



## UPDATE FROM THE FIELD: DARFUR, SEPTEMBER 2009

### OVERVIEW: DARFUR AND UN ACTION'S ROLE

Sexual violence has been a prominent and devastating feature of all humanitarian conflicts, Darfur included. UN Action Against Sexual Violence in Conflict (UN Action) unites the work of 12 UN entities with the goal of ending conflict-related sexual violence.<sup>1</sup> It is a concerted effort by the UN system to improve coordination and accountability, amplify programming and advocacy, and support national efforts to prevent sexual violence and respond effectively to the needs of survivors. At country-level, UN Action has provided strategic support to UN Country Teams and Peacekeeping Operations in Sudan (Darfur), Liberia, DRC, and Kenya. This bridges the spectrum of security, humanitarian and development actors for a holistic, harmonized response. This update examines the current state of UN activities to address sexual violence in Darfur and outlines the programmatic work undertaken by UN Action's member entities regarding gender-based violence (GBV).

### ON THE GROUND: THE CURRENT STATE OF SEXUAL VIOLENCE AND RESPONSES IN DARFUR

Civilians have been deliberately targeted throughout the Darfur conflict, in violation of international humanitarian and human rights law, by all parties to the conflict. Countless civilians have suffered physical violence, including sexual violence.<sup>2</sup>

In 2005, the UN High Commissioner for Human Rights published a report on sexual violence in Darfur, which described rapes perpetrated by state and non-state actors and called on the Government of Sudan to “take action to end the climate of impunity that continues to fuel sexual violence in Darfur.”<sup>3</sup> A commission of inquiry authorized by Security Council Resolution 1564 “established that the Government of the Sudan and the Janjaweed...conducted indiscriminate attacks, including killings of civilians, torture, enforced disappearances, destruction of villages, rape and other forms of sexual violence, pillaging and forced displacement throughout Darfur.”<sup>4</sup> A subsequent high-level mission confirmed these findings, and found that “rape and sexual violence are widespread and systematic.”<sup>5</sup> These patterns of rapes and gang rapes have continued in the intervening years, and have spilled over into neighboring eastern Chad, where “it has been reported that sexual violence has increased alarmingly during the past five years, with repeated cross-border incursions of Janjaweed militias from Sudan, the presence of Chadian rebel groups occasionally clashing with Government forces, and intercommunal fighting of local militias.”<sup>6</sup>

By 2007, systematic campaigns of rape and terror had displaced more than one million civilians from their tribal lands. In this context, reports of sexual violence have spiked in the last five

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<sup>1</sup> The 12 UN entities that have partnered in the UN Action initiative are: DPA, DPKO, OCHA, OHCHR, UNAIDS, UNDP, UNFPA, UNHCR, UNICEF, UNIFEM, WFP, and WHO.

<sup>2</sup> “Briefing notes on the Gender Based Violence Response in Darfur Prepared for UN Action Steering Committee Meeting,” 11 May 2009.

<sup>3</sup> Access to Justice for Victims of Sexual Violence, Report of the UN High Commissioner for Human Rights, July 29, 2005; see also S/RES/1590 (2005) establishing UNMIS.

<sup>4</sup> S/2005/60.

<sup>5</sup> S/2005/60.

<sup>6</sup> “Report of the Secretary-General pursuant to Security Council resolution 1820” (S/2009/362).



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years.<sup>7</sup> In the middle of 2008, Sudanese authorities halted women-support programming and closed mental health service facilities in several Darfur locations.<sup>8</sup>

The task of protecting civilians in Darfur continues to be challenging. The charges against two senior government officials and an alleged Janjaweed leader include counts of attacks against the civilian population, including the crime of rape. Incidents of rape still often occur when women are collecting firewood or going to the market. Many IDP women walk during the night as a means to reduce their risk of rape, especially since now they must walk further due to the scarcity of firewood.

In March 2009, the Sudanese President was indicted by the International Criminal Court (ICC) for war crimes and crimes against humanity. Reactions to this indictment have had dramatic repercussions for the humanitarian presence in Darfur, and particularly on GBV programming in the area.<sup>9</sup> Shortly after ICC judges handed down the President's warrant for arrest, the Sudanese government expelled 13 international NGOs (INGOs) and terminated 3 national NGOs. Ten of these groups had worked in Darfur, and between them employed nearly 40% of Darfur's aid workers. Among the expelled organizations were many providing lifesaving healthcare, psychosocial, and livelihood support to women and girls. Numerous international staff were given 48 hours to leave the country, and their exits were marked by intimidation and threats. Some humanitarian workers saw the INGO expulsions as a signal to other NGO actors to stop engaging in protection and GBV work. Subsequently, the kidnapping of five Médecins Sans Frontières (MSF) staff members in mid-March from their North Darfur office by armed men has exacerbated the security concerns that humanitarian relief workers face from parties to the Darfur conflict.<sup>10</sup>

Judicial redress for violent crimes against women and girls remains inadequate throughout the country. Moreover, the legal framework provides very little protection to the survivors of sexual violence, and a general culture of stigmatizing rape victims still prevails, hindering both reporting and accountability.<sup>11</sup> The Sudanese legal framework impedes gender justice, with the Armed Forces Act of 2007 and the Police Act of 2008 providing procedural immunity for armed and police forces. The Government has, however, taken steps to remove the requirement of "Form 8", which obliged women to report rape to police or security forces before they were entitled to receive medical examination and treatment in Darfur. According to the Violence Against Women's Unit (VAW) of the Ministry of Justice, Circular 2 is now applicable for all of Northern Sudan. In Southern Sudan, UN partners and NGOs are developing their own "Form 8 Strategy" to ensure medical treatment of rape with or without Form 8.

Many international and national NGO humanitarian aid workers are reluctant to carry out GBV programming. Since September 2008, many have been forced to close their operations, affecting access to life-saving services. Under international humanitarian law, parties to conflict must protect and meet the basic needs of persons within their control and facilitate humanitarian

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<sup>7</sup> *Forced Migration Review*, Issue 27, Jan 2007, "Sexual Violence: Weapon of war, impediment to peace".

<sup>8</sup> "Briefing notes on the Gender Based Violence Response in Darfur Prepared for UN Action Steering Committee Meeting," 11 May 2009.

<sup>9</sup> Ibid.

<sup>10</sup> "Ban voices concern after aid workers abducted in Darfur", UN News Centre, 12 March 2009: <http://www.un.org/apps/news/story.asp?NewsID=30172&Cr=Darfur&Cr1=&Kw1=darfur&Kw2=kidnapping&Kw3=>.

<sup>11</sup> "Briefing notes on the Gender Based Violence Response in Darfur Prepared for UN Action Steering Committee Meeting," 11 May 2009.



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assistance. Yet since March, referral pathways that were previously established encounter gaps in meaningful service providers or community outreach workers on the ground compounding access to care for the few survivors that may seek help. Many of the NGOs currently on the ground in Darfur also lack the technical capacity or infrastructure to handle such cases. There were humanitarian actors who were trained in clinical management of rape (CMR) amongst those who were expelled, adding to already existing gaps in services. UNFPA, in partnership with the Ministry of Health (MoH), has scaled up training of CMR targeting remote areas to the extent that access is not restricted. There continues to be a shortage of medical supplies to treat rape, in those areas that the Ministry of Health (MoH) and the UN cannot reach. Psychosocial support services suffered the most. There are currently almost no mental health case management services available and only a few informal centers able to provide short-term psychosocial support. The critical link between communities and health services by outreach workers is also missing.

In April, following the expulsion of many NGOs, the Government of Sudan undertook a Joint Needs Assessment with UN counterparts to evaluate the gaps in humanitarian assistance on the ground. However, neither GBV nor general protection issues were included in this Joint Assessment. UN Action member agencies continue to make every effort to support and supplement existing INGO, NGO and government capacity, while the UN continues to lobby for those humanitarian workers who were expelled from Sudan to be allowed to return. A recent joint mission between government and UN actors was undertaken to look at Protection, Education and Agriculture gaps; however, the results of this mission remain to be seen.

### **ABOUT UN ACTION MEMBERS IN DARFUR**

In 2004, the UN country team in Khartoum mandated UNFPA to serve as the UN's lead agency on GBV in Darfur, and to coordinate GBV response and prevention activities. UN Action provides strategic, financial, and programmatic support to these activities. In 2008, UN Action began co-funding two of UNFPA's International GBV Coordinators in Darfur. These GBV Coordinators help oversee a "Pillar Structure" that engages the following UN agencies across the various sectors of response to gender based violence: UNFPA and the World Health Organization (WHO) for health; the United Nations Children Fund (UNICEF) for psychosocial services; the United Nations Development Programme (UNDP); the United Nations High Commissioner for Refugees (UNHCR) for safety and security; and the United Nations Development Fund for Women (UNIFEM) and the Food and Agriculture Organization (FAO) for livelihoods. Additionally, UNFPA coordinates the GBV response with entities charged with protecting civilians, including UNAMID peacekeepers.<sup>12</sup>

The lead agencies in charge of these pillars are currently pursuing strategies that focus on the government and local communities, since the international and national NGOs remaining in Darfur are reluctant to implement activities to address sexual and gender-based violence.

### **RECENT ACTIVITIES**

*Progress by the Federal Government of Sudan (GoS).* The Violence Against Women (VAW) Unit of the Ministry of Justice (MoJ), is developing a five year National Action Plan for Violence Against Women. This initiative has been supported by UNFPA in Khartoum. The Head of the VAW Unit has been working closely with the Minister of Justice to ensure that Darfur initiatives, circulars and legislative amendments to prevent and respond to GBV will be expanded to include all Northern States. Walis in several States have agreed to open VAW Units in their respective States. During a consultation in Khartoum, representatives of the State Committees, VAW Units

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<sup>12</sup> Ibid.



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and Wali Advisors on women and children from the 3 Darfur States shared their advances since the beginning of the conflict with representatives from other States. The head of VAW will travel to other Northern States for further consultation with local authorities.

**Government Training.** Training has focused on government institutions such as the Ministries of Health (MoH), Social Affairs (MoSA), Justice (MoJ), the Violence Against Women (VAW) Units, and the State Committees to Combat Violence Against Women. Government staff in these areas have received training to help provide a comprehensive range of GBV services, and individuals have been trained as GBV focal points in key ministries. Staff receiving these services appear below, with the training agencies in parentheses:

- ✘ The Government of Sudan and Sudanese Police (UNICEF, UNDP, UNFPA, UNIFEM, UNAMID)
- ✘ Social Workers (UNICEF-UNFPA)
- ✘ Legal Aid lawyers and paralegals (UNFPA-UNDP)
- ✘ Health providers such as doctors, medical assistants, midwives (UNFPA-UNICEF-UNDP).

**Multi-Sectoral Response for GBV Survivors.** Coordinated UN activity on GBV in Sudan incorporates initiatives to boost the multi-sectoral response to the needs of sexual violence survivors. Initiatives that are in the process of being further developed, strengthened, or expanded, alongside government institutions include:

- ✘ **In collaboration with MoH conduct Clinical Management of Rape training and Guidelines review where needed:** training for health providers, targeting areas where NGOs and INGOs were expelled. UNFPA provides medical support, UNICEF provides psychosocial support for children, and UNDP provides legal support.
- ✘ **Provision of Post Rape Treatment Kits:** UNFPA in consultation with MoH procures and distributes these kits while UNAMID assists in the transportation and distribution of kits to remote and hard-to-reach areas.
- ✘ **In collaboration with Ministry of Interior, UNICEF supports the establishment and capacity support for Family and Child Protection Units:** to provide comprehensive services to child survivors of sexual violence, which are expanding to include adult women. UNFPA and UNDP provide training to staff for medical and legal support, respectively.
- ✘ **Psychosocial Support:** UNICEF leads on integrating psychosocial support within the education system, while UNFPA has taken the lead on integrating GBV messages for teachers and students into the education system in some parts of Darfur.

**Strengthening Community Response Mechanisms.** The UN's coordinated response to GBV has focused on exploring ways to work with community leaders, religious leaders, and women's groups to enhance community response mechanisms in a way that better supports survivors. Key among these initiatives is the challenging task of reopening women's centers across all three Darfur States and in refugee camps. UNFPA, UNAMID Gender and Police Units, UNDP, UNHCR in collaboration with MoSA in ND have begun reopening former women's centers in IDP camps. Furthermore, UNDP is currently seeking ways to support women's center livelihood projects, while UNAMID police will continue to support firewood patrols and market-route escorts and provide assistance to Sudanese Police forces for GBV response actions.

## NEXT STEPS

UN Action partners face a daunting task in Darfur, but there are steps being taken to address conflict-related sexual violence. Further efforts are needed to:



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- ✘ **Advocate the promotion of GBV programming as a central and lifesaving activity** in all upcoming inter-agency missions and high-level visits to Darfur, and ensure that protection and human rights issues are kept at the forefront of strategic interactions with the Government of Sudan.
- ✘ **Advocate for widening and safeguarding of the operational ‘humanitarian space’ for INGOs and NGOs** so that they can implement GBV prevention and response programmes with government support.<sup>13</sup>
- ✘ **Advocate for funds needed for the Cluster Approach roll out, in particular for the functioning of the GBV Sub-cluster; that will strengthen overall coordination of protection issues in addition to Inter-Cluster Coordination.**

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<sup>13</sup> “Briefing notes on the Gender Based Violence Response in Darfur Prepared for UN Action Steering Committee Meeting,” 11 May 2009.