“I Felt Like the World Was Falling Down on Me”

Adolescent Girls’ Sexual and Reproductive Health and Rights in the Dominican Republic
Lucely, 18, lives in a rural area in San Cristóbal province, on the outskirts of Santo Domingo, the capital of the Dominican Republic. At age 16, she had an unplanned and unwanted pregnancy. “Everything ended right there,” she said. Lucely—whose name has been changed to protect her privacy—first had sex when she was 14. At that time, she had very little information about preventing pregnancy and sexually transmitted infections. She said someone visited her school “once in a while” to talk to the girls and boys about sex: “They’d tell us not to have sex at an early age—that we shouldn’t be doing that,” she said. No one informed her about contraceptive methods or how to access or use them.

Lucely said she felt ashamed to go to a clinic and ask about family planning methods. She feared staff at the clinic would judge or criticize her for seeking family planning, or tell her family or other people in her community that she was having sex. “I didn’t want to [go to the clinic for contraception]. They say, ‘Oh, you’re so young. You’re already doing it?’”

“I felt like the world was falling down on me…. I was going crazy, thinking I can’t have a kid. I’m not prepared, I’m not ready economically.... I’d always thought of myself as becoming a successful lawyer or psychologist. I was horrified that my plans would have to be put on hold.”

—Samantha, on learning she was pregnant at age 17, April 2018
When she found out she was pregnant at age 16, she was deeply distressed. Her partner was out of work, and she did not have support from her family: her mother lived far away, and her father was verbally abusive.

They did a sonogram, and I realized [I was pregnant]. I wanted to die. Oh my god. I felt alone in that moment…. I was almost in shock.

Lucely wanted to end the pregnancy, but abortion is illegal and prohibited in all circumstances in the Dominican Republic. Like many women and girls in her position, she tried to induce abortion clandestinely by drinking a tea made from plants and herbs, but it did not work.

Wearing a pink denim vest and jeans and chasing after her lively 2-year-old daughter, she told Human Rights Watch the pregnancy changed her life profoundly. “I never went back [to my life before],” she said. Without a support network to help care for her baby, she was unable to continue school and had to drop out of ninth grade.

I suffered a lot. My mom was far away. I was here alone. My father spoke badly to me. He’d insult me. He didn’t help me. I feel bad to even think about it. It’s like when you feel like no one loves you.¹

Lucely is one of the 20.5 percent of girls and young women ages 15 to 19 in the Dominican Republic who become pregnant while still in their teens, most of them without having intended or wanted to do so.² Their fundamental human rights—to life, health, freedom from discrimination, and education, among others—are threatened by harmful policies and practices that deny them access to essential sexual and reproductive health information and services.

Adolescent girls need access to scientifically accurate, age-appropriate information about their sexual and reproductive health. The government of the Dominican Republic has not implemented a rights-based, comprehensive sexuality education curriculum in schools. This gap leaves girls and boys to navigate early sexual relationships without reliable information about how to protect themselves from unwanted pregnancy and sexually transmitted infections.

¹ Human Rights Watch interview with Lucely, 18, San Cristóbal province, Dominican Republic, April 16, 2018.
A young woman, 18, dresses her daughter, a toddler, while her younger child sleeps nearby at their home in Santo Domingo, Dominican Republic. She stopped going to school during her first pregnancy and has not returned.

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A 15-year-old girl watches as her child sleeps in a stroller at her home in Santo Domingo, Dominican Republic.

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A girl, 17, breastfeeds her son while checking her phone at her home in Santo Domingo, Dominican Republic. She is currently pregnant for the second time.

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In many parts of the country, there is no place girls can go to access confidential, non-stigmatizing, adolescent-friendly sexual and reproductive health services. The Dominican Republic is one of few countries in Latin America and the Caribbean where abortion is criminalized and prohibited in all circumstances, even for women and girls who become pregnant from rape or incest, whose lives are endangered by pregnancy, or who are carrying pregnancies that are not viable, meaning the fetus will not survive outside the womb. Provisions in the civil code and other national laws facilitate the country’s high rate of child marriage, allowing children under 18 to marry with parental or judicial authorization. Girls, particularly those from poor and rural communities, suffer the consequences of these policy failures most profoundly.

A young woman, 18, holds her son and talks to a friend in her neighborhood in Santo Domingo, Dominican Republic. She left school when she first became pregnant, but now takes classes on Sundays while her partner watches her child.

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The Dominican Republic has the highest adolescent fertility rate of all the countries in Latin America and the Caribbean, according to the Pan American Health Organization (PAHO). While some adolescent pregnancies are planned and wanted at the time they occur, many are not. The total ban on abortion in the Dominican Republic means adolescent girls facing unwanted pregnancies must choose between clandestine and often risky abortions or the lifelong consequences of having a child against their wishes.

Early pregnancy carries serious health risks for young mothers and their babies. Despite a law prohibiting the expulsion of pregnant girls from schools, pregnant students and young mothers often find it difficult, or impossible, to continue their education, due to a combination of harmful social stigma, inadequate childcare and support services, and exclusion or marginalization by teachers or school administrators. An unplanned pregnancy can therefore jeopardize a girl’s health and right to education, curtail her economic opportunities, and push her to marry at a young age, derailing the course of her entire life.

3 Ibid., p. 109.
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The government of the Dominican Republic has pledged to reduce adolescent pregnancy and eliminate preventable maternal death. Achieving these goals requires dedicated action by authorities to advance the sexual and reproductive health and rights of adolescent girls. Policymakers should act swiftly to:

- Provide adolescents with essential sexual and reproductive health information, including by implementing a mandatory comprehensive sexuality education curriculum in schools;
- Expand supportive and welcoming health services nationwide to receive girls without judgment or stigma;
- Decriminalize abortion and give girls the option to safely end an unwanted pregnancy; and
- Ensure pregnant and married girls and young mothers are never excluded or pushed out of school.

Rosa Hernández looks at photos of her daughter, Rosaura Almonte Hernández, who died in 2012 at age 16. Rosaura, known as “Esperancita,” had leukemia. Doctors initially denied her chemotherapy because she was pregnant and refused to end the pregnancy because abortion is illegal under all circumstances in the Dominican Republic.

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A young woman, 22, sits with her daughter while discussing contraceptive methods with a health worker at a clinic in Santo Domingo, Dominican Republic. She was first pregnant at 17. Public health data shows one-fourth of adolescent girls and young women ages 15 to 19, and one-fifth of women ages 20 to 24 have an unmet need for contraception in the Dominican Republic.

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RECOMMENDATIONS

To President Danilo Medina, Cabinet Ministers, and the National Congress

• Implement the Strategy for Comprehensive Sexuality Education as a mandatory part of the curriculum in primary and secondary schools nationwide. Ensure that the strategy meets international standards and is scientifically accurate, rights-based, and age-appropriate. Ensure comprehensive sexuality education reaches students from an early age and builds incrementally to equip them with developmentally relevant information about their health and wellbeing. As part of the curriculum, provide children with practical information about how to use contraceptive methods and where they can obtain contraceptive supplies.

• Train educators to teach the curriculum impartially.

• Ensure health centers do not stigmatize adolescents who are sexually active, protect the confidentiality of all patients, do not impose parental notification and consent requirements for receiving services and contraceptive supplies, and that they are staffed with medical personnel qualified to provide comprehensive adolescent health services.

• Strengthen measures to reach out to adolescents to raise their awareness about access to contraception and reassure them of the availability and confidentiality of adolescent-friendly, non-judgmental services.

• Implement public information and awareness-raising campaigns that address the stigma around adolescent sexuality and promote healthy adolescent sexual practices. Ensure such campaigns make clear that adolescent children do not need an adult’s authorization to access sexual and reproductive health information and services.

• Decriminalize abortion as a matter of urgency, by removing all criminal penalties for abortion from the penal code. If necessary, as an interim step, at a minimum ensure women and girls can access safe and legal services when a pregnancy poses a risk to the life or health of the woman or girl, when the fetus has a serious condition incompatible with life outside the womb, and when the pregnancy resulted from any form of sexual violence.

• Enforce laws that prohibit schools from excluding pregnant girls from education or pushing them to alternative class schedules against their wishes. Ensure that pregnant students and young mothers who wish to continue their education can do so in an environment free from stigma and discrimination. Facilitate access to formal flexible school programs, such as evening classes or part-time classes, for pregnant girls or adolescent mothers who are not able to attend full-time classes. Ensure students receive full accreditation and certificates of education upon completion.

• Take immediate measures to ensure that all of secondary education is available and accessible to all free of charge.
People take part in a march in Santo Domingo for the decriminalization of abortion in three circumstances: when the life of a pregnant woman is in danger, when the pregnancy resulted from rape, or when the fetus will not survive outside the womb.

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Adolescent Girls’ Sexual and Reproductive Health and Rights in the Dominican Republic

Adolescent girls in the Dominican Republic are being denied their sexual and reproductive rights, including access to safe abortion. “I Felt Like the World Was Falling Down on Me” documents how authorities have stalled the rollout of a long-awaited sexuality education program, leaving hundreds of thousands of adolescent girls and boys without scientifically accurate information about their health. The country has the highest teen pregnancy rate in Latin America and the Caribbean, according to the Pan American Health Organization (PAHO). The country’s total ban on abortion means an adolescent girl facing an unwanted pregnancy must continue that pregnancy against her wishes or obtain a clandestine abortion, often at great risk to her health and even her life. Human Rights Watch urges authorities to carry out a new plan for comprehensive sexuality education and decriminalize abortion to curb unwanted teen pregnancy and reduce unsafe abortion.

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