

REPUBLIC OF COLOMBIA

TOTAL
POPULATION^I

51,959,220

POPULATION 24 YEARS OR YOUNGER^I

37.21%

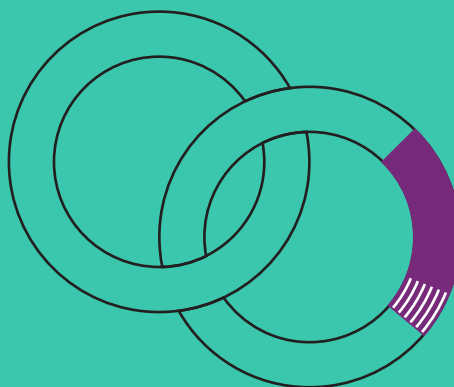
WOMEN OF REPRODUCTIVE AGE
(15-49 years)^I

14,018,940

POPULATION 15-24 YEARS
(male + female)^I

8,300,120

WOMEN (20-24 years) WHO WERE
FIRST MARRIED OR IN UNION^{II}



BEFORE
AGE 18

23.4%

BEFORE
AGE 15

4.9%

MATERNAL MORTALITY RATIO

83

(per 100,000 live births)^{II}

100,000



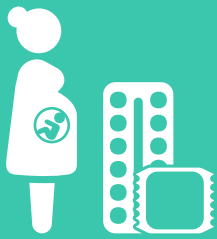
TOTAL FERTILITY RATE^I (births per woman)

1.69

ADOLESCENT BIRTH RATE^I (15-19 years)
(births per 1000 girls)

56.94





5.5% UNMET NEED
FOR FAMILY PLANNING
(all women) ^{III}

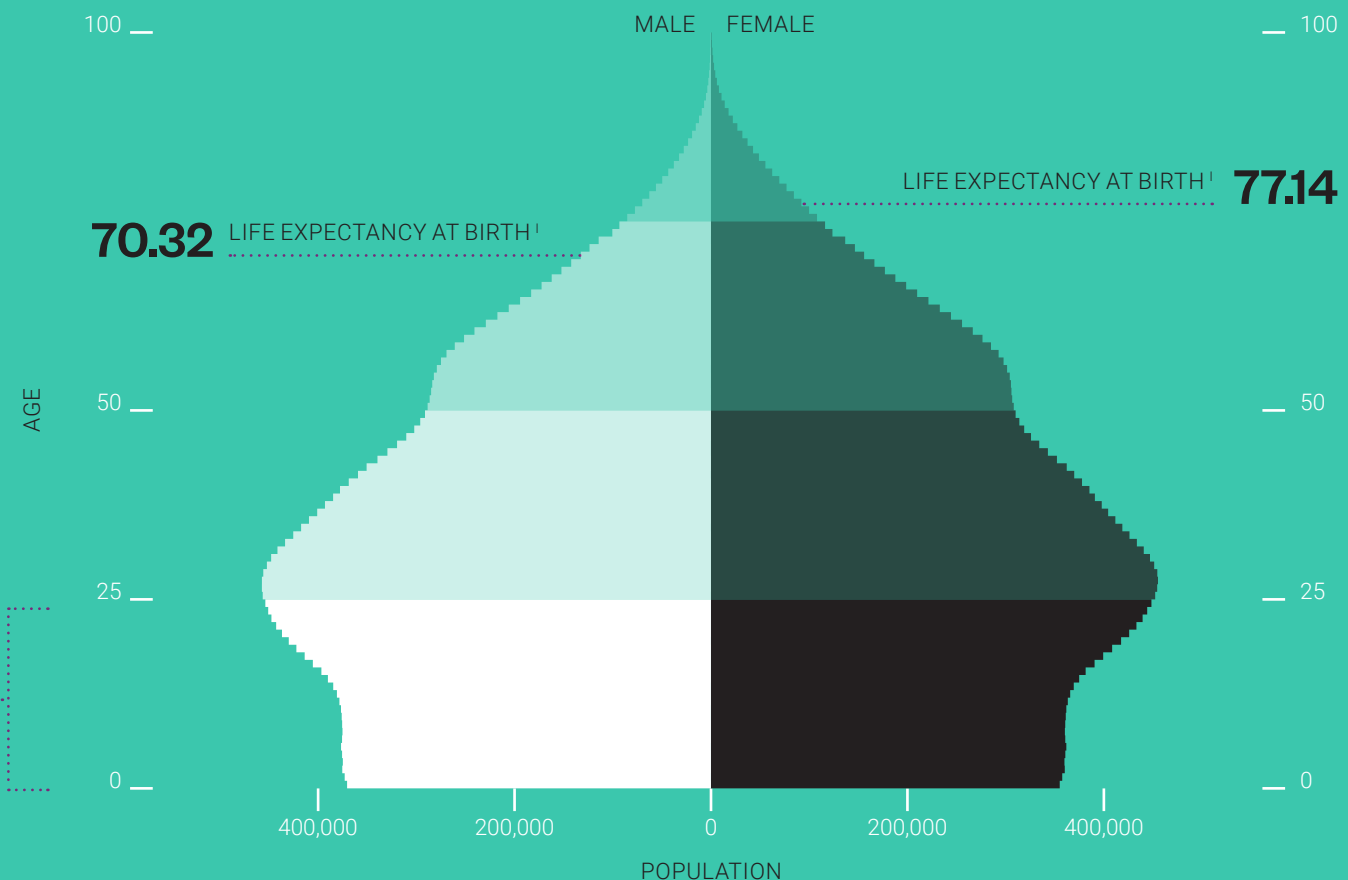


87% DEMAND FOR FAMILY
PLANNING SATISFIED WITH
MODERN METHODS (all women) ^{III}



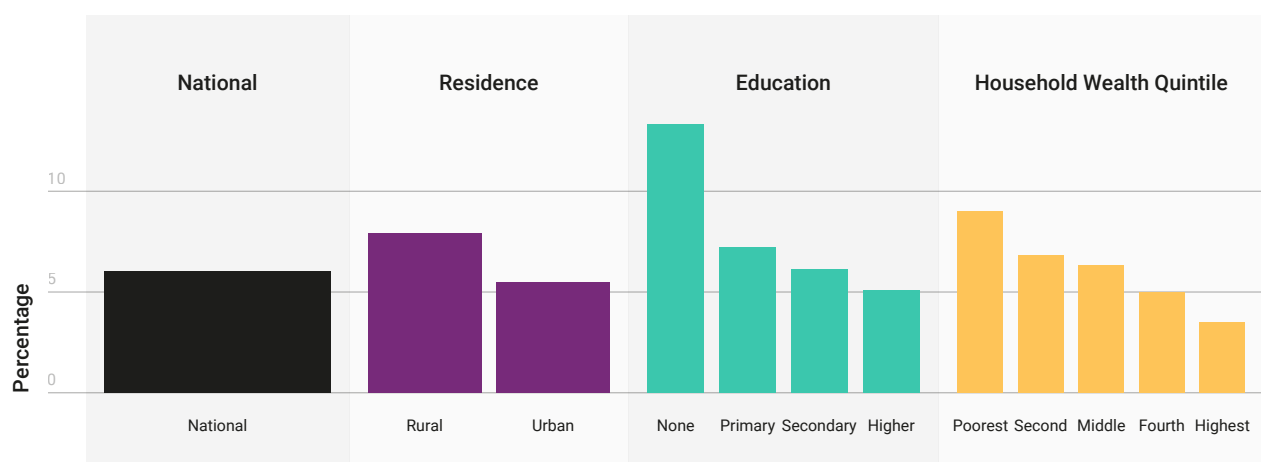
98.8% DELIVERIES
ATTENDED BY SKILLED
HEALTH PERSONNEL ^{II}

At the Nairobi Summit, the Republic of Colombia has committed to accelerate the reduction of preventable mortality and severe maternal morbidity in rural and dispersed areas. Colombia has committed to advocating for the full application of the **right to abortion** and to guaranteeing it as a health service.



In 2022, Colombia's total fertility rate (TFR) – the number of children that would be born to a woman if she were to live to the end of her childbearing years – is 1.69. Unmet need for family planning is 1.5 times higher among rural women than urban women, and is almost three times higher among women with no education compared with women with higher education. It is also highest among women living in the poorest households, and decreases with household income.

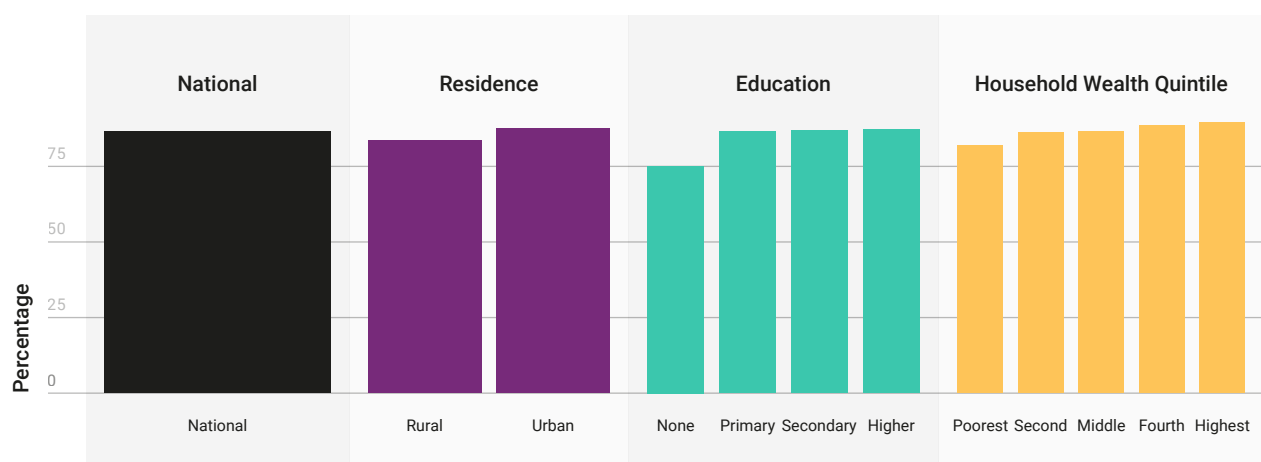
Unmet Need for Family Planning, All Women



Source: Demographic and Health Survey, 2015

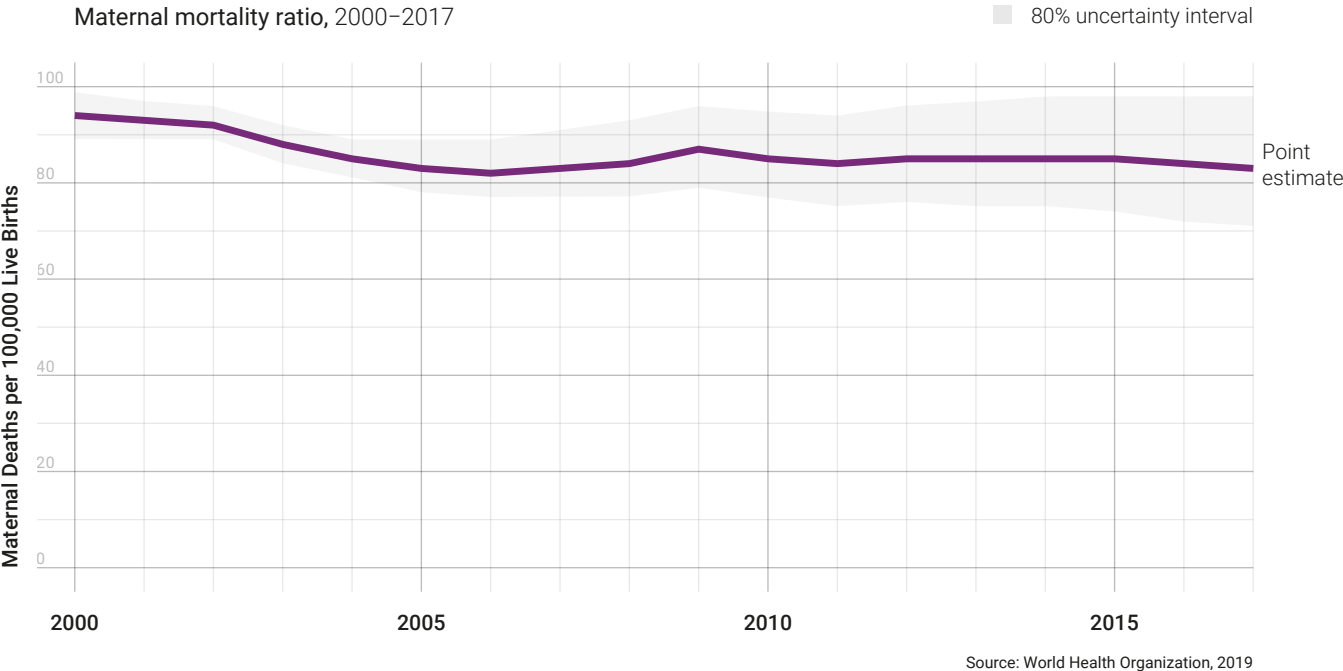
Based on the latest available data, 87% of married and in-union women had their demand for family planning satisfied by modern methods. This percentage is higher in urban areas, among women with primary and more education, and increases with household wealth.

Demand for Family Planning Satisfied with Modern Methods, All Women



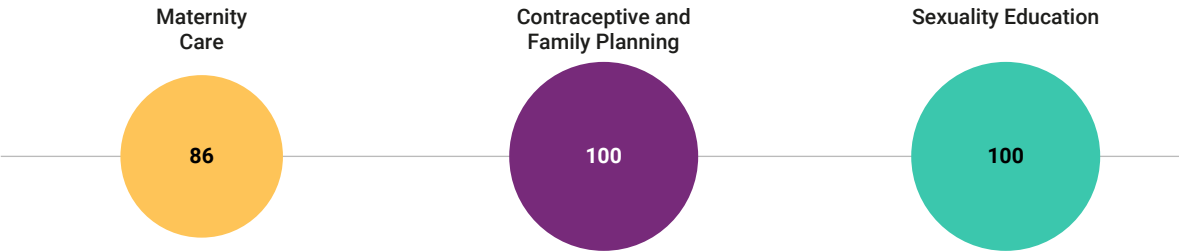
Source: Demographic and Health Survey, 2015

Colombia’s maternal mortality ratio has reduced slightly from 2000 to 2017 when it was estimated to be 83 deaths per 100,000 live births. Recognizing the impact of unsafe abortion on maternal deaths, Nairobi Summit Commitment 3 highlights the integration of “a comprehensive package of sexual and reproductive health interventions, including access to safe abortion to the full extent of the law, measures for preventing and avoiding unsafe abortions, and the provision of post-abortion care into national UHC strategies, policies and programmes, and the need to protect and ensure all individuals’ right to bodily integrity, autonomy and reproductive rights, and to provide access to essential services in support of these rights”. In February 2022, Colombia’s Constitutional Court ruled that abortion is no longer a crime before 24 weeks of pregnancy.



SDG 5.6.2 reflects the extent to which prevailing laws enable or disable women and men’s full and equal access to health and rights. On average, Colombia has achieved 97% of enabling laws and regulations that guarantee full and equal access to women and men to sexual and reproductive health care, information and education.

Extent to which Colombia has laws and regulations that guarantee full and equal access to women and men aged 15 years and older to sexual and reproductive health care, information and education



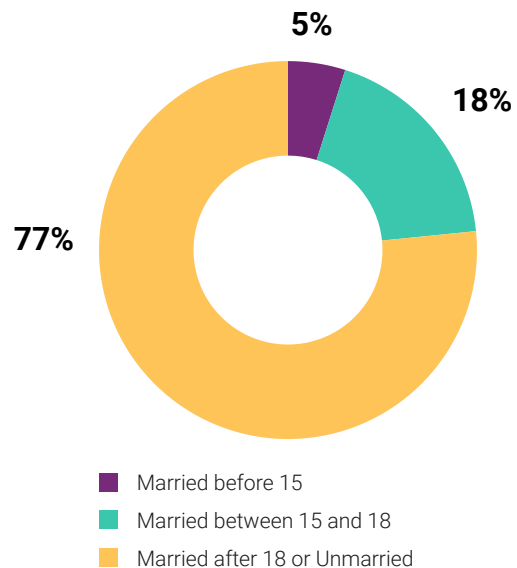
Source: United Nations Population Fund, 2022

Colombia has committed to accelerated and effective actions to improve the health of adolescents and young people, as well as to promote concrete actions in favor of girls and women so that they can freely choose what they want to be or do in their lives. Colombia's Development Plan 2018-2022 includes a central pact for equality for women and girls. The country has committed to eliminating harmful practices including child marriage and early unions as well as all forms of violence against girls and women through territorial, institutional and community strategies.

In Colombia, data from the latest available survey indicate that 23% of women 20 to 24 years were married before age 18 years. This percentage is higher in rural areas (39%) compared with urban areas (19%).

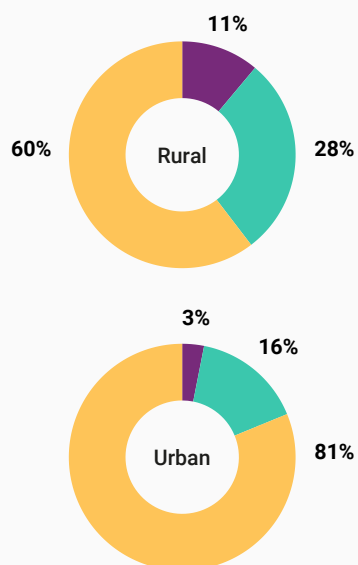
Approximately 62% of women who were married before age 18 had no education or only primary education. The percentage of those women married before the age 18 decreases with level of education – in particular the percentage of those married before age 15. 43% of women who were married before age 18 were from the poorest households; most women married before the age of 18 were from the poorest and second poorest households, with the percentage of marriage before the age of 18 decreasing with household wealth.

Age of Marriage Distribution, Women 20–24

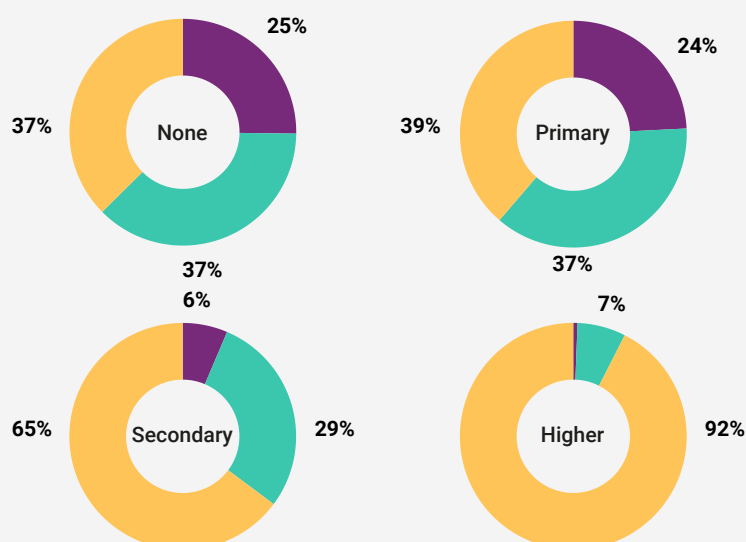


Source: Demographic and Health Survey, 2015

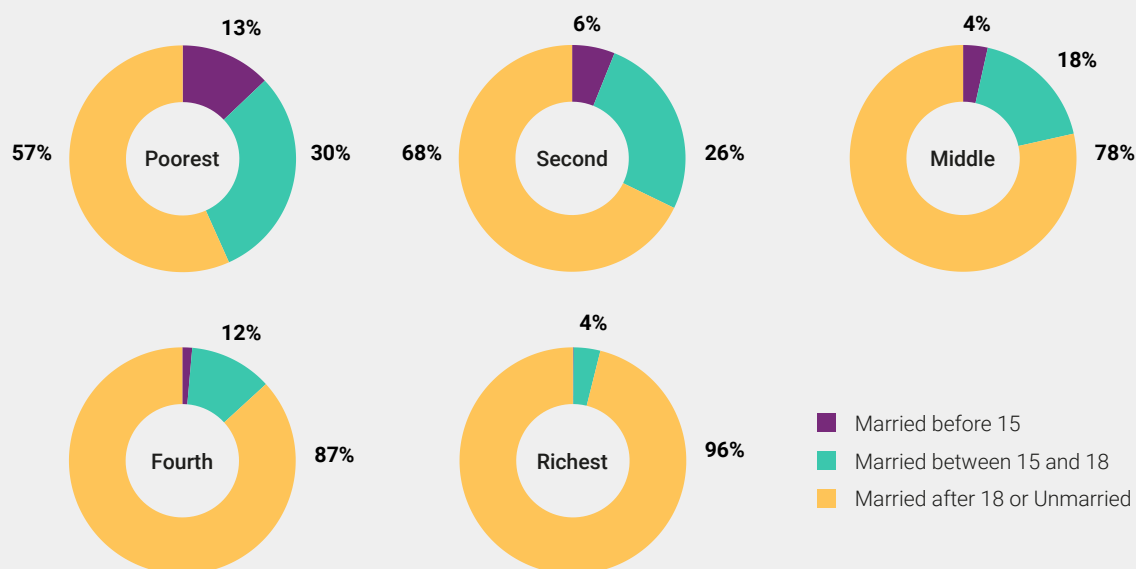
Age of Marriage Distribution
by Residence, Women 20–24



Age of Marriage Distribution by Level of Education, Women 20–24



Age of Marriage Distribution by Household Wealth Quintile, Women 20–24

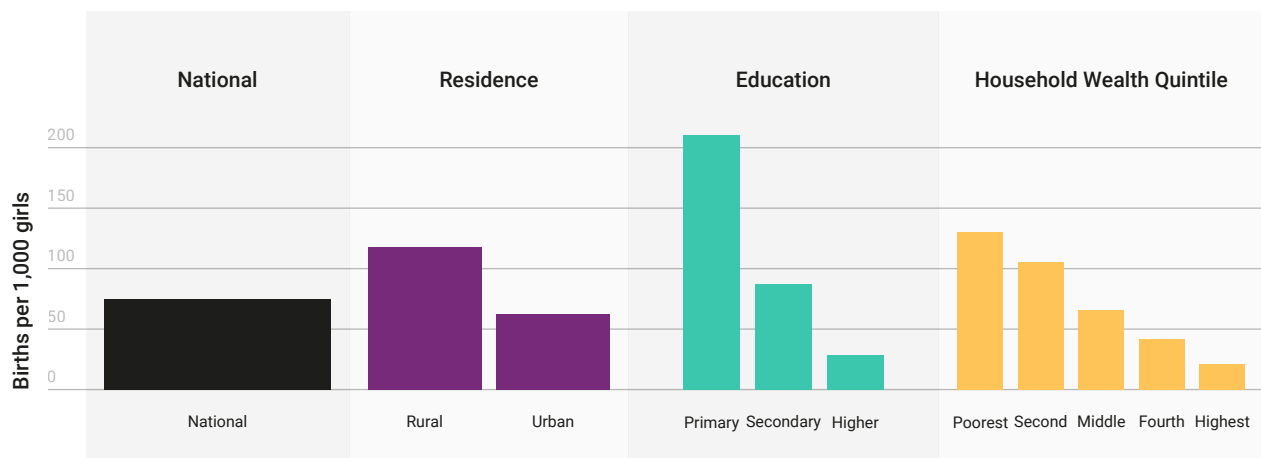


■ Married before 15
■ Married between 15 and 18
■ Married after 18 or Unmarried

Source: Demographic and Health Survey, 2015

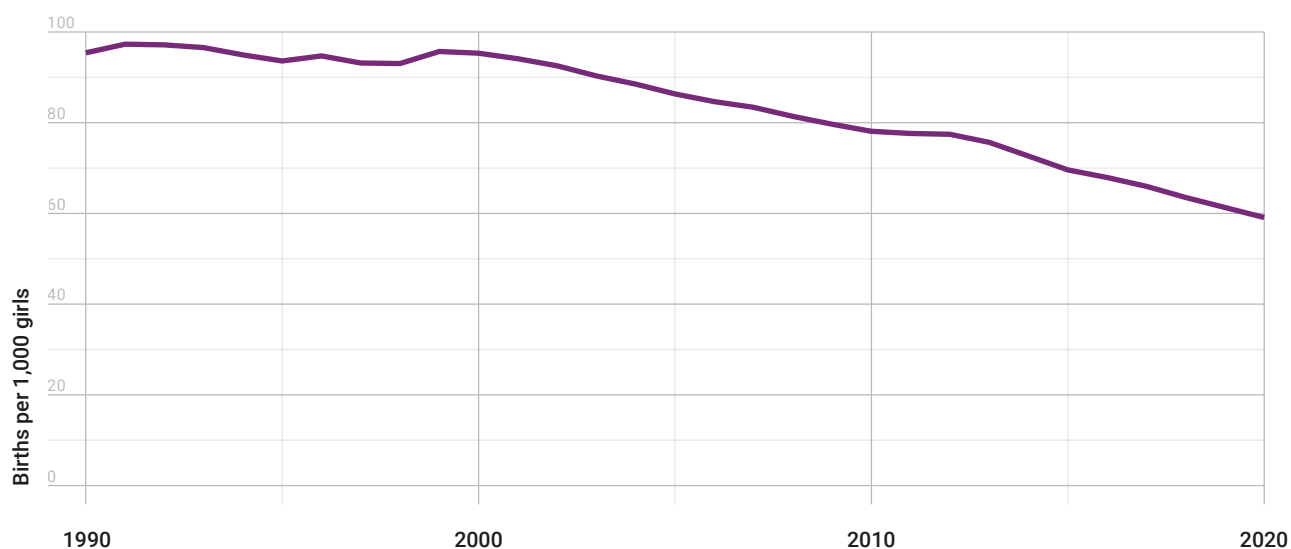
Colombia's adolescent birth rate has decreased from 1990 to 2020. The adolescent birth rate is almost two times higher in rural areas than in urban areas, and six times higher among women living in the poorest households than those living in the wealthiest households. Approximately 35% of births before age 18 are among those women living in rural areas (compared to 17% of women living in urban areas). Births before age 18 are eight times higher among those women with no education compared to those with higher education, and almost seven times higher among women living in the poorest households compared with those women living in the wealthiest households.

Adolescent birth rate



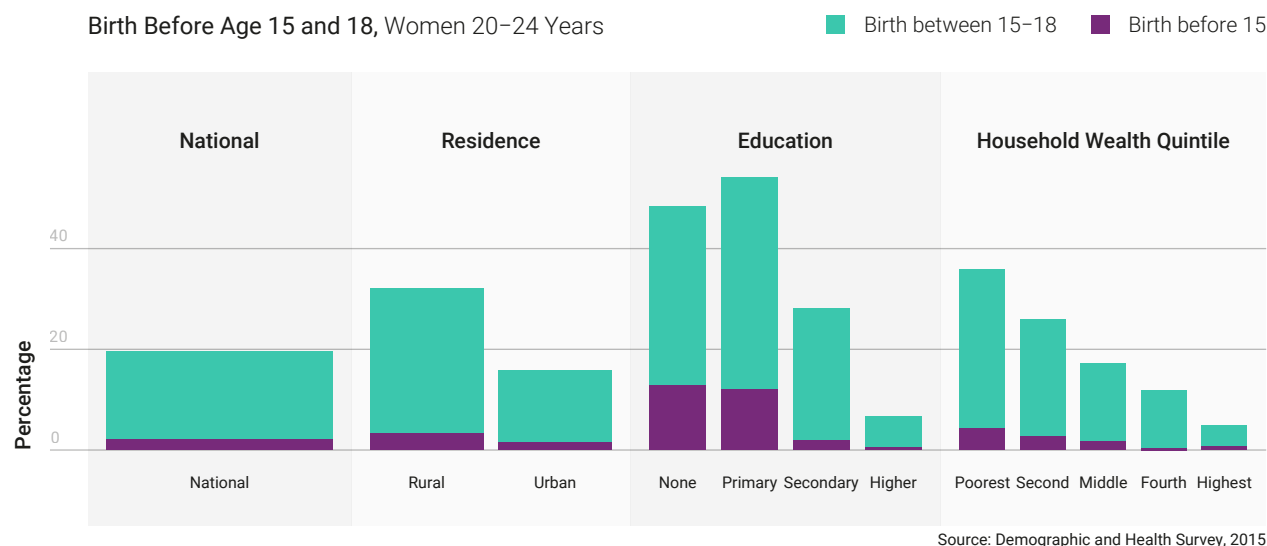
Source: Demographic and Health Survey, 2015

Adolescent birth rate, 1990–2020



Source: World Population Prospects, 2022

Birth Before Age 15 and 18, Women 20–24 Years



The maternal death rate in Colombia has been falling for years, yet many of these gains have not been seen by Afro-Colombian and indigenous communities, where maternal death rates are two to four times higher, according to the health ministry; this situation has worsened under the COVID-19 pandemic.^{IV}

Afrodescendent and indigenous women and girls also face higher risks of violence and harmful practices, including sexual violence during armed conflicts, and labour exploitation.^V As the High Level Commission's 2022 underscores, this heightened vulnerability stems from the intersecting oppressions they face, including discrimination and exclusion based on gender, ethnicity and the poverty that disproportionately affects Indigenous communities.

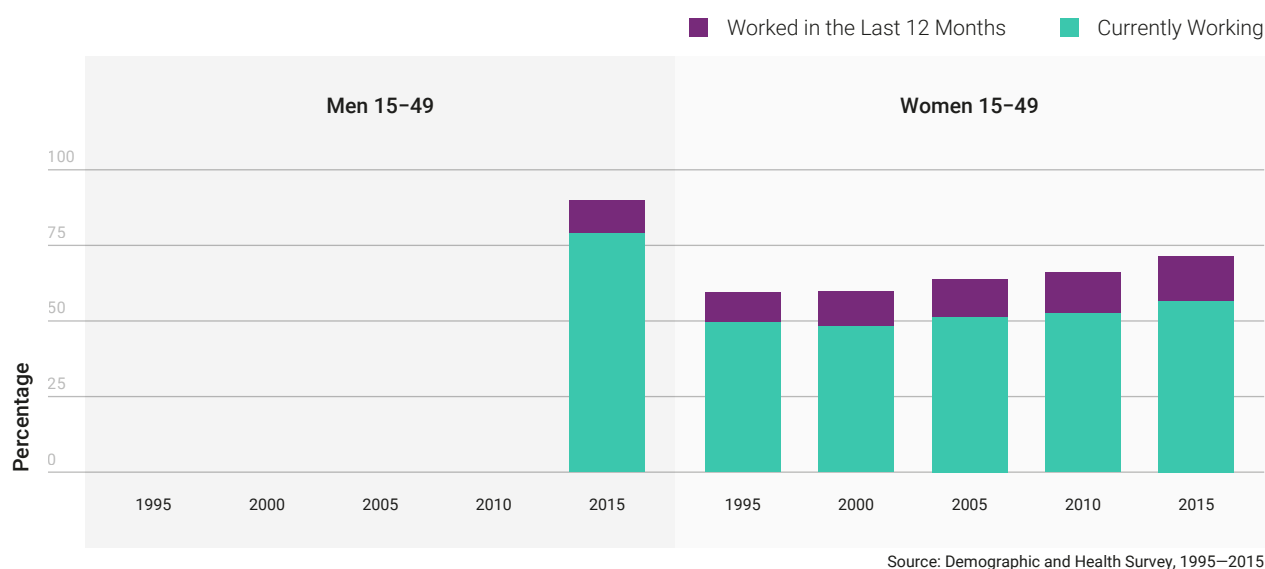
To support full and equal access to sexual and reproductive health and rights for indigenous and Afrodescendent women and girls, along with freedom from violence, UNFPA partners with Afrodescendent and Indigenous organizations – especially women-led initiatives – to design and implement intercultural approaches to sexual and reproductive health, gender-based violence and harmful practices. Intercultural approaches not only entail training health and social service workers to combat discrimination and increase cultural sensitivity – they make sure that women and girls from these communities, lead the design and delivery of policies and services. Services cater to speakers of local languages; engage communities and families; embrace traditional practices, technologies and medicines; and partner with practitioners from their communities such as traditional birth attendants.

IV <https://www.unfpa.org/news/partnering-traditional-birth-attendants-reach-afro-descendant-and-indigenous-women-colombia>

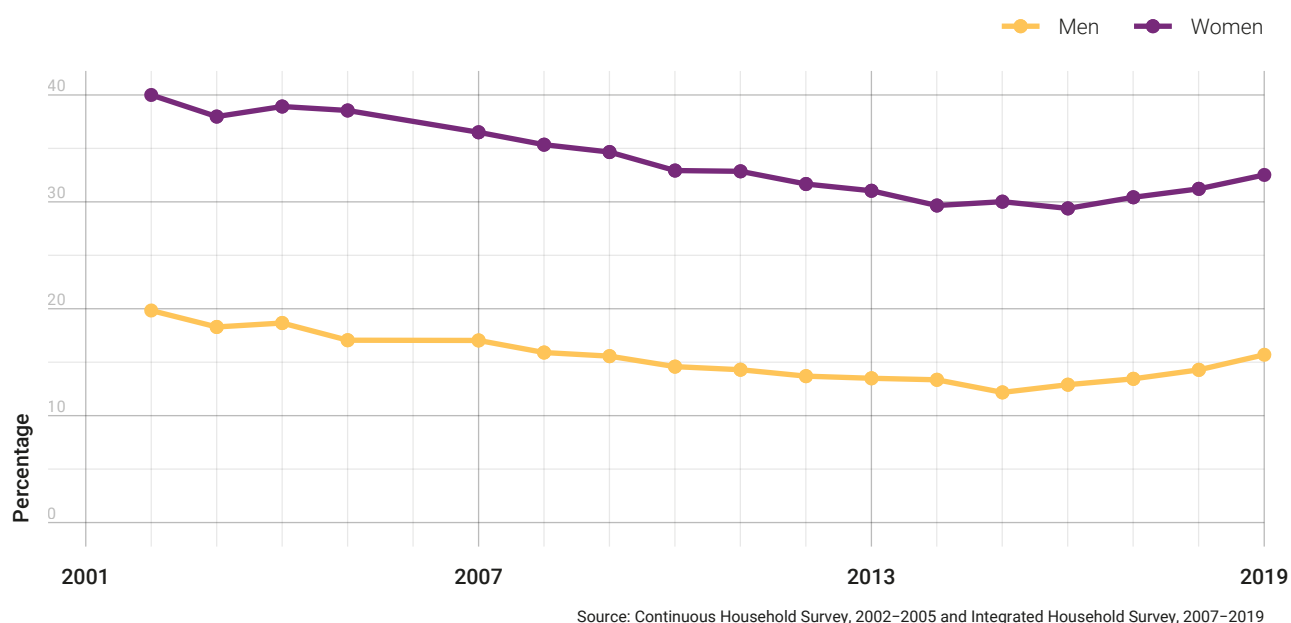
V <https://www.unfpa.org/events/international-day-worlds-indigenous-peoples>

In 2015, the year for which the latest data are available, approximately 57% of women had worked in the last 12 months and were currently working compared to 81% of men. Since 1996 the percentage of women currently working and who worked in the last 12 months has been increasing. Young people who are not in education, employment or training (i.e., the NEET population) quantifies the proportion of young people who find themselves outside of the educational system and without work. In Colombia the percentage of youth not in education, employment or training has been decreasing among women and men from 2005 to 2017; in the latest year for which there is data, the percentage of youth not in education, employment or training for men is about 10 percentage points less than that for women.

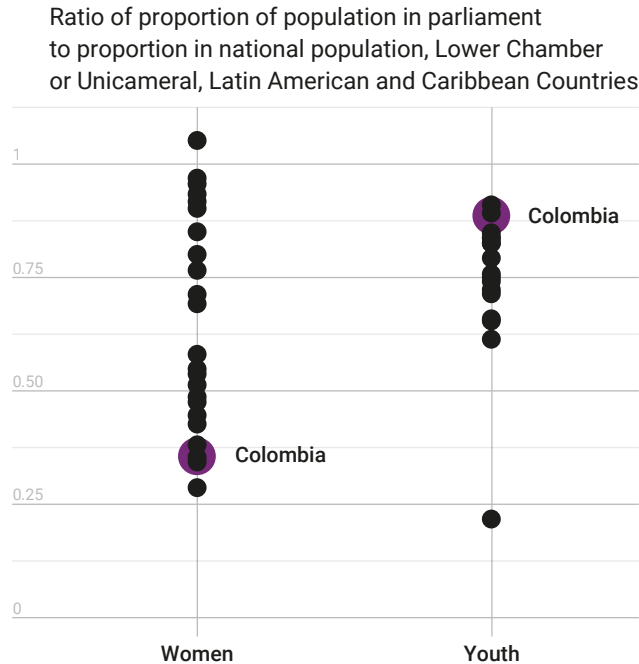
Employment Trends (Currently Working and Worked in the Last 12 Months), by Sex



Percentage of Youth (15–24) Not in Education, Employment, or Training, by Sex



SDG Goal 16 seeks to promote peaceful and inclusive societies for sustainable development, to provide access to justice for all and build effective, accountable and inclusive institutions at all levels. One component of this is ensuring responsive, inclusive, participatory and representative decision-making at all levels. The ratio of the proportion of female Members of Parliament in Colombia is one of the lowest in the region, while the ratio of the proportion of young Members of Parliament is one of the highest in the region (SDG 16.17.1).



Source: Inter-Parliamentary Union, 2022

Since the Nairobi Summit, civil society has been mobilized in the process of following up on the commitments made in Colombia and participated in analyzing the progress made in realizing the commitments. In addition, a work plan has been signed by the National Administrative Department of Statistics of Colombia, commonly referred to as DANE, which includes activities and resources to advance the fulfillment of the Nairobi commitments in the statistical area.