



Parliamentarians *for Global Action*
Parlamentarios para la Acción Global
Action Mondiale des Parlementaires
برلمانيون من أجل التحرك العالمي

PARLIAMENTARY HANDBOOK

on the Role of **Women Parliamentarians**
in Preventing the Proliferation
of **Weapons of Mass Destruction**





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Preface

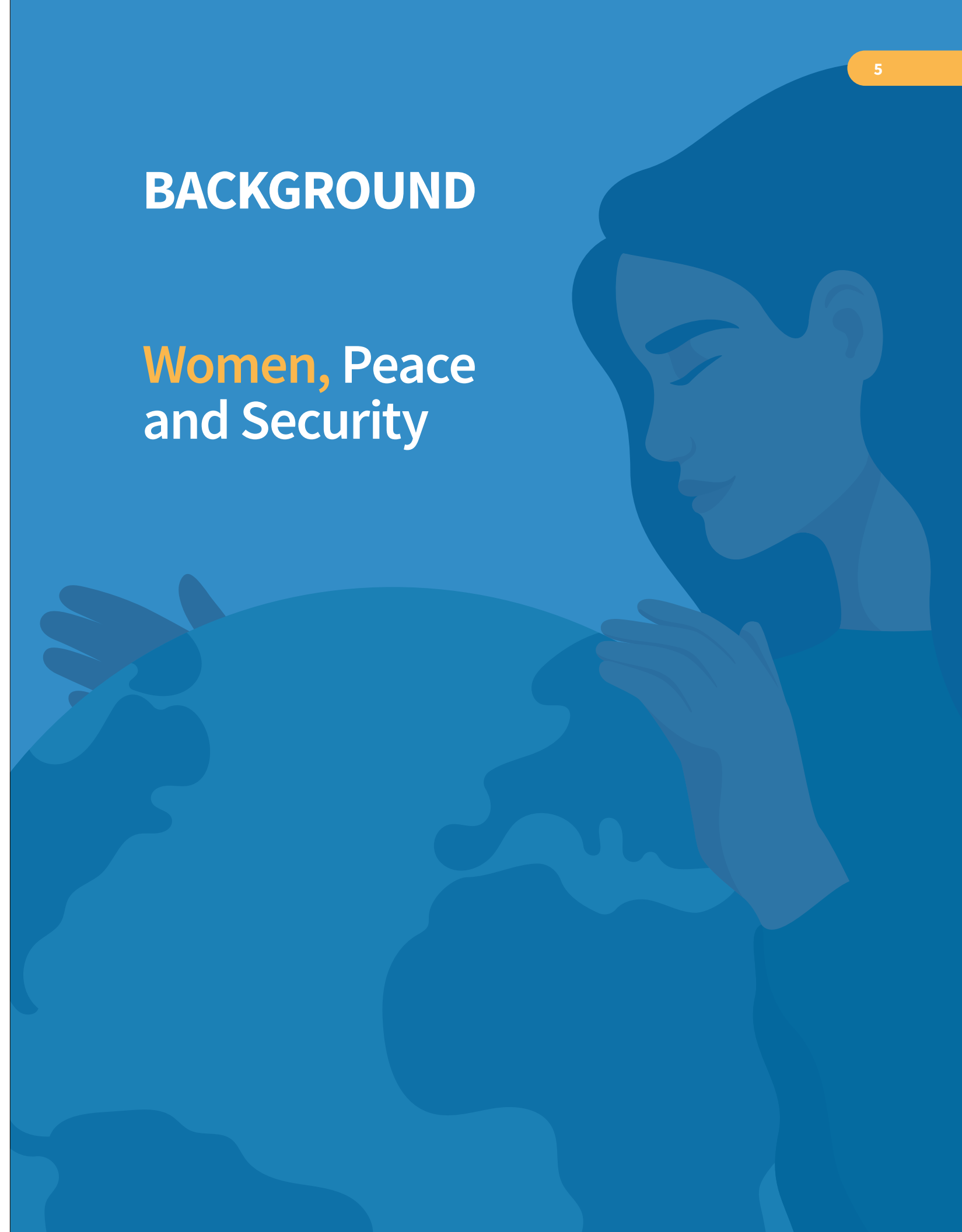
Humanity currently confronts a myriad of serious, sophisticated, and existential threats, perhaps more than has ever been the case in its troubled history. Addressing and resolving these many, different challenges in an effective manner requires the engagement of all those who are affected, directly and indirectly, by such threats. The Covid-19 pandemic, in particular, has provided a timely, and stern, reminder to humanity, not only of its extraordinary fragility and vulnerability, but also a rebuke of its 'business as usual' approach when it comes to confronting risks and threats of the most serious kind. Significant strides forward have been made in engaging greater involvement by women decision and policy makers in the Peace and Security arena, in particular in the past twenty years. But this is a journey which in many ways that has just begun and the path ahead remains a long and challenging one. Many mind sets, fundamentally, remain to be changed and words have too frequently not been matched by concrete actions and deeds.

The purpose of this Parliamentary Handbook on the Role of Women Parliamentarians in the Prevention of Proliferation of Weapons of Mass Destruction (WMD) seeks to highlight why and how Women Parliamentarians can make decisive contributions in pushing back against a threat that has never been more clear and present. It is hoped that this Handbook will (i) encourage those Women Parliamentarians already engaged in the Women Peace and Security space to continue their heroic efforts also in the WMD arena (ii) encourage a new generation of Women Parliamentarians also to respond to the urgent need for more voices of women to be heard in this field and (iii) just as importantly, persuade *all* Parliamentarians of the imperative and urgent necessity of building-on, consolidating, and securing progress made to date.

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BACKGROUND

Women, Peace and Security



1995 – The Beijing Action Plan

In 1995, the Beijing Action Plan was adopted at the United Nations, paving the way, through Objective 5: “Combat the effects of armed conflict on women,” to better identifying the role of women in conflict prevention.

During the 1990s, civil society became increasingly concerned about the negative impacts of conflict on women, in particular in the context of the sexual violence that took place during the conflicts in Bosnia, West Africa and Rwanda. Activists around the world were particularly concerned that women were not only among the first victims but also took notice of their wide absence from subsequent peace talks tables. Accordingly, civil society groups made essential contributions to the 1995 Beijing Action Plan towards advancing the role of women in peace and security issues.

Objective 5 of the Beijing Action Plan (1995)

OBJECTIVE 1

Broaden women’s participation in conflict resolution at the decision-making level and protect women living in armed and other conflict situations or under foreign occupation.

OBJECTIVE 2

Broaden women’s participation in conflict resolution at the decision-making level and protect women living in armed and other conflict situations or under foreign occupation.

OBJECTIVE 3

Promote non-violent forms of conflict resolution and reduce human rights violations in conflict situations.

OBJECTIVE 4

Promote women’s contribution to the development of a culture of peace.

OBJECTIVE 5

Provide protection, assistance and training to refugee women, other displaced women in need of international protection and internally displaced women.

OBJECTIVE 6

Provide assistance to women in the colonies and non-self-governing territories.


2000 – Adoption of UN Security Council Resolution 1325 (2000)

The consequences of conflict are far-reaching devastating, including in the context of gender equality. Women often have fewer means than men to protect themselves. Together with children, women also generally constitute the majority of refugee or displaced persons populations as well as frequently finding themselves as targets of war-time tactics such as sexual violence. Although women are frequent leaders of peaceful movements and initiators of post-conflict community recovery within their respective countries, they are often excluded from formal peace negotiations – nationally, regionally and on the international stage. As a result, women are less likely to be able to resume everyday, post-conflict lives, obtain justice for violations of their human rights nor be able to make decisive contributions in ensuring the sustainability and success of negotiated peace accords.

In 2000, the United Nations Security Council unanimously adopted the historical [Resolution 1325 “Women, Peace and Security”](#), the first UN Security Council Resolution obliging different parties to a conflict to respect women’s rights, as well as calling for the participation of women in peacebuilding, better protection of women and their access to justice and anti-discrimination services.

Subsequent Commitments



The UN Security Council has pursued this commitment by adopting other resolutions under the title “Women, Peace and Security”, allowing for the establishment of a relatively comprehensive institutional framework, combining relevant international instruments:

 **Resolution 1820 (2008)** calls on all States to adopt special measures in order to protect women and girls from sexual violence in armed conflict and to ensure access to justice and assistance to victims. It also calls for an increase in the number of women in peacekeeping forces. It invites the UN to develop mechanisms in the Disarmament, Demobilisation and Reintegration and Security Sector Reform (DDR-SSR) processes in order to protect women against violence, in consultation with women and women’s organisations.

-  **Resolution 1888 (2009)** calls for the inclusion of sexual violence issues in peace processes and disarmament, demobilisation and reintegration and security sector reform agreements and urges judicial reforms to end impunity and ensure victims' access to justice.
-  **Resolution 1889 (2009)** calls on all States to include women in peacebuilding and political and economic decision-making. The Resolution also calls for the integration of a gender perspective in post-conflict processes, the funding and programming of women's empowerment activities and the adoption of concrete strategies in law enforcement and justice to address the needs and priorities of women and girls.
-  **Resolution 1960 (2010)** encourages the Secretary-General to provide, in his reports, detailed information on belligerents suspected of having committed acts of sexual violence.
-  **Resolution 2106 (2013)** calls on all actors to implement previous resolutions and to combat impunity for crimes committed against women.
-  **Resolution 2122 (2013)** reiterates the importance of the implementation of previous resolutions and invites the Secretary-General of the United Nations to commission a global study on the implementation of UNSCR 1325, highlighting shortcomings and difficulties in implementation, new trends and priority areas for action.
-  **Resolution 2242 (2015)** focuses on the role of women in the fight against violent extremism and terrorism, improves the working methods of the Security Council on women, peace and security.
-  **Resolution 2467 (2019)** encourages the Member States to strengthen their legislation to hold perpetrators of sexual violence accountable.
-  **Resolution 2493 (2019)** calls upon the Member States to fully implement the provisions of all previous resolutions and to intensify their efforts in this regard.
-  **Resolution 2538 (2020)** calls upon the Member States, the United Nations Secretariat and regional organisations to strengthen their collective efforts to promote the “full, effective and meaningful” participation of military and civilian women in peacekeeping operations at all levels and in all functions, including at senior levels.

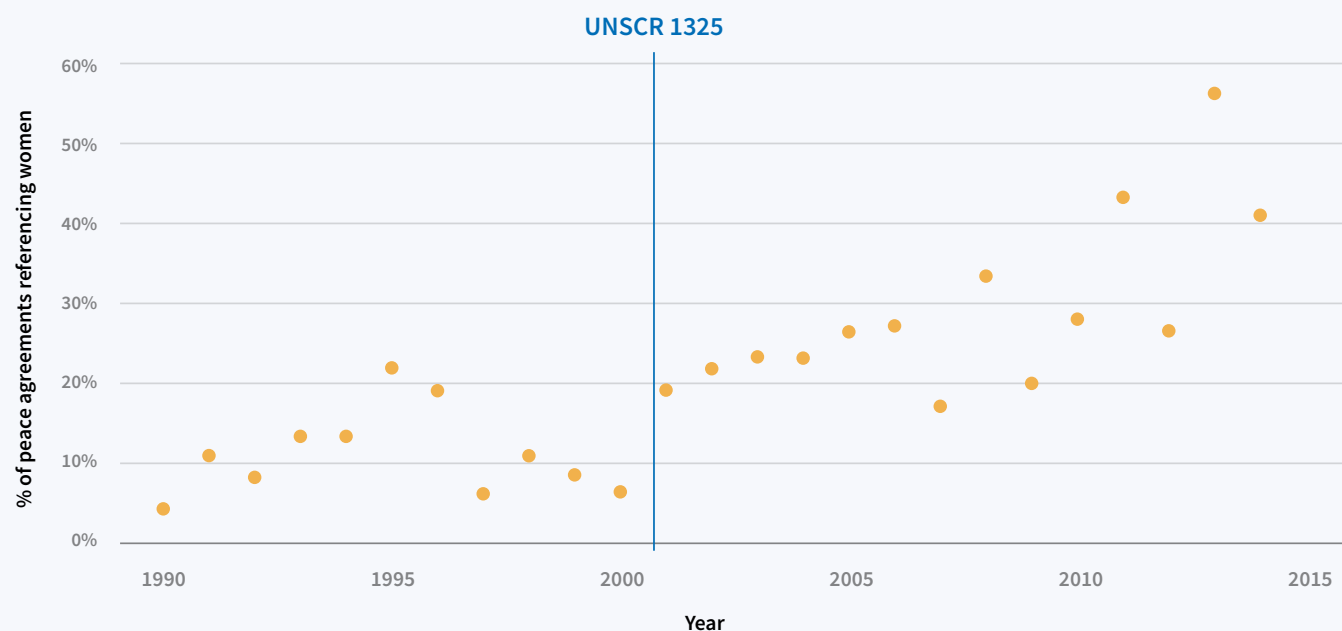
The UN Disarmament Agenda

In 2018, UN Secretary General António Guterres launched [Securing our Common Future: An Agenda for Disarmament](#) defining a vision of disarmament actions based on four pillars, two of which have a particular relevance in the context of this Parliamentary Handbook:

-  **“Disarmament that saves humanity”** focusing on weapons of mass destruction.
-  **“Strengthening partnerships for disarmament”** ensuring the participation and inclusion of women, youth, civil society and the private sector in arms control processes.



Source: UN, <https://www.un.org/disarmament/sg-agenda/en/>

Graph 1**Percentage of peace agreements including at least one reference to women (1990 to October 2000 and November 2000 to 2015)**Source: unwomen.org

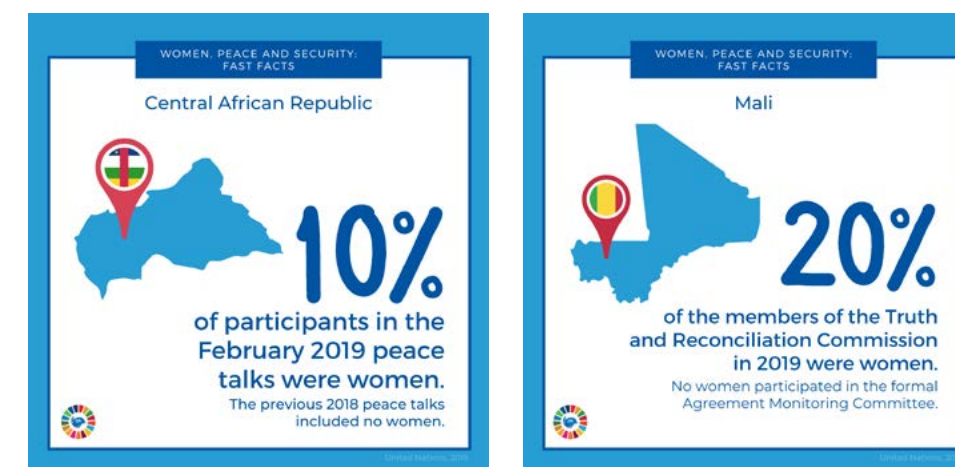
We invite you to consult an overview of the action plans of each of the 86 countries (in 2020), carried out by the organization *Security Women*, by clicking below.

[National Action Plans of the 86 countries](#)

**Implementation of the Resolutions**

UN Member States have implemented the principles of the Resolution by drawing up National Action Plans. This process helps the Member States to identify priorities and resources, determine their responsibilities and encourage government action. These are essential elements in the implementation of the resolutions. By October 2020, 86 countries had created National Action Plans. In many cases, Member States have prepared second or third versions.

Despite the sharp increase in the number (in percentage terms) of peace agreements that include at least one reference to women, from less than 5% in 1990 to almost 60% in 2014 (see graph above), work is still needed. As shown in graph 2, the participation of women in multilateral disarmament meetings at the UN remains far below those of men.



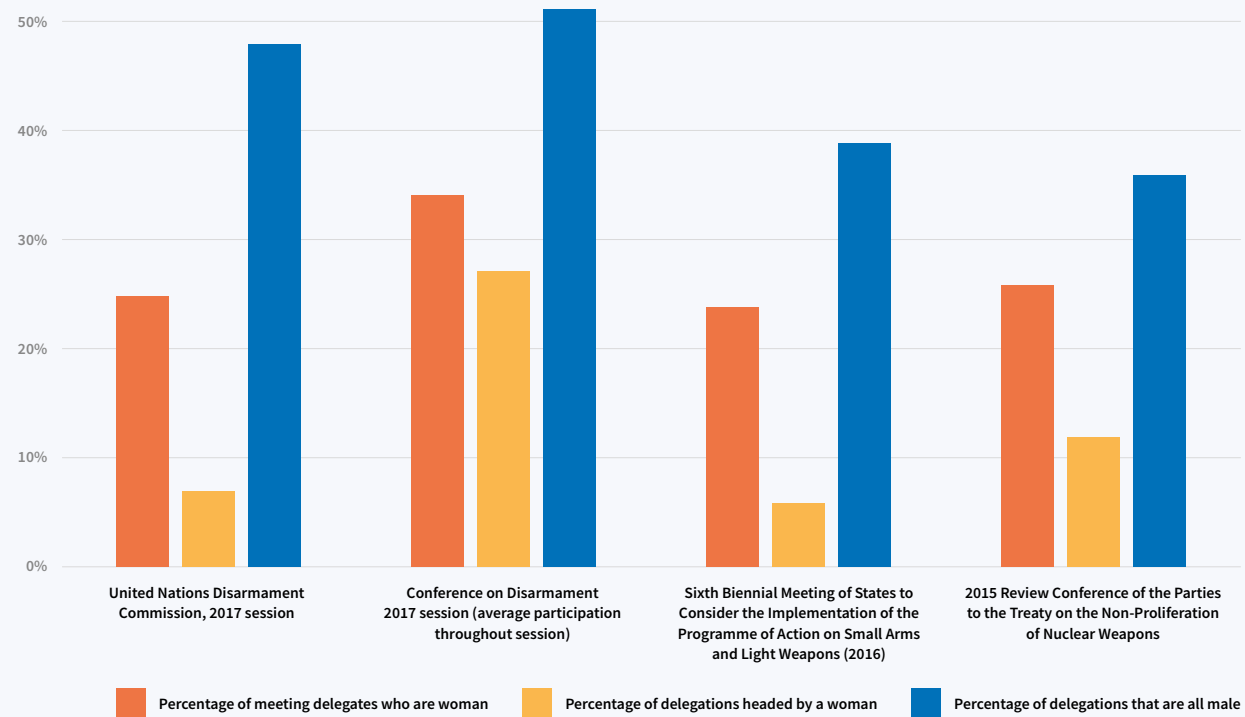
Source: UN

The evidence is unequivocal: when women are at the negotiating table, peace agreements are more likely to last 15 years or more. Yet women represented only 13% of negotiators, 6% of mediators and 6% of signatories to major peace processes between 1992 and 2019. In conflict-affected countries, women's representation in COVID-19 task forces is only 18%.

In addition, threats to the tentative progress made to date are never far from the surface. In October 2020, a draft Resolution was submitted within the UN Security Council which, if adopted, would have had a very negative impact on hard-fought for gains made to date. Fortunately, with the abstention of 10 UN Security Council Members, the draft resolution in question failed to garner the 9 affirmative votes required in order for it to be adopted.

Graph 2**Participation of women in multilateral disarmament meetings at the United Nations**

Source: UN, <https://unoda-epub.s3.amazonaws.com/i/index.html?book=sg-disarmament-agenda.epub>



The impact of Weapons of Mass Destruction on Women

A large number of scientific studies have been carried out to date, including in the context of the impact of the nuclear explosions in Hiroshima and Nagasaki, Japan, in 1945 as well as on nuclear testing during the Cold War period.

Impacts on physical health

With regard to nuclear weapons, scientific researchers have conclusively established that women have a much higher risk of developing cancer than men when exposed to the same level of ionising radiation. The instantaneous effects of the explosion of such weapons, i.e. the blast and heat, the flash of light (which can seriously damage eyesight and cause burns over several kilometres), affect everyone, men, women and children, without distinction. Depending on the altitude of the explosion of the nuclear weapon, the fallout from the radioactive particles on the ground contaminate the region and pose health risks over extended periods of time.

According to the UNIDIR¹ women are also more adversely affected by ionising radiation than men because women have 50% more high-risk body tissues (sensitive reproductive and adipose tissue), as well as differences in metabolism. A study on the life expectancy of survivors of the 1945 nuclear-weapon attacks in Japan found that the risk of developing and dying from cancer due to exposure to ionising radiation was about twice as high for women as for men. Gender-specific cancers, such as breast cancer in women, appear to be the main reasons for the increased risk for women.

Women's reproductive health is susceptible to the effects of emitted radiation. In the Marshall Islands, where numerous nuclear tests were conducted by the United States (67 nuclear detonations between 1946 and 1958), it was found that women living downwind had a high stillbirth rate and that some newborns were born without bones, with severe deformities such as transparent skin or with displaced organs. Studies of those exposed to the Chernobyl incident in 1986 also show that radiation is responsible for a significantly higher level of thyroid cancer in women. In addition, high doses of ionising radiation poses a risk to pregnant women as it creates threats of harm to their children such as malformations, spontaneous abortions and stillbirths. Fetuses are also vulnerable because they have no protective mechanisms to metabolise or protect themselves against weapons of mass destruction. Leukaemia rates were much higher for those exposed *in utero* than for others. A similar conclusion was drawn by a study analysing the effects

¹ <https://www.unidir.org/files/publications/pdfs/gendered-impacts-en-620.pdf>

Ionising radiation

Ionising radiation can harm the human body in two ways.



They can burn cells directly by radiation or by an acute radiation syndrome. These types of “deterministic” effects are observable in victims of nuclear detonation immediately or shortly after exposure.



Ionising radiation can cause DNA mutations such as cancers and cause genetic changes (stochastic effects). If the mutations are not repaired, the cell may become cancerous. These “stochastic” effects are generally observed over time, up to several years after exposure to radiation.

Total number of nuclear tests between 1945 and 2017

1030 United States

715 Soviet Union

45 Great Britain

210 France

45 China

3 India

2 Pakistan

6 North Korea



of Agent Orange (a chemical weapon) on the reproductive life of women in Vietnam². Exposed women had a high number of miscarriages and premature births. About two thirds of their children had congenital disabilities or developed disabilities in the first years of life. According to another report³, following the chemical attack in Eastern Ghouta, Syria, data collected from 211 pregnant women who visited Al Ghouta Hospital in September, October and November 2014 suggest a miscarriage rate of 45% among the exposed group, compared to 14% among unexposed women. In addition, the World Health Organization (WHO) has reported that the Ebola virus is associated with a high rate of obstetric complications and poor maternal and perinatal outcomes, with neonatal mortality approaching 100%. The WHO estimated that “women accounted for 62% (280/450) of all cases where sex was reported”⁴. As the graph below shows, women were more represented in the number of people infected with the Ebola virus in the Democratic Republic of Congo (DRC). One possible explanation for this is that women in this region are more likely to play the role of caregivers and therefore, more likely to be exposed to biological agents.

2 TN, Johansson A. Impact of chemical warfare with agent orange on women's reproductive lives in Vietnam: a pilot study. *Reprod Health Matters*. 2001 Nov; 9(18): 156-64. doi: 10.1016/s0968-8080(01)90102-8. PMID: 11765392

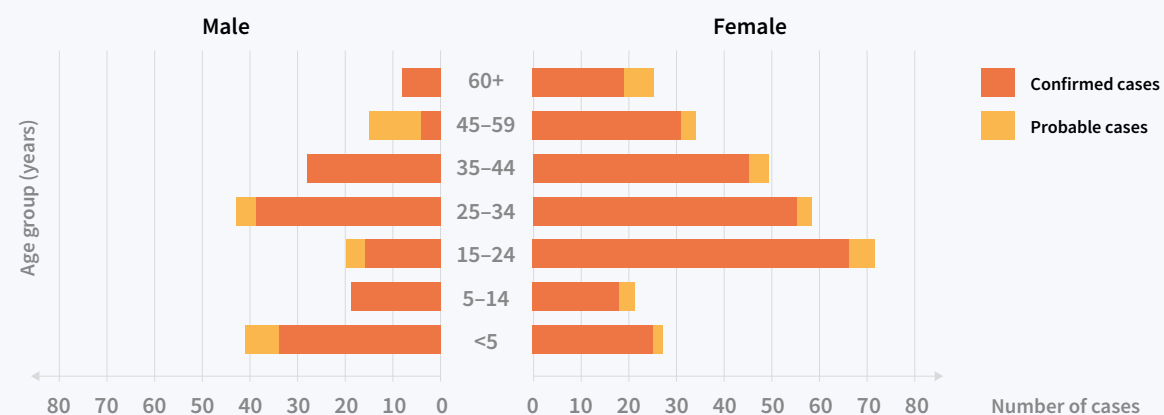
3 <https://www.unidir.org/sites/default/files/2019-11/Missing%20Links-3.pdf>

4 <https://www.who.int/csr/don/06-December-2018-ebola-drc/en/>

Graph 3

Confirmed and probable cases of Ebola infection by sex and age group as of 4 December 2018 in DRC

Source: OMS



There is also a risk of contamination through breastfeeding. In the 1960s, traces of strontium-89 and strontium-90 were found in breast milk, which could then be transmitted to new-borns. Another risk is that in the manufacturing process of most vaccines, including vaccination against agents used in biological warfare, the sample of subjects used is predominantly male, which does not allow for improved protection of women.

Psychological impacts

Invisible contamination, either by a radiological, biological or chemical agent, can have traumatic psychological effects. Lack of information and uncertainty about health risks can become a source of stress. Evidence exists that these psychological impacts may be more severe for women, due to their role as mothers. According to a study by Bromet⁵, mothers experienced a prevalence of mental health problems after the nuclear incidents of Three Miles Island and Chernobyl. Indeed, preliminary data from Fukushima suggest that mothers of young children are at greater risk of depression, anxiety, psychosomatic and post-traumatic symptoms, both because of the fear of invisible contamination but also because of social stigma. Similarly, in the aftermath of the nuclear weapons tests in the Marshall Islands, women have reported suffering from shame and stigma, fearing that radiation will continue to compromise successive generations.

Evacuation and Displacement and Access to Health Care

Potential contamination from weapons of mass destruction such as biological, nuclear, radiological or chemical weapons can lead to prolonged or short-term population displacement. In conflict situations, women and girls are more vulnerable to domestic violence, rape, forced prostitution and other crimes that disproportionately target women and make women dependent on others for help and safe passage. Women also have less access to protection and assistance and are likely to face adversity in exercising their rights to health, housing, property, exacerbating existing patterns of discrimination. This can also have long-term effects on psychological and physical health. The WHO reports that complications of pregnancy and childbirth kill an estimated 287,000 women each year, making it the second leading cause of death for women of reproductive age.

5 Bromet, Evelyn & Gluzman, Semyon & Schwartz, Joseph & Goldgaber, Dmitry. (2002). Somatic Symptoms in Women 11 Years after the Chernobyl Accident: Prevalence and Risk Factors. *Environmental health perspectives*. 110 Suppl 4. 625-9. 10.1289/ehp.02110s4625.

The World Health Organization reports that complications of pregnancy and childbirth kill about 287,000 women each year (303,000 in 2015), making maternal deaths the second leading cause of death among women of reproductive age. If the hospital and health care infrastructure are damaged or inaccessible due to the use of weapons of mass destruction, this threat to women's health could be exacerbated. Reduced access to reproductive health can be a death sentence for women in countries where, even in times of peace, the risk of dying from pregnancy is incredibly high. As a World Bank report reminds us, "A total of 4,022 women are at risk of dying each year in Guinea, Liberia and Sierra Leone, exclusively as a result of the 'legacy' of the Ebola epidemic that killed more than 11,000 people, including many doctors and nurses"⁶ and adds that "the mortality of women in pregnancy or childbirth could increase by 111% in Liberia, 74% in Sierra Leone and 38% in Guinea, even if these countries were 'declared Ebola-free'".

Social Stigma and Discrimination

Survivors of mass destruction attacks also face social stigma. This was the case, for example, of the Japanese survivors of the bombings of Hiroshima and Nagasaki. They were considered "contaminated" and were treated with fear and suspicion by Japanese society, hence their name, Hibakusha (被爆者). Some people believed that the Hibakusha were suffering from congenital diseases, that the radiation was contagious or, according to some sources, because of their association with Japan's defeat in the war. Women, in particular, were discriminated against compared to men and had difficulty marrying, as members of society often thought they would give birth to malformed babies. Hibakusha women also had a high suicide rate. A study of female landmine survivors⁷ shows that women are at greater risk of being similarly stigmatised and marginalised by their husbands because of their injuries. It is therefore widely believed that injuries or disfigurements due to the effects of chemical, bacteriological or nuclear weapons have a very similar impact. The 1984 Bhopal tragedy (explosion of a pesticide factory in India) demonstrated that, in addition to the deaths and injuries directly attributed to the accident, exposure to chemical agents made women more vulnerable to abuse by their husbands, mainly because they were less able to perform certain domestic activities.

⁶ <https://www.24heures.ch/monde/mortalite-maternelle-hausse-ebola/story/19913292>

⁷ <https://www.oecd.org/social/gender-development/1896552.pdf>

Case Studies from Guinea Bissau, Central African Republic and Zimbabwe

Women Parliamentarians can make decisive contributions in promoting the prevention of the proliferation of Weapons of Mass Destruction. Further information and details of the precise contributions made by the PGA Members of Parliament included in the 3 Case Studies here can be viewed by clicking on the links contained in each Case Study.

Central African Republic / Hon. Béatrice Epaye

- 👉 **3 July 2018** – Ratification of BWC
- 👉 **28 September 2018** – CAR becomes the 182nd State Party
- 👉 **27 August 2019** – The 1540 Committee received the First National Report from the CAR



Guinea Bissau / Hon. Dr. Suzi Barbosa

- 👉 **22 March 2018** – The Ministry of Foreign Affairs of Guinea Bissau has produced the first National Report in reference to the United Nations Security Council Resolution 1540 (2004)
- 👉 **25 September 2019** – Guinea Bissau submits First Report to UN Security Council Committee 1540 (2004)



Zimbabwe / Hon. Dorcas Sibanda

- 👉 **19 June 2019** – Hon. Dorcas Sibanda, MP asks the Minister of Justice, Legal and Parliamentary Affairs about the BWC implementation bill





Recommendations

Research and access to information

- ✓ Further research is needed with a particular focus on the characteristics of the damage caused to women by weapons of mass destruction.
- ✓ Provide better training on gender mainstreaming in the fight against the proliferation of weapons of mass destruction and improve the dissemination of knowledge to strengthen existing policies and laws.
- ✓ Develop expertise among women in the technical field of WMD control. More women could be encouraged to develop professional knowledge in the technical field related to weapons of mass destruction and the political skills involved in WMD negotiations.

Women's participation in regional and international fora

- ✓ Increase women's participation at all levels of decision-making on issues of international peace and security.
- ✓ Involve women more equitably as technical experts in discussions on weapons of mass destruction.
- ✓ Involve women parliamentarians more broadly in the maintenance of regional and international peace and security, including the prevention of the proliferation of weapons of mass destruction. In May 2019, PGA organized a [Parliamentary Workshop to Promote Women Parliamentarians in Africa in Preventing the Proliferation of Weapons of Mass Destruction](#) in the National Assembly of The Gambia in Banjul. At the conclusion of the Workshop, the Banjul Plan of Action was adopted which facilitated the taking of additional concrete steps by participants in this Workshop upon return to their respective Parliaments.

National Action Plans

- ✔ Fully implement United Nations Security Council Resolution 1325 (2000) and successive related Resolutions.
- ✔ Seek the participation of women from diverse backgrounds, and not just those living in capital cities, to ensure that the security needs of women and girls as a whole are addressed.
- ✔ Women Parliamentarians should be encouraged to participate in larger numbers in National Defence and Security Committees of their respective National Parliaments than has been the case to date. The insights and experience of Women Parliamentarians in the health space can also make vital contributions leading to better informed decision-making in these Parliamentary Committees.
- ✔ Ensure that Ministries of Finance are involved in the processes from the outset to provide support for budgeting and costing.
- ✔ Ensure buy-in and understanding of these issues at all levels of government.
- ✔ Reform institutional regulations to open up more positions for women in security and defence institutions.

Conclusion

Women parliamentarians are key actors in promoting the role of women in the field of international peace and security – at the national, regional and international levels. This reality also extends to the area of combating the threats posed by weapons of mass destruction, on account of their devastating, disproportionate impact on women. Since 2000, the role of women in peace and security issues has been steadily increasing, but still falls well short of what is needed. It is hoped that this Parliamentary Handbook will encourage more Women Parliamentarians worldwide to engage more pro-actively in this arena and that *all* Parliamentarians and other policy and decision-makers will take the necessary steps to facilitate this process, in the best interests of humanity as a whole.



