

# AMNESTY INTERNATIONAL

## Media Briefing

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## **Peru: Poor and excluded women – denial of maternal and infant health Facts and Figures**

### **Internal armed conflict**

The internal armed conflict in Peru (1980 - 2000) confronted the Peruvian State and the armed opposition groups Shining Path and the Movimiento Revolucionario Tupac Amaru (MRTA).

23,969 people were killed or “disappeared” during the conflict – 79% came from rural areas and 56% were peasants (Peruvian Truth and Reconciliation Commission, 2003).

85% of victims of human rights violations during the conflict were poor (Peruvian Truth and Reconciliation Commission, 2003).

### **Access to health today**

Around 25% of all Peruvians (around 6,500,000 people) do not have access to primary health attention (National Health Survey, 2000).

Most of the health budget is spent on richer areas – in 2005 around US\$51 per capita was given to areas with richer populations and US\$24 per capita to areas with high levels of poverty (CIES, 2005).

Lima, the richest city in the country, has 22 doctors, 11 nurses and 3 obstetricians for every 10,000 people. Huancavelica, one of the poorest cities of the country, has 4 doctors, 3 nurses and 2 obstetricians for every 10,000 people (INEI, 2003).

50% of Peru's population doesn't have access to medicines – 60% in rural areas (Pan-American Health Organization, 2002).

49% of the Peruvian population lives in poverty – 70% in rural areas (UN Special Rapporteur on Right to Health, 2004).

25% of the Peruvian population (around 6.8 million) lacks drinkable water – 40% in rural areas (National Ombudsman, 2005).

### **Women**

410 out of every 100,000 women who give birth die during labour. This figure is surpassed only by Haiti, Guatemala and Bolivia -- the three poorest countries in the Americas (World Health Organization, 2004).

One woman dies in Peru every 8 hours due to birth complications (II National Health Conference, 2005).

Twice as many women die in poor areas across Peru due to birth related complications (Ministry of Health, 2005).

Most deaths of women and children – particularly those caused by labour complications, infections, and in the case of children by malnutrition and diarrhoea -- could have been easily prevented by adequate medical care.

90% of indigenous women living in communities in the district of Río Santiago, Amazonas department prefer to give birth at home due to traditional beliefs and practices (Binational development Plan survey).

### **Children**

In Lima, Peru's richest city, 17 out of every 1,000 children born alive died at birth. In the country's poorest areas, the number rises to 89 of out every 1,000 (INEI, 2000).

45% of deaths across the country are of children under 5 years old (II National Health Conference, 2005).

25% of children under 5 have chronic malnutrition – between 75 and 80% in rural areas (Ministry of Health, 2002).

### **Health services**

In 2002, the Peruvian government created the Seguro Integral de Salud (SIS) (Integral Health Insurance) in order to guarantee basic health services for impoverished sectors of the population.

At the end of 2005, the Peruvian state adopted the first Human Rights Programme which included the issue of health as one of its priorities.

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