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COMMISSION ON HUMAN RIGHTS  
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INTEGRATION OF THE HUMAN RIGHTS OF WOMEN AND THE GENDER  
PERSPECTIVE:  
(a) VIOLENCE AGAINST WOMEN

Written statement\*/ submitted by The International League for Human Rights,  
a non-governmental organization in special consultative status

The Secretary-General has received the following written statement which is circulated in accordance with Economic and Social Council resolution 1996/31.

[8 January 2001]

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\*/ This written statement is issued, unedited, as received from the submitting non-governmental organization(s).

1. Five years ago, the Beijing Declaration and Platform for Action affirmed that “[w]omen’s rights are human rights” (paragraph 14). Nonetheless, in many societies, the traditional association of women with family issues—which are often considered matters of private, rather than public or international, concern—can obscure certain widespread violations of women’s human rights. Consequently, some forms of gender-based violence are more visible than others. In recent years, for example, the International Criminal Tribunals for the Former Yugoslavia and Rwanda have uncovered evidence of systematic rapes and other forms of sexual violence perpetrated by Serb and Hutu militias during campaigns of ethnic cleansing and genocide. In the aftermath of decisions like *Akayesu*, ICTR-96-4-T (Sept. 2, 1998), it has become disturbingly clear that a pattern of acts of violence against women can be symptomatic of other large-scale human rights violations directed against an ethnic population, including crimes against humanity and genocide.

2. Outside of the context of armed conflict, however, systematic and discriminatory acts of violence against women may be more difficult to discern. For this reason, we call the Commission’s attention to the pattern of gender-based violence that Tibetan women suffer at the hands of Chinese government officials. This pattern includes forced or coerced sterilizations and abortions, as well as rape and other sexual torture perpetrated against Tibetan women, primarily nuns, as punishment for non-violent political protest. Moreover, these acts take place within the context of a broad and ongoing pattern of human rights violations against the Tibetan people, whose foundational right to self-determination has been denied for the past fifty years, as recognized by General Assembly Resolution 1723 (XVI) (1961) and reaffirmed by Resolution 2079 (XX) (1965). Women’s rights violations in Tibet, including both reproductive rights violations and acts of sexual violence, reflect and in many ways originate in the failure of China’s authorities to permit Tibetans to exercise their right to self-determination. Here, as in the more overt cases in Bosnia and Rwanda, patterns of sexual violence also evince a discriminatory motive.

3. Coerced abortions and sterilizations, as well as intrusive monitoring of women’s reproductive cycles, constitute acts of discrimination that violate Articles 1 and 2 of the Convention on the Elimination of Discrimination Against Women (CEDAW). Article 16(e) of CEDAW specifically guarantees women the rights “to decide freely and responsibly on the number and spacing of their children and to have access to the . . . means to enable them to exercise these rights.” At the Fourth World Conference on Women, the participating governments, including China, recognized and reaffirmed “the right of all women to control all aspects of their health, in particular their own fertility” (Beijing Declaration and Platform of Action, para. 17). To this end, governments agreed to “[e]nsure that all health services and workers conform to human rights and to ethical, professional and gender-sensitive standards in the delivery of women’s health services aimed at ensuring responsible, voluntary and informed consent” and to “eliminate harmful, medically unnecessary or coercive medical interventions” (paras. 107(g)-(h)). China’s 1995 White Paper, “The Progress of Human Rights in China,” however, says

only that the state respects a woman's "right" to "family planning" and her "freedom to choose *not* to give birth."

4. Tibetan women continue to face a systematic policy of medically unnecessary, highly coercive, and often harmful sterilizations and forced abortions, ostensibly justified by China's nationwide population control policies. Ordinarily, the government adheres to a "one family – one child" policy as a means to control China's overpopulation problems. But this policy, at least in theory, applies solely to nationalities whose populations exceed ten million. Only about six million Tibetans live in Tibet. More critically, Tibet has no population problem, and it never has. In fact, prior to 1950, about six million Tibetans lived in Tibet, a region roughly the size of Western Europe. Even today, in the "Tibet Autonomous Region," which covers about forty percent of the region traditionally called Tibet, fewer than 1.6 persons inhabit each square kilometre. Tibet remains one of the *least* populated regions in the world. There is absolutely no justification for China to apply its "family planning" policies in Tibet.

5. Indeed, if the true reason that China forcibly limits Tibetan women's reproductive rights is the government's legitimate concern about Tibet's population density, then it is difficult to understand why China continues to encourage the resettlement of tremendous numbers of ethnic Chinese in Tibet. The pattern of coercive sterilizations and abortions performed on Tibetan women, absent any real justification, constitutes measures imposed to prevent births within the Tibetan national, ethnic, racial and religious group. This suggests an intent to destroy the Tibetan people, in whole or in part, which is a clear violation of China's international obligations under the Convention on the Prevention and Punishment of the Crime of Genocide.

6. Reports indicate that Tibetan women suffer forced sterilizations and late-term abortions at the hands of state healthcare workers. According to the Tibet Information Network (TIN), "a considerable element of coercion is applied to women, particularly in rural areas, through the mechanisms of fines and administrative structures introduced by these officials" ("Increased Restrictions on Birth of Children in Tibet," Feb. 9, 2000). For example, a 61-year-old Tibetan reported that poor women from his village, regardless of the size of their families, were summoned by Chinese authorities to undergo birth control measures. If they refused, the authorities fined them 1000 yuan, approximately two-thirds of the per capita net annual income for the farmers and herders who comprise 85% of the Tibet Autonomous Region's Tibetan population. TIN's source noted that "none of the women could dare refuse," and they were given the choice of "being inserted with loops [IUD], sterilisation, or injection." Tibetans who objected to these procedures—either because of their Tibetan Buddhist religious beliefs or their practical need, as subsistence farmers, for more children to help them survive—were reprimanded for "expressing such discontent" and told they were "defying the policy of the Chinese government," charges that "can lead to severe repercussions."

7. “Racial Discrimination in Tibet,” a recent study by the Tibetan Centre for Human Rights and Democracy (TCHRD), confirms that “sterilisation and forced abortions” have become routine in Tibet. For instance, in the Kanze Tibetan Autonomous Prefecture (a region of the Tibetan province of Kham), one Tibetan described how Chinese authorities visit his village regularly to enforce the birth control policy: “[A]ll the other women in the village who had two children already were ordered to undergo sterilisation regardless of their age or physical condition. They were treated like animals, and given very poor operations. One woman . . . died seven days after she was sterilised.” Tibetan sources also told TIN researchers that Chinese authorities in the Kanze were intensifying birth control to enforce a strict “two child” policy for Tibetan farmers and herders—even though Kanze’s population growth is about one-half that of China as a whole, and its population density is similarly sparse. (“New Birth Control Policies to ‘Help Families Become Richer,’” Feb. 9, 2000)

8. Another Tibetan woman, from the Tsolho Tibetan Autonomous Prefecture in Qinghai Province, was threatened with severe consequences if she refused to abort her second child: “No words have the power to express the excruciating pain I experienced during the operation,” she told TCHRD. “Over 85% of the women worker[s] have to undergo the same torture and excruciating pain.” As her testimony suggests, Tibetan women are subjected to forced, and often late-term (as late as the 7th or 8th month of pregnancy), abortions. These cause them severe pain and are not always performed by experienced healthcare workers or under sanitary conditions. If the women refuse to submit to these procedures, however, their “unauthorized” children are denied education, medical care, ration cards and other state benefits that they would ordinarily receive. Moreover, some reports indicate that Tibetan women have been brought to medical clinics on various pretexts unrelated to their pregnancies and then, without their knowledge or consent, given injections that induce abortions.

9. Tibetan women also face a systematic pattern of gender-based violence for non-violent expressions of their political opinions. According to “Hostile Elements” (1999), a recent report by TIN, about one out of every twenty Tibetan women imprisoned for non-violent political expression die as a result of violence, torture, and other maltreatment. In June 1998, according to another TIN report (“Rukhag 3: The Nuns of Drapchi Prison” (2000)), five Tibetan nuns who had been detained for political protests in the late 1980s and early 1990s reportedly committed suicide after suffering five weeks of severe maltreatment. Security personnel, acting under official orders, had beat the nuns and subjected them to electric shocks with cattle prods: “Electric batons are utilised . . . to torture those under restraint. Sense organs, such as tongue and ears, body cavities and sexual areas, especially on females, have been routine points of application for electric shocks.” In 1999, TCHRD likewise reported that Tibetan women detained for political expression are subject to sexual torture, including “assaults with sticks and electric cattle prods that are forcibly inserted into the vagina, anus and mouth.”

10. Mr. Chairman, Article 1 of the 1993 Declaration on the Elimination of Violence Against Women notes that “the term ‘violence against women’ means any act of gender-based violence that results in, or is likely to result in, physical, sexual, or psychological harm or suffering to women,” and Article 2(d) makes clear that this includes “physical, sexual and psychological violence perpetuated or condoned by the State.” The evidence of gender-based violence in Tibet, including coerced abortions, forcible sterilizations, and acts of sexual torture, reveals a systematic pattern of violence against Tibetan women that is “perpetuated or condoned by the [Chinese] State.” We therefore urge the Commission to adopt a resolution calling on the Chinese government to protect Tibetan women from this pattern of gender-based violence, to take prompt and effective measures to prevent the sexual torture and abuse of detained Tibetan women, and to cease the illegitimate policy and practice of forcibly sterilizing Tibetan women and aborting their children.

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