for 2012: Cameroon, U.S. Department of State (2012), at 30.

³² Ibid.; Bawe Rosaline Ngunshi, *Breast Ironing: A Harmful Traditional Practice in Cameroon*, 2011, at http://www2.ohchr.org/english/bodies/cedaw/docs/cedaw_crc_contributions/GenderEmpowermentandDevelopment.pdf (last visited Aug. 23, 2013).

on harm and assault. Recent research in Cameroon, however, failed to identify any legal interventions, arrests, or detentions for breast ironing based on these provisions.

(B) The Notion of Female Genital Mutilation

Female genital mutilation is believed to reduce the sexual desire of the women and girl children thereby assisting them to remain virgins as long as possible and faithful to their husbands when they later marry but this practice constitutes a permanent health risk. This act which is usually performed by traditional methods without the use of anaesthesia often lead to severe pain, haemorrhage, and other complications that often result in difficulties of conception and child delivery. It equally increases the exposure of the concerned women to HIV/AIDS and tetanus infection. It also reduces the possibility of attaining full sexual satisfaction as it hinders victims from reaching orgasm.

Female genital mutilation (FGM) is carried out in nearly all areas of Cameroon. Most FGM practices are clitorectomies; it is reported that infibulation has been performed in the Kajifu area. In the southwest and far northern provinces, FGM is reportedly practiced on 100% of Muslim and 63.6% of Christian girls. There is no law prohibiting FGM. The government's history and recent statements by ministry officials suggest that addressing FGM is not a priority for the Cameroon Government. Attempts by the Cameroon Parliament to address FGM have been unsuccessful and protracted over the course of nearly a decade. As early as November 2003, a private member's bill to abolish FGM was introduced, but the majority Cameroon People's Democratic Movement (CPDM) party defeated it. Subsequent efforts have since failed. In 2010, Ministry of Justice authorities informed Amnesty International that the process was underway to criminalize FGM, but three years later, such legal reform has yet to happen. Furthermore, the Minister of Justice downplayed FGM as practiced in Cameroon, stating that it is "slicing off a section of the clitoris and is not as dramatic as in West Africa." In its 3rd Periodic Report, the Government of Cameroon describes its support and rehabilitation for victims of FGM experiencing obstetric fistula as "psycho-social welfare." It does not, however, detail any medical assistance it is providing these girls to address their physical and reproductive health care needs. a harmful traditional practice involving partial or total removal of the female external genitalia. It includes the most severe form of abuse, infibulation, usually practiced on preadolescent girls. The Government has criticized the practice; however, no law prohibiting FGM is implemented. At present, the practice of FGM by groups is tending to decline, albeit slowly. This is due to its condemnation by the State -even if not prohibited by law, the discreet but effective influence of the NGOs and the threat of HIV. FGM continues to be practiced especially in the Ejagham tribe of the South West Province and the Hausas and

Araphous in Northern Cameroon. Furthermore, migration contributed to the spread of FGM to different parts of the country. Public health centres in areas where FGM is frequently practiced counselled women on the harmful consequences of FGM; however, the government did not prosecute anyone for performing FGM.³³ Female genital mutilation affects more than 1.4% of the female population at the national level and 20% in the outbreak areas⁴⁵. Women and girls in the Far North are the most circumcised (5.4%) followed by those in the Southwest (2.4%) and the North (2.2%).³⁴

(C) Assessing the Position of Employment Discrimination

The Government of Cameroon's 3rd Periodic Report states: "In a bid to promote gender, the Government and National Community will ensure equitable representation of girls in all sectors, particularly in vocational training, higher education and access to employment."³⁵ In light of this goal, the Report points to the formulation of a National Gender Policy ("NGP") which seeks to "guarantee the enjoyment of the same rights by men and women including an equitable and equal participation in the development of the country" by 2035.³⁶ The NGP also seeks to ensure the "promotion of the equality of chances and opportunities between men and women in the economic and employment spheres."³⁷ Cameroon's Civil Code of 1981 ("Civil Code") perpetuates gender discrimination and significantly impairs the ability of women to pursue their right to employment. Specifically, Chapter VI, Section 74 of the Civil Code states the following:

- (1) A married woman may exercise a trade different from that of her husband.
- (2) The husband may object to exercise of such a trade in the interest of the marriage or their children.³⁸ against women and their right to work under Article 15 of the African Charter. Second, this provision has a de facto discriminatory effect on women, as employers may be reluctant to hire women and, in some cases, may even require written authorization from a woman's husband before hiring.³⁹ As a result, women may have less ability to exercise their employment options given their husbands' authority, particularly in the Northern Muslim-

³³ Country Sheet Cameroon on Female Genital Mutilation, European Commission on Human Right in Cameroon, 2015

³⁴ MINPROFF Cameroun, Annuaire Statistique 2015 du Ministère de la Promotion de la Femme et de la Famille, MINPROFF Cameroun, p.6.

³⁵ 3rd Government Report within the Framework of the African Charter on Human and Peoples' Rights, Section 3(1)(c).

³⁶ *Id.*, para. 460.

³⁷ *Ibid.*

³⁸ Cameroon Civil Code of 1981, Chapter VI, Section 74.

³⁹ Cameroon Society and Culture Complete Report, World Trade Press, 2010, Petaluma CA

dominated region, where misperceptions that the men are superior to women prevail.⁴⁰ Additionally, some men are reluctant to employ well-educated women, such as lawyers and journalists. Women may refuse certain jobs that they feel may put their matrimonial harmony at risk. Finally, a husbands' veto power in the interest of their children is exacerbated by the scarce and insufficient facilities for children such as crèches, childcare centres, and kindergartens.⁴¹The Civil Code's discriminatory effect against women in employment is evident in the employment statistics reported by the Cameroon Government in its 3rd Periodic Report: 61.3% of males are employed versus 44.5% of females.²⁰⁷ When employment data is broken down by employment in the formal sector, the gender disparity becomes even more apparent: 11.9% of males are working in the formal sector, whereas just 4.1% of women are employed in the formal sector.²⁰⁸ Women's employment as salaried, permanent workers is low, and only 8.2% of women working in any capacity falling in this category.

III. FORCED AND EARLY MARRIAGES, AN EXAGGERATING EXPOSITION ON CHILDREN RIGHT AND STATUS

The Cameroon Penal Code provides punishment for the perpetrators of forced or early marriage under **article 356** of the Penal Code:

“(1) Whoever compels anyone to marry shall be punished with imprisonment for from five to ten years and with a fine of from 25,000 to 1,000,000 francs.

(2) Where the victim is under the age of 18, the punishment may not be less than two years' imprisonment, whatever the mitigating circumstances.

(3) Whoever gives in marriage a boy under 16 years of age or a girl under 14 shall be punished as under the two last foregoing subsections.

(4) Upon conviction, the court may deprive the offender of parental power and disqualify him from being the guardian or curator of any person for the period stipulated in article 31(4) of this Code.”

Forced marriages are considered a big problem in Cameroon. Such marriages are traditional and not civil and occur for females between the ages of 14 and 18. The marriages tend not to be civil because the birth certificate and marriage certificate has to be paid for. In addition to being too young to get married, the girls are not protected through the family law and have few rights.

⁴⁰ Written Communication with Ndi Richard Tanto, Ecumenical Service for Peace, Aug. 20, 2013

⁴¹ Isidore Léopold Miendjiem, Etude nationale sur la discrimination en matière d'emploi et de professionet proposition d'un plan national d'action au Cameroun, at 78, Geneva 2011, http://www.ilo.org/wcmsp5/groups/public/@ed_norm/@declaration/documents/publication/wcms_164856.pdf

Such marriages usually occur in the north and far north, although the practice may occur throughout the country. The legal age for women to enter into marriage in Cameroon is 15 but according to the results of the Third Demographic and Health Survey of Cameroon carried out in 2004, the median age for entry into marriage was 17.6 years. This national average conceals wide variations within Cameroon with a median age at first marriage for women in three Northern regions of 15.4 years and 20.6 years for Yaoundé and Douala. Some girls especially in the northern parts of Cameroon enter into marital unions as early as 11 years. Girls who enter into early marital unions are usually either forced or tricked into it with little or no regard for their will. There is a close link between early marriage and early fertility which may lead to obstructed delivery and high rates of maternal deaths. There is also a close link between high rates of early marriages and high divorce rates. Divorce exposes the woman to prostitution with the many negative consequences that are connected to it such as high exposure to infection by sexually transmitted diseases including HIV/AIDS. For early and forced marriages, the MICS 2014 report shows that 11.4% of girls enter the union before the age of 15 and 36% before the age of 18 and that 42.5% of girls aged 15 To 19 years are in union with a partner of at least 10 years their elder. The study carried out⁵⁰ by the local NGO ALVF-EN in 2014 revealed that 89% of the respondents indicated that women should not have their first period under the roof of their parents but rather their spouses and 15% of these people believe that early and forced marriage protects girls against abortions and unwanted pregnancies.

(A) Assessing the tendency of Violence on Birth-rate

The non-declaration of births or the possession of invalid acts constitutes a violation of the right to identity and nationality in Cameroon. This lack of respect for the right to identity hinders the exercise of many other rights such as the right to education, work and health care. A study conducted from August 2014 to June 2015 in 477 kindergartens and primary schools in the Littoral region revealed that 27,273 children (5.4 %) did not have birth certificates.⁴² In the same period, in the North of the country, more than 200,000 children under the age of 15 were also identified as being without birth certificates.⁴³

In 2017, the Committee on the Rights of the Child had noted the problem of the cost of birth registration, the lack of information of parents about the importance of birth registration, and the deadlines for doing so and the fact that civil registration offices are sometimes inaccessible

⁴² Information and public awareness project on specific formalities and obligations for the rehabilitation of civil status, Douala 2015, funded by the European Union

⁴³ Diagnostic study on the status of issuance of civil status records in the Department of Benoue, 2014-2015, funded by the European Union

and lack sufficient resources, which has disproportionate effects on vulnerable populations.⁴⁴ The Committee on Economic, Social and Cultural Rights has also raised this problem in its list of issues addressed to Cameroon, requesting it to provide statistical data on unregistered births and information on the impact of measures taken by the State party to urgently address the problems of non-declaration of birth and the possession of invalid acts.⁴⁵ Finally, it should be noted that Cameroon has noted, without providing any justification, a recommendation from its 3rd Universal Periodic Review to: “Ensure universal birth registration without discrimination by developing information systems with solid databases that would include information on the number of people yet to be registered, creating mobile registration units to reach the most remote areas, and conducting campaigns to inform all factory.

(B) The Health Arena, a Fatal Error in Protecting Female Standard

The maternal mortality rate is high (782 deaths per 100,000 live births). The birth rate among adolescent girls, aged 15 to 19, is 105.8 births per 1,000 girls.⁴⁶ In recent years, maternal and infant mortality has increased as women practice traditional deliveries in the bush with various risks to their babies' health and their own health.⁴⁷ In some areas of the Southwest and Northwest, only 6% of women give birth in health centres.⁴⁸ The low rate of assisted deliveries, inadequate management of obstetric complications and limited access to health services contribute to an increased maternal mortality. 5% of women and 2.3% of men aged 15 to 64 live with HIV / AIDS.⁴⁹ Women are less knowledgeable than men about how to prevent the sexual transmission of STDs and HIV / AIDS.⁵⁰ Risk taking behaviour, sexual violence and the use of prostitution as a survival strategy lead to an increase in infectious diseases, especially HIV / AIDS. Lack of access to contraceptive methods, combined with low coverage of sexual and reproductive health services, reinforces this problem. Young people (adolescent girls in particular) are the most exposed to risky behavior, resulting in early pregnancy, unsafe abortion and STDs. Because of the beliefs about the use of contraceptive methods, girls have very little access to them. In the South West and North West, the male condom remains the most common method of preventing STDs and unwanted pregnancies.⁵¹ In South West and North West, people living with HIV who were on ARVs can no longer access drugs when they are in the

⁴⁴ CRC/C/CMR/CO/3-5, paragraphs 18 and 19

⁴⁵ The Committee on Economic, Social and Cultural Rights has raised this issue in its list of issues E/C.12/CMR/Q4, paragraph 18

⁴⁶ <http://hdr.undp.org/en/composite/GII>

⁴⁷ ONU Femmes, *Profil...*, p.4

⁴⁸ IMC, July 2018

⁴⁹ *Rapport de l'enquête CAMPHIA 2018*

⁵⁰ *Annuaire Statistique du MINPROFF*, p.84

⁵¹ CARE & PLAN INTERNATIONAL, *Ibid.*

bush, increasing the risk of contamination.⁵² Fear of social stigma, concerns about parents rejecting them, poverty and impossibility of sharing with the father of the future baby parental responsibilities; push some pregnant girls to terminate their pregnancies. In the Southwest and Northwest, while 61% of them seek help at the hospital, 56% of them use traditional doctors, 28% do this at home, using drugs or other methods.⁵³

(C) Educational Manipulation

Despite the adoption of a law on free public primary education, the payment of fees to Parents' and Teachers' Associations and other related costs is still required in public primary schools as well as in secondary schools. Many civil society organisations contest this practice, which is not only a violation of the law on free education, but also a violation of the right to education, which encourages corruption and embezzlement by school headmasters. The Committee on the Rights of the Child also noted in 2017 during its review of Cameroon: "(c) Excessive costs for education in the form of informal fees disproportionately affecting the large number of families in the State party living in poverty" and recommended that the Government abolish all indirect costs in primary education and punish educational staff who demand payment of unofficial fees.⁵⁴

The percentage of women over 25 with some secondary education is 32.5% compared to 39.2% for men. Young girls in university studies focus primarily on humanities, social studies, law and social and economic management studies. They represent only 32.3% of the students in sciences, school streams that are more promising in terms of employment.⁵⁵ For more than three years, tens of thousands of children in the Far North, North-West and South-West of Cameroon have not been able to return to school. In areas still offering schooling possibilities, boys are in some cases privileged when school fees cannot be paid for all: While they go to class, girls are responsible for domestic chores and small trade to support their families. This tendency takes place in a national environment already favouring, before the crisis, the boys' education: In elementary school, 110% of girls against 125% of boys are enrolled (gross rate of schooling). In secondary school, the gap widens, with 53% of girls enrolled compared to 65% of boys.⁵⁶ Beyond the costs associated with schooling, adolescent girls face additional barriers, particularly in secondary school, mainly because of the burden of household chores. The safety conditions and distances to go to school are also important barriers to education.

⁵² ONU Femmes, *Profil...*, p.4

⁵³ CARE & PLAN INTERNATIONAL, *Ibid*, p. 7

⁵⁴ CRC/C/CMR/CO/3-5, paragraphs 38 (c) and 39 (d)

⁵⁵ Annuaire statistique MINESUP 2012

⁵⁶ Annuaire statistique de l'éducation 2018

Poverty and displacement have caused many girls to never go to school.⁵⁷

IV. GENDER BASED VIOLENCE PROTECTION: A COMPLETE FORGOTTEN NETWORK IN CAMEROON

Violence against women is a form of violence that is very prevalent but lacks recognition as a social problem due to the fact that it is sometimes invariably accepted as a way of life. Violence takes various forms but the most pervasive is violence against women in the private sphere that is domestic violence. Domestic violence in the form of physical assault is very rampant and is compounded by societal acceptance as either a form of correction by the husband and other family members, or as a sign of love in certain cultures. It is a serious violation of women's human rights because adequate actions to prevent violations have not been taken nor where violations occur, the State has not adopted proper measures (e.g. a specific law on violence against women) that provide remedies to the victims of domestic violence. Law enforcement officers and medical personnel are not adequately trained to deal with the issue. It is either regarded as a private domestic matter or victims are discouraged from bringing their partners and other culprits before the law. This is the more reason why the draft law on Gender Based Violence needs to be urgently promulgated into law. Statistics show that 53% of women are subjected to one form of violence or another as from the age of 15. In 36% of the cases it is the husband who is the perpetrator of violence. Amongst women who are assaulted, 55% are those living in marital unions while 19% are single women.

Physical violence is a common phenomenon in Cameroon. 40% of women living in urban areas are subjected to it while those living in rural areas constitute 37%. Violence against women knows no distinction of class or status. Studies revealed that educated women suffer more violence (45 %) than uneducated women (36 %). 64 % of employed women suffer physical violence. Furthermore, domestic violence is common amongst the childless (77 %), while 53 % of those with five or more children are victims of such violence.

In Cameroon 43.2% of women in union are confronted with domestic violence. 39.8% and 14.5% respectively face emotional and sexual violence. Nationally, 20.1% of women were reported to have been forced to have sex for their first sexual relationship.⁵⁸ Overall, 56.4% of women in union experienced at least one of these forms of violence. The lack of legal criminalization of domestic violence and marital rape is a major gap in the protection of

⁵⁷ Plan International, *Ibid*, p.52

⁵⁸ Annuaire Statistique du MINPROFF, p.55

women's rights.⁵⁹ Gender-based violence has increased since the beginning of the crisis: A consultation in the South-West shows that 85% of respondents think that women and girls face violence, whether rape, sexual abuse, domestic violence, denial of resources or opportunity, psychological abuse, physical violence or early marriage.⁶⁰ Young women, aged 15 to 35, would be most at risk. In the Far North region, from February 2018 to June 2019, 97% of cases of Gender Based Violence are reported by women, of which about 12% are sexual violence. In 84% of cases, the perpetrator is the intimate partner.⁶¹ Sexual violence by armed groups or other men is a reality that is sometimes faced by boys and men. Thus, 11% of GBV cases reported in June were boys and men.⁶² While domestic violence and sexual assault against women is reported very little to the police, these figures are virtually non-existent when it comes to violence against men.⁶³ Prosecuting the perpetrators of sexual violence against men is a real challenge since the definition in Cameroon's penal code does not provision for rape against the male population. Thus, the lawyers had to use the term "forced homosexuality" as an element to establish legal proceedings.⁶⁴ The lack of a formal referral mechanism to guide survivors greatly limits their access to appropriate holistic services. Health centres, while more accessible, do not offer the privacy and confidentiality that is recommended for the treatment of such cases. Information about cases of violence is also not stored safely. Lack of support to cover medical costs as well as the lack of complete PEP kits undermines the quality of care.⁶⁵ The accessibility to the forensic certificate remains limited because they are paying. In addition, survivors in some localities do not report abuse to the police for fear of arrest or fear that their case will not be handled in a way that places their own safety at the centre. Beyond the absence and inadequacy of existing services, survivors face various obstacles preventing them from reporting abuse. Thus, the social representation of marriage, with the perception that a raped woman / girl has very little chance of finding a husband, being considered a "torn cloth", reduces them to silence. Also, the guilt of the rape suffered is sometimes placed on the victim who, by her actions or inadequate outfit, would have "provoked" the aggression. Sometimes survivors think they cannot be believed. Finally, the level of power often held by the perpetrators of such acts, with an ascendant over their victims, the threat of reprisals, the apprehension of being repudiated or the fear of being married to the executioner, are all

⁵⁹ http://www.wilpf-cameroon.org/wp-content/uploads/2018/10/Cameroon-UPR_EnglishWEB-FINAL-.pdf

⁶⁰ IRC Cameroon Country, *Ibid*

⁶¹ Rapports GBVIMS (février 2018 à Juin 2019)

⁶² OCHA, *Cameroon...*, p.7. At the national level, 54.6% of women and 41.2% of men have been victims of physical violence since the age of 15 (Annuaire statistique du MINPROFF, p. 55)

⁶³ Annuaire Statistique du MINPROFF, p.32

⁶⁴ OCHA, *Cameroon...*, p.7

⁶⁵ IRC Cameroon Country Program, *Ibid*.

obstacles to denunciation. Cases of breast ironing and female genital mutilation are noted, which already prevailed in some regions before the crisis.⁶⁶ Physical violence exercised against women and the girl children takes many forms. It can take the form of sexual aggression which involves the use of force to have sexual relations with either a very young girl or a mature woman. Sexual aggression can even take place within marriage circles. It can also be practised by someone who is very close to the young girl such as the father, teacher, the pastor, the doctor, a brother, etc. This involves a form of abuse of confidence. Forced sex intercourse is usually carried out without the use of the condom and is often accompanied by injury, STD infection and unwanted pregnancies.

In other cases, sexual aggression may take a milder form where the aggressor uses persuasive methods such as the use of money or the offer of non-financial items to lure the woman or the girl child into sexual relation. The men involved in such sexual acts are usually quite older and financially viable than their female partners (sugar daddies) and most often have more other sex partners. Sexual relations occurring under such circumstances expose the girl child to various forms of unpleasant effect including injury which leads to high rates of infection by sexually transmitted diseases including HIV/AIDS, early and unwanted pregnancy which at times compromise educational career of victims and reduce their chances to develop their productive potentials and increase the risk of dying from pregnancy and child delivery related complications. Cases of sexual aggression on women and girl children in Cameroon are usually under reported. Women and girl children who undergo these unfortunate circumstances usually keep quiet to spare themselves of the shame usually associated to this by the societies they live in. Sometimes, they keep quiet for fear of being accused of provoking the situation. Information collected during the 2017 Cameroon Demographic and Health Survey shows that in 2017 alone, 13.0% of Cameroonian women underwent sex under physical constraints.

Apart from sexual aggression, other forms of physical assaults on the women and the girl children involve inflicting pain and injury on the women using the hands, the head, the cane, arms, etc. Although such aggressions usually takes place within the households, coming from especially the husband (domestic violence), young girls are usually physically assaulted by the boyfriends. In some parts of Cameroon especially the Centre and South regions, some people claim that beating the woman is a sign of deep affection and beating the woman is generally more accepted in these regions than other regions of Cameroon. Men usually beat their wives under the influence of alcohol. Some men claim that since they spend much money on the bride

⁶⁶ ONU Femmes, *Profil..*, p.3

prize paid to marry their wives, they can do almost anything that they want with them including the practice of physical or psychological violence on them. Cases of such violence in Cameroon are many as shown on the diagram below:

(A) The Phenomenon of Gender-Based Violence:

Violence against women is a form of violence that is very prevalent but lacks recognition as a social problem due to the fact that it is sometimes invariably accepted as a way of life. Violence takes various forms but the most pervasive is violence against women in the private sphere that is domestic violence. Domestic violence in the form of physical assault is very rampant and is compounded by societal acceptance as either a form of correction by the husband and other family members, or as a sign of love in certain cultures. It is a serious violation of women's human rights because adequate actions to prevent violations have not been taken nor where violations occur, the State has not adopted proper measures (e.g. a specific law on violence against women) that provide remedies to the victims of domestic violence. Law enforcement officers and medical personnel are not adequately trained to deal with the issue. It is either regarded as a private domestic matter or victims are discouraged from bringing their partners and other culprits before the law. This is the more reason why the draft law on Gender Based Violence needs to be urgently promulgated into law. Statistics show that 53% of women are subjected to one form of violence or another as from the age of 15. In 36% of the cases it is the husband who is the perpetrator of violence. Amongst women who are assaulted, 55% are those living in marital unions while 19% are single women.

Physical violence is a common phenomenon in Cameroon. 40% of women living in urban areas are subjected to it while those living in rural areas constitute 37%. Violence against women knows no distinction of class or status. Studies revealed that educated women suffer more violence (45 %) than uneducated women (36 %). 64 % of employed women suffer physical violence. Furthermore, domestic violence is common amongst the childless (77 %), while 53 % of those with five or more children are victims of such violence.

In Cameroon 43.2% of women in union are confronted with domestic violence. 39.8% and 14.5% respectively face emotional and sexual violence. Nationally, 20.1% of women were reported to have been forced to have sex for their first sexual relationship.⁶⁷ Overall, 56.4% of women in union experienced at least one of these forms of violence. The lack of legal criminalization of domestic violence and marital rape is a major gap in the protection of

⁶⁷ Annuaire Statistique du MINPROFF, p.55

women's rights.⁶⁸ Gender-based violence has increased since the beginning of the crisis: A consultation in the South-West shows that 85% of respondents think that women and girls face violence, whether rape, sexual abuse, domestic violence, denial of resources or opportunity, psychological abuse, physical violence or early marriage.⁶⁹ Young women, aged 15 to 35, would be most at risk. In the Far North region, from February 2018 to June 2019, 97% of cases of Gender Based Violence are reported by women, of which about 12% are sexual violence. In 84% of cases, the perpetrator is the intimate partner.⁷⁰ Sexual violence by armed groups or other men is a reality that is sometimes faced by boys and men. Thus, 11% of GBV cases reported in June were boys and men.⁷¹ While domestic violence and sexual assault against women is reported very little to the police, these figures are virtually non-existent when it comes to violence against men.⁷² Prosecuting the perpetrators of sexual violence against men is a real challenge since the definition in Cameroon's penal code does not provision for rape against the male population. Thus, the lawyers had to use the term "forced homosexuality" as an element to establish legal proceedings.⁷³ The lack of a formal referral mechanism to guide survivors greatly limits their access to appropriate holistic services. Health centres, while more accessible, do not offer the privacy and confidentiality that is recommended for the treatment of such cases. Information about cases of violence is also not stored safely. Lack of support to cover medical costs as well as the lack of complete PEP kits undermines the quality of care.⁷⁴ The accessibility to the forensic certificate remains limited because they are paying. In addition, survivors in some localities do not report abuse to the police for fear of arrest or fear that their case will not be handled in a way that places their own safety at the centre. Beyond the absence and inadequacy of existing services, survivors face various obstacles preventing them from reporting abuse. Thus, the social representation of marriage, with the perception that a raped woman / girl has very little chance of finding a husband, being considered a "torn cloth", reduces them to silence. Also, the guilt of the rape suffered is sometimes placed on the victim who, by her actions or inadequate outfit, would have "provoked" the aggression. Sometimes survivors think they cannot be believed. Finally, the level of power often held by the perpetrators of such acts, with an ascendant over their victims, the threat of reprisals, the apprehension of being repudiated or the fear of being married to the executioner, are all

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(B) Presence of Experiencing Aspect of Sexual Aggression

In other cases, sexual aggression may take a milder form where the aggressor uses persuasive methods such as the use of money or the offer of non-financial items to lure the woman or the girl child into sexual relation. The men involved in such sexual acts are usually quite older and financially viable than their female partners (sugar daddies) and most often have more other sex partners. Sexual relations occurring under such circumstances expose the girl child to various forms of unpleasant effect including injury which leads to high rates of infection by sexually transmitted diseases including HIV/AIDS, early and unwanted pregnancy which at times compromise educational career of victims and reduce their chances to develop their productive potentials and increase the risk of dying from pregnancy and child delivery related complications. Cases of sexual aggression on women and girl children in Cameroon are usually under reported. Women and girl children who undergo these unfortunate circumstances usually keep quiet to spare themselves of the shame usually associated to this by the societies they live in. Sometimes, they keep quiet for fear of being accused of provoking the situation. Information collected during the 2017 Cameroon Demographic and Health Survey shows that in 2017 alone, 13.0% of Cameroonian women underwent sex under physical constraints.

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under the influence of alcohol. Some men claim that since they spend much money on the bride prize paid to marry their wives, they can do almost anything that they want with them including the practice of physical or psychological violence on them. Cases of such violence in Cameroon are many as shown on the diagram below:

Female genital mutilation is believed to reduce the sexual desire of the women and girl children thereby assisting them to remain virgins as long as possible and faithful to their husbands when they later marry but this practice constitutes a permanent health risk. This act which is usually performed by traditional methods without the use of anaesthesia often lead to severe pain, haemorrhage, and other complications that often result in difficulties of conception and child delivery. It equally increases the exposure of the concerned women to HIV/AIDS and tetanus infection. It also reduces the possibility of attaining full sexual satisfaction as it hinders victims from reaching orgasm.

(C) Gender Based Violence and Complexities of Female Genital Mutilation,

Female genital mutilation (FGM) is carried out in nearly all areas of Cameroon. Most FGM practices are clitorectomies; it is reported that infibulation has been performed in the Kajifu area. In the southwest and far northern provinces, FGM is reportedly practiced on 100% of Muslim and 63.6% of Christian girls. There is no law prohibiting FGM. The government's history and recent statements by ministry officials suggest that addressing FGM is not a priority for the Cameroon Government. Attempts by the Cameroon Parliament to address FGM have been unsuccessful and protracted over the course of nearly a decade. As early as November 2003, a private member's bill to abolish FGM was introduced, but the majority Cameroon People's Democratic Movement (CPDM) party defeated it. Subsequent efforts have since failed. In 2010, Ministry of Justice authorities informed Amnesty International that the process was underway to criminalize FGM, but three years later, such legal reform has yet to happen. Furthermore, the Minister of Justice downplayed FGM as practiced in Cameroon, stating that it is "slicing off a section of the clitoris and is not as dramatic as in West Africa." In its 3rd Periodic Report, the Government of Cameroon describes its support and rehabilitation for victims of FGM experiencing obstetric fistula as "psycho-social welfare." It does not, however, detail any medical assistance it is providing these girls to address their physical and reproductive health care needs. a harmful traditional practice involving partial or total removal of the female external genitalia. It includes the most severe form of abuse, infibulation, usually practiced on preadolescent girls. The Government has criticized the practice; however, no law prohibiting FGM is implemented. At present, the practice of FGM by groups is tending to decline, albeit slowly. This is due to its condemnation by the State -even if not prohibited by

law, the discreet but effective influence of the NGOs and the threat of HIV. FGM continues to be practiced especially in the Ejagham tribe of the South West Province and the Hausas and Araphous in Northern Cameroon. Furthermore, migration contributed to the spread of FGM to different parts of the country. Public health centres in areas where FGM is frequently practiced counselled women on the harmful consequences of FGM; however, the government did not prosecute anyone for performing FGM.⁷⁶ Female genital mutilation affects more than 1.4% of the female population at the national level and 20% in the outbreak areas⁴⁵. Women and girls in the Far North are the most circumcised (5.4%) followed by those in the Southwest (2.4%) and the North (2.2%).⁷⁷

V. CONCLUSION

Domestic violence causes long and short term effects on the victims, not leaving out the children, family and even the sex-life of the victim. It is therefore necessary to study the impact of domestic violence against women. Violence against women causes stress, anxiety, depression, disturbed sleep, palpitation, physical, fatigue chronic headache, psychological pains to a woman. A single victim may suffer from one or more ailments. So far as physical and mental disorder arising out of domestic violence against women is discuss, it is necessary to examine how and what extend the personal and the social life of a woman is affected due to domestic violence. There are women who faced the violent situation boldly and do not allow their personality to be adversely affected, but there are others who get mentally disturbed and disorganized. They restrict their social contact and feel ashamed of their abusive situations. Others get worried and become victims of chronic health problems. Long term effects include, mentally disturbed and disorganized, ashamed of mixing with relatives and friends, restrict social contacts and impaired health. Conflicts are normal features of a family life but intimate relationship create a paradox. Violence perpetration is very common among the members of the family. Domestic violence against married women perpetrated by the husband or other members of the family spoiled the cordial relationship between them. Domestic violence might create atmosphere for conjugal relationship, strain, tension, quarrels over minor issues, gap in communication given rise to misunderstanding, mutual trust is lost and family does not remain a place to live in.

⁷⁶ Country Sheet Cameroon on Female Genital Mutilation, European Commission on Human Right in Cameroon, 2015

⁷⁷ MINPROFF Cameroun, Annuaire Statistique 2015 du Ministère de la Promotion de la Femme et de la Famille, MINPROFF Cameroun, p.6.

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