Kit 3.3: Programming

Building Accountability

3.3

Building Accountability

Contents

Aleppo, Syria

Tondikiwindi, Niger

Monitoring and Responding to Conflict-Related Sexual Violence

Key Messages

- **Conflict-related sexual violence** is sexual violence perpetrated against women, men, girls or boys that is directly or indirectly linked to a conflict.

- Both State and non-State actors perpetrate sexual violence during armed conflict. Deliberately targeting civilians for rape **constitutes a war crime and may also amount to a crime against humanity.**

- A complementary set of **Security Council Resolutions now obligate States and the international community to monitor and respond to sexual violence during armed conflict.**

- **Monitoring conflict-related sexual violence informs advocacy and action** to:

  - Assist survivors;

  - Protect at-risk populations;

  - Prevent further perpetration; and

  - Foster accountability of perpetrators.

- **UNICEF holds key responsibilities within wider United Nations efforts to monitor and respond to conflict-related sexual violence.**

Summary

This section of **Kit 3.3: Programming – Building Accountability** provides information on monitoring and responding to conflict-related sexual violence (CRSV). It includes information and tools for taking action to assist survivors, protect communities, prevent perpetration and foster accountability for perpetrators.

When to use this kit

Type of emergency	Phase of response	Population location
• Armed conflict	• Immediate response	• Urban/peri-urban
• Political violence/ instability	• Ongoing response	• Rural
		• Community/formal settlement
		• Camp
		• Informal/spontaneous settlement
		• In transit/on the move

Materials included in this kit

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Sexual Violence as a Tool of Ethnic Cleansing and Genocide

The Effects of Conflict-Related Sexual Violence

Men, Boys and Conflict-Related Sexual Violence

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CRSV Tool 1: Stakeholder Mapping Tool

CRSV Tool 2: Coordination Architecture Options

Introduction

Conflict-related sexual violence (CRSV) has military, political, economic, criminal, personal, familial and ethnic drivers. Both State and non-State actors perpetrate sexual violence during armed conflict. Sexual violence is used by security forces, armed groups and militia to spread terror, degrade, intimidate and punish communities and opposition groups. **Sexual violence is also used tool of ethnic cleansing and genocide**, to drive people off their land, and as a form of torture. In many conflicts, children and women are recruited and used by armed groups; girls and women are forced to become 'wives' of commanders or may be subjected to sexual slavery.[1]

Sexual Violence as a Tool of Ethnic Cleansing and Genocide

Boys and men may also be targeted for sexual violence in conflict settings. The threat or use of sexual violence as a form of torture or punishment of males in detention settings and within armed groups is evident in many situations. While most survivors of sexual violence are girls and women, males also experience sexual violence. Boys or men may also be forced to perpetrate or witness acts of sexual violence against their family and community members.[2]

Defining conflict-related sexual violence (CRSV)

"The term conflict-related sexual violence refers to rape, sexual slavery, forced prostitution, forced pregnancy, forced abortion, enforced sterilization, forced marriage and any other form of sexual violence of comparable gravity perpetrated against women, men, girls or boys that is directly or indirectly linked (temporally, geographically or causally) to a conflict. This link with conflict may be evident in the profile of the perpetrator (often affiliated with a State or non-State armed group, including a terrorist entity or network), the profile of the victim (who is frequently an actual or perceived member of a persecuted political, ethnic or religious minority, or is targeted on the basis of actual or perceived sexual orientation and gender identity), the climate of impunity (which is generally associated with State collapse), cross-border consequences (such as displacement or trafficking) and/or violations of the provisions of a ceasefire agreement. The term also encompasses trafficking in persons when used in situations of armed conflict for the purpose of sexual violence and exploitation. Incidents or patterns of sexual violence committed by United Nations peacekeepers or non-United Nations international forces may also meet the above definition, depending on the circumstances of the case."[3]

1   Milillo, D., 'Rape as a Tactic of War: Social and Psychological Perspectives', *Affilia – Journal of Women and Social Work*, vol. 21, no. 2, 2006; Mischkowski, G., 'Sexualised violence in war: A chronicle', *Violence against women in war: Handbook for professionals working with traumatised women,* medica mondiale, Cologne, 2004; Gingerich, T., et al., *The use of rape as a weapon of war in the conflict in Darfur, Sudan,* Francois-Xavier Bagnoud Center for Health and Human Rights, Harvard School of Public Health, Boston, 2004; and Nordstrom, C., 'Rape: Politics and Theory in War and Peace', *Australian Feminist Studies*, vol. 11, no. 23, 1996.
2   Shteir, S*., Conflict-Related Sexual and Gender-Based Violence: An Introductory Overview to Support Prevention and Response Efforts,* Australian Government Civil-Military Centre, Canberra, 2014.
3   Extracted from United Nations Action Against Sexual Violence in Conflict, *Analytical and Conceptual Framing of Conflict-Related Sexual Violence,* UN Action, New York, 2011.

Observations on differences between male and female survivors

A systematic review of the physical, mental and social effects of conflict-related sexual violence between 1981 and 2014 found there were differences between male and female survivors. In one study, the prevalence in females and males for traumatic genital injury was 29 per cent and 13 per cent, respectively. The prevalence of sexually transmitted diseases (STDs) in females (17 per cent) and males (5 per cent) also differed. In two studies, females had higher rates of post-traumatic stress disorder (PTSD) and depression, while males had a higher prevalence of anxiety than females. Male survivors were more likely than females to abuse alcohol and other substances, with rates of 50 per cent and 18 per cent, respectively.[4]

The Effects of Conflict-Related Sexual Violence

The **effects of conflict-related violence** can be severe and life-long, not only impacting the physical and psychosocial well-being of those directly affected, but also fraying the social fabric of communities and hindering peace, security and post-conflict development. Addressing the consequences of sexual violence and other human rights atrocities is vital to help survivors and their families recover and heal, to restore social cohesion, and to build a culture of respect for human rights and create lasting peace.

Men, Boys and Conflict-Related Sexual Violence

Men and boys who are survivors of CRSV should also have access to good quality care and support services, as all survivors need and have the right to care and support to help them heal and recover. Humanitarian actors must work together to make services available to all survivors regardless of their gender or age. Understanding how the dynamics, types, prevalence and consequences of sexual violence for boys and men differ from those of girls and women in each setting is important when developing prevention, protection and response strategies.

Until recently, sexual violence was considered an inevitable consequence of war; there was limited understanding of when and why it is used by armed actors, and few resources were invested in preventing and responding to it. However, beginning in the 1990s, there has been a significant increase in research on the prevalence of, variations of and motivations for sexual violence perpetrated in conflict. There have also been substantial developments in international peace, security and humanitarian frameworks, policies and capacity for responding to CRSV. Acts of CRSV are now recognized as serious violations of the most basic human rights and of international law. Deliberately targeting civilians for rape constitutes a war crime and may also amount to crimes against humanity. Cases involving sexual violence in conflict are now brought before the International Criminal Court (ICC) and successfully prosecuted.

UNICEF is a founding member of the United Nations Action Against Sexual Violence in Conflict initiative,[5] which consists of 13 UN entities and is chaired by the Special Representative to the Secretary-General on Sexual Violence. UN Action aims to strengthen sexual violence prevention and response through a coordinated, coherent, comprehensive and catalytic approach.

A complementary set of Security Council Resolutions (SCRs) now obligate States and the international community to monitor and respond to sexual violence during armed

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4   Adapted from Ba and Bhopal, 'Physical, mental and social consequences in civilians who have experienced war-related sexual violence: A systematic review (1981–2014)', *Public Health,* vol. 142, 2017, p. 128.
5   See the Stop Rape Now website for more information: <www.stoprapenow.org/>.
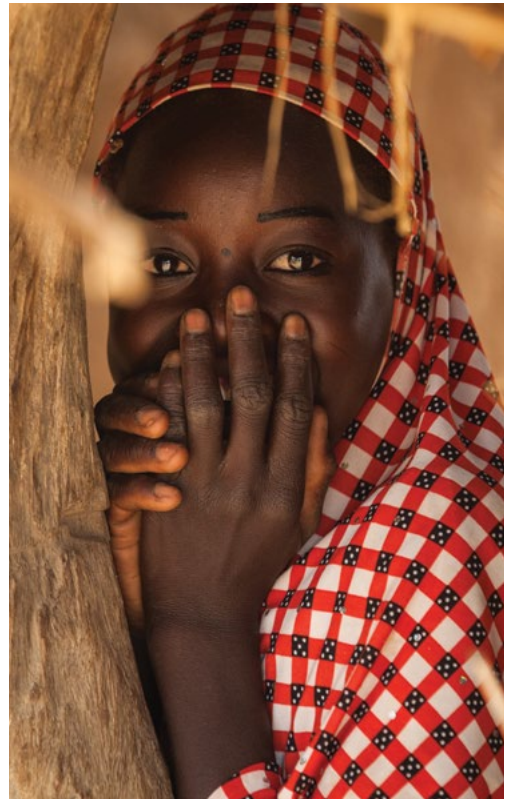
conflict. When a State is unable or unwilling to prevent CRSV, protect civilians and assist survivors, the international community must act. Peace, security and humanitarian efforts to prevent and respond to CRSV have been bolstered by these developments in international laws and norms.

As a global leader and one of the largest operational agencies delivering humanitarian assistance and protection in conflict-affected settings, and with a mandate to promote children's and women's rights, UNICEF has key responsibilities within wider United Nations (UN) efforts to prevent and respond to CRSV and improve the lives and outcomes for affected children and women in situations of armed conflict.

Resources

▶ **The Fallout of Rape as a Weapon of War: The life-long and intergenerational impacts of sexual violence in conflict**
Overseas Development Institute (2014)
<www.odi.org/sites/odi.org.uk/files/odi -assets/publications-opinion-files/8990.pdf>

▶ **Analytical and Conceptual Framing of Conflict-Related Sexual Violence**
UN Action Against Sexual Violence in Conflict (2011)
<www.humanitarianresponse.info/en/ operations/pakistan/document/analytical -and-conceptual-framing-conflict-related -sexual-violence>

▶ **Conflict-Related Sexual and Gender-Based Violence: An Introductory Overview to Support Prevention and Response Effort**
Australian Government Civil-Military Centre (2014)
<http://apo.org.au/system/files/39108/ apo-nid39108-35891.pdf >

▶ **Wartime Sexual Violence Misconceptions, Implications, and Ways Forward: Special Report**
United States Institute of Peace (2012)
<www.usip.org/sites/default/files/ resources/SR323.pdf>

▶ **Sexual Violence During War: Toward an Understanding of Variation**
Wood, E., Analisis Politico (2009)

▶ **Armed Groups and Sexual Violence: When Is Wartime Rape Rare**
Wood, E., Politics Society (2009)

▶ **Gender Violence in Armed Conflicts**
Instituto da Defesa Nacional (2013)
<www.idn.gov.pt/publicacoes/cadernos/ idncaderno_11.pdf>

▶ **Human Rights Watch reports on sexual violence**
<www.hrw.org/topic/womens-rights/ sexual-violence-and-rape>

▶ **Physical, Mental and Social Consequences in Civilians Who Have Experienced War-Related Sexual Violence: A systematic review (1981–2014)**
Ba and Bhopal, Public Health (2017)
<www.publichealthjrnl.com/article/S0033 -3506(16)30190-1/pdf>

Batilass, Niger

El Fasher, North Darfur, Sudan

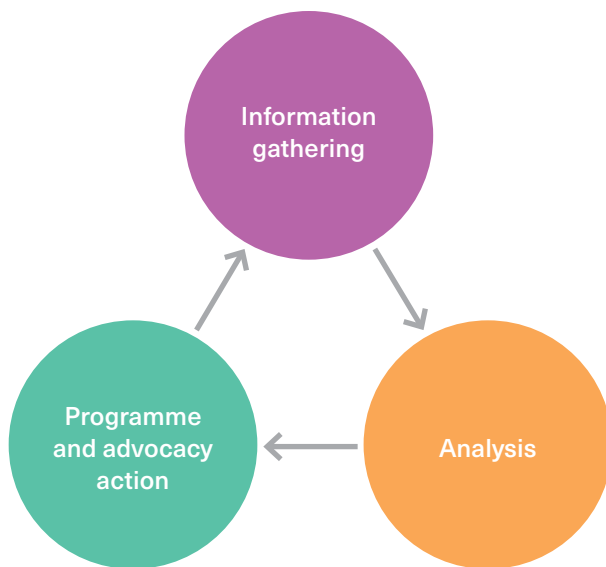# Holistic, multi-dimensional action on CRSV

Addressing CRSV requires collaborative and coordinated humanitarian, security, legal, political and social responses that are based on careful and ongoing analysis of the situation, the dynamics of perpetration and the vulnerabilities and needs of affected populations. Responding to CRSV involves *a cycle of information gathering, analysis and action* based on strong partnerships between UN entities, governments, civil society and communities.

Ongoing information collection and **monitoring** – or analysis of the patterns, trends and dynamics of sexual violence perpetration and victimization – informs context-specific programme and advocacy action and strategies to:

- Assist survivors;
- Protect at-risk populations;
- Prevent further perpetration; and
- Foster accountability of perpetrators.

Figure 1: The CRSV information and action cycle

Assisting survivors

Survivors of CRSV have the right to health, safety and psychosocial well-being. Establishing multi-sectoral care and support services to address the consequences of GBV, including meeting the physical, psychological and reintegration needs of survivors of CRSV and their children, is a humanitarian priority.

Protecting communities

In situations of ongoing insecurity and conflict, real-time and cumulative monitoring data on sexual violence is used to take concrete action with communities to reduce the exposure of at-risk populations to attacks.

CRSV monitoring

Monitoring involves a structured process of collecting and analysing information on sexual violence perpetrated in the context of armed conflict for the purpose of informing responses to it.

Strengthening accountability

Holding perpetrators of CRSV accountable for their actions and delivering some measure of justice for such crimes is vital for ending impunity for sexual violence and other human rights abuses. It is also an important component of helping survivors and communities heal and recover.

Preventing perpetration

Prevention involves changing the behaviour of perpetrators. This can include engaging with parties to a conflict to influence them to stop the use of sexual violence, and/or initiating community-based interventions that target drivers of sexual violence.

CRSV monitoring

Humanitarian and peace and security actors need updated information on when, where and why sexual violence is perpetrated to build an evidence base for action to tackle it. CRSV monitoring involves the systematic collection and analysis of information related to CRSV from a range of sources over time. In many settings, there are multiple humanitarian, human rights and military mechanisms for collecting information.

Operative Paragraph (Op) 26 of SCR 1888 specifically requests that the Secretary-General develop methods for more effective monitoring and reporting on the protection of women and children from rape and other forms of sexual violence in armed conflict and post-conflict situations, in order to identify and address gaps in United Nations (UN) entities' response.

Formal UN-led monitoring mechanisms are established in line with **Security Council Resolutions 1612 (2005) and/or 1960 (2010)**. The Monitoring and Reporting Mechanism on Grave Violations of Children's Rights (MRM) mandated by SCR 1612, as well as the Monitoring, Analysis and Reporting Arrangements on Conflict-Related Sexual Violence (MARA) mandated by SCR 1960, are two common mechanisms established in conflict settings to enhance coordinated monitoring of sexual violence. More information on the MRM and MARA can be found in *Foundations for CRSV monitoring and response* on page 18.

In contexts where there are no formal human rights monitoring mechanisms in place, the GBV sub-cluster or equivalent coordination forum serves as the main clearinghouse for CRSV information to guide humanitarian protection and assistance efforts. Where UN or other peacekeeping missions are deployed, military actors also gather and analyse information about CRSV to guide protection responses.

In situations where **sexual exploitation and abuse** by UN peacekeepers is occurring, dedicated UN networks may be established for monitoring and responding to allegations. In such situations, there are specific actions UNICEF country offices (COs) must take to report and respond to all allegations against children.

Ermera, East Timor

In practice

'Monitoring' is a human rights term describing the active collection, verification and immediate use of information to address human rights problems. Human rights monitoring includes gathering information about incidents; observing events; visiting sites, such as places of detention and refugee camps; and holding discussions with government authorities to obtain information and to pursue remedies and other immediate follow-up.[6]

Traditional human rights monitoring systems begin with data collection and secondarily link to service provision, viewing monitoring and documenting violations as a primary intervention and referrals for service provision as a secondary intervention. However, having basic services in place for survivors is a pre-requisite for sexual violence monitoring activities.

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6   Office of the High Commissioner for Human Rights, *Training Manual on Human Rights Monitoring,* OHCHR, New York, 2011.

Mogadishu, Somalia

and women with children born from rape and those who are forced to marry enemy combatants may be viewed as 'contaminated' or as collaborators. CRSV survivors, their children and their families may therefore need tailored assistance to cope with adjusting to family and community life.

Assisting survivors

Like survivors of other forms of GBV, those affected by sexual violence in conflict settings are entitled to the highest standard of physical, mental and social well-being. They have the right to good quality, confidential and compassionate care and support services to help them heal and recover from the harmful consequences of sexual violence and to access available remedies should they choose to. Making sure a **minimum set of GBV response services** is available to CRSV survivors in the first instance – followed in time by an expanded set of reintegration and support programmes – is a humanitarian priority.

Minimum Set of GBV Response Services

CRSV survivors and their children may have particular health, psychosocial support and protection needs stemming from their experiences. Different types of violence – for instance, rape by multiple perpetrators, being subjected to abduction and captivity, being exposed to sexual violence over extended periods, etc. – can contribute to different forms of physical and mental trauma. Girls

Protection Mandates

In practice

Studies of disclosure patterns of child and adult sexual violence survivors indicate disclosure is closely linked to the delivery of quality and confidential services. When support systems fail even one survivor, women and girls in a community quickly begin to distrust the reliability and safety of the services; this trust is very difficult to restore once it has been compromised.[7] Service-based data is one key source of information on the CRSV situation in a setting. Having quality, confidential services available also increases the knowledge-base on the situation.

Protecting communities

Protecting communities from CRSV involves taking concrete action to reduce at-risk children's and women's exposure and vulnerability to assault or abuse. Both military and non-military strategies of protection can be used; the most appropriate approach and combination of strategies will be determined by the situation-specific risks and the **protection mandates** of different actors. For instance, where they are deployed and are authorized to do so, peacekeepers can use force to deter attacks or defend civilian populations from CRSV; they can also provide security

7   An assessment of child protection information management in Indonesia identified five formal and informal 'detection alternatives' for children who are at risk and who have experienced violations. The five informal and formal detection alternatives that capture information on vulnerable children included: social welfare programmes; service providers; community governance; family and community information (unreported but known); and undetected. Among the five alternatives, the assessment identified service provision as a mechanism that detects the most children in need. For more information, see Boothby, Neil, Lindsay Stark, K. Simmons and E. Chu, *Child Protection Information Management Mapping: Towards a Data Surveillance System in Indonesia,* Columbia University, United Nations Children's Fund, and Universitas Indonesia, 2009.

patrols or escorts to high-risk locations or for high-risk activities, such as firewood or water collection in unsafe areas.

Humanitarian actors also implement a wide range of interventions to reduce girls' and women's exposure to sexual violence. For instance, programmes that introduce fuel-efficient stoves so that girls and women don't have to move as often through unsafe areas to collect firewood can help to lower exposure to attack. The active engagement and empowerment of communities as agents of their own protection is increasingly recognized by humanitarian, peace and security actors as a powerful and important dimension of protection.

humanitarian law (IHL) and refrain from perpetrating sexual violence. Coercive methods such as naming and shaming, arms embargos and targeted sanctions (including travel bans and asset freezes) for serious IHL violations are also strategies employed by the international community to create incentives for parties to a conflict to cease perpetrating sexual violence and other human rights violations.

In addition to influencing the behaviour of armed groups, humanitarian actors are increasingly exploring community-based interventions to address local conflict dynamics and drivers to prevent CRSV. These include programmes to catalyse changes in social norms that underpin sexual violence, as well as conflict management interventions that address local and long-standing conflict dynamics between groups.[9]

In practice

Protection requires engagement with a broad range of actors, including civilian and military. Civilian-military (CivMil) coordination is a useful tool for humanitarian protection actors to engage military or other armed actors to support protection. It serves as a bridge between humanitarian organizations with a protection mandate and deployed military forces to ensure adequate dialogue and cooperation, where needed and as appropriate.[8]

Preventing perpetration

To prevent CRSV, it is necessary to change the behaviour of those perpetrating it. Dialogue, negotiation, advocacy, training, awareness-raising and supporting armed groups to develop **action plans** are examples of inclusive strategies for building commitment, motivation and capacity of parties to a conflict to adhere to international

Action Plans

In practice

The **Deed of Commitment** is an innovative mechanism that allows non-State armed actors[10] to pledge to respect specific humanitarian norms and be held publicly accountable for their commitments. Non-State armed actors cannot become parties to relevant international treaties and are generally precluded from participating in norm-making processes. Consequently, these actors may not feel bound to abide by rules that they have neither put forward nor formally adhered to. Sometimes they are simply not aware of their obligations under international humanitarian law. The Deed of Commitment process gives non-State armed actors the opportunity to formally express their agreement to abide by humanitarian norms and take ownership of these rules.[11]

8   United Nations Office for the Coordination of Humanitarian Affairs Civil-Military Coordination Section, *United Nations Civil-Military Coordination Field Handbook*, UNOCHA, Geneva, 2015.
9   Mahony, L., 'Non-military strategies for civilian protection in the DRC', Henry Dunant Centre for Humanitarian Dialogue, Geneva, 2013.
10 The terms 'non-State armed actor' (NSAA), 'armed non-State actor' (ANSA) and 'non-State armed group' (NSAG) are often used interchangeably in the humanitarian community.
11 For more information, see the Geneva Call: <www.genevacall.org/how-we-work/deed-of-commitment/>.

Colombia

judicial mechanisms, and various truth, justice and reconciliation commissions.[13]

UN and other humanitarian and peace and security actors play an important role in supporting national judicial and non-judicial accountability mechanisms and ensuring they are responsive and sensitive to the needs and experiences of children and women. Improving the capacity of national judicial institutions to address sexual violence and advocating for gender- and age-based crimes to be included within national truth, healing and reparations processes are examples of this work.

Strengthening accountability for CRSV

> "**Accountability to the law** refers to the processes, norms, and structures that hold the population and public officials legally responsible for their actions and that impose sanctions if they violate the law. Accountability is essential if systemic threats to the rule of law are to be corrected. This involves ensuring there are consequences for criminal behaviour; mechanisms to address impunity for past crimes; and horizontal accountability (state institutions overseeing the actions of one another) and vertical accountability (citizens overseeing the actions of the state)."[12]

Impunity for CRSV can fuel a cycle of violence and retribution, contributing to instability and a culture of indifference to human rights. Holding perpetrators accountable for their crimes and delivering some measure of justice, healing or reparations to survivors can help to break this cycle. **National and international accountability mechanisms for CRSV** include the International Criminal Court (ICC), domestic justice systems, hybrid

National and International Accountability Mechanisms

In practice

The Team of Experts on the Rule of Law and Sexual Violence in Conflict, established under **Security Council Resolution 1888 (2009),** has provided technical and advisory assistance to governments, including in the areas of criminal investigation and prosecution, military justice, legislative reform, protection of victims and witnesses, and reparations for survivors. Reporting directly to the Special Representative on Sexual Violence in Conflict, the Team is composed of specialists from the UN Department of Peacekeeping Operations (DPKO), the Office of the United Nations High Commissioner for Human Rights (OHCHR) and the United Nations Development Programme (UNDP), supplemented by a roster of experts with a wide range of specializations. Since its establishment, the Team has played a catalytic role in assisting national institutions. For example, in Guinea, the Team's technical support to a national panel of investigating judges has resulted in the indictments of 17 high-ranking military and political officials for mass rape and other crimes committed in September 2009.

12 United States Institute of Peace, Peacekeeping and Stability Operations Institute, *Guiding Principles for Stabilization and Reconstruction*, USIP, Washington D.C., 2009, p. 81.
13 Conflict Dynamics International, *Children in Armed Conflict Accountability Framework: A Framework for Advancing Accountability for Serious Violations against Children in Armed Conflict*, Conflict Dynamics International, Cambridge, 2015.

Grand Bassa, Liberia

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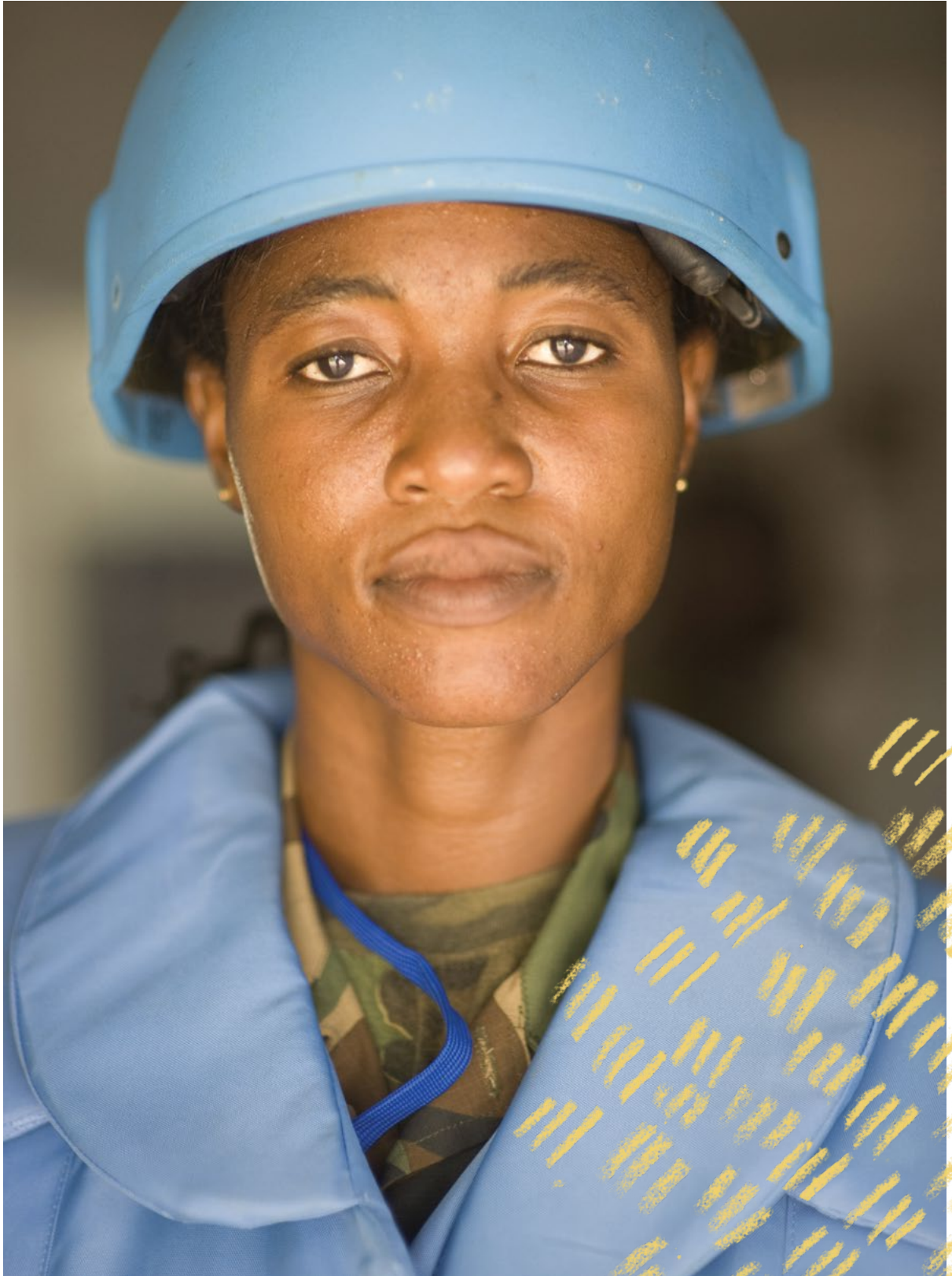
UNICEF's role in CRSV monitoring and response

Improving action and accountability to end violations of children's and women's rights is a core component of emergency response within UNICEF's child protection (CP) work. UNICEF headquarters, regional and country office (CO) responsibilities toward monitoring CRSV, assisting survivors, protecting communities and preventing sexual violence against children and women are linked to UNICEF's mission. They are also inherently tied to UNICEF's status as:

- One of the largest UN humanitarian and development agencies;

- Child Protection lead agency within the humanitarian cluster system;

- A member of UN Action Against Sexual Violence in Conflict; and

- The UN entity responsible for championing children's rights in situations of armed conflict.

The specific responsibilities of COs toward monitoring and responding to CRSV are shaped by the legal and normative frameworks – in particular, the applicability of SCRs 1612 and 1960, as well as the presence and mandate of UN peacekeeping missions and other actors.

In collaboration with relevant UN entities, affected communities, and government and non-government stakeholders, UNICEF COs commonly fulfil some or all the following responsibilities for CRSV monitoring and response:

CRSV monitoring

Facilitate and/or support the establishment and operations of CRSV monitoring systems in line with SCRs 1612 and 1960.

GBV coordination

Contribute to effective coordination of humanitarian action to prevent and respond to CRSV within the GBV and CP sub-clusters.

Survivor assistance

Deliver multi-sectoral care, support and protection services for survivors of CRSV to promote their healing, recovery and community reintegration.

Community protection

Implement community-based protection strategies to reduce children's and women's risk and exposure to sexual violence perpetrated by armed actors.

Preventing perpetration

Engage with armed groups and other duty bearers to increase adherence to IHL and prevent the use of sexual violence.

Strengthening accountability

Build capacity of accountability processes to deliver child- and survivor-centred justice, reparations and healing.

UNICEF Core Commitments for Children (CCCs) CP Programme Action on CRSV [14]

"In armed conflict, initiate the establishment of monitoring and reporting mechanisms focused on grave violations against children and sexual violence against both children and women, with a view to developing action plans; and ensure that affected children and women are referred to existing services."

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14 United Nations Children's Fund, *Core Commitments for Children in Humanitarian Action*, UNICEF, 2010. For more information, see: <www.unicef.org/publications/files/CCC_042010.pdf>.

Foundations for CRSV monitoring and response

Legal and normative framework

Sexual violence is a violation of human rights and, in situations of armed conflict, a violation of international humanitarian law. In certain circumstances, sexual violence constitutes a war crime, a crime against humanity and an act of genocide.[15] The following are key sources of international law and norms pertaining to the prohibition and prevention of sexual violence in conflict.

International humanitarian law

Sexual violence is prohibited in armed conflict under the Geneva Conventions and the rules of customary international humanitarian law.[16]

International criminal law

The International Criminal Tribunals for Rwanda and former Yugoslavia, the Special Court for Sierra Leone and the Extraordinary Chamber in the Courts of Cambodia all consider sexual violence as a tool of war rather than a private crime. The Rome Statute of the International Criminal Tribunal recognized rape, sexual slavery, forced prostitution, forced pregnancy, forced sterilizations, gender-based persecutions, trafficking of persons (especially children and women) and sexual violence as crimes under its jurisdiction.

International human rights law

Numerous instruments set standards and norms for the protection of children and women from sexual violence. These include the Universal Declaration of Human Rights, which prohibits torture, cruel, inhuman or degrading treatment or punishment; the Convention on the Rights of the Child[17] (CRC 1989) and its Optional Protocol on the Involvement of Children in Armed Conflict[18] (OPAC); the Convention on the Elimination of All Forms of Discrimination Against Women[19] (CEDAW 1979); and the Declaration on the Elimination of Violence Against Women[20] (DEVAW 1993).

Non-State Armed Groups and International Norms[21]

Under international criminal law, individual members of non-State armed groups can be held criminally responsible for acts of sexual violence that constitute war crimes, crimes against humanity and genocide. Similar to State parties, non-State armed groups are obligated to:

- Give protection to, and collect and care for, civilians, the wounded and the sick; and

- Conduct hostilities in accordance with the obligations contained in the Geneva Conventions.

Some non-State armed groups have confirmed their obligations by adopting commitments, declarations, codes of conduct and special agreements to respect obligations under international law, such as Action Plans or Deeds of Commitment to refrain from using sexual violence.

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15 United Nations Action Against Sexual Violence in Conflict, 'Analytical and Conceptual Framing of Conflict-Related Sexual Violence', UN Action, New York, 2011.
16 See the International Committee of the Red Cross for more information on international humanitarian law: <www.icrc.org/en/war-and-law/treaties-customary-law/geneva-conventions>.
17 See <www.ohchr.org/EN/ProfessionalInterest/Pages/CRC.aspx>.
18 See <www.ohchr.org/EN/ProfessionalInterest/Pages/OPACCRC.aspx>.
19 See <www.ohchr.org/Documents/ProfessionalInterest/cedaw.pdf>.
20 See <www.un.org/documents/ga/res/48/a48r104.htm>.
21 Democratic Centre for the Control of Armed Forces and Geneva Call, 'Armed Non-State Actors: Current Trends & Future Challenges', DCAF, Geneva, 2015.

Security Council Resolutions

Eight complementary Security Council Resolutions[22] highlight the responsibilities of peace, security and humanitarian actors, including UNICEF, to monitor, prevent and respond to CRSV. These are overviewed below. Security Council Resolutions 1612 and 1960 establish formal monitoring and reporting processes for CRSV.

SCR 1325 (2001)	Recognizes the urgent need to protect women during conflict and to engage them in peacebuilding efforts; builds on resolutions that address protection of civilians and children during armed conflict.
SCR 1612 (2005)	Establishes the monitoring and reporting mechanism (MRM) on six grave violations against children in armed conflict, including sexual violence.
SCR 1820 (2008)	Recognizes sexual violence as a tactic of war and links it to international peace and security; stresses the need to increase women's role in decision-making related to conflict prevention and resolution.
SCR 1882 (2009)	Calls for listing of parties engaged in sexual violence and the integration of methods to address sexual violence into Action Plans.
SCR 1888 (2009)	Strengthens the efforts of the international community to combat sexual violence in armed conflict.
SCR 1889 (2010)	Focuses on women's participation and ensuring women's protection and empowerment are considered during post-conflict needs assessment and planning.
SCR 1960 (2010)	Establishes monitoring, analysis and reporting arrangements (MARA) on conflict-related sexual violence; mandates the Secretary-General to list those parties suspected of committing or being responsible for patterns of sexual violence.
SCR 2106 (2013)	Recognizes the need for rigorous investigation and prosecution of sexual violence crimes in conflict, and calls on Member States to continue the fight against impunity.

22 See <https://peacekeeping.un.org/en/empowering-women>

SCR 1612 monitoring and reporting mechanism (MRM) [23]

The purpose of the MRM is to provide for the systematic gathering of accurate, timely, objective and reliable information on grave violations committed against children, including rape or other sexual violence, in situations of armed conflict and in other situations of concern as determined by the UN Secretary-General.

Such information is used as a basis to foster the accountability and compliance of parties to conflict with international child protection standards and norms. This information should lead to well-informed, concerted and effective advocacy and responses to protect and care for children.[24]

Security Council Resolution (SCR) **1888** is an unprecedented marker of political commitment that recognizes sexual violence in conflict as a serious threat to sustainable peace and security. It goes beyond previous calls to keep sexual violence on the humanitarian agenda, challenging the international community to systematically address sexual violence and acknowledge this issue as a crucial part of the Security Council's wider efforts to protect children and women in armed conflict.

SCR 1960 monitoring, analysis and reporting arrangements (MARA) [25]

The purpose of the MARA is to ensure the systematic gathering of timely, accurate, reliable and objective information on CRSV against women, men and children. It serves to collect information on patterns and trends of sexual violence in situations of conflict, post-conflict and other situations of concern to the UN Secretary-General. It also collects detailed information on parties to conflict credibly suspected of committing or being responsible for rape and other forms of CRSV for the purpose of listing them in the UN Secretary-General's report to the Security Council. This information is used to promote increased and timely action to prevent and respond to CRSV, including strategic advocacy; enhanced prevention and programmatic responses for survivors; and development of comprehensive strategies to combat sexual violence at the country level.

As with the MRM, information from the MARA serves as the basis for Security Council action, including imposing sanctions and other targeted measures and establishing protection mandates in situations on the agenda of the Security Council.[26]

Resources

▸ **Monitoring and Reporting Mechanism on Grave Violations Against Children in Situations of Armed Conflict website** <www.mrmtools.org/mrm/>

▸ **Office of the Special Representative of the Secretary-General for Children and Armed Conflict website** <https://childrenandarmedconflict.un.org/>

▸ **Office of the Special Representative of the Secretary-General for Sexual Violence in Conflict website** <www.un.org/sexualviolenceinconflict/>

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23 Office of the Special Representative of the Secretary-General for Children Affected by Armed Conflict, United Nations Department of Peacekeeping Operations, and United Nations Children's Fund, *Monitoring and Reporting Mechanism (MRM) on Grave Violations against Children in Situations of Armed Conflict Guidelines,* UNICEF, New York, 2014.
24 For more information, see reports from the Office of the Special Representative of the Secretary-General for Children and Armed Conflict: <https://childrenandarmedconflict.un.org/virtual-library/>.
25 Office of the Special Representative of the Secretary-General on Sexual Violence in Conflict, Provisional Guidance Note: Implementation of Security Council Resolution 1960 (2010) On Women, Peace and Security, 2011.
26 See Office of the Special Representative of the Secretary-General for Sexual Violence in Conflict for reports: <www.un.org/sexualviolenceinconflict/key-documents/reports/>.

Dili, East Timor

Stakeholders

Key stakeholders in CRSV monitoring and response include national governments; UN entities; international non-government organizations (NGOs); national NGOs and other civil society actors; and communities.
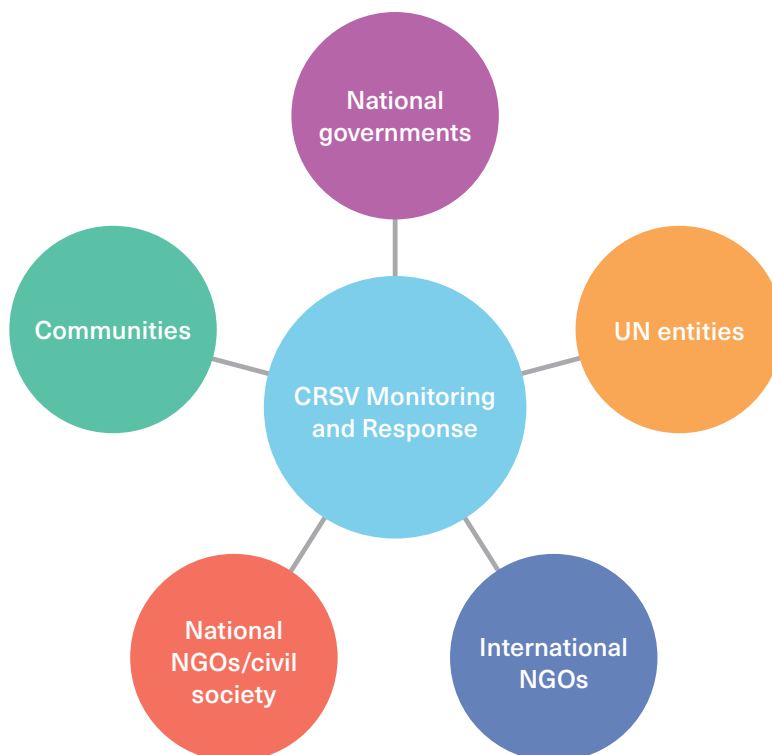
National governments

Protecting the human rights of children and women and preventing and redressing CRSV violations is the responsibility of the State. This includes States that are party to an armed conflict. States are obligated to:[27]

- Provide effective protection, as well as assistance, to victims of CRSV;

- Prevent, investigate, hold accountable and ensure redress for human rights violations, including CRSV committed by State or non-State actors;

- Provide effective remedies to victims, and prevent similar violations from occurring in the future; and

- Conduct prompt, fair and thorough investigations, as well as impartial, independent prosecutions of those alleged to have committed violations.

27 Conflict Dynamics International, 'Children in Armed Conflict Accountability Framework: A Framework for Advancing Accountability for Serious Violations against Children in Armed Conflict', Conflict Dynamics International, Cambridge, 2015.

UN entities

In situations where the State is unable or unwilling to fulfil its responsibilities toward protecting children and women from CRSV, the international community has an obligation to act. The presence, roles and responsibilities of UN entities vary according to the department or agency mandate and mission.

UN Political and Peacekeeping Missions

UN political and peacekeeping missions commonly have multidimensional mandates covering accountability for serious human rights violations, protection of civilians and strengthening of the rule of law. Special political missions vary widely in their roles and are deployed to support Member States in conflict prevention, peacemaking and peacebuilding.[28] Peacekeeping and political missions, alongside the UN Office for the High Commissioner for Human Rights (OHCHR), may have responsibilities toward human rights monitoring, including CRSV monitoring.

Within humanitarian and development programming, UN agencies – including UNICEF – support States to protect civilians and prevent CRSV, provide assistance to survivors, and build capacity of national justice systems to prosecute CRSV crimes and implement the rule of law. In settings where the MRM and/or MARA are operational, UN entities may work with parties to a conflict to develop, implement and monitor action plans to prevent CRSV and/or other violations of children's rights.

International NGOs

International NGOs are actively involved in preventing and responding to sexual violence in conflict settings. Human rights NGOs, along with those dedicated to conflict prevention or peace efforts, play an important role in CRSV monitoring, prevention and accountability. *Human rights*

NGOs collect and document testimony of CRSV survivors and witnesses, using this evidence to advocate nationally and internationally for increased action to address it. Peace-promoting organizations support community-based conflict management and prevention activities and may engage with armed actors to positively influence their behaviour.[29]

Humanitarian NGOs deliver health, psychosocial, child protection and other support services to survivors of CRSV. They also implement community protection and prevention programmes as part of their humanitarian programming, and they contribute information to CRSV monitoring efforts by sharing de-identified case management data.

National NGOs and other civil society actors

National and local human rights, humanitarian, development and peace actors are crucial to CRSV monitoring and response efforts. A wide spectrum of civil society actors – including NGOs, community-based organizations (CBOs), religious and faith-based groups, and children's and women's networks – contribute to the successful implementation of UN-led CRSV monitoring mechanisms. Through service delivery and their extensive presence in communities, civil society actors often have enhanced access to information about violations of children's and women's rights. Additionally, local NGOs may be closely linked to or leading networks and coalitions focused on protection, which may already be collecting data on children's and women's rights and therefore able to provide corroborating information.[30] They are also actively engaged in conflict prevention and resolution at the community level. Local NGOs and groups are critical sources of psychosocial care and assistance for survivors and others affected by CRSV.

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28 While special political missions vary widely in their functional roles and characteristics, they can be broadly defined as United Nations civilian missions that are deployed for a limited duration to support Member States in good offices, conflict prevention, peacemaking and peacebuilding.
29 See, for example, the work of Geneva Call: <http://genevacall.org/>.
30 Office of the SRSG for Children Affected by Armed Conflict, DPKO and UNICEF, *MRM Guidelines*.

Erbil, Iraq

The engagement of civil society is essential for effective humanitarian response to GBV, as well as to the success of the MRM and MARA. However, participation of NGOs in UN-led monitoring for MRM and MARA reporting can be highly sensitive, given the risks it may pose for NGO personnel and programmes. Each NGO will have different factors governing its participation in monitoring mechanisms, such as organizational policy, security and operational considerations, and other factors.

Communities

Communities are always at the centre of efforts to prevent and respond to GBV, including CRSV. They have capacities and responsibilities to protect children and women from violence and to provide care and support for survivors and others affected by violence. Communities can also hold States accountable and support them in upholding their obligations toward reparations and healing for human rights violations. For example, traditional, religious and other community leaders may have responsibilities related to accountability for human rights violations in post-conflict situations,[31] and children and women can play an active role in accountability processes aiming to seek truth, justice and reparation.

Challenges in CRSV monitoring and response

Monitoring and responding to CRSV involves sensitive, complex and challenging activities. Even in stable settings, there are significant obstacles to collecting and sharing information about sexual violence and implementing coordinated multi-stakeholder action to prevent and respond to it. In situations of political instability or conflict where sexual violence is a sensitive political, military and security issue, the obstacles are magnified. In such settings, even inquiring about sexual violence can be dangerous for survivors and those assisting them. It is therefore mandatory that *all actors involved in CRSV monitoring and response are aware of and take steps to minimize the risks and challenges* that arise in sexual violence work.

Common challenges in monitoring and responding to CRSV are outlined in the following pages, including operational and practical constraints; high rates of non-disclosure by sexual violence survivors; risks to survivors, supporters and staff; problems related to data collection, analysis and

31 Conflict Dynamics International, *Children in Armed Conflict Accountability Framework*, Conflict Dynamics International, 2015.

Hohhot, Mongolia

A lack of adequate resources and capacity also constrain human rights or humanitarian endeavours to collect reliable information and monitor CRSV on an ongoing basis across all affected areas. For this reason, caution must be exercised not to generalize about CRSV from limited data. Further, many conflict-affected settings are characterized by a breakdown in provision of even basic services, making it difficult to maintain even a minimum set of basic health and psycho-social responses for survivors.

High rates of non-disclosure by sexual violence survivors

Sexual assault is a highly traumatic form of violence, associated with severe emotional, psychological and social consequences for many survivors. Even in settings where good quality services do exist and social stigma attached to being a victim of sexual assault is low, the vast majority of survivors never disclose their experience. In settings where survivors' trauma is compounded by other human rights violations and abuses, where there is a lack confidence and trust in services, and/or where the effects of victim-blaming, loss of honour or other social stigma can be devastating, it is unsurprising that disclosure rates are low. Low rates of disclosure do, however, contribute to keeping the issue hidden; this poses a challenge to the development of an accurate picture of the scale and scope of the problem, which is vital for designing effective prevention, protection and response to it.

For some individuals, disclosing their experience can be healing and empowering. However, this is not universally the case. It is of the utmost importance that all humanitarian, peace and security actors understand and respect that some survivors will not want to disclose what has happened to them or have their information shared. *All people have the right to decide who should know their personal and private information.*

Lessons Learned from the 1612 MRM

sharing activities; and inadequate resourcing and capacity. These challenges are based on several sources, including **lessons from the implementation of the MRM**.[32] *Steps in Implementing CRSV Monitoring and Response* on page 27 offers information and key recommendations for addressing and minimizing these challenges.

Operational and practical constraints

Numerous operational constraints make it difficult to aid survivors, protect communities and collect information about CRSV. Operating in insecure environments poses logistical and security problems for humanitarian protection and assistance efforts, especially those linked to human rights violations perpetrated by parties to a conflict. Information collection, protection and assistance activities continue to be constrained by security threats to staff, restricted humanitarian access, and frequent displacement of affected populations due to military dynamics and armed group control over territory. The problems may be heightened in situations where armed groups do not appreciate the distinction between military and humanitarian objectives and may not perceive humanitarian or human rights workers as neutral and impartial.

32 These lessons are drawn from humanitarian action to prevent and respond to GBV, including sexual violence perpetrated by armed groups, and from implementing the MRM and MARA.

Risks to survivors, supporters and staff

There are extremely serious risks associated with inquiring about sexual violence, especially in settings where there is a high likelihood of, and few protections against, retaliation. Unlike other human rights abuses, survivors of sexual violence often face the threat of further violence, abuse, discrimination or rejection from their own families and communities, as well as retaliation from perpetrators. In societies with strong social norms that associate female virginity and sexuality with honour and shame, the consequences of social stigma and victim-blaming can include homicide, violent punishment, or social disgrace and rejection.

Staff without extensive experience working in the field of sexual assault do not always fully appreciate how sexual violence differs from other human rights violations. They may not understand why identifying and interviewing survivors and documenting their experiences must only be done *when absolutely necessary* – and even then, within the strictest guidelines.

Human rights monitors and service providers who do not adhere to **strict ethical and safety guidelines** can cause further harm and trauma to survivors and deter others from coming forward to report or get help. In situations where survivors can see that the process of disclosure is harmful or risky, they are less likely to share their stories. This means sexual violence will continue to be severely underreported, a culture of impunity will remain entrenched, and children and women will continue to be at risk.

As well as creating risks for survivors, unsafe practices in CRSV monitoring and response can cause harm to others, including other members of the affected population and humanitarian staff and operations. Examples of risks and problems associated with unsafe monitoring and services are given in the table below.

Risks associated with unsafe monitoring and services	
Survivors & witnesses	• Actual or threatened violence from perpetrators and those supporting or associated with them, including armed groups participating in a conflict
	• Violence, rejection or abandonment by family or community due to: stigma associated with sexual violence; social norms pertaining to sex, honour and shame; the perception of colluding with an enemy; or the perception of contamination (e.g., of HIV)
	• Re-traumatization due to insensitive or inappropriate interviewing
Communities	• Violence, intimidation or other retaliation by a party to conflict as collective punishment for speaking out or disclosing information pertaining to human rights abuses, including sexual violence
Humanitarian staff & agencies	• Threat of violence or intimidation of agency staff who are believed to have disclosed information about CRSV, especially in areas where there are no or few other service providers
	• Restriction or loss of humanitarian access to affected populations caused by damage to the perception of humanitarian impartiality and neutrality
	• Vicarious traumatization of staff

Problems related to data collection, analysis and sharing activities

Data Collection, Analysis and Flow

Poor quality **data collection, analysis and information sharing** practices can lead to an inaccurate picture of the nature and scope of CRSV perpetration and victimization. This can hinder the design of effective strategies to help survivors, protect at-risk communities and target prevention efforts. It also undermines efforts to hold those responsible accountable for their crimes.

Inadequate technical input and oversight, inconsistent classification of incidents, untrained staff and a lack of standards for data sharing are common problems that undermine effective GBV information management and CRSV monitoring. These problems are compounded in some settings by the high number of people in different organizations gathering multiple, overlapping and uncoordinated databases of CRSV and other human rights incidents.[33]

Verification

A significant challenge in CRSV monitoring and reporting is the issue of **verification**. Verification involves corroborating information received about a human rights violation to verify the accuracy of the report. Within formal human rights monitoring mechanisms, the standards of verification typically rely on individual testimony to prove incidents, and they are one of the key impediments to monitoring and reporting sexual violence violations.[34] Often, community members report that sexual violence incidents have been perpetrated, but no individuals will come forward to verify it.

Difficulties in identifying reliable sources of information can make documentation and verification of CRSV incidents challenging. In most cases, the actual numbers of incidents are far higher than recorded; as such, incidents collected through monitoring activities are only indicative of the types of violations occurring, not a comprehensive overview. Without individual testimony to corroborate incidents, many violations are not reflected in monitoring reports submitted to the UN Security Council. However, verifying case-specific information can lead to violation of the confidentiality, safety, security, dignity and other rights of survivors.

Inadequate resourcing and capacity

Effective CRSV monitoring and response systems require adequate resourcing. Even with the highest level of commitment, it is not possible to carry out safe and effective monitoring or take action to address CRSV when there is a lack of appropriately skilled, experienced and trained personnel equipped with the resources necessary to support their work.

CRSV information collection and management are specialized areas of work that require a high level of technical expertise, not only to establish and manage rigorous data collection and analysis processes, but also to facilitate the safe sharing of information. Equally, providing assistance and support to survivors, working with communities to implement concrete and effective protection strategies, and influencing duty bearers to change their behaviour all require specialized knowledge, expertise, the input of GBV specialists, and significant investment in building the capacity of national actors and institutions.

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33 Mahony, 'Non-military strategies for civilian protection in the DRC'.
34 Research conducted by UNICEF found three key issues linked to underreporting of sexual violence violations: i) the lack of GBV-related services available to survivors; ii) minimal input from agencies and institutions with experience addressing GBV survivors; and iii) verification as burden of proof.

Steps in implementing CRSV monitoring and response

Following is step-by-step information and resources for COs to work in close partnership with all key stakeholders to establish and implement good practice in CRSV monitoring and response. It also offers information and key recommendations for minimizing the challenges inherent in this important but sensitive area of work. This work consists of five steps:

Step 1: Coordinate stakeholders
- 1.1 – Conduct stakeholder mapping and analysis
- 1.2 – Define the CRSV coordination architecture and relationships
- 1.3 – Sensitize UNICEF and partner staff on CRSV monitoring and response

Step 2: Establish ethical, safe, and child- and survivor-centred monitoring systems and practices
- 2.1 – Ensure minimum services and referral pathways are in place before monitoring activities occur
- 2.2 – Conduct risk assessment and risk management planning
- 2.3 – Develop guidance and build UNICEF and partner capacity to implement ethical, safe, and child- and survivor -centred principles and practice

Step 3: Empower communities
- 3.1 – Empower survivors, their advocates and communities with information
- 3.2 – Create opportunities for community participation in the planning and implementation of CRSV monitoring and response

Step 4: Collect, analyse and share data
- 4.1 – Plan for and ensure adequate technical and operational capacity for CRSV information management activities
- 4.2 – Develop and agree on protocols for collecting and receiving information related to CRSV in line with best practice standards

Step 5: Take action to assist survivors, protect communities, prevent perpetration and strengthen accountability
- 5.1 – Assist survivors
- 5.2 – Protect communities
- 5.3 – Prevent perpetration
- 5.4 – Strengthen accountability

Step 1: Coordinate stakeholders

Collecting and analysing information about incidents, patterns and dynamics of sexual violence – as well as acting to prevent perpetration, protect communities and assist survivors – relies on the engagement, input and coordination of a broad group of stakeholders with different mandates and objectives. From the largest multi-dimensional international peacekeeping mission to the smallest local women's group, each actor has an important role to play in preventing and responding to CRSV. It is essential to ensure all actors are

Mogadishu, Somali

engaged; have a shared understanding of the diverse mandates, roles and responsibilities of others; and are well coordinated. This helps to:

- Build ownership and collective responsibility for addressing CRSV across local and international humanitarian and peace and security systems;

- Promote a collaborative and system-wide approach to protecting communities from CRSV and assisting survivors;

- Harness the expertise, resources, relationships and networks that different organizations and groups bring to CRSV monitoring and response activities, as well as to prevention, protection and survivor assistance; and

- Maximize the opportunities for capturing data from existing sources, thereby reducing duplication of efforts and eliminating the need to re-interview survivors or witnesses.

Resources

▶ **United Nations Civil-Military Coordination Field Handbook**
UNOCHA Civil-Military Coordination Section (2015)
<https://docs.unocha.org/sites/dms/ Documents/CMCoord%20Field%20 Handbook%20v1.0_Sept2015.pdf>

▶ **Global Good Practices Study: Monitoring and Reporting Mechanism on Grave Violations against Children in Situations of Armed Conflict**
Office of the SRSG for Children and Armed Conflict, DPKO and UNICEF (2013)
<https://reliefweb.int/report/world/global -good-practices-study-monitoring-and -reporting-mechanism-mrm-grave -violations>

There are often multiple overlapping inter-agency coordination mechanisms, each with different but complementary mandates for monitoring and responding to CRSV. To reduce duplication and maximize efforts and resources, it is vital to create strong linkages between different mechanisms while respecting the mandates of others.

The **GBV and CP sub-clusters**, the **MRM Task Force,** and the **MARA Working Group** are multi-stakeholder coordination mech-anisms with different but complementary roles in CRSV monitoring and response. In some settings, there may also be a network or working group for the prevention of sexual exploitation and abuse (PSEA).

for conducting assessments on the GBV situation and implementing the **Gender-Based Violence Information Management System (GBVIMS)**, a source of GBV-related data in conflict-affected settings.

The terms of reference and membership of sub-clusters vary across settings. In some countries, government authorities co-chair the GBV sub-cluster; in other settings, there may be no or limited government involvement.

Resources

▶ **Provisional Guidance Note on the Intersections Between the Gender-Based Violence Information Management System (GBVIMS) and the Monitoring and Analysis Reporting Arrangements (MARA)**
GBVIMS (2016)
<www.gbvims.com/wp/wp-content/up
loads/Provisional-Guidance-Note-on-Inter
sections-Between-GBVIMS-MARA.pdf>

▶ **Handbook for Coordinating Gender-Based Violence Interventions in Humanitarian Settings**
Gender-Based Violence Area of Responsibility (2010)
<www.refworld.org/docid/52146d634.html>

▶ **Child Protection in Emergencies Coordination Handbook**
Child Protection Area of responsibility (2016)
<http://cpwg.net/wp-content/uploads/
sites/2/2016/03/Child-Protection
-Coordination-Handbook.pdf>

GBV and CP sub-clusters: The GBV sub-cluster is the principle coordination body for GBV prevention and response in humanitarian settings. The sub-cluster has oversight of multi-sectoral service delivery for survivors – the availability of which is a pre-requisite for monitoring and reporting CRSV. The sub-cluster is also responsible

MRM Task Force: In settings where SCR 1612 applies, the Special Representative of the Secretary-General (SRSG) or Resident Coordinator/Humanitarian Coordinator (RC/HC) establishes a 1612 MRM **Country Task Force for Monitoring and Reporting (CTFMR).** The CTFMR is made up of all relevant UN entities, represented at the most senior level in country. These may include: representatives of the peacekeeping or political mission; UNICEF; OCHA; UNHCR; UNHCHR; UNDP; UNFPA; and UN Women.

The CTFMR is co-chaired by the highest UN authority in the country, whether the SRSG or RC/HC, and the UNICEF Representative.[35]

Collecting and reporting information on rape and other forms of sexual violence remains a significant challenge for many MRM Task Forces.[36] As co-lead of the CTFMR, UNICEF plays a key role in ensuring good coordination and linkages between the CTFMR, the GBV and CP sub-clusters, and MARA working groups. UNICEF also has a responsibility to promote ethical, safe, and child- and survivor-centred practices within the MRM – which is one strategy for addressing the challenge of collecting and reporting information on sexual violence.

Resources

▸ **Monitoring and Reporting Mechanism (MRM) on Grave Violations against Children in Situations of Armed Conflict: Guidelines and Field Manual**
Office of the SRSG Children Affected by armed conflict, DPKO and UNICEF (2014)
<https://childrenandarmedconflict.un.org/wp-content/uploads/2016/04/MRM_Guidelines_-_5_June_20141.pdf>

▸ **Getting It Done and Doing It Right: A global study on the United Nations-led monitoring and reporting mechanism on children and armed conflict**
Watchlist on Children and Armed Conflict (2008)
<http://watchlist.org/publications/global-study-on-the-implementation-of-the-un-led-monitoring-and-reporting-mechanism-mrm/>

MARA Working Group: In settings where SCR 1960 is being implemented, the SRSG or RC/HC is responsible for establishing a technical-level working group on CRSV to oversee the MARA. The working group is convened by a Women Protection Adviser (WPA), a position established within peacekeeping missions with specific responsibility for implementing SCR 1960. Pending appointment of a WPA, a UN entity may be identified after consultation within the senior UN team in-country to lead the MARA working group. Depending on the mission structure and mandate, various actors with UN missions may be involved in the working group, including the Office of the Gender Advisor; Human Rights, Rule of Law, Child Protection and HIV/AIDs sections of UN missions; and military and police components. UN humanitarian agencies, including UNICEF, are also members of the working group.

The MRM and MARA are expected to capitalize and build on existing human rights, CP and GBV coordination mechanisms, as well as databases established by UN peacekeeping missions and within the humanitarian cluster system. Emphasis should be placed on collaboration and coordination between peacekeeping and humanitarian actors. Such collaboration should be undertaken in a manner consistent with humanitarian principles.[37] Both the MRM Task Force and MARA Working Groups are political missions that have relationships with the government, while at the same time working to address human rights violations perpetrated by the State. Governments do not participate in MRM or MARA working groups; however, where it is safe and feasible, systematic and regular contact with government authorities is crucial for effective CRSV monitoring and response.[38] The level and type of information sharing and collaboration with different arms of government depend on whether the government, or groups associated with it, are complicit in the perpetration of CRSV.

35 Office of the SRSG for Children and Armed Conflict, DPKO and UNICEF, *MRM Guidelines*.
36 Office of the Special Representative of the Secretary-General for Children and Armed Conflict, United Nations Department of Peacekeeping Operations, and United Nations Children's Fund, *Global Good Practices Study: Monitoring and Reporting Mechanism (MRM) on Grave Violations against Children in Situations of Armed Conflict,* UNICEF, New York, 2013.
37 Office of the SRSG on Sexual Violence in Conflict, Provisional Guidance Note, 2011.
38 Office of the SRSG for Children Affected by Armed Conflict, DPKO and UNICEF, *Global Good Practices Study: MRM;* and The Watchlist on Children and Armed Conflict, *Getting It Done and Doing It Right: A Global Study on the United Nations-led Monitoring & Reporting Mechanism on Children and Armed Conflict,* Watchlist, New York, 2008.

There are often multiple overlapping inter-agency coordination mechanisms, each with different but complementary mandates for monitoring and responding to CRSV.
To reduce duplication and maximize efforts and resources, it is vital to create strong linkages between different mechanisms while respecting the mandates of others.

As a lead agency within the humanitarian
cluster system and in MRM and MARA
implementation, UNICEF COs are excep-
tionally well-placed to help streamline and
strengthen inter-agency coordination to
support effective CRSV monitoring and
response. COs can take the following steps
to build good coordination between the
various actors and mechanisms:

1.1 Conduct stakeholder mapping and
analysis;

1.2 Define the CRSV coordination architec-
ture and relationships; and

1.3 Sensitize UNICEF and partner staff on
CRSV monitoring and response.

Gaziantep, Turkey

1.1 Conduct stakeholder mapping and analysis

UNICEF COs can lead or support a mapping
exercise to identify all stakeholders with
influence over and responsibilities toward
CRSV monitoring and response in a certain
context. A mapping should identify:

✓ **Key local, national and international
actors,** as well as their mandates, focal
points and current activities for:

- Collecting and sharing information
on CRSV, including for humanitarian
response and for UN-led monitoring and
reporting under the MRM and MARA;

- Providing immediate and longer-term
health, psychosocial, safety and reinte-
gration support for survivors, including
survivors and their children born of rape;

- Providing humanitarian and military
protection of at-risk communities,
populations or groups;

- Working with government, non-State
armed actors and other duty bearers of
IHL to prevent perpetration of CRSV;

- Developing community-level conflict
and violence prevention and peace
programming; and

- Strengthening or instituting local and
national accountability mechanisms,
including national justice systems and
truth and reconciliation commissions.

✓ **Needs/gaps in coverage**, such as gaps
in clinical health and psychosocial ser-
vices for rape survivors, which may limit
coverage of CRSV monitoring activities.

✓ **Existing humanitarian, peace and secu-
rity coordination mechanisms**, working
groups and task forces, as well as their
terms of reference, membership, roles,
responsibilities and division of labour for
CRSV monitoring and response. Don't
forget to coordinate with relevant PSEA
working groups where they are in place.

Tools

Resources

▶ **The 1612 Monitoring and Reporting Mechanism: NGO Resource Pack**
Watchlist on Children and Armed Conflict (2015)
<http://watchlist.org/resource-pack-on-ngo-engagement-in-the-mrm-2/>

▶ **Terms of Reference for In-Country Network on Protection from Sexual Exploitation and Abuse by UN/NGO/IGO Personnel**
UN and NGO Task Force on PSEA (2008)
<http://pseataskforce.org/en/tools>

1.2 Define the CRSV coordination architecture and relationships

There is no 'one size fits all' model for how the various coordination mechanisms mandated to address CRSV intersect and interact. It is critical that the relationships, areas of collaboration and parameters for information sharing are agreed on and documented, and that all actors understand and respect the mandate and operational concerns of others – such as the imperative for humanitarian actors to maintain the perception of impartiality and neutrality. The most appropriate framework for inter-agency coordination is best determined at the local level. Country-level coordination arrangements require a pragmatic approach that is flexible; based on country-specific circumstances; and avoids duplication of functions, overburdening of actors and confusion of roles.[39]

This entails, among other things, ensuring clarity, principles and procedures for civilian and military interaction, as well as for information sharing and protection activities. In some settings, GBV sub-clusters may provide an appropriate forum for facilitating interaction between humanitarian actors and UN peacekeeping missions on CRSV issues. However, in contexts where UN forces are engaged in combat operations and are themselves a party to the conflict, the UN mission may be viewed by some actors as perpetuating harm. In these contexts, it is essential that humanitarian agencies preserve their actual and perceived neutrality, impartiality and independence to maintain their ability to negotiate access and deliver assistance.[40] In such settings, it may not be appropriate to include UN mission personnel in GBV sub-clusters, and alternative, discreet coordination arrangements will need to be established.[41]

Where there are multiple coordination mechanisms intersecting with CRSV monitoring and response, UNICEF COs can take the following actions to support the development of an effective coordination framework:

✔ **Identify a focal point** for CRSV within the CO.

✔ **Bring MARA, MRM, GBV and CP sub-cluster lead agencies together to define the coordination architecture, linkages, principles and procedures** for interacting on CRSV monitoring and response.

✔ **Contribute to the development of Standard Operating Procedures (SOPs)** for coordination between humanitarian and UN peacekeeping missions. These SOPs should set out mandates and processes for collaboration on information sharing, joint assessment and protection of civilians.

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39 Office of the SRSG on Sexual Violence in Conflict, *Provisional Guidance Note*, 2011.
40 Global Protection Cluster, *Diagnostic Tool and Guidance on the Interaction Between Field Protection Clusters and UN Missions,* GPC, Geneva, 2013.
41 GPC, *Diagnostic Tool and Guidance.*

Tools

CRSV Tool 2: Coordination Architecture Options

Resources

▶ **United Nations Civil-Military Coordination Field Handbook**
UNOCHA Civil-Military Coordination Section (2015)
<https://docs.unocha.org/sites/dms/Documents/CMCoord%20Field%20Handbook%20v1.0_Sept2015.pdf>

▶ **Diagnostic Tool and Guidance on the Interaction Between Field Protection Clusters and UN Missions**
Global Protection Cluster (2013)
<www.globalprotectioncluster.org/_assets/files/tools_and_guidance/GPC_Diagnostic_Tool_Interaction_UN_Missions_2013_EN.pdf>

▶ **Civil-Military Guidelines and Reference for Complex Emergencies**
UNOCHA (2008)
<https://docs.unocha.org/sites/dms/Documents/ENGLISH%20VERSION%20Guidelines%20for%20Complex%20Emergencies.pdf>

▶ **Guidelines for the Coordination between Humanitarian Actors and the United Nations Mission in South Sudan**
UNCT and UNMISS (2014)
<https://docs.unocha.org/sites/dms/Documents/A05%20Guidelines%20for%20the%20Coordination%20between%20Humanitarian%20Actors%20and%20the%20UNMISS.pdf>

▶ **UN OCHA Humanitarian Civil-Military Coordination Publications**
<www.unocha.org/legacy/what-we-do/coordination-tools/UN-CMCoord/publications>

Capacity Development

▶ **United Nations Humanitarian Civil-Military Coordination E-Learning**
<www.usipglobalcampus.org/training-overview/uncmcoord/>

1.3 Sensitize UNICEF and partner staff on CRSV monitoring and response

Good coordination of CRSV monitoring and response is aided by all stakeholders having a shared understanding of the issue; the humanitarian/peace and security framework in place for addressing it; and the mandates and roles of different actors within that framework. UNICEF and partner staff, both Protection and non-Protection specialists, must be informed about the issue of CRSV and oriented to the monitoring and response architecture and responsibilities. This is essential for COs to deliver on UNICEF's responsibilities toward monitoring within the MRM and MARA, as well as its responsibilities toward assisting survivors, protecting at-risk communities and preventing further rights violations.

COs can implement the following activities to build staff and partner knowledge and engagement on CRSV prevention and response:

✔ **Provide orientation** for UNICEF staff on CRSV, covering:

  • The legal and normative frameworks for CRSV;

  • Formal monitoring and response mechanisms; and

  • UNICEF, NGO and CBO roles and responsibilities in information collection and reporting.

✔ **Provide regular briefings** to UNICEF and partner staff on progress and activities within CRSV monitoring and response to keep them informed.

Amarah, Iraq

The following checklist will assist COs in coordinating stakeholders for CRSV monitoring and response.

Coordination checklist	
Stakeholder mapping for CRSV monitoring and response is conducted.	◯
Inter-agency coordination architecture and procedures for CRSV monitoring and response are in place.	◯
SOPs for civilian-military engagement and coordination on CRSV are in place.	◯
CO CRSV Focal Point is in place.	◯
UNICEF staff is sensitized on CRSV and on roles and responsibilities in monitoring and response.	◯

Step 2: Establish ethical, safe, and child- and survivor-centred monitoring systems and practices

Collecting information about sexual violence in the context of armed conflict presents serious ethical, safety and security challenges. If not done carefully, sexual violence monitoring activities can create serious risk of harm to survivors and witnesses and can violate basic ethical principles. Unsafe practices can also create threats to humanitarian staff and operations.

Prioritizing **ethical, safe, and child- and survivor-centred processes** and practices in CRSV monitoring and response activities is a priority for every actor, regardless of their mandate or objectives. While those providing health, psychosocial and safety services to survivors are often aware of the importance of adhering to ethical and safe survivor-centred practices, personnel involved in interviewing survivors or witnesses of human rights violations for documentation purposes may be less familiar with the rationale and requirements for ethical and safe practices.

All initiatives aimed at gathering and sharing information on CRSV must be approached with utmost caution. Every effort must be made to ensure processes are in place for collecting the best possible information, *while at the same time prioritizing protection, dignity, rights and confidentiality of survivors and witnesses*. Documenting and reporting CRSV must not *under any circumstances* put survivors, witnesses or others at risk of further harm.

All stakeholders in CRSV monitoring and response must adhere to ethical and safety standards and adopt a survivor-centred approach throughout all monitoring and response activities. Doing so is essential to:

- Promote and uphold the fundamental human rights of survivors to security, privacy, respect and dignity;

- Protect the identity of survivors and others, and to reduce the risk of further harm or retaliation to survivors, communities and those who support them; and

- Increase the likelihood that survivors, witnesses and service providers will feel confident and safe in coming forward to report incidents, contributing to better data collection on CRSV.

Ethical and safety guidelines

Eight ethical and safety recommendations must be followed at all times by all actors, including human rights monitors or others gathering information for documentation and reporting purposes.[42]

1. The benefits to respondents or communities of documenting sexual violence must be greater than the risks to respondents and communities.

2. Information gathering and documentation must be done in a manner that presents the least risk to respondents, is methodologically sound, and builds on current experience and good practice.

3. Basic care and support for survivors must be available locally before commencing any activity that may involve individuals in disclosing information about their experiences of sexual violence.

4. The safety and security of all those involved in information gathering is of paramount concern and, in emergency settings, should be continuously monitored.

5. The confidentiality of individuals who provide information about sexual violence must be protected at all times.

6. Anyone providing information about sexual violence must give informed consent before participating in the data gathering activity.

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42 World Health Organization, *Ethical and Safety Recommendations for Researching, Documenting and Monitoring Sexual Violence in Emergencies*, WHO, Geneva, 2007.

7. All members of the data collection team must be carefully selected and must receive relevant and sufficient specialized training and ongoing support.

8. Additional safeguards must be put into place if children (i.e., those under 18 years) are to be the subject of information gathering.

Considering the ethical and safety dimensions of all monitoring and response activities from the very beginning will help minimize the potential risks that talking about CRSV can have for survivors, community members and staff involved in monitoring and response.

Malakal, South Sudan

Resources

▶ **Ethical and Safety Recommendations for Researching, Documenting and Monitoring Sexual Violence in Emergencies**
World Health Organization (2007)
<www.who.int/gender/documents/OMS_Ethics&Safety10Aug07.pdf>

A survivor-centred approach

Survivors of sexual violence have a right to compassionate care and support to promote their health and recovery. They also have the right to decide what help is best for them and who should know about what has happened. Child survivors equally have the right to quality, compassionate and child-centred care, support and protection. Everyone who comes in contact with child survivors, including human rights monitors, needs appropriate knowledge and skills in engaging with children.

A survivor-centred approach involves promoting empowerment and respect for each survivor in all CRSV monitoring and response activities. This approach recognizes that each person:

• Has equal rights to care, support and protection;

• Is different and unique;

• Will react differently to sexual violence;

• Has different strengths, capacities, resources and needs;

• Has rights, appropriate to her age and developmental level, to participate and have a voice in actions and decisions affecting her; and

• Needs to feel protected, respected and recognized.

Tamil Nadu, India

Survivor-centred principles

Principle 1: Right to safety. Safety refers to physical safety and security, as well as to a sense of psychological and emotional safety for people who are highly distressed.

Principle 2: Right to confidentiality. Maintaining confidentiality means not disclosing any information at any time to any party without the informed consent of the person concerned.

Principle 3: Dignity and self-determination. All those who come into contact with survivors have a role to play in restoring dignity, and survivors have the right to self-determination regarding their information and assistance.

Principle 4: Non-discrimination. All people have the right to the best possible assistance without unfair discrimination on the basis of gender, age, disability, race, colour, language, religious or political beliefs, sexual orientation, status or social class.

Best interests of the child principle. Every child is unique and will be affected differently by sexual violence. Decisions and actions affecting the child should reflect what is best for their safety, well-being and development.

A survivor-centred approach aims to create an environment in which each survivor is treated with dignity and respect and their rights to services and self-determination are upheld. Putting a survivor-centred approach into practice in CRSV monitoring and response activities involves applying rights-based, **survivor-centred principles** in all interactions with survivors; making sure survivors have access to coordinated, **confidential** and quality services; and making sure all those who interact with survivors – including those collecting information on CRSV for the MRM, MARA or other monitoring mechanisms – are skilled and compassionate.

Survivor-Centred Principles

Confidentiality

When **working with child survivors**, additional considerations for being child survivor-centred include making sure staff are trained in **obtaining permission from a child** to collect information in an age-appropriate manner. It also means adhering to the **best interests of the child principle** at all times. It is paramount to ensure those who interact with child survivors for the purpose of collecting information or providing services are skilful in communicating with children; skilful in ensuring the child's appropriate level of participation based on her/his age and developmental level; and able to listen and communicate respect.

Working with Child Survivors of Sexual Abuse

Obtaining Permission from a Child

UNICEF COs must ensure all CRSV monitoring and response activities with which UNICEF is associated (including the 1612 MRM, the 1960 MARA, and GBV and CP programming) are implemented in line with ethical and safety standards and survivor-centred principles. UNICEF COs must take the following steps to ensure ethical, safe, and child- and survivor-centred CRSV monitoring systems and processes are in place:

2.1 Ensure minimum services and referral pathways are in place before monitoring activities occur;

2.2 Conduct risk assessment and risk management planning; and

2.3 Develop guidance and build UNICEF and partner capacity to implement ethical, safe, and child- and survivor-centred principles and practice.

2.1 Ensure minimum services and referral pathway are in place before monitoring activities occur

It is not ethical to ask about sexual assault without offering survivors information and referrals for basic services to address the consequences of violence. *In locations where there are no services available, CRSV monitoring activities should not be undertaken unless some provision is made for enabling survivors to access services*. Even in insecure environments, agencies conducting CRSV monitoring have a responsibility to ensure survivors who disclose have access to health and psychosocial services and that every effort is made to prioritize their safety.[43]

While the establishment of the MRM or MARA provide an opportunity to improve information collection on CRSV, they also provide an opportunity to expand the availability, accessibility and quality of survivor services. Increased availability of services will, in turn, result in more accurate information related to sexual violence, as services are an important source of incident data on CRSV.

UNICEF COs should take the following actions to ensure minimum services and referral pathways are in place for sexual violence survivors:

✔ **Scale up the availability of a minimum set of age-appropriate care and support services** for survivors of sexual violence, including referral protocols, in operational areas.

✔ **Ensure information on the referral pathway for sexual violence survivors is widely available.**

✔ **Inform humanitarian and peace and security actors of the ethical requirement** to have a minimum set of age-appropriate services and referral protocols in place before conducting sexual violence monitoring activities.

Tools

See **Kit 3.1: Programming – Responding to GBV Survivors in Emergencies** for information and resources on establishing a minimum set of GBV services on survivors.

2.2 Conduct risk assessment and risk management planning

Collecting and sharing information on CRSV generates safety and security risks for survivors, witnesses, those supporting them, and potentially even humanitarian staff and operations. All actors involved in CRSV monitoring must proactively consider the potential consequences and take the following actions to minimize and manage risks:

✔ **Conduct risk assessments** for all CRSV monitoring and response activities with which UNICEF is associated.

✔ **Plan and implement risk mitigation activities** to address any identified risks. Risk mitigation must include additional safeguards if children are to be the subject of information gathering.

✔ Ensure MRM and MARA Task Forces and Working Groups **devise strategies to identify, mitigate and respond to security threats arising from CRSV monitoring and reporting.**

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43 This is also consistent with the recommendation to amplify the participation of service providers in monitoring, reporting and response of sexual violence violations set out in Watchlist on Children and Armed Conflict, 'UN Security Council Resolution 1612 and Beyond', Watchlist, New York, 2009.

Resources

▶ **Guidelines on the Protection of Human Rights Defenders**
Office for Democratic Institutions and Human Rights (2014)
<www.osce.org/odihr/guidelines-on-the-protection-of-human-rights-defenders>

Nara, Mali

2.3 Develop guidance and build UNICEF and partner capacity to implement ethical, safe, and child- and survivor-centred principles and practice

Upholding the dignity and rights of survivors is a priority within all CRSV monitoring, reporting and response activities. Survivors' rights to safety, confidentiality and self-determination are paramount within **all** information collection, information sharing, service delivery and accountability processes. UNICEF COs can take the following actions to facilitate survivor-centred practices within CRSV monitoring and response:

✔ **Support the development of guidance** for operationalizing ethical, safe and survivor-centred principles within CRSV monitoring, including special considerations for children. Guidance must explicitly address:

- Safety and confidentiality of all individuals who provide information about sexual violence to UN-led monitoring mechanisms;

- Self-determination and informed consent regarding information sharing; and

- The best interests of the child in all monitoring procedures and practices.

✔ **Provide mandatory training** on ethics, safety and survivor-centred practice for all UNICEF and partner staff involved in CRSV monitoring and response.

✔ **Sensitize other actors** (including human rights monitors and organizations; civilian and military personnel within UN missions; NGOs; journalists; etc.) on survivor-centred principles in monitoring and reporting CRSV.

The following checklist will assist COs in prioritizing ethics and safety within CRSV monitoring and response.

A minimum set of age-appropriate care and support services for survivors of sexual violence, including referral protocols, are available in operational areas. ◯

Information on the referral pathway for sexual violence survivors is widely available. ◯

Humanitarian and peace and security actors are informed of the requirement to have a minimum set of age-appropriate services and referral protocols in place before conducting sexual violence monitoring activities. ◯

A risk assessment is undertaken and a mitigation plan is in place for CRSV monitoring and response activities with which UNICEF is associated. ◯

MRM and MARA Task Forces and Working Groups have strategies in place to identify, mitigate and respond to security threats arising from CRSV monitoring and reporting. ◯

Guidance is available to all actors on operationalizing survivor-centred principles within CRSV monitoring and response. ◯

UNICEF and partner staff involved in MRM/MARA implementation or humanitarian protection/assistance programming are trained on ethics, safety and survivor-centred principles. ◯

Human rights organizations, civilian and military personnel within UN missions, NGOs, journalists, and other actors are sensitized on survivor-centred principles. ◯

Step 3: Empower communities

Communities are often-overlooked stake-holders in CRSV monitoring and response; and yet, they are active agents in their own protection. Communities have expertise, capacities and resources to contribute to monitoring CSRV, assisting survivors and protecting at-risk children and women. Conflict-affected communities have a right to information on issues, activities and pro-grammes that affect them, as well as a right to participate in CRSV monitoring, reporting and accountability processes. Community participation is a cornerstone of humani-tarian action and a rights-based approach.

As such, community participation is a key element of CRSV response – in particular, for:

- Building positive community norms that support care, protection and reintegration of CRSV survivors;

- Designing locally effective community protection strategies that build on com-munity strengths, resources and coping mechanisms; and

- Developing community-based prevention interventions to address local dynamics that contribute to conflict and sexual violence.

Dili, East Timor

UNICEF COs can take the following steps to engage and empower communities in CRSV monitoring and response activities.

3.1 Empower survivors, their advocates and communities with information; and

3.2 Create opportunities for community participation in the planning and implementation of CRSV monitoring and response.

3.1 Empower survivors, their advocates and communities with information

To enable survivors, their caregivers, witnesses and others to make informed decisions about accessing and participating in monitoring, assistance, protection and accountability mechanisms, UNICEF COs can:

✔ **Provide communities with survivor-centred and child-friendly information on CRSV monitoring processes**; how individuals can participate; the rights of survivors and witnesses to confidentiality and safety; and the availability of support services.

✔ **Provide communities with survivor-centred and child-friendly information on available accountability processes for CRSV**; how they operate; the benefits and risks of participation; and witness protection and support programmes.

3.2 Create opportunities for community participation in the planning and implementation of CRSV monitoring and response

While extensive community consultation may not be possible in insecure areas (or in situations where perpetrators pose a continued threat), where it is safe to do so, UNICEF COs can take the following actions to support community participation in CRSV monitoring and response:

✔ **Ensure consultation with children's and women's representatives** or groups during MRM and MARA establishment phases. Consultation should cover the following issues:

- Identification and management of risks associated with monitoring;

- How and where to safely interview survivors and witnesses of CRSV; and

- Appropriate mechanisms for survivors, witnesses or others to report protection threats or concerns resulting from monitoring or information gathering activities.

✔ **Ensure the appropriate level of participation by children and women** in planning and implementing survivor assistance, protection analysis and planning, and community-based prevention programming.

The following checklist will assist COs in empowering communities within CRSV monitoring and response.

Checklist for community empowerment

Communities are informed about CRSV monitoring processes.   ◯

Communities are informed about different accountability processes, rights of participants and support services available.   ◯

Children's and women's representatives have been consulted during MRM and MARA establishment phases.   ◯

Appropriate levels of participation by children, women and other community representatives are determined during planning and implementation phases of CRSV assistance, protection and prevention programming.   ◯

Step 4: Collect, analyse and share data

COs have a responsibility to protect the rights of children and women in CRSV information collection activities. This includes activities which UNICEF may not be directly involved with, such as media reporting on CRSV or military protection monitoring. Collecting, analysing and sharing CRSV information are ongoing activities; the input of new information helps to deepen understanding of the situation over time and assess the effectiveness of responsive actions taken to protect individuals and communities. UNICEF is involved in collecting, analysing and disseminating information about sexual violence perpetration and victimization in conflict-affected settings for the following purposes:

• Implementing CRSV monitoring and reporting arrangements as mandated by SCR 1612 and SCR 1960;

• Undertaking GBV and CP sub-cluster assessments and situation analyses to conduct international and national

advocacy on behalf of children and women in conflict, as well as to guide humanitarian action to prevent and respond to CRSV; and

• Informing UNICEF's humanitarian and post-conflict GBV, CP and other sectoral assistance programming.

There are significant challenges in collecting information about CRSV, including the serious risks posed to survivors and witnesses. Information gathering and documentation must be done in a manner that presents the least risk to respondents, is methodologically sound and builds on good practice. Following basic guidelines for maintaining confidentiality and other good practices throughout the information management life-cycle (illustrated in *Figure 2* on the following page) will help to overcome some of these challenges and risks.

Figure 2: Information management lifecycle

COs should collaborate with other principle actors in CRSV monitoring to address the following data collection and information management issues.

Scope of CRSV information collection.
There must be shared understanding in each setting on exactly what is being monitored and how it is defined. A common problem undermining systematic collection and analysis of GBV information is the lack of standardized definitions. This can lead to confusion and poor and incomparable data sets. While there are standardized definitions of sexual violence and CRSV, it is necessary to determine which forms of sexual violence are considered 'conflict-related' in each setting for the purposes of monitoring and reporting. For example, in many contexts, there are multiple dimensions to a conflict, including different armed groups and different forms of localized violence. Sexual violence incidents may be associated with disarmament processes; occurring in cross-border areas involving armed groups from different countries or conflicts; occurring in internally displaced persons (IDP) and refugee camps/areas; perpetrated by civilians affiliated with armed groups; or resulting from mass or generalized violence.

In collaboration with other principle actors, UNICEF COs will need to make sure due consideration is given to:

- Which types of violence are relevant for monitoring purposes;

- What information is needed and for what purpose;

- How incidents will be classified and recorded via data collection tools and in databases;

Primary and Secondary Data in Emergencies

- How multiple incidents against the same victim will be documented and recorded in databases; and

- The geographical scope of data collection activities, including on what basis some areas will be prioritized over others in the face of limited resources.

Data sources and verification. Given the ethical and safety challenges inherent in collecting information directly from survivors of sexual violence, it is imperative to minimize survivor interviews for data collection purposes. Interviews can be minimized by collecting data from a wide range of sources, including **secondary data** on sexual violence wherever possible. There are a wide range of information sources on CRSV that can be used for developing an accurate picture of the magnitude and nature of sexual violence, including:

- Local government authorities and institutions, including law enforcement agencies;

- The Gender-based Violence Information Management System (GBVIMS), where it is operational;

- Case management data from health and psychosocial service providers;

- Civilian, police and military divisions within UN Missions;

- Police records;

- UNCT agencies;

- Local and international NGOs and CBOs working on human rights;

- Human Rights Commissions; and

- Religious institutions and faith-based networks.

Secondary data is available in rapid and comprehensive assessment reports, service delivery statistics, human rights monitoring, security monitoring and operational research initiatives. A variety of information and data is collected by humanitarian actors in conflict settings, ranging from troop movements and other security information to incident data. Such data can also be used for verification purposes. For example, by controlling for the combatant status of perpetrators and the age of survivors in service statistics, service providers can share aggregate incident data with agencies leading MARA reporting, who could then corroborate the data with other information to determine patterns and trends in sexual violence. Such an approach helps to meet information requirements set out in SCRs 1612 and 1960, while also complying with good practices in the collection of sexual violence-related data.

Protecting data sources is also a priority for principle actors in MRM and MARA implementation. UNICEF and other UN agencies managing these processes must consider how to create safe channels for receiving anonymized and aggregate information. This type of information sharing helps protect agencies seeking to preserve their operational space and humanitarian access while maximizing sources of information.[44]

Informed consent. It is mandatory to obtain informed consent from survivors who choose to give testimony for CRSV monitoring and reporting purposes. Informed consent is not about signing a form; it is about people's willingness to participate in activities while fully understanding how their information will be used and shared with others. For consent to be fully informed, survivors must fully comprehend the purpose, procedures, and potential risks and benefits of their involvement. *Even when data is going to be de-identified for monitoring and reporting purposes, survivors still have the right to object to their information being used in the public domain. This protects their dignity, safety and rights to privacy and self-determination*.

To be able to make a genuinely informed decision regarding the use of their personal data, survivors who are interviewed for CRSV monitoring and reporting purposes under the MRM or MARA must be advised of the potential ways in which their information may be used. When information is being obtained from children, informed consent procedures must be clearly documented; must be based on the best interest of the child principle; and must specify at what age a child can give informed consent and who may give it on their behalf.

Information sharing, handling and security protocols. Under what circumstances, how and with whom detailed CRSV incident data will be shared must be clearly documented in information sharing, handling and security protocols.

> At all times, information sharing, even at the level of the Working Group, should be done with the **best interests of the survivor** as the guiding principle and in adherence to the protocols of **confidentiality** and **informed consent**.

To implement good practice in CRSV information collection and sharing, UNICEF COs can take the following steps:

4.1 Plan for and ensure adequate technical and operational capacity for CRSV information management activities; and

4.2 Develop and agree on protocols for collecting and receiving information related to CRSV in line with best practice standards.

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44 The Watchlist on Children and Armed Conflict, *Getting It Done and Doing It Right*.

Gao, Mali

investment of technical and operational resources, the ability to ethically and effectively collect sexual violence information is severely compromised.[45]

Information management activities are resource-intensive and time-consuming. Information collection, data entry and analysis – as well as the production of information products (such as Security Council reports, advocacy materials or briefing documents) – are all specialized areas of work. Technical know-how is essential for collecting, analysing and using information from multiple sources to develop comprehensive and dynamic analyses of CRSV and to discern the strategies, motivations and nature of the violence.

Staff involved in different aspects of information management need specialized knowledge, skills and expertise to maximize data quality and minimize the risk of harm to survivors and witnesses. They also need appropriate supervision and psychosocial support, as such work can lead to stress, burn-out and – in the worst-case scenario – secondary traumatization.

Staff interviewing survivors and witnesses with limited experience working in the field of sexual violence will need training and supervision on ethical, safety and methodological challenges associated with the collection, analysis and use of sexual violence information. This will help to reduce the risk of exposing victims and witnesses to additional harm or re-traumatization, and it will minimize the collection of unreliable or incomplete information.[46] COs also need to consider allocating resources to support survivors in accessing healthcare and safety, as well as resources for training and awareness-raising of the network of information sources at the community level to encourage the safe and confidential sharing of CRSV information.

4.1 Plan for and ensure adequate technical and operational capacity for CRSV information management activities

Lessons learned from MRM and MARA implementation, as well as from the roll-out of the GBVIMS, consistently highlight the importance of adequate resourcing for GBV and CP monitoring and associated information management processes. Without

45 The Watchlist on Children and Armed Conflict, *Getting It Done and Doing It Right;* and Office of the SRSG Children Affected by Armed Conflict, DPKO and UNICEF*, Global Good Practices Study: MRM*. See also the research summarized in the United Nations Children's Fund Proposal to Respond to UN Security Council Resolution 1888 (2009), Operative Paragraph 26: Strengthening UN Response to Sexual Violence in Conflict-Related Situations.
46 UNICEF, 'Proposal to Respond to UN Security Council Resolution 1888 (2009), Operative Paragraph 26: Strengthening UN Response to Sexual Violence in Conflict-Related Situations'.

UNICEF COs need to carefully consider the resource requirements for staffing, capacity-building and administrative support to the MRM and MARA, as well as for roll-out and management of GBV and CP information systems, such as the GBVIMS. To contribute to adequate resourcing of CRSV information collection, COs can take the following action:

✔ **Ensure detailed implementation plans are in place** for establishing the MRM and MARA.

✔ **Advocate to donors** for adequate funding for CRSV monitoring and response activities.

✔ **Allocate resources** within CP budgets to support capacity-building for monitoring CRSV and supporting survivors.

✔ **Contribute technical and operational resources** to support CRSV information management processes.

✔ **Provide initial training and ongoing supervision/support** to UNICEF and partner staff (this includes partners in MRM information gathering activities).

✔ **Provide awareness-raising and trainin**g on ethics, safety, confidentiality and survivors' rights to informed consent to service providers, CBOs and networks involved in collecting and sharing information on CRSV and other human rights atrocities against children and women.

Resources

▶ **Training Manual on Human Rights Monitoring (Chapter XVI: Monitoring During Periods of Armed Conflict)** *OHCHR (2001)* <www.ohchr.org/Documents/Publications/training7part1618en.pdf>

4.2 Develop and agree on protocols for collecting and receiving information related to CRSV in line with best practice standards

Principle actors in the MRM, MARA and GBV sub-cluster must jointly plan and develop protocols for collecting, receiving, organizing and storing CRSV information. COs can take the following actions to facilitate this process:

✔ **Obtain consensus** amongst principle actors on the scope of monitoring activities, including what is being monitored and in which geographical area(s).

✔ **Develop protocols and tools** for collecting, receiving, organizing and storing CRSV data. Protocols must address:

- Definitions of sexual violence incidents;
- How to operationalize principles underpinning CRSV monitoring;
- The use of secondary source data wherever possible;
- Relevant sources of data;
- Verification standards for CRSV within MRM and MARA;
- Data sharing and handling; and
- Data security and disposal.

Resources

▶ **Provisional Guidance Note on the Intersections Between the Gender-Based Violence Information Management System (GBVIMS) and the Monitoring and Analysis Reporting Arrangements (MARA)** *GBVIMS (2016)* <www.gbvims.com/wp/wp-content/uploads/Provisional-Guidance-Note-on-Intersections-Between-GBVIMS-MARA.pdf>

▶ **GBVIMS tools and documents on GBV data collection and sharing:**
  ○ Incident Classification Tool
    <www.gbvims.com/gbvims-tools/>
  ○ Information Sharing Protocol Template
    <www.gbvims.com/gbvims-tools/>
  ○ Promoting Best Practices
    <www.gbvims.com/wp/wp-content/
    uploads/BestPractices2.pdf>

▶ **Methods and Systems for the Assessment and Monitoring of Sexual Violence and Exploitation in Conflict Situations**
  United Nations Population Fund and the World Health Organization (2005)
  <www.ssrc.org/publications/view/methods
  -and-systems-for-the-assessment-and
  -monitoring-of-sexual-violence-and
  -exploitation-in-conflict-situations/>

Geneva, Switzerland

The following checklist will assist COs in collecting, analysing and sharing data related to CRSV:

| Checklist for information collection, analysis and sharing |
| --- |
| Detailed implementation plans are in place for establishing and resourcing the MRM and MARA. |
| Adequate funding is available for CRSV monitoring and response activities. |
| Resources are allocated within the CO CP budget to support CRSV monitoring, including for capacity-building and emergency health and protection for survivors. |
| UNICEF and partner staff involved in MRM and MARA implementation are trained and receive ongoing supervision. |
| Service providers, CBOs and networks are sensitized on ethics and safety, confidentiality, survivors' rights to informed consent, etc. |
| The scope of monitoring activities is clarified amongst MRM and MARA principal actors. |
| Protocols and tools are developed for collecting, receiving, storing, sharing and disposing of CRSV data. |

As described earlier, holistic and multi-dimensional action against CRSV requires taking action to improve survivor services, enhance protection for communities, prevent perpetration from occurring in the first place and strengthen accountability for perpetrators of violence.
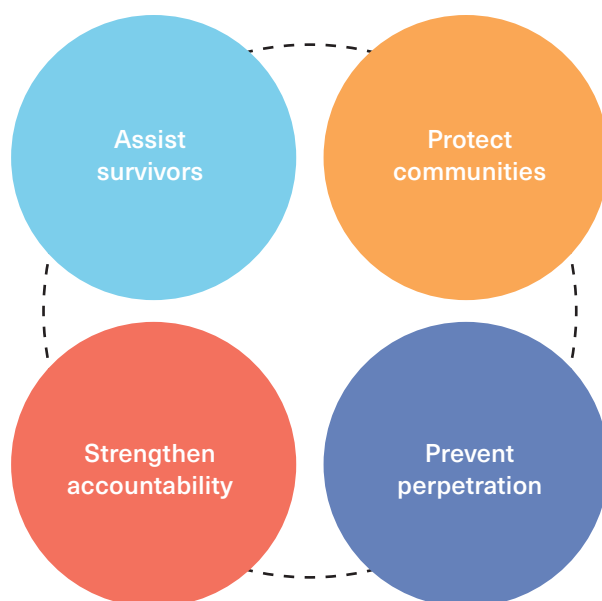
5.1 Assist survivors

Making a minimum set of health, psychosocial and safety services available for CRSV survivors to mitigate the immediate harms caused by sexual violence is a humanitarian priority. In addition to basic health, psychosocial and safety services, survivors of CRSV may require assistance tailored to meet their needs and foster their recovery, healing and reintegration into family and community life. Where possible, CRSV survivors are integrated into educational, economic and social support programmes available to all vulnerable children and women. This helps to avoid labelling, reduce further stigmatization, and foster their participation and acceptance in community life.

However, some groups of CRSV survivors may have special support needs. For example, mothers and their children born of rape may require specialized programming to address the challenges and problems they face. These individuals and groups have the right to resources and services to meet their specific needs.

Along with other GBV assessment data, CRSV monitoring data is used by humanitarian actors to identify priority needs and services in different geographical locations. UNICEF COs can take the following actions to enhance the provision of comprehensive GBV and CP services to cater for CRSV survivors:

✔ **Build capacity** of GBV health, psychosocial and safety services to respond to the immediate and longer-term health, psychosocial, safety and reintegration needs of survivors of different forms of CRSV (such as rape by multiple perpetrators, abduction, forced pregnancy, sexual slavery, etc.).

✔ **Implement a coordinated case management approach** to assisting survivors of CRSV with complex and multiple needs.

✔ **Implement a community engagement strategy** to promote the safe return and reintegration of CRSV survivors into their communities of origin.

✔ **Provide technical, financial and operational inputs** to build the capacity of government agencies to be able to support mothers who bear children from rape in keeping their children and, when this is not possible, to provide safe and appropriate alternative care for children if required.

See **Kit 3.1: Programming – Responding to GBV Survivors in Emergencies** for information and resources on minimum and expanded GBV services in emergencies.

▶ **Mental Health and Psychosocial Support for Conflict-Related Sexual Violence Resources**
World Health Organization
<www.who.int/reproductivehealth/publications/violence/rhr12_18/en/>

The following checklist will assist COs in taking action to improve survivor assistance:

Checklist for action on survivor assistance

GBV health, psychosocial and safety services have the capacity to respond to health, psychosocial, safety and reintegration needs of CRSV survivors. ◯

Coordinated case management systems are in place for assisting survivors of CRSV with complex and multiple needs. ◯

A community engagement strategy is in place for promoting the safe return and reintegration of CRSV survivors. ◯

Government agencies are mobilized and capacitated to support mothers with children born of rape and, if necessary, to provide safe and appropriate alternative care arrangements for children. ◯

Bangassou, Central African Republic

5.2 Protect communities

Finding real-time solutions to protecting at-risk communities and populations from CRSV is a primary concern of humanitarian and peace and security actors in conflict settings. A variety of military and non-military strategies for reducing children's and women's exposure to CRSV may be effective in a given setting. Approaches to reducing exposure of at-risk communities, populations or groups to CRSV include:

- **Protection through presence** – for example, establishing field offices or increasing monitoring visits by humanitarian or human rights agencies in high-risk areas to increase visibility of international presence.

- **Early warning and response measures** – for example, establishing community alert networks linked to rapid response safety plans for at-risk communities or populations.

- **Physical protection measures** – for example, providing security patrols, transport, or military or non-military escorts for girls and women in high-risk areas when collecting firewood and water, travelling to and from school, etc.

- **Humanitarian assistance interventions** to reduce vulnerability – for example, distributing fuel-efficient stoves or creating income generation opportunities to reduce the frequency of fuel collection in unsafe areas.

- **Conflict management and peacebuilding interventions** – for example, establishing community-based programmes to address local level conflict drivers.

Where it is feasible, a collaborative approach is optimal for developing and implementing community protection strategies involving UN peacekeeping/political missions, international/national humanitarian actors and – most importantly – communities. Putting communities at the centre of protection analysis and planning helps to ensure that the problems are correctly diagnosed and that communities have input into identifying and prioritizing protection strategies. This increases the likelihood that activities and programmes will be relevant, will be acceptable to the community and will not cause further harm. The extent and timeline for community engagement in protection analysis and planning will depend on the context and security environment. However, in situations of imminent threat, obtaining local knowledge and information on community strategies and preferences will contribute to more effective protection interventions by external actors.

Collaboration arrangements for community-level protection analysis and planning will depend on, amongst other factors, the mandate of security forces and whether they are a party to the conflict. Engagement between humanitarian and security forces must always be in line with humanitarian principles. Such engagement must also be sensitive to concerns about the security of humanitarian workers; the risk of restrictions on humanitarian access by conflict parties; possible negative impacts on how humanitarian actors are perceived by local communities; and the risk of subordinating humanitarian principles and action to political aims of a mission.

Resources

▶ **Using Presence and Visibility Chapter 30: Manual on Human Rights Monitoring** *OHCHR (2001)* <www.ohchr.org/Documents/Publications/ Chapter30-20pp.pdf>

▶ **Protection of Civilians in UN Peace Operations: Experiences and lessons** *United Nations University (2015)* <http://collections.unu.edu/eserv/UNU:32 14/unu_cpr_nonmilitary_poc.pdf>

▶ **Non-Military Strategies for Civilian Protection in the DRC** *Fieldview Solutions (2013)* <http://reliefweb.int/report/democratic -republic-congo/non-military-strategies -civilian-protection-drc>

▶ **Influence on the Ground: Understanding and strengthening the protection impact of United Nations human rights field presence**
Fieldview Solutions (2012)
<www.fieldviewsolutions.org/fv-publi cations/Influence_on_the_Ground.pdf>

▶ **A Framework for a Holistic Approach to UN Security Council Resolutions on Protection of Civilians, Children and Armed Conflict, and Women, Peace and Security**
Fieldview Solutions (2008)
<http://www.fieldviewsolutions.org/fv-publi cations/Influence_on_the_Ground.pdf>

▶ **Protective Presence: Field strategies for civilian protection**
Centre for Humanitarian Dialogue (2006)
<www.hdcentre.org/wp-content/uploads/ 2016/07/Proactive-Presence-January -2006.pdf>

To help identify and implement effective strategies for protecting children and women from CRSV, UNICEF COs can take the following steps:

a) **Facilitate collaborative community protection analysis and safety planning; and**

b) **Deliver targeted humanitarian assistance and protection programmes that reduce vulnerability to CRSV.**

a) **Facilitate collaborative community protection analysis and safety planning**

UNICEF COs can take the following action to facilitate joint community-based protection analysis and planning to responds to CRSV:

✔ **Sensitize UNICEF CP, GBV and partner staff** on the protection of civilians, the CRSV mandate of security forces, and military and non-military strategies for protecting children and women from CRSV.

✔ **Facilitate inter-agency protection analysis and planning** involving military and non-military actors, prioritizing the appropriate level of community participation.

✔ **Provide funding, material and technical inputs** for the implementation of community protection plans.

✔ **Advocate with peacekeeping forces** to consult with children and women in the design and deployment of military strategies to protect children and women from CRSV in situations where joint protection analysis and planning are not viable.

Tools

See **Kit 3.2: Programming – Building Girls' and Women's Safety and Resilience** for information and resources on community-based safety assessment and planning.

Resources

▶ **Matrix Early-Warning Indicators of Conflict-Related Sexual Violence**
UN Action Against Sexual Violence (2011)
<http://gbvaor.net/resources/matrix -early-warning-indicators-conflict-related -sexual-violence/>

▶ **Addressing Conflict-Related Sexual Violence: An Analytical Inventory of Peacekeeping Practice**
UN Women (2012)
<www.unwomen.org/~/media/Head quarters/Media/Publications/en/04 DAnAnalyticalinventoryofPeacekeeping Practi.pdf>

▶ **United Nations Civil-Military Coordination Field Handbook**
UNOCHA Civil-Military Coordination Section (2015)
<https://docs.unocha.org/sites/dms/ Documents/CMCoord%20Field%20 Handbook%20v1.0_Sept2015.pdf>

Bangui, Central African Republic

actors when travelling to or from distribution points, clinics, schools and other locations. Alternatively, providing fuel-efficient stoves and drilling wells and locating services in secure areas may help to reduce exposure to sexual assault.

UNICEF COs can take the following actions, in line with the **IASC GBV Guidelines**,[47] to reduce children's and women's vulnerability to CRSV:

✔ **Sensitize all cluster lead agencies** to CRSV risks that have been identified through monitoring activities.

✔ **Advocate for humanitarian action** across clusters to reduce children's and women's exposure to CRSV.

✔ **Deliver targeted humanitarian assistance** and programming to reduce CRSV risks faced by children and women carrying out daily tasks, such as fuel or water collection.

▶ **Gender-Responsive Early Warning and How-To Guide**
UN Women (2012)
<www.unwomen.org/~/media/Head quarters/Media/Publications/en/04 EGenderResponsiveEarlyWarning.pdf>

▶ **Joint Protection Teams: A Model for Enhancing Civilian Security**
The Institute for Inclusive Security (2010)
<www.inclusivesecurity.org/publication/ joint-protection-teams-a-model-for -enhancing-civilian-security/>

🛈 Tools

See **Kit 3.2: Programming – Building Girls' and Women's Safety and Resilience** for information and resources on interventions to build safety and reduce vulnerability to GBV.

See **Kit 3.6: Programming – Integrating GBV Risk Mitigation Across UNICEF Sectors and Clusters** for more information on integrating the **IASC GBV Guidelines** throughout cluster and sector work.

📚 Resources

▶ **Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action**
IASC (2015)
<http://gbvguidelines.org/>

b) Deliver targeted humanitarian assistance and protection programmes that reduce vulnerability to CRSV

Humanitarian assistance can either increase or decrease children's and women's vulnerability to CRSV. For example, a lack of consideration for how and where goods and services are delivered can put children and women at risk of sexual assault by armed

47 See Inter-Agency Standing Committee, *Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action: Reducing risk, promoting resilience and aiding recovery*, IASC, 2015, available at <www.gbvguidelines.org>.

Preventing CRSV involves engaging with armed groups to change the behaviour of perpetrators, while targeting the drivers of conflict to disrupt conflict dynamics and build social cohesion. [...] A range of approaches can be used to encourage or motivate State and non-State armed actors to adhere to international human rights law and international humanitarian law and adopt zero tolerance for sexual violence.

The following checklist will assist COs in implementing strategies to protect communities.

Checklist for community protection	
UNICEF CP, GBV and partner staff are knowledgeable on the protection of civilians, the CRSV mandate of security forces, and military and non-military strategies for protecting children and women from CRSV.	○
Inter-agency protection analysis and planning involving military and non-military actors is occurring where appropriate.	○
Resources are committed to the implementation of community protection plans.	○
Cluster lead agencies are sensitized to CRSV risks that have been identified through monitoring activities.	○
Targeted UNICEF humanitarian assistance and programming are implemented to reduce exposure to CRSV risks for at-risk populations.	○

5.3 Prevent perpetration

Preventing CRSV involves engaging with armed groups to change the behaviour of perpetrators, while targeting the drivers of conflict to disrupt conflict dynamics and build social cohesion. In-depth analysis of the motivation, patterns and drivers of sexual violence within a conflict is vital to shaping prevention strategies.

Engaging with armed groups. A range of approaches can be used to encourage or motivate State and non-State armed actors to adhere to international human rights law (IHRL) and international humanitarian law (IHL) and adopt zero tolerance for sexual violence. What works in one setting may not work in another, as the motivations and drivers of sexual violence perpetration might be different. Two such approaches include inclusive strategies and coercive strategies, examples of which are shown below.

Inclusive strategies	Coercive strategies
• Quiet advocacy	• Denunciation and 'naming and shaming'
• Dialogue and negotiation	• Sanctions and embargos
• Training and capacity-building	• Individual criminal prosecution
• Intermediation between conflict parties	• 'Terrorist listing' [48]
• Support for implementation and monitoring of Action Plans	

48 Democratic Centre for the Control of Armed Forces and Geneva Call, 'Armed Non-State Actors: Current Trends & Future Challenges', DCAF, Geneva, 2015.

UN engagement and advocacy with armed actors can have significant effects on the conduct of government forces, their associated militia and rebel groups, in many cases preventing, deterring and ending violations. However, even governments that display the political will to ensure protection of civilians often face limitations in implementing their commitments in the face of poor command and control arrangements and poorly trained troops.[49] Further, not all **non-State armed actors** are amenable to engagement and advocacy, and it is essential that issues such as these are considered when developing an engagement strategy.

Non-State Armed Actors

UNICEF COs regularly engage with State and non-State armed actors at central and local command levels, using inclusive strategies to secure humanitarian access, safe schools and hospitals and to end child recruitment, child detention, sexual violence and exploitation. For example, UNICEF and MRM partners have developed a systematic practice for obtaining concrete commitments from all parties to a conflict through the development of time-bound and verifiable agreements and **Action Plans** that prevent grave violations against children. To support the implementation of such commitments, UNICEF contributes to programmes that train or otherwise build the capacity of government security forces on children's/women's rights and procedures that ensure their enforcement.

Action Plans

Due to the security risks, the highly sensitive political nature of engaging with parties to a conflict, and the associated risks to the perception of humanitarian principles of neutrality and impartiality, responsibility for directing engagement with State or non-State armed actors sits with the most senior UN representatives in country.

Resources

▶ **Action Plans to Prevent and End Violations Against Children: Discussion Paper**
Watchlist on Children and Armed Conflict (2013)
<http://watchlist.org/wp-content/uploads/FINAL-Discussion-Paper-Action-Plans.pdf>

▶ **Naming and Shaming: Human rights accountability in security council resolution 1960 (2010) on women, peace and security**
Heathcote, G., Journal of Human Rights Practice (2012)
<https://academic.oup.com/jhrp/article-abstract/4/1/82/2188703>

▶ **Preventing Perpetrators: How to go from protection to prevention of sexual violence in war?**
Peace Research Institute Oslo (2013)
<http://file.prio.no/publication_files/prio/Skjelsbaek-Preventing-Perpetrators-PRIO-Policy-Brief-03-2013.pdf>

▶ **NGOs and Non-State Armed Actors: Improving compliance with International norms**
United States Institute of Peace (2011)
<www.usip.org/sites/default/files/sr284.pdf>

▶ **In Their Words: Perspectives of armed non-state actors on the protection of children from the effects of armed conflict**
Geneva Call (2010)
<https://genevacall.org/wp-content/uploads/dlm_uploads/2014/01/2010_GC_CANSA_InTheirWords.pdf>

▶ **Rules of Engagement: Protecting Civilians through Dialogue with Armed Non-State Actors**
Geneva Academy of International Humanitarian Law and Human Rights (2011)
<https://papers.ssrn.com/sol3/papers.cfm?abstract_id=2163135>

49 Von Einsiedel, S., 'Non-Military Protection of Civilians in UN Peace Operations: Experiences and Lessons', *United Nations University Centre for Policy Research Occasional Paper 3,* United Nations University, Tokyo, 2015.

Addressing local-level conflict drivers.
In many settings, local conflict dynamics –
such as entrenched inequality, exclusion,
and ethnic- or resource-based tensions [50]
– play an important role in the outbreak
and continuation of armed conflict and can
contribute to ongoing fighting after peace
agreements have been signed.[51] In circum-
stances where localized social relations
are drivers of conflict and sexual violence,
community-based peacebuilding and
conflict management efforts to build social
capital, enhance social cohesion, promote
livelihoods, and support local development
and economic opportunities may help to
prevent the perpetration of CRSV.

UNICEF COs can take the following steps
toward preventing CRSV perpetration
by motivating a positive change in the
behaviour of parties to a conflict or influenc-
ing conflict drivers:

a) **Engage with armed groups, politicians
or military leaders to promote
adherence to IHL and zero tolerance of
sexual violence; and**

b) **Implement community-level
peacebuilding interventions to address
localized drivers of conflict.**

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a) **Engage with armed groups, politicians
or military leaders to promote
adherence to IHL and zero tolerance of
sexual violence**

With guidance from UNICEF headquarters
and regional offices, and under the direction
of the Country Representative, UNICEF COs
participate in UN efforts to engage with and
influence armed groups to prevent CRSV per-
petration and other human rights violations.
All engagement with armed actors must be
carried out by the appropriate staff and in line
with UNICEF's guidelines on engagement
with armed groups. When appropriate,

UNICEF COs can take the following actions
to influence armed groups to halt the use of
CRSV against children and women:

✓ **Participate in high-level political or mil-
itary dialogue, advocacy or negotiation**
with military or political leaders to secure
commitments to adhere to IHL.

✓ **Support development and implemen-
tation of Action Plans** to operationalize
commitments adopted by armed actors
– for example, introducing codes of con-
duct and zero tolerance policies.

✓ **Contribute to monitoring Action Plans**
or other commitments (such as public
declarations, Deeds of Commitment, etc.).

✓ **Sensitize and train parties to a conflict**
(including local authorities, military forces,
police and, where appropriate, non-State
actors) on legal and normative frame-
works; obligations and accountabilities
under IHL; children's and women's rights;
and obligations to prevent CRSV.

✓ **Undertake quiet advocacy** with com-
manders to secure safety for individual or
groups of children or women.

✓ **Integrate GBV prevention and
response into formal disarmament,
demobilization and reintegration (DDR)
processes** and other reintegration
initiatives targeting former combatants.

Tools

See **Kit 3.2: Programming – Building
Girls' and Women's Safety and Resilience**,
*Section 6: Addressing GBV Through
Disarmament, Demobilization and
Reintegration Processes* for information
and resources on integrating GBV into
DDR processes.

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50 Destructive impact of locally based conflicts is often underestimated. Land conflicts, for instance, at the local level,
can sustain ethnic friction between groups for decades.
51 Von Einsiedel, 'Non-Military Protection of Civilians in UN Peace Operations:

Bamyan, Afghanistan

Resources

▶ **Programme Guidance Note on Engaging with Non-State Entities in Humanitarian Action**
UNCEF (2011)
<www.unicefinemergencies.com/down loads/eresource/Engaging%20with% 20Non-State%20Entities.html#anchor -operations>

▶ **Strengthening Prevention of Conflict-related Sexual Violence with Non-State Armed Groups: A preliminary framework for key prevention strategies**
UNICEF and OCHA (2011)
<www.stoprapenow.org/uploads/advocacy resources/1352897743.pdf>

▶ **Humanitarian Negotiation: A handbook for securing access, assistance and protection for civilians in armed conflict**
Centre for Humanitarian Dialogue (2004)
<www.alnap.org/resource/10002>

▶ **Humanitarian Negotiations with Armed Non-State Actors: Key lessons from Afghanistan, Sudan and Somalia**
Overseas Development Institute (2014)
<www.odi.org/publications/8283-humani tarian-negotiations-armed-non-state -actors-key-lessons-afghanistan-sudan -and-somalia>

▶ **Humanitarian Negotiations with Armed Groups: A manual and guidelines for practitioners**
OCHA (2006)
<www.unicef.org/emerg/files/guidelines_ negotiations_armed_groups.pdf>

▶ **Armed Non-State Actors: Current trends and future challenges**
Democratic Centre for the Control of Armed Forces and Geneva Call (2015)
<www.dcaf.ch/sites/default/files/publica tions/documents/ANSA_Final.pdf>

▶ **Non-Conventional Armed Violence and Non-State Actors: Challenges for mediation and humanitarian action**
Noref (2013)
<http://noref.no/Themes/Peace -processes-and-mediation/publications/ Non-conventional-armed-violence -and-non-state-actors-challenges-for -mediation-and-humanitarian-action>

▶ **Talking to the Other Side: Humanitarian engagement with armed non-state actors**
Humanitarian Policy Group (2012)
<www.odi.org/publications/6662 -humanitarian-negotiations-non-state -armed-militia-rebel>

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b) Implement community-level peacebuilding interventions to address localized drivers of conflict

COs can take the following actions to support local-level conflict management and the prevention of sexual violence against children and women (this list is not exhaustive):

✔ **Implement conflict-management and peacebuilding programmes** at the village or community level to build social cohesion and address local conflict drivers.

✔ **Implement community-based social norms interventions** to catalyse positive changes in social norms that underpin sexual violence.

Resources

▶ **UNICEF Peacebuilding and Education Resources**
<www.ineesite.org/en/education-for-peacebuilding>

▶ **Integrating Peacebuilding into Humanitarian and Development Programming: Practical guidance on designing effective, holistic peacebuilding projects**
Catholic Relief Services (2010)
<www.crs.org/sites/default/files/tools-research/integrating-peacebuilding-into-humanitarian-and-development-programming.pdf>

▶ **Communities Care: Preventing Violence and Transforming Lives Toolkit**
UNICEF (2014)

▶ **Behaviour Change Communication in Emergencies: A Toolkit**
UNICEF (2006)
<www.unicef.org/cbsc/files/BCC_Emergencies_full.pdf>

▶ **Shifting Social Norms to Tackle Violence Against Women and Girls (VAWG)**
Department for International Development (2016)
<www.gov.uk/government/uploads/system/uploads/attachment_data/file/507845/Shifting-Social-Norms-tackle-Violence-against-Women-Girls3.pdf>

▶ **Social Norms Professional Development Pack**
GSDRC and University of Birmingham (2016)
<www.gsdrc.org/professional-dev/social-norms/>

The following checklist will assist COs in taking action to prevent perpetration of CRSV.

Checklist for actions to prevent perpetration	
The development, implementation and monitoring of Action Plans within armed groups are supported to operationalize their commitments to adhere to IHL.	◯
Sensitization and trainings are offered to local authorities, military, police and armed non-State actors on legal and normative frameworks; obligations and accountabilities under IHL; children's and women's rights; and obligations to prevent CRSV.	◯
Authorized staff undertake local advocacy with commanders of armed groups in line with UNICEF guidelines.	◯
GBV prevention and response are integrated into formal DDR processes and other reintegration initiatives targeting former combatants.	◯
Conflict-management and peacebuilding programmes are implemented at the community level to build social cohesion and address local conflict drivers.	◯
Community-based social norms interventions are implemented to catalyse positive changes in social norms that underpin sexual violence.	◯

5.4 Strengthen accountability

Holding those who bear responsibility for CRSV crimes accountable during and after armed conflict is vitally important for ending a culture of impunity and deterring others from perpetrating similar crimes. Additionally, delivering some measure of justice to survivors can facilitate reconciliation and sustainable peace and contribute toward the restoration of rule of law.

UN entities play a central role in supporting international, national and local accountability processes for CRSV and other human rights violations in conflict and post-conflict settings. Examples of UN responsibilities include:

- UN Security Council reporting under 1612 MRM and 1960 MARA requirements;

- Building capacity of national systems to prosecute CRSV crimes and punish perpetrators; and

- Ensuring gender-based violations and crimes committed against children and women are included in truth and reconciliation commissions or processes.

Resources

▶ **Children in Armed Conflict Accountability Framework: A framework for advancing accountability for serious violations against children in armed conflict**
Conflict Dynamics International (2015)
<http://cacaccountability.org/media/CAC_Accountability_Framework.pdf>

▶ **Analytical study focusing on gender-based and sexual violence in relation to transitional justice – Report of the Office of the United Nations High Commissioner for Human Rights (A/HRC/27/21)**
OHCHR (2014)
<http://reliefweb.int/report/world/analytical-study-focusing-gender-based-and-sexual-violence-relation-transitional>

▶ **Progress and Obstacles in the Fight Against Impunity for Sexual Violence in the Democratic Republic of the Congo**
UN Joint Human Rights Office in the Democratic Republic of the Congo (2014)
<www.refworld.org/docid/534b931f4.html>

UNICEF plays a critical role in ensuring that accountability processes reflect and are sensitive to the experiences, rights and needs of children and women. COs can take the following steps toward strengthening age- and gender-responsive accountability processes:

a) **Promote children's and women's perspectives, participation and rights within national accountability processes; and**

b) **Build capacity of national institutions to implement child- and survivor-centred justice, healing and reconciliation processes.**

a) **Promote children's and women's perspectives, participation and rights within national accountability processes**

Putting children's and women's voices, experiences and rights at the centre of accountability processes is a key objective for UNICEF. COs can take the following actions to ensure these voices are centred:

✔ **Advocate for recognition** of sexual violence violations within transitional justice and reparation frameworks and programmes.

✔ **Consult with child survivors** of CRSV, their advocates and organizations dedicated to children's rights during the design phase of justice and reparation programmes.

✔ **Advocate for participation** of children's and women's civil society groups in national accountability mechanisms as technical experts, trainers, service providers, etc.

Labado, South Darfur, Sudan

✔ **Sensitize NGO and CBO partners** on relevant national and international CRSV accountability mechanisms.

✔ **Provide technical and operational resources** to legal aid, psychosocial support and protection services for CRSV survivors and witnesses during trials, hearings or other procedures linked to justice and accountability for CRSV.

Resources

▶ **Justice in Matters Involving Child Victims and Witnesses of Crime: Model law and related commentary**
UNDOC and UNICEF (2009)
<www.refworld.org/docid/4a096ce42.html>

▶ **Children and Transitional Justice**
UNICEF Innocenti Research Centre (2010)
www.unicef-irc.org/publications/pdf/tj_publication_eng.pdf>

▶ **Model Strategies and Practical Measures on the Elimination of Violence Against Children in the Field of Crime Prevention and Criminal Justice: A checklist**
UN Office on Drugs and Crime (2015)
<www.unodc.org/documents/justice-and-prison-reform/14-08452_Ebook.pdf>

▶ **Children and Transitional Justice Key Principles Document for the Involvement of Children and Consideration of Children's Rights in Truth, Justice and Reconciliation Processes**
UNICEF (2010)
<www.unicef-irc.org/files/documents/d-3727-Key-principles-document-f.pdf>

▶ **Children and Truth Commissions**
UNICEF Innocenti Research Centre (2010)
<www.unicef-irc.org/publications/pdf/truth_commissions_eng.pdf>

▶ **Model Strategies and Practical Measures on the Elimination of Violence Against Children in the Field of Crime Prevention and Criminal Justice: Commission on Crime Prevention and Criminal Justice Report on the 22nd session**
UN Economic and Social Council (2014)
<http://srsg.violenceagainstchildren.org/sites/default/files/documents/docs/UN_Model%20Strategies_%20on_Elimination_of_Violence_against_Children_in_Crime_Prevention_and_Criminal_Justice_EN.pdf>

▶ **Guidance Note of the Secretary-General on Reparations for Conflict-Related Sexual Violence**
United Nations (2014)
<www.ohchr.org/Documents/Press/GuidanceNoteReparationsJune-2014.pdf>

▶ **The Trouble with Rape Trials – Views of Witnesses, Prosecutors and Judges on Prosecuting Sexualised Violence during the War in the former Yugoslavia**
medica mondiale (2009)
<www.medicamondiale.org/fileadmin/redaktion/5_Service/Mediathek/Dokumente/English/Documentations_studies/medica_mondiale_and_that_it_does_not_happen_to_anyone_anywhere_in_the_world_english_complete_version_dec_2009.pdf>

▶ **Redress for Rape: Using international jurisprudence on rape as a form of torture or other ill-treatment**
REDRESS (2013)
<https://redress.org/wp-content/uploads/2017/12/final-rape-as-torture1.pdf>

▶ **Citizen Security, Law, and Justice Brief**
World Bank (2015)
<www.vawgresourceguide.org/sites/
default/files/briefs/vawg_resource_
guide_citizen_security_brief_april_
2015.pdf>

▶ **Justice for Women: Seeking
accountability for sexual crimes
in post-conflict situations**
Fride (2008)
<http://fride.org/download/CR_Justice_
for_Women_ENG_jul08.pdf?>

▶ **Model Strategies and Practical
Measures on the Elimination of
Violence against Women in the Field
of Crime Prevention and Criminal
Justice Services**
UN Economic and Social Council (2010)
<http://www.un.org/womenwatch/daw/
vaw/egm/nap2010/EGM.GPNAP.2010.
SP.01.UNODC.pdf>

▶ **Prosecuting Conflict Related
Sexual Violence at The International
Criminal Court**
*Stockholm International Peace Research
Institute (2009)*
<https://reliefweb.int/report/central
-african-republic/prosecuting-conflict
-related-sexual-violence-international
-criminal>

▶ **Whose Justice, Whose Alternative?
Locating Women's Voice and Agency
in Alternative Dispute Resolution
Response to Intimate Partner Violence**
Beyond Borders, CEDOVIP, ICRW (2016)
<www.icrw.org/wp-content/uploads/
2016/10/ICRW-Mediation-Paper
-FINAL.PDF>

**b) Build capacity of national institutions to
implement child- and survivor-centred
justice, healing and reconciliation
processes**

To build capacity of national actors to protect
and promote the rights of child and other
survivors within accountability processes,
UNICEF COs can take the following actions:

✔ **Provide training on child- and survivor-
centred principles and practices** to
staff of transitional justice and healing
processes.

✔ **Provide technical and operational inputs**
to support the development of child- and
survivor-centred law enforcement and
judicial procedures, addressing:

  • Safety and confidentiality of all
    individuals involved in investigations
    and prosecutions;

  • Self-determination and informed
    consent regarding information sharing;

  • Age-appropriate interviewing and
    cross-examination of survivors and
    witnesses; and

  • The best interests of the child in all
    judicial processes.

✔ **Facilitate training** of judicial, law
enforcement and transitional justice
administrators on CRSV and child- and
survivor-centred principles.

Tools

See **Kit 3.1: Programming – Responding to
GBV Survivors in Emergencies** for informa-
tion and resources on strengthening access
to justice for GBV survivors.

The following checklist will assist COs in taking action to strengthen accountability related to CRSV.

Checklist for action to strengthen accountability processes	
Sexual violence violations are recognized within transitional justice and reparation frameworks and programmes.	◯
NGO and CBO partners are sensitized on relevant national and international CRSV accountability mechanisms.	◯
Child survivors of CRSV, their advocates and organizations dedicated to children's rights have been consulted during the design phase of justice and reparation programmes.	◯
Children's and women's civil society groups participate in national accountability mechanisms as technical experts, trainers, service providers, etc.	◯
Legal aid, psychosocial support and protection services are available for CRSV survivors and witnesses during trials, hearings or other procedures linked to justice and accountability for CRSV.	◯
Staff of transitional justice and healing processes are trained on child- and survivor-centred principles and practices.	◯
Law enforcement and judicial procedures and practices incorporate child- and survivor-centred principles.	◯
Judicial, law enforcement and transitional justice administrators are trained on CRSV and child- and survivor-centred principles.	◯

Info Sheets – Monitoring and Responding to Conflict-Related Sexual Violence

Sexual Violence as a Tool of Ethnic Cleansing and Genocide

Source: Shteir, S., *Conflict-Related Sexual and Gender-Based Violence: An Introductory Overview to Support Prevention and Response Efforts*, Australian Government Civil-Military Centre, Canberra, 2014.[1]

In recent decades sexual violence has been used as a form of ethnic cleansing and genocide. Among the methods are forced impregnation, intentional harm to the reproductive organs of both women and men, and creating a stigma that makes rape survivors 'un-marriageable'. Testimony from the war in the Balkans has clearly shown how the Serbs used rape as a tool of ethnic cleansing. The 1994 final report of the Commission of Experts on the war in the Former Yugoslavia noted, 'Survivors of some camps report that they believe they were detained for the purpose of rape' and 'Some captors also state that they are trying to impregnate the women. Pregnant women are detained until it is too late for them to obtain an abortion. The same report provided details about a woman who was detained and raped by her neighbour and told 'she would give birth to a chetnik boy who would kill Muslims when he grew up. They repeatedly said their President had ordered them to do this…'. In the context of the Bosnian war, male survivors have also described how Serb perpetrators used sexual violence as a means to attack and destroy the Muslim population. In the words of one male survivor of Serbian concentration camps, 'Serb torturers would beat us, step or jump on us until they tired out. They were deliberately aiming their beatings at our testicles saying "you'll never make Muslim children again".'

The International Criminal Tribunal for Rwanda was the first international court to present a judgment that included rape as a crime of genocide. The 1998 judgment in the case of the *Prosecutor v Jean-Paul Akayesu* noted:

In light of all the evidence before it, the Chamber is satisfied that the acts of rape and sexual violence… were committed solely against Tutsi women… These rapes resulted in physical and psychological destruction of Tutsi women, their families and their communities. Sexual violence was an integral part of the process of destruction, specifically targeting Tutsi women and specifically contributing to their destruction and to the destruction of the Tutsi group as a whole.

Survivors and eyewitnesses of sexual attacks by Janjaweed and government forces in Darfur said rape was one means of destroying the non-Arab ethnic groups – in particular the Fur, Zaghawa and Masalit – by 'polluting' the 'tribal blood line'. Communities under attack were sometimes called 'slaves, a clear demonstration of the ethnic dimension of the attacks against non-Arab groups.

1   Available at: <http://apo.org.au/node/39108>.

The Effects of Conflict-Related Sexual Violence

Source (emphasis added): Jones, N., J. Cooper, E. Presler-Marshall and D. Walker, 'The fallout of rape as a weapon of war: The life-long and intergenerational impacts of sexual violence in conflict', Overseas Development Institute, London, 2014, pp. 2–5.[1]

- Individual survivors can suffer from **numerous physical, psychological, social and economic consequences** – many of which persist for years.

- The **longer-term physical symptoms** reported by victims of sexual violence include persistent pain, fistula and infertility – with the latter being a particularly devastating condition in cultures where a woman's worth is measured, and her future secured, by her ability to produce children.

- Survivors are also more likely to be infected with **HIV and other sexually transmitted diseases**.

- In general, **those who manage to survive the worst forms of sexual violence**, such as gang rape, sexual slavery and forced pregnancy, are more likely to suffer from long-term problems, as are the youngest, and smallest, victims.

- Although still limited, the current evidence base on the **psychological dimensions** of sexual violence suggests that they too are often long-lasting. Survivors are more likely to exhibit symptoms of depression, anxiety, post-traumatic stress disorder (PTSD), low self-esteem and suicidal thoughts.

- Their **family members are also at considerable risk** of psychological damage, particularly when they have been made to watch the violence and have been powerless to protect the victim, or, as has been the case in several African conflicts, they have been forced to participate in the rape of their family members.

- While it is well-known that sexual violence has particularly significant and long-lasting impacts on **children and adolescents** in non-conflict settings, those impacts remain virtually unexplored in post-conflict areas. This is a problem, given that whole cohorts of young people in some regions have now been exposed, in one way or another, to horrific sexual violence.

- In many post-conflict areas, the social impacts of sexual violence cannot be overstated. Survivors – women and girls, as well as men and boys (who are even less likely to report the violence because of hostility around homosexual acts) – can face **stigma that forces them out of their families, isolates them from their communities and leaves them to deal with their physical and psychological trauma alone**.

- While culture and custom on the sexual propriety of girls and women is at the root of this discrimination – mixed with family and community shame at their inability to provide protection – even **formal law can marginalise victims** still further. For example, in Cyprus, after the Turkish invasion, divorce was legalised on a temporary basis, just so that the husbands of raped women could divorce them legitimately.

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1   Available at: <www.odi.org/sites/odi.org.uk/files/odi-assets/publications-opinion-files/8990.pdf>.

- Sexual violence also **has long-term ramifications for the economic futures of the survivors**. In areas where marriage represents women's best – and sometimes only – route to security, abandonment and the loss of their marriage prospects can result in a lifetime of poverty. Even those survivors who are supported by their families are at risk. In the DRC, and among Ethiopian refugees in Sudan, agricultural output has been reduced because women are afraid to return to their 'normal' lives.

- **Women who become pregnant** as a result of rape – and up to 18% of survivors do – carry an even heavier burden in many ways and on many levels. Even more likely to be abandoned, for bearing an 'enemy child' whose very existence is a constant reminder of their sexual assault and a constant affront to their husbands' lack of protection, they often find themselves alone and with another mouth to feed.

- Sexual violence can also have **long-term impacts on communities**, which may be particularly hard to heal where sexual violence has been targeted along tribal or ethnic lines, as the trauma can further delineate those lines, making future violence more likely.

- In many contexts, conflict-related sexual violence **normalises gender-based violence**, even after the conflict itself has ended.

- The most devastating community impact of mass sexual violence, however, may be the way in which it **damages the social capital** on which communities are built. At times that damage is literally physical: whole villages can be displaced by the threat of mass rape, unravelling age-old social networks that have provided emotional and economic safety-nets.

- UNICEF has noted, however, that even when villages are not displaced, **sexual violence 'erodes the fabric of a community** in a way that few weapons can. Rape's damage can be devastating because of the strong communal reaction to the violation and pain stamped on entire families. The harm inflicted in such cases on a woman by a rapist is an attack on her family and culture'.

Men, Boys and Conflict-Related Sexual Violence

Source: Russell, W., 'Sexual violence against men and boys', *Forced Migration Review*, no. 27, January 2007, pp. 22–23.[1]

In the last decade, sexualised violence against men and boys – including rape, sexual torture, mutilation of the genitals, sexual humiliation, sexual enslavement, forced incest and forced rape – has been reported in 25 armed conflicts across the world. If one expands this tally to include cases of sexual exploitation of boys displaced by violent conflict, the list encompasses the majority of the 59 armed conflicts (based on *Human Security Report,* 2006).

Male-directed sexual violence remains largely undocumented. Little is known either about the scope or nature of such violence or about the psychosocial consequences for male survivors. For individual survivors, this collective ignorance leads to a lack of assistance or justice.

Sexualised violence against men and boys can emerge in any form of conflict – from interstate wars to civil wars to localised conflicts – and in any cultural context. Both men and boys are vulnerable in conflict settings and in countries of asylum alike. Both adult men and boys are most vulnerable to sexual violence in detention. In some places over 50% of detainees reportedly experience sexualised torture.

However, both adult men and boys are also vulnerable during military operations in civilian areas and in situations of military conscription or abduction into paramilitary forces. Boys, meanwhile, are also highly vulnerable in refugee/IDP settings.

In addition to acts of individual sadism, the main overt purposes of sexualised violence against men and boys appear to be torture, initiation and integration into military/paramilitary forces, punishment of individuals and a strategy of war designed to terrify, demoralise and destroy family and community cohesion.

More fundamentally, most sexual violence is a mechanism by which men are placed or kept in a position subordinate to other men. Male-directed sexual violence helps to expose the broader phenomenon of conflict-related sexual violence, including against the women and girls who are the most numerous victims, for what it is: not 'boys being boys' but an exercise in power and humiliation.

1   Available at: <www.fmreview.org/sites/fmr/files/FMRdownloads/en/FMRpdfs/FMR27/12.pdf>.

Security Council Resolutions 1612 and 1960

Sources: Office of the Special Representative of the Secretary-General on Children and Armed Conflict website: <https://childrenandarmedconflict.un.org>; and Peacewomen website: <www.peacewomen.org/SCR-1960>.

UN Security Council Resolution 1612 of 2005

UN Security Council Resolution 1612, adopted unanimously by the UN Security Council on July 26th 2005, was a groundbreaking development in the children and armed conflict agenda. Following the steps of UN Security Council Resolution 1539 of 2004, it established an unprecedented UN-led monitoring and reporting mechanism (MRM) to systematically document and report on the six grave violations against children in armed conflict. These include:

1. Killing and maiming of children

2. Recruiting and using child soldiers

3. Attacks against schools or hospitals

4. Rape or other grave sexual violence against children

5. Abduction of children

6. Denial of humanitarian access for children

Security Council Resolution 1960 of 2010

In December 2010, noting that sexual violence during armed conflict remains systematic, rampant, and widespread, the Security Council unanimously adopted a new resolution, Resolution 1960 (2010). This resolution creates institutional tools and teeth to combat impunity and outlines specific steps needed for both the prevention of and protection from sexual violence in conflict. The new "naming and shaming," listing mechanism mandated in the Resolution is a step forward in bringing justice for victims and a recognition that sexual violence is a serious violation of human rights and international law.

SCR 1960 outlines specific steps for the prevention of and protection from sexual violence in conflict, including the establishment of standardized monitoring, analysis and reporting arrangements (MARA).

The purpose of the MARA is to provide systematic, timely, reliable, and objective information on conflict-related sexual violence to the Security Council that will help reduce the risk of sexual violence and improve assistance to survivors. It will also serve to collect:

- Information on patterns and trends of sexual violence in situations of conflict, post-conflict and other situations of concern to the UN Secretary-General;

- Detailed information on parties to conflict credibly suspected of committing or being responsible for rape and other forms of conflict-related sexual violence – for the purpose of listing in the UN Secretary-General's report to the Security Council.

Sexual Exploitation and Abuse

All forms of sexual exploitation and abuse (SEA) by humanitarian and peacekeeping personnel are a gross violation of human rights and an abuse of a position of power over vulnerable people. SEA can lead to serious and sometimes life-long consequences for those who are victimized and their families. Further, SEA has wider negative impacts: it undermines the integrity and reputation of the UN and other humanitarian actors, and it can threaten the security of staff and operations, hindering UNICEF and the wider UN from achieving its mission.

Although there has been a decrease in reports, incidents of SEA by UN civilian and military personnel against women and children continue to occur. Underreporting of all forms of sexual violence, including SEA, is widely acknowledged. Recently, sexual harassment and sexual assault of humanitarian workers by fellow staff has also been reported publicly.

The problem of sexual exploitation and sexual abuse by humanitarian workers and peacekeepers is not new; allegations surfaced in numerous conflict-affected settings in the 1990s. However, the release of a report detailing serious and widespread misconduct and abuse of children in West Africa by aid workers and peacekeepers in 2002 brought international attention and condemnation to the issue.

In response to the allegations, the Inter-Agency Standing Committee (IASC) established a task force in 2002 and developed six core principles on SEA.[1] These principles are:

- Sexual exploitation and abuse by humanitarian workers constitute acts of gross misconduct and are therefore grounds for termination of employment.

- Sexual activity with children (persons under the age of 18) is prohibited regardless of the local age of consent. Mistaken belief in the age of the child is not a defence.

- Exchange of money, employment, goods or services for sex, including favours or other forms of humiliating, degrading or exploitative behaviour is prohibited. This includes the exchange of assistance that is due to beneficiaries.

- Sexual relationships between staff members and beneficiaries are strongly discouraged since they are based on inherently unequal power dynamics. Such relationships undermine the credibility and integrity of humanitarian aid work.

- Where a member of staff develops concerns or suspicions regarding sexual abuse or exploitation by any person, whether in the UN or not, s/he must report such concerns via the prescribed procedure.

- UN staff members are obliged to create and maintain an environment that prevents sexual exploitation and abuse and promotes the implementation of this code of conduct.

- Managers at all levels have particular responsibilities to support and develop systems that maintain this environment.

These principles were incorporated into a zero tolerance policy toward SEA perpetrated by UN and partner personnel. This policy is outlined in the Secretary-General's 2003 Bulletin, *Special measures for protection from sexual exploitation and sexual abuse* (ST/SGB/2003/13). The Bulletin serves as a Code of Conduct (CoC) for UN and partner personnel and prohibits sexual relations in the context of one person taking advantage of another person, regardless of the victim's age. It also prohibits all sexual relations with children under 18 years of age.

1   Available at: <www.pseataskforce.org/uploads/tools/sixcoreprinciplesrelatingtosea_iasc_english.doc>.

Transactional sex is banned. Although the policy does not prohibit all sexual relations with members of the local population, most are considered unequal due to the vulnerability of conflict- and disaster-affected people and the relative power held by humanitarian and peacekeeping personnel, and they are therefore "strongly discouraged."

A comprehensive approach to addressing SEA

UNICEF country offices (COs) must undertake multi-dimensional actions to effectively prevent SEA from occurring and to ethically and appropriately respond to all allegations and complaints of SEA involving humanitarian and peacekeeping personnel. Key pillars of action include: (i) management and coordination of CO efforts to address SEA; (ii) effective systems and procedures for confidentially and effectively reporting and responding to SEA allegations and complaints; (iii) proactive prevention measures; and (iv) community outreach and education related to the issue.

Management and coordination

Implementing comprehensive prevention and response to SEA requires strategic and coordinated action, best implemented via a well-resourced CO SEA action plan. This plan must be championed by senior management and must set out clear accountabilities for all managers and staff.

In addition to coordination across CO departments and programmes, inter-agency coordination is a core component of action to prevent and respond to SEA.

Systems for reporting and responding to SEA allegations and complaints

Each and every report or allegation of SEA received by UNICEF must be appropriately followed up on by COs. In the case of allegations involving children, the Notification Alert must be followed.[2] Responding to allegations also involves providing appropriate care, support and protection for survivors, as well as following procedures for internal reporting set out in the Notification Alert.

2   The UNICEF Notification Alert can be found at the end of this Info Sheet. Contact Child Protection in Emergencies Section at Headquarters for additional UNICEF SEA prevention and response resources and training materials.

Preventive measures

Steps can and must be taken to reduce the likelihood of UNICEF or partner staff breaching the code of conduct and perpetrating sexual abuse or exploitation. COs must take steps to mitigate the risk of staff engaging in SEA-related misconduct in the same way that risks of other misconduct, such as theft, are minimized. Preventive action centres on increasing staff compliance with behavioural standards set out in the Secretary-General's Bulletin *Special measures for protection from sexual exploitation and sexual abuse* (ST/SGB/2003/13)[3] and related UNICEF policies. It also involves strengthening organizational practices such as improving staff recruitment and management processes, building safer partnerships and implementing protective programming.

Community outreach and education

Community members have both a need and a right to access information regarding protection from SEA by humanitarian and peacekeeping personnel, as well as the UN's zero tolerance approach toward it. Providing community members with age-, sex- and ability-appropriate information about how to safely report SEA complaints, and initiating efforts to build trust with communities so that people are willing to come forward and make complaints, are both vital for ending impunity for SEA by humanitarian and peacekeeping personnel.

Challenges in preventing and responding to SEA

It is important to be aware of the complexities and challenges inherent in SEA prevention and response. Sexual violence is a sensitive issue, and even in well-resourced, stable settings, there are significant obstacles to reporting and responding to sexual assault, as well as to coordinating multi-stakeholder preventive action. A common challenge across settings is the underreporting of sexual violence. Survivors are often reluctant to report their experience of sexual assault due to feelings of shame, intense social stigma, and victim-blaming attitudes and behaviours from those around them. Survivors who speak out often face the threat of retaliation in the form of further violence or harassment from perpetrators and/or those supporting the perpetrators. This challenge is further exacerbated in humanitarian settings. Although the following list is not exhaustive, it highlights some of key challenges faced in unstable and/or resource-poor emergency contexts.

A lack of appropriate GBV response services: Poor quality or limited access to health, safety and psychosocial services means survivors may be less likely to come forward, increasing the risk of further harm. It can be extremely difficult to provide appropriate care and assistance to survivors of SEA who do come forward when there are limited or poor quality services available. Further, a lack of legal services may prohibit survivors from asserting their legal rights, where these rights exist.

The nature and context of abuse and exploitation: SEA includes a spectrum of activities and behaviours: some involve the use or threat of force or violence, while others do not outwardly appear to be coercive. For example, in some instances of sexual exploitation, survivors may 'consent' to the activity and therefore not consider it abusive. In such cases, there is often an economic incentive to exchange sexual activity for resources for survival and a subsequent disincentive to report: the survivor may not wish to lodge a complaint or have the matter investigated because of the economic consequences it may cause. In these cases, it is not uncommon for survivors to 'disappear' rather than agree to participate in an

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3   See the website of the Inter-Agency Standing Committee Protection from Sexual Exploitation and Abuse Taskforce for this and other SEA-related policies and documents: <www.pseataskforce.org/>.

investigation. In other settings, behaviours that are considered culturally or socially acceptable may constitute abuse or exploitation according to the UN definition.

Evidentiary issues: Although the burden of proof is lower for establishing a breach of the UN's code of conduct (as opposed to proving criminal responsibility), it can be very difficult to prove SEA. There are rarely witnesses, and even when there are, they may be afraid of participating in investigations. This problem is compounded in situations where survivors are not the complainant in a case.

Maintaining a survivor-centred approach in conditions of mandatory reporting: A survivor-centred approach to sexual violence affirms the rights of survivors to confidentiality and self-determination – including the right to decide whether or not to formally report the incident. Upholding the full rights of survivors to confidentiality and self-determination is not always possible in the context of mandatory reporting of SEA. Further, maintaining anonymity and safety of survivors and witnesses can also be difficult.

Inconsistent investigative and disciplinary procedures: UN staff, including civilian staff and police, are disciplined by the UN through administrative sanctions, such as fines, dismissal or repatriation, whereas military personnel are disciplined according to the rules of the troop-contributing country. Communities rarely make distinctions between different arms of the UN; therefore, poor practices amongst one organization or entity can reflect badly on the entire UN country mission.

Inadequate resources and technical capacity: Implementing comprehensive SEA prevention and response measures requires resources, specialist knowledge and skills, and adequate capacity – which have not always been prioritized in the past. Further, the issue of SEA has not always been taken seriously by the humanitarian community in some settings.

Accountabilities, roles and responsibilities for preventing and responding to SEA
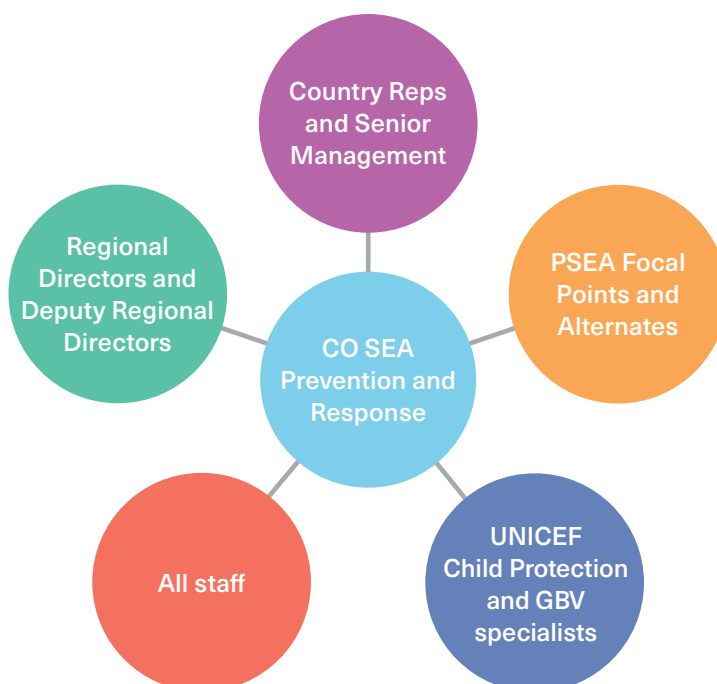
Senior management staff at all levels are accountable for preventing and responding to SEA. The procedures to report, respond to and monitor allegations of SEA, in line with the Notification Alert, and to take effective actions in preventing SEA, are carried out in coordination with the Division of Human Resources, Supply Division, Office of Internal Audit and Investigation (OIAI) and the Legal Adviser. The specific roles and responsibilities of those offices are identified and explained in other documents.

Regional Directors and Deputy Regional Directors

Regional Directors and Deputy Regional Directors are responsible for:

- Holding in-country management to account regarding their roles and responsibilities for SEA prevention, reporting and response strategies and providing support in identifying adequate resources for implementation;

- Taking appropriate action with regard to onward reporting of alleged cases of SEA, noting in particular the Notification Alert; and

- Supporting the management of external communications concerning an SEA case, particularly media management.

Country Representatives/Heads of Office and other senior managers

UNICEF Country Representatives and senior managers, including Heads of sub or zonal offices, are accountable for taking action to prevent and respond to SEA at country level. This includes operationalizing the four steps for reporting and responding to SEA allegations, noted above.

PSEA Focal Points and Alternates

PSEA Focal Points and Alternates have a significant role in preventing and responding to SEA. They are responsible for:

- Receiving and reporting onward all complaints, reports and questions about alleged acts of SEA committed by UNICEF personnel and personnel of other entities whenever approached;

- Confirming that records are kept, information is held confidentially and appropriate reporting takes place, in line with local reporting procedures; and

- Reporting to the UNICEF Representative or other senior manager, such as the Head of a field office.

The PSEA Focal Point or Alternate is never responsible for questioning or dismissing an allegation, deciding if or how to proceed with an allegation, or making decisions regarding investigations.

UNICEF Child Protection and GBV specialists

Child Protection and GBV staff are often the first to be notified of an SEA incident or allegation. They are also likely to have the expertise and skills to engage with and support victims. Key responsibilities of UNICEF Child Protection and GBV specialists include:

- Supporting PSEA Focal Points, Alternates and other designated staff at field level to identify appropriate referral services and establish protocols for referring victims; and

- Providing guidance and advice to Focal Points and Alternates regarding victims' rights and the best interests of the child throughout the reporting and assistance processes.

UNICEF staff members and related personnel

Regardless of their contractual status, all UNICEF staff and related personnel have the following responsibilities in preventing and responding to SEA:

- Abiding by the standards of behaviour set out in the UN SEA Code of Conduct;

- Reporting all information regarding allegations, suspicions or complaints of SEA to designated Focal Points or supervisors; and

- Contributing to a climate and culture of zero tolerance for SEA in the workplace and community by promoting the rights of women and children to be free from all forms of violence.

Country office checklist for preventing and responding to sexual exploitation and abuse

Reporting	
UNICEF Head of Office is immediately informed of SEA allegations by UN staff or related personnel.	○
Notification Alert is activated within 24 hours of receipt of an SEA allegation. Allegation is reported using the Significant Incident Report (SIR) for SEA.	○
Within 12 hours after receiving the SIR, Regional Director makes a decision whether to inform NYHQ.	○
Where PSEA Task Force has been established by the UNCT, UNICEF informs Task Force as appropriate.	○
Country Representative consults UNICEF Legal Adviser and other relevant staff to determine the appropriate procedures for reporting to national authorities.	○
Country Representative reports SEA allegations involving UNICEF staff and related personnel following the Notification Alert and confirms follow-up actions are taken.	○
Response	
Appropriate information, support, referral and victim assistance are provided or facilitated for child victims of SEA (and adult victims of SEA allegedly perpetrated by UNICEF staff or related personnel) throughout the reporting and investigation process and during follow-up, as needed. Victim assistance includes safety, medical care, psychosocial support, legal services and case management. Relevant Child Protection colleagues are involved in identifying available services and referral procedures for child victims.	○
OIAI is informed of SEA allegations.	○

Monitoring

Mechanisms are in place for monitoring response and follow-up of allegations, including the quality of victim assistance provided by UNICEF and its partners to address the child's safety, health and psychosocial needs, and access to legal assistance. UNICEF's accountability for monitoring SEA response also includes assistance to adult victims of SEA allegedly perpetrated by a UNICEF staff or related personnel.	◯
Mechanisms are in place for monitoring ongoing investigations.	◯

Prevention

A PSEA Focal Point and Alternate are designated in each CO and each sub or zonal office and are trained on SEA prevention and response.	◯
Focal Points' and Alternates' responsibilities are reflected in Performance Appraisal Reports.	◯
CO is active in inter-agency PSEA Task Force and advocates for establishment of Task Force where it does not exist.	◯
Appropriate linkages are facilitated with other relevant coordination forums.	◯
Victim assistance services are mapped to determine the availability and quality of medical, psychosocial and legal services.	◯
Protocol is established for referring SEA victims.	◯
Victim assistance services are established or strengthened.	◯
PSEA training and capacity-building of partners, peacekeepers and relevant troops is supported.	◯
All staff are trained on SEA and the Code of Conduct.	◯
The Code of Conduct and key UNICEF policies related to SEA reporting, response and prevention are translated into the main local languages and prominently displayed throughout the CO.	◯
SEA awareness is promoted to build staff knowledge and commitment to zero tolerance of SEA.	◯
Senior managers are trained on how to identify and respond to staff stress.	◯
Staff are advised of disciplinary procedures.	◯

Sexual Exploitation and Abuse

GBV prevention and mitigation strategies are incorporated into the policies, standards and guidelines of sectoral programmes. ◯

Communities, especially children and women, are consulted on how to make community-based complaint mechanisms accessible, safe and confidential. ◯

Community-based complaint mechanisms are established and announced in UNICEF operational areas. ◯

Provisions are in place for anonymous reporting of SEA. ◯

Mechanisms are in place to provide feedback to communities on measures taken to prevent and respond to SEA. ◯

Essential SEA prevention and response resources

- **UNICEF Minimum Operating Standards for Protection from Sexual Exploitation and Abuse (MOS-PSEA):** Contact Child Protection in Emergencies, Programme Division, Headquarters for a copy.

- **UNICEF Notification Alert package:** Reporting Allegations of Sexual Exploitation and Abuse of Children by UN Personnel or by Foreign Military Personnel Associated with a UN Mandate – contact Child Protection in Emergencies, Programme Division, Headquarters for a copy.

- **UNICEF SEA package** (Eng, Fr): Guidance on conducting child interviews for investigations, Child Interview Monitoring Checklist, SEA UNICEF Training presentation – contact Child Protection in Emergencies, Programme Division, Headquarters for a copy.

- **UNICEF's Standard Programme Cooperation Agreement,** available at: <https://intranet. unicef.org/pd/pdc.nsf/caf1cccd04786f1285256c870076516b/b972e7beaf90edba85257e 0a0069239e?OpenDocument>.

- **UNICEF Child Safeguarding Policy,** available at: <https://intranet.unicef.org/pd/pdc. nsf/0/B91A2CD30AA64B2685257FE9007254A4/$FILE/CF%20EXD%202016%20 006%20Child%20Safeguarding%20Policy.pdf>.

- **Secretary-General's Bulletin on Special measures for protection from sexual exploitation and sexual abuse** (ST/SGB/2003/13), available at: <www.pseataskforce.org/uploads/ tools/1327932869.pdf>.

- **IASC Standard Operating Procedures for Community-Based Complaints Mechanisms (CBCMs),** available at: <https://interagencystandingcommittee.org/accountability-affected -populations-including-protection-sexual-exploitation-and-abuse/documents-51>.

- **IASC AAP/PSEA Best Practice Guide on Inter-Agency Community-Based Complaints Mechanisms (CBCMs),** available at: <https://interagencystandingcommittee.org/accountability -affected-populations-including-protection-sexual-exploitation-and-abuse/documents-50>.

UNICEF Notification Alert to Senior Management: Reporting Allegations of Sexual Exploitation and Abuse of Children by UN Personnel or by International Military Personnel Associated with a UN Mandate

Allegations must be reported to UNICEF senior management

- All UNICEF Personnel have a duty to report to UNICEF senior management allegations of sexual exploitation and abuse of children by UN Personnel or by international military personnel associated with a UN mandate. Reports must be made urgently once an allegation is received. The steps for making these reports (including the template form to use) are set out on the following page.

- Reporting allows UNICEF senior management to make sure the Organization is taking appropriate steps to help the children involved, to stop any on-going exploitation and abuse, and to trigger appropriate investigations and possible referrals to law enforcement.

Who must report what, when, and to whom?

- **Who has to report?** "UNICEF Personnel" means, for these purposes, all staff members; UNVs working with UNICEF; people deployed to UNICEF under Stand-by Personnel arrangements or on reimbursable or non-reimbursable loans; interns; personnel deployed to UNICEF through an employment agency or similar arrangements; and individuals who have a consultancy contract with UNICEF.

- **What has to be reported?** Allegations of sexual exploitation and abuse of children by UN Personnel. Given the nature of the actions involved, all allegations should be reported. However, making an allegation in bad faith against someone or embellishing an allegation are strictly prohibited; appropriate steps will be taken against anyone who does so.

  - "Sexual exploitation and abuse" have been defined in various instruments issued by UNICEF and the UN, but all allegations of sexual conduct by UN Personnel with children – including attempted or threatened conduct of a sexual nature – must be reported. This is especially so if the allegation involves actual or threatened violence or inducements such as protection, food, shelter, or the like. An analysis of whether such conduct meets the technical definitions can occur at a later phase of the process.

  - "Children" also has a definition, and all allegations involving someone who appears or claims to be under 18 must be reported.

  - "UN Personnel" means staff members of the UN Secretariat or any UN System Organization (including UNICEF), UNVs working with any such organization, people deployed to a UN System Organization under Stand-by Personnel arrangements or on reimbursable loans, interns, people deployed to a UN System Organization through an employment agency or similar arrangements, gratis personnel, and individuals who have a consultancy contract with a UN System Organization. It also includes the employees or consultants and sub-contractors of UN System Organizations, civil society implementing partners, and contractors or suppliers. In addition, it includes all personnel associated with international or regional military forces operating as part of a UN Peacekeeping Mission or otherwise under a UN mandate. "International military personnel associated with a UN mandate" is self-explanatory.

- **When Must the Allegations be Reported?** Allegations must be reported urgently once they are received. The maximum time frames for reporting are set out in the matrix below.

- **To Whom Must the Report be Made?** The report must be made directly to the head of the UNICEF office where the person making the report is assigned. That might be a Country Office or a zonal- or sub-office. That person then has obligations to report to more senior colleagues within UNICEF and the UN System at country level. The reporting protocols from there are set out in the matrix below.

Special notes:

- If you are in doubt about whether something has to be reported, report it.

- UNICEF expects that our government partners and donors, UNICEF national committees, civil society implementing partners (local and international), vendors and suppliers, and organizations with a corporate consulting contract with UNICEF, and the employees of all of these, will also report such allegations to UNICEF.

Reporting steps

Step 1

Immediately after receiving an allegation of actual, attempted, or threatened, sexual exploitation and abuse of a child by any UN Personnel, UNICEF Personnel must inform the Head of Office where he or she is assigned. The Head of Office must immediately inform the UNICEF Representative in the country, or the acting Representative, if the initial report is made at a sub- or zonal- office. This report should be made by whatever means is fastest and easiest, e.g., in person, by phone, by text, by email.

Step 2

Within 24 hours after he or she receives the report, the UNICEF Representative must report the allegation to the UNICEF Regional Director.

- The report must be made in writing, using the Significant Incident Report (SIR) for Sexual Exploitation and Abuse (SEA). First reports are often incomplete and may contain details that are later found to be inaccurate. The SIR for SEA may be revised later. All information available at the time of making the report must be included except the names and identifying information of the child which must be removed from all written documents and communications; that information (if known) is to be retained at Country Office level under strict confidentiality.

- The SIR for SEA form requires the Representative to report on steps taken to support the child and his/her family. The SIR for SEA also requires the Representative to express a view on whether the allegation is credible.

- In all cases, the Representative must also inform the most-senior UN official in country (e.g., SRSG of UN Mission, or UNCT RC/HC). This report is provided orally, with an email follow up making clear that the allegation has not been assessed or investigated. The SIR for SEA is a confidential internal UNICEF document and is not provided outside UNICEF.

Within 12 hours after he/she receives the SIR for SEA, the Regional Director reviews the information and makes a decision, using his or her best judgment, whether to inform NYHQ. If the Regional Director decides to inform NYHQ, this is done by forwarding the SIR for SEA (with the relevant section of the SIR/SEA completed by the Regional Director):

- Deputy Executive Director Programmes with copy to:
  - Deputy Executive Director Management
  - Chief of Staff (OED)
  - Director Programme Division
  - Director EMOPS
  - Associate Director PD (Child Protection)
  - Country Representative

- If the alleged perpetrator is a UNICEF staff member, UNV working with UNICEF, a person deployed to UNICEF under a Stand-by Personnel arrangement or on reimbursable or non-reimbursable loan, an intern, a person deployed to UNICEF through an employment agency or similar arrangements, or a gratis personnel: the SIR for SEA must also be copied to Director DHR; Chief of Investigations, OIAI; and the Legal Adviser NYHQ.

- If the alleged perpetrator is an individual consultant, or an employee or associate of a corporate vendor or supplier or of an institutional or corporate contractors (sometimes referred to as corporate consultants): the SIR for SEA must also be copied to Director SD; Chief of Investigations OIAI; and the Legal Adviser NYHQ.

The Country Representative, upon advice of and with specific guidance from UNICEF Headquarters, informs appropriate Government authorities and, when relevant, contractors or implementing partners.

Minimum Set of GBV Response Services

Survivors of CRSV have the right to age-appropriate essential health, psychosocial and safety services to meet their needs.

Making priority health, psychosocial and safety services universally available for child, adolescent and adult survivors of sexual violence is a humanitarian priority. As such, providing assistance and support to GBV survivors is one component of UNICEF's **Minimum GBViE Response Package** (see the box below).

Kit 3.1: Programming – Responding to GBV Survivors in Emergencies contains information, resources and tools to support age-appropriate health, psychosocial and safety services for sexual violence survivors as part of the **Minimum GBViE Response Package**.

UNICEF's Minimum GBViE Response Package

1. Effective Coordination to address GBV between:	1. Providing Assistance and Support to GBV Survivors through age-appropriate:	1. Building Safety and Resilience	1. Mitigating GBV Risks
• GBV actors • All humanitarian sectors/clusters • Other actors	• Healthcare • Psychosocial support • Safety services	• Community safety planning • Dignity kit programming • Safe space programming	Integrating essential GBV risk mitigation actions across UNICEF sectors and clusters

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1   See the Inter-Agency Standing Committee, *Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action: Reducing risk, promoting resilience and aiding recovery,* IASC, 2015, available at: <http://gbvguidelines.org/>.

Action Plans

- Similar to the SCR 1612 (2005) Monitoring and Reporting Mechanism (MRM) for Grave Violations affecting Children and Armed Conflict (CAAC), the Monitoring and Reporting Arrangements (MARA) under SCR 1960 (2010) make provision for Action Plans.

- An Action Plan is a formal commitment to cease violations by a party listed in the annexes of the Report of the Secretary-General on Conflict-Related Sexual Violence.

- This is a commitment to carry out time-bound specific actions to cease and desist violations, as well as a road map for prevention of further violations. According to context, the Action Plan could also include establishing systems for comprehensive response for survivors.

- Women Protection Advisors (WPAs) who are placed within missions work together with the UN Office of the Special Representative of the Secretary-General (SRSG); the UN Department of Peacekeeping Operations (DPKO); the UN Department of Political Affairs (as applicable); UN and non-government organizations, humanitarian agencies and entities; and the host government (depending on whether or not it is a party to the violations) to implement monitoring and develop an Action Plan for the specific context.[1]

- Collectively, these stakeholders have the responsibility of developing concrete, time-bound and verifiable agreements with the parties to the conflict in order to enhance the accountability of responsible parties; respond to violations; and prevent future violations.[2]

- The Action Plan will include: agreements on access for monitoring by the UN on implementation of the Action Plan; disciplinary measures against perpetrators; and the designation of a high-level focal point responsible for ensuring commitments within the Action Plan are carried out on time and according to what was agreed to.[3]

- Once an Action Plan is signed by both the listed party and by representatives of the United Nations, the activities under the Action Plan itself are then supported and monitored for effective and timely implementation.

- Perpetrating parties may be incentivized to agree to and sign an action plan by their interest in becoming de-listed from the annexes of the annual Report of the Secretary General on conflict-related sexual violence.

- There is no standard format of actions required of violators by the UN Secretary General, the Security Council and the Office of the Special Representative of the Secretary-General on Sexual Violence in Conflict (SRSG-SVC). Each setting is context-specific.

1   United Nations Entity for Gender Equality and the Empowerment of Women, 'Virtual Knowledge Centre to End Violence Against Women and Girls: Violence Against Women in Conflict and Post-Conflict Settings Module', <www.endvawnow.org/uploads/modules/pdf/1405612658.pdf>, accessed 28 March 2017.
2   Office of the Special Representative of the Secretary-General, Children for Children and Armed Conflict, United Nations Department of Peacekeeping Operations, and United Nations Children's Fund, *Monitoring and Reporting Mechanism (MRM) on Grave Violations against Children in Situations of Armed Conflict Guidelines*, UNICEF, New York, 2012.
3   Hodgson, S., 'Whose Action Plan? An Analysis of the UN Security Council Resolution 1612 Action Plan and Monitoring and Reporting Mechanism in Nepal', Oxford Journals and New York University Law School Library, March 2016.

Protection Mandates

Type of protection	Humanitarian Protection	Protection of Civilians as UN Mandate
Definition	All activities aimed at ensuring full respect for the rights of the individual in accordance with the letter and the spirit of the relevant bodies of law (e.g., human rights law, international humanitarian law and refugee law).	A mandate granted by the UN Security Council under Chapter VI, VII or VIII delineating the role, responsibility and extent of action that may be taken by peacekeeping forces to protect civilians from violence.
Protected persons	• All people at all times	• Civilians • Humanitarian personnel
Duty bearers	• The State • Humanitarian and Human Rights Organizations	• The State • Dependent on, and specific to, respective mandate provided by the UN Security Council
Mandated agencies	UNHCR, UNICEF, OHCHR, International Committee of the Red Cross (ICRC) in situations of armed conflict	Dependent on, and specific to, mandate provided by the UN Security Council
Scope	• International and non-international armed conflict • Post-conflict • Natural disasters	• Peacekeeping/peacebuilding operations • Scope dependent on the relevant Protection of Civilians mandate provided by the UN Security Council
Regulatory framework	• International Humanitarian Law (Geneva Conventions + Laws of War) • International Human Rights Law • International Refugee Law	• International Humanitarian Law (Geneva Conventions + Laws of War) • UN Security Council Resolution(s) • Charter of the United Nations

Kit 3.3: Programming – Building Accountability Info Sheets

Protection of Civilians Under International Humanitarian Law	Refugee Protection
The defense of the legal status and rights of civilians and other protected persons in times of armed conflict.	Ensuring the rights of refugees in accordance with the 1951 Refugee Convention, 1967 Protocol and other relevant regional refugee instruments.
• Civilians • Persons not or no longer taking part in fighting • Sick or wounded combatants • Shipwrecked persons • Prisoners of war • Medical and religious personnel • Staff of relief operations	• All refugees (excluding Palestinian refugees who fall within UNRWA areas of operation)
• The State • Non-State actors engaged in armed conflict	• Host State/country of asylum
International Committee of the Red Cross (ICRC) as derived from the Geneva Conventions (international conflict) and the Statutes of the International Red Cross and Red Crescent Movement (internal conflict)	UNHCR
• Situations of international and non-international armed conflict; International Humanitarian Law does not apply when the situation, no matter how unstable, does not amount to armed conflict	• International displacement due to war and persecution only; it is not applicable in situations of international displacement due to natural disasters
• International Humanitarian Law (Geneva Conventions + Laws of War) • Statutes of the International Red Cross and Red Crescent Movement	• 1951 UN Refugee Convention • International Human Rights Law • Regional Instruments

National and International Accountability Mechanisms

Adapted from: Conflict Dynamics International, *Children in Armed Conflict Accountability Framework: A Framework for Advancing Accountability for Serious Violations against Children in Armed Conflict*, Conflict Dynamics International, Cambridge, 2015.[1]

As shown below, there are numerous accountability mechanisms at local, national, regional and international levels that may be operational in any one setting.

Local
- Traditional and local justice mechanisms
- Civil society monitoring and reporting initiatives
- Humanitarian programming

National
- National monitoring/ implementation of core treaty bodies, e.g., CRC and CAT
- National civil and criminal investigations and prosecutions
- National transitional justice mechanisms, e.g., truth and reconciliation commissions and reparations programs

Regional
- Regional human rights courts
- Regional organizations and mechanisms, e.g., fact-finding missions
- Regional instruments related to prevention of sexual violence
- Monitoring and implementation of regional treaties

International
- International Criminal Court
- UN Security Council mandated mechanisms, e.g., MARA and MRM
- Other, e.g., ad hoc tribunals, special courts and commissions of inquiry

1   Available at: <http://cacaccountability.org/media/CAC_Accountability_Framework.pdf>.

UN Political and Peacekeeping Missions

Source: United Nations Office for the Coordination of Humanitarian Affairs Civil-Military Coordination Section, *United Nations Civil-Military Coordination Field Handbook*, UNOCHA, Geneva, 2015.[1]

UN political missions

The UN Secretariat's **Department of Political Affairs (DPA)** manages **political missions** and **peacebuilding support offices** engaged in conflict prevention, peace-making and post-conflict peacebuilding.

UN political missions would e.g. support peace negotiations or oversee longer-term peacebuilding activities. **Peacebuilding offices** aim to help nations consolidate peace, in coordination with national actors and UN development and humanitarian entities on the ground.

Political missions (DPA-led) might thus be replaced by **peacekeeping operations** (led by the Department of Peacekeeping Operations (DPKO)), after a peace treaty has been signed, or the other way around, UN peacekeeping operations have given way to special political missions.

DPA-led field operations are headed by **senior representatives of the UN Secretary-General.** Some examples of political missions are the UN Assistance Mission in Somalia (UNSOM), the UN Assistance Mission in Afghanistan (UNAMA), the UN Assistance Mission for Iraq (UNAMI), and the Office of the UN Special Coordinator for the Middle East Peace Process (UNSCO).

Not all specialized political missions are DPA-led. There might be different arrangements for **highly specialized mandates**, such as the Joint Mission of the Organization for the Prohibition of Chemical Weapons (OPCW) and the UN for the Elimination of the Chemical Weapons Programme of the Syrian Arab Republic and the UN Mission for Ebola Emergency Response (UNMEER). **Field support missions** are led by the UN Department of Field Support (DFS).

Political missions might include military personnel, e.g. military observers or static guard units.

UN peacekeeping operations

While their mandates may also have political elements, **UN peacekeeping operations** have a military and, sometimes police component, or carry out their mandates alongside a regional or multinational peacekeeping force. They are deployed on the basis of a **Security Council mandate**. A **Chapter VII resolution** determines that there is a threat to peace or an act of aggression according to the UN Charter and defines measures to be taken.

UN peacekeeping is based on the principle that an impartial presence on the ground can ease tensions between hostile parties and create space for political negotiations.

The mandates (defined in Security Council resolutions) and therein defined tasks are situation-specific, depending on the nature of the conflict. Traditionally, UN peacekeeping operations were deployed in support of a political process, such as the implementation of a ceasefire or peace agreement. Over the past decades the range of tasks has expanded

1   Available at: <https://docs.unocha.org/sites/dms/Documents/CMCoord%20Field%20Handbook%20v1.0_Sept2015.pdf>.

significantly in response to changing natures and patterns of conflict. Peacekeeping has increasingly been used in non-international armed conflicts and civil wars, which are often characterized by a multitude of (armed) actors and political objectives.

The structure of many peacekeeping operations has become **multidimensional,** including inter alia military, civilian police, political, civil affairs, rule of law, human rights, disarmament, demobilization and reintegration (DDR), security sector reform, reconstruction, public information and gender components.

Typical mandates may include, among others:

- Providing a secure environment.

- Helping to implement complex peace agreements.

- Facilitating the delivery of humanitarian assistance through the creation of conducive security conditions.

- Assisting with the DDR of former combatants.

- Supervising and conducting elections.

- Strengthening the rule of law, including judicial reform and training of civilian police.

- Promoting respect for human rights and investigating violations.

- Assisting with post-conflict recovery and rehabilitation.

Starting from the Security Council mandate, the "**mission**" and its responsibilities are defined. The **UN Secretary-General** has the command of peacekeeping operations, under the authority of the Security Council. The UN Secretary-General delegates the overall responsibility for these missions to the **Under-Secretary-General for Peacekeeping** and for multidimensional peacekeeping operations appoints an **SRSG,** who serves as **Head of Mission** and is responsible for implementing the mission's mandate. For traditional peace-keeping operations, the UN Secretary-General may appoint a **Force Commander (FC)** or **Chief Military Observer** as Head of Mission.

The SRSG can have one or more deputies (DSRSG) with different thematic tasks. One of them is potentially the RC (DSRSG/RC), who might become a triple-hatted DSRSG/RC/HC if the humanitarian leadership is assumed by the RC.
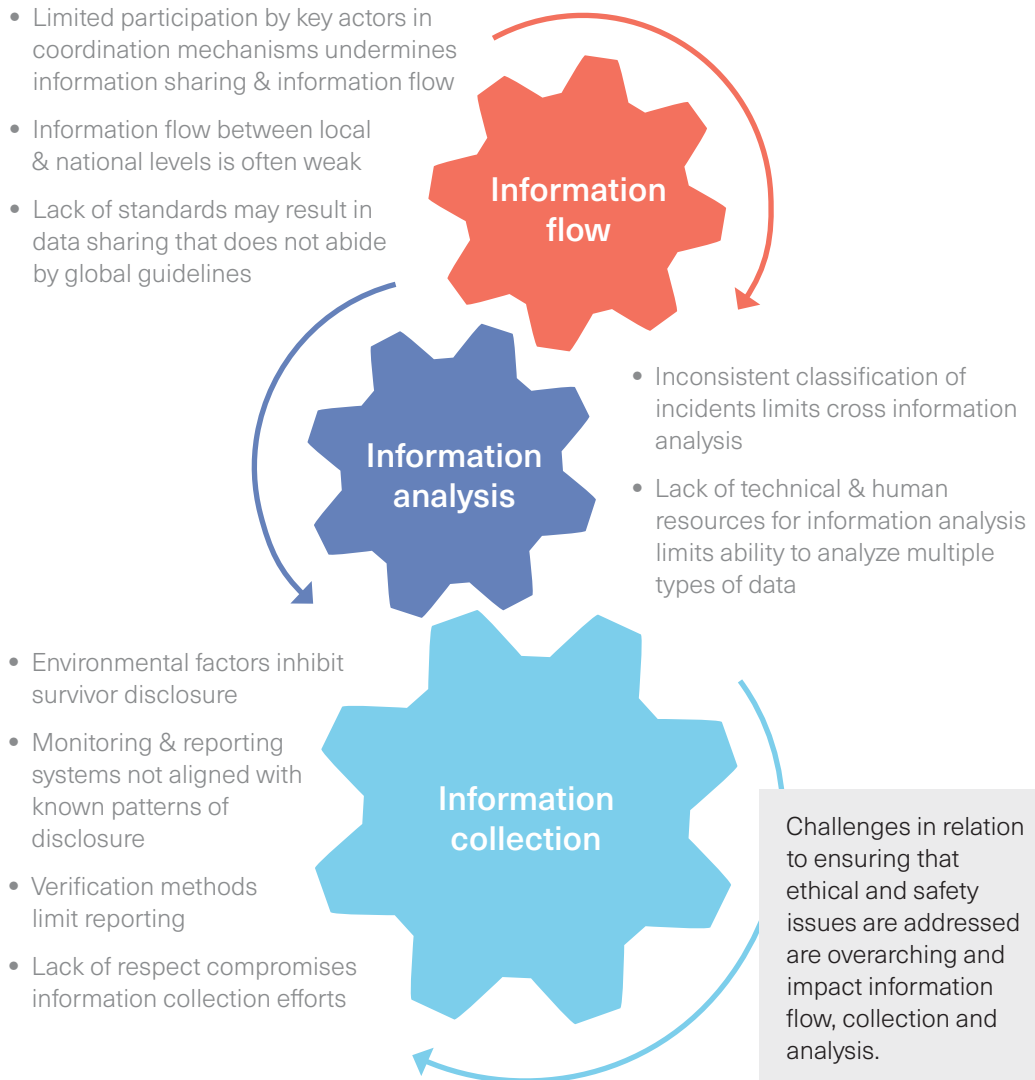
Lessons Learned from the 1612 MRM

- The participation of civil society is crucial to the success of the MRM and must be encouraged with appropriate financial and technical resources.

- Engagement of senior staff from all UN agencies and key NGOs is crucial. At the national level, every country implementing the 1612 MRM system has an established 1612 Country Task Force that engages the most senior level UN leaders. While technical level staff participate in the meetings and drive the implementation of the MRM, the Special Representative to the Secretary-General (SRSG) or Resident Coordinator/Humanitarian Coordinator (RC/HC) typically serves as the chair of the Taskforce, along with the UNICEF Country Representative.

- Continued high-level advocacy – for example by SRSG or senior staff of UN agencies, NGOs, and the International Committee of the Red Cross (ICRC – is beneficial in many countries.

- Strong interagency collaboration in the field and at headquarters is essential.

- Tapping into existing networks, resources, and systems helps to minimize the duplication of efforts to collect information.

- Data collection and verification of methodologies focus largely on individual cases, which increase the risk of exposing children and respondents to further harm or re-traumatization.

- Guaranteeing confidentiality of information and securing informed consent from victims and witnesses remains inconsistent.

- Collecting and reporting information on rape and other forms of sexual violence remains a significant challenge for many MRM Taskforces.

- Limited input from UN agencies or NGOs with expertise addressing sexual violence limits the information that the MRM is able to collect.

- Limited GBV-related services makes collecting information on sexual violence violations challenging – and in many situations, unethical.

- Many survivors remain wary about the security of the information they choose to share and who has access to this information.

- Lack of a clear and common information management template, guideline and training tool for the MRM have inhibited the mechanism's productivity.

- The MRM requires dedicated resources to ensure that it functions effectively.

- Where safe and feasible, systematic and regular contact with government authorities is crucial.

- Response, at all levels, must continue to be an integral component of the MRM.

- A good balance between political engagement and field activities is important.

Data Collection, Analysis and Flow

Information collection, analysis and flow make up the key components of sexual violence monitoring and reporting.

- Limited participation by key actors in coordination mechanisms undermines information sharing & information flow

- Information flow between local & national levels is often weak

- Lack of standards may result in data sharing that does not abide by global guidelines

Information flow

- Inconsistent classification of incidents limits cross information analysis

- Lack of technical & human resources for information analysis limits ability to analyze multiple types of data

Information analysis

- Environmental factors inhibit survivor disclosure

- Monitoring & reporting systems not aligned with known patterns of disclosure

- Verification methods limit reporting

- Lack of respect compromises information collection efforts

Information collection

Challenges in relation to ensuring that ethical and safety issues are addressed are overarching and impact information flow, collection and analysis.

- **Information collection** refers to activities related to gathering information about incidents of sexual violence. Information might be collected through a variety of means, such as rapid assessments, service delivery statistics, human rights monitoring, security monitoring, and operational research initiatives.

- **Information analysis** refers to the process of organizing and reviewing information to identify trends and patterns related to the nature and scope of violence.

Verification

As a member of the MARA Working Group on CRSV, UNICEF will play a role in verifying CRSV information. At all times the GBV guiding principles for working with survivors of safety, confidentiality, dignity and self-determination and non-discrimination apply. This means that survivors must consent for information sharing regarding their case. They should also be either receiving or referred to a service for care and support when verification is in process.

For MARA purposes, **verification** entails the careful assessment of each piece of information gathered relating to reported incidents of CRSV independently, as well as alongside other information collected, and the development of at least prima facie analysis. This implies a separate assessment of:

i.   the credibility and reliability of each source of information (e.g., is it trustworthy? Biased? Are there any political or other motives that may affect its credibility?);

ii. the relevance and validity of each piece of information (e.g., is it accurate, logical, consistent within itself and compared to others? Does it point to the involvement – or not – of a candidate in a human rights or IHL violation?);

iii. the integrity of the methodology used to gather the information (e.g., was the information gathered without bias? Was information independently corroborated?).

As a general rule, for corroboration of a piece of information there has to be concurring information from two other independent, reliable sources. If there are less than two sources, including one single source, then the incident or event would be considered corroborated only if the source(s) is assessed as reliable and the information is consistent with other material, such as the investigator's own observations.

In some incidents of sexual violence it may be very difficult to obtain corroboration of the survivor's account from another independent source, especially if the survivor has not received medical assistance or been able to report the incident to the authorities. In such instances, corroboration may be obtained by assessing the details of the victim's account, evaluating if they are consistent with what is generally known about the incident (for example, the area where it occurred, the alleged perpetrators or the methods used) and establishing whether the incident reveals a pattern that is consistent with other similar incidents.

1   Available at: <www.gbvims.com/wp/wp-content/uploads/Provisional-Guidance-Note-on-Intersections-Between-GBVIMS-MARA.pdf>.

Gender-Based Violence Information Management System and CRSV

What is the GBVIMS?

Developed through a partnership between UNFPA, UNHCR, UNICEF, WHO and the International Rescue Committee (IRC), the GBVIMS is intended to: assist service providers in identifying trends and patterns in relation to the GBV cases being reported to them; enable actors to share data both internally across project sites within a single organization, and externally with interested agencies for broader trends analysis and improved coordination of the GBV response.

The GBVIMS is currently one of the most recognized and widely used information management systems that adhere to globally-recognized best practices for GBV data management based on the WHO *Ethical and Safety Recommendations for Researching, Documenting and Monitoring Sexual Violence in Emergencies*.

Data generated by the GBVIMS can be used to improve programme interventions and to support advocacy and donor reporting. However, as the data represent only reported incident cases from a sub-set of GBV service providers collected at the point of intake and assessment, GBVIMS data do not measure the total number of GBV cases coming to the attention of service providers, nor does the GBVIMS provide data on prevalence. The GBVIMS records self reported cases of survivors, meaning that the information collected is based on survivors' direct testimony without any further verification. Finally, the GBVIMS is not a case management tool, and therefore cannot be used to track progress on individual cases.

Using a globally-standardized GBV incident classification system, direct service providers record information about reported cases using standardized incident intake forms, and then enter data into a customized and locked Excel-based spread sheet (the Incident Recorder, IR) that is password protected and contains only de-identified incident data. The IR automatically generates statistical reports, tables and charts to allow users to instantly search, utilize and analyse their data. These automatically generated reports include quantitative statistics on the number of incidents, survivors, alleged perpetrators, context of incidents, and referrals made at the point of intake. To promote safe and ethical data sharing, an Information Sharing Protocol (ISP) provides a framework to share information that is relevant for broader discussions of trends and analysis of the types of GBV being reported to service providers.

What are the minimum standards of verification that are recommended in the context of the GBVIMS? How GBVIMS data is considered "United Nations-verified"?

Multiple sources of information are ideal according to human rights monitoring standards. The GBVIMS provides information collected by GBV services providers directly from GBV survivors' testimonies, i.e. from primary sources. Therefore when considering information sharing from the GBVIMS for MARA's verification purposes the three following minimum standards of verification based on the Field Manual on Monitoring and Reporting Mechanism (MRM) on Grave Violations against children in situation of armed conflict should apply:

When information is available from only one primary source, the following criteria should be met, in the best interest of GBV survivors:

- **Information has been received from a primary source.** The GBVIMS collects data at the point of service delivery i.e. directly and only from survivors. GBVIMS users who share data for MARA reporting purposes should not be asked to provide further identifiable data on survivors, perpetrators, and service providers for corroboration purposes; and

- **The information collected is deemed credible by an UN-trained GBV service provider.** If all GBVIMS users have been trained by UN agencies, GBVIMS data is considered as "Unverified" i.e. as a credible source of information on GBV collected by UN-trained organizations; and

- **The GBVIMS Coordination body ensures regular quality control on the data collected.**

Survivor-Centred Principles

A survivor-centred approach to GBV response is based on a set of guiding principles that guide the work of all helpers – no matter what their role is – in all of their interactions with GBV survivors.

Survivor-centred principles are interrelated and mutually reinforcing; for example, confidentiality (principle 2) is essential to promote safety (principle 1) and dignity (principle 3). The principles are described below.

Principle 1: Right to safety

Safety refers to both physical security as well as a sense of psychological and emotional safety. It is important to consider the safety and security needs of each survivor, their family members and those providing care and support.

In the case of conflict-related and politically motivated sexual violence, the security risks may be even greater than usual.

Every person has the right to be protected from further violence. In the case of child survivors, every child has the right to be protected from sexual and other violence; as adults, we all have responsibilities to uphold that right.

Why is safety important?

Individuals who disclose sexual violence or other forms of GBV may be at high risk of further violence from the following people:

- Perpetrators;
- People protecting perpetrators; and
- Members of their own family due to notions of family 'honour'.

Principle 2: Right to confidentiality

Confidentiality promotes safety, trust and empowerment. It reflects the belief that people have the right to choose to whom they will, or will not, tell their story. Maintaining confidentiality means not disclosing any information at any time to any party without the informed consent of the person concerned.

Why is confidentiality important?

- Confidentiality promotes safety, trust and dignity.
- Confidentiality reflects the belief that survivors, including children, have the right to privacy and to choose who should know about what has happened.
- Breaching confidentiality inappropriately can put the survivor and others at risk of further harm.
- If service providers and other helpers do not respect confidentiality, other survivors will be discouraged from coming forward for help.

Exceptions to confidentiality

In several situations there are exceptions to confidentiality, and it is very important that survivors, including children and their caregivers, are not led to believe that nothing they say will be shared.

Helpers need to understand and communicate the exceptions to confidentiality, such as:

- Situations in which there is the threat of ongoing violence or harm to a child, and the need to protect the child overrides confidentiality;
- Situations in which laws or policies require mandatory reporting of certain types of violence or abuse;
- Situations in which the survivor is at risk of harming themselves or others, including thoughts of suicide; and
- Situations involving sexual exploitation or abuse by humanitarian or peacekeeping personnel.

Principle 3: Dignity and self-determination

GBV is an assault on the dignity and rights of a person, and all those who come into contact with survivors have a role to play in supporting their dignity and self-determination. For example, survivors have the right to choose whether or not to access legal services and other support services.

Failing to respect the dignity, wishes and rights of survivors can increase their feelings of helplessness and shame, reduce the effectiveness of interventions, and cause re-victimization and further harm.

Principle 4: Non-discrimination

All people have the right to the best possible assistance without unfair discrimination on the basis of sex, gender, age, disability, race, colour, language, religious or political beliefs, sexual orientation, status or social class.

Best interests of the child principle

Every child is unique and will be affected differently by violence. Decisions and actions affecting them should reflect what is best for the safety, well-being and development of that particular child.

The primary purpose of intervening is to provide care, support and protection for individual children – not to meet other objectives.

Strategies for ensuring the best interests of the child include the following:

- Take an approach that takes the individual circumstances of each child into account, including their family situation and their particular vulnerabilities and strengths, and prioritize their needs for safety, protection, and physical and mental health above other needs.
- Listen to the voice and perspective of the child and take their wishes into consideration.

- Protect the child from further emotional, psychological and/or physical harm.

- Empower children and families.

- Examine and balance benefits and potentially harmful consequences of each decision or action affecting a child.

- Promote recovery and healing.

See related **Info Sheets** on:

Mandatory Reporting of Child Abuse

Working with Child Survivors of Sexual Abuse

Obtaining Permission from a Child

Confidentiality

What is confidentiality?

- Confidentiality refers to the right of a person to have any information about them treated privately and with respect. Confidentiality is a basic principle of working with survivors of GBV; it is important for restoring the dignity of the survivor and for reducing social stigma and blame. Survivors have the right to keep information about themselves private in the same way every person has the right to privacy regarding personal information, such as health status.

- Information about a GBV incident or case should never be shared publicly. Those involved in responding to GBV should never discuss details of a case outside of their work or with anyone not related to the case.

- People sometimes think that confidentiality means never telling anyone anything about a case. This is not what confidentiality means. For example, a case worker might discuss issues related to a case with her supervisor. She needs to do this in order to get supervision and make sure she is providing the best possible service.

- People involved in a case may discuss details about the case with each other to make sure they are coordinating and meeting all of a survivor's needs and rights.

- At all times, it is essential that we inform a survivor or her caregiver about who will be involved in a case and why. If they object, we must take their objection seriously and look at why they are objecting; they likely have a good reason for objecting, and we need to listen and find out more.

Limited confidentiality

- 'Limited confidentiality' refers to situations in which there may be legal or other obligations that override the individual's right to confidentiality. Such 'limited confidentiality' applies in the following circumstances:

  - When there are concerns about a person's safety and well-being or the safety of others; and/or

  - When it is believed a criminal offence has been committed, and there are laws that obligate reporting to police or other authorities. In situations in which legal requirements override the person's permission, the survivor or her caregiver should be made aware of the legal requirements.

Communicating with survivors about confidentiality

- Guaranteeing confidentiality can be an important way of building trust, particularly with adolescents. However, it is not acceptable to promise confidentiality and then break it. In fact, we should never start a conversation with survivors by promising that we will not tell anyone what they have said. What we *do* explain to them is what the limits of confidentiality are in that context.

- The first step in addressing complex issues of confidentiality, trust and the rights of survivors is to identify what the limits to confidentiality are in your context.

  ○ How is confidentiality related to cases of GBV being dealt with now?

  ○ Does it reflect the best interests of child survivors?

- After agreeing between actors about the limits of confidentiality, it is important to make sure this information is communicated to survivors at the beginning of an interview.

Mandatory reporting

- All response actors need to understand the laws and obligations on mandatory reporting of sexual violence and other forms of GBV.

- Mandatory reporting can conflict with ethical principles in working with survivors of GBV, including confidentiality and self-determination. It can be complex: for example, when for example, when mandatory reporting results in an action that is not in the survivor's best interest, such as being removed from her family and placed in an institution or punished.

See related **Info Sheet** on:

Mandatory Reporting of Child Abuse

Confidentiality

Working with Child Survivors of Sexual Abuse

Source: International Rescue Committee and United Nations Children's Fund, *Caring for Child Survivors of Sexual Abuse: Guidelines for health and psychosocial service providers in humanitarian settings,* IRC, New York 2012, pp. 88–90.[1]

Guiding principles for working with child survivors of sexual abuse

Service providers caring for child survivors should adhere to a common set of principles to guide decision-making and overall quality of care. Guiding principles set out the ethical responsibilities and behaviors of service providers delivering direct services to children and families seeking assistance. They assure service providers that actions taken on behalf of child clients are supported by standards of care that aim to benefit the health and well-being of the child client(s). Guiding principles ensure that all actors are accountable to minimum standards for behavior and action, and because of that, children and families receive the best care possible.

1. **Promote the child's best interest.** A child's best interest is central to good care. A primary best interest consideration for children is securing their physical and emotional safety – in other words, the child's well-being – throughout their care and treatment. Service providers must evaluate the positive and negative consequences of actions with participation from the child and his/her caregivers (as appropriate). The least harmful course of action is always preferred. All actions should ensure that the children's rights to safety and ongoing development are never compromised.

2. **Ensure the safety of the child.** Ensuring the physical and emotional safety of children is critical during care and treatment. All case actions taken on behalf of a child must safeguard a child's physical and emotional well-being in the short and long terms.

3. **Comfort the child.** Children who disclose sexual abuse require comfort, encouragement and support from service providers. This means that service providers are trained in how to handle the disclosure of sexual abuse appropriately. Service providers should believe children who disclose sexual abuse and never blame them in any way for the sexual abuse they have experienced. A fundamental responsibility of service providers is to make children feel safe and cared for as they receive services.

4. **Ensure appropriate confidentiality.** Information about a child's experience of abuse should be collected, used, shared and stored in a confidential manner. This means ensuring 1) the confidential collection of information during interviews; 2) that sharing information happens in line with local laws and policies and on a need-to-know basis, and only after obtaining permission from the child and/or caregiver; 3) and that case information is stored securely. In some places where service providers are required under local law to report child abuse to the local authorities, mandatory reporting procedures should be communicated to the children and their caregivers at the beginning of service delivery. In situations where a child's health or safety is at risk, limits to confidentiality exist in order to protect the child.

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1   Available at: <http://gbvresponders.org/response/caring-child-survivors/>.

5. **Involve the child in decision-making.** Children have the right to participate in decisions that have implications in their lives. The level of a child's participation in decision-making should be appropriate to the child's level of maturity and age. Listening to children's ideas and opinions should not interfere with caregivers' rights and responsibilities to express their views on matters affecting their children. While service providers may not always be able to follow the child's wishes (based on best interest considerations), they should always empower and support children and deal with them in a transparent manner with maximum respect. In cases where a child's wishes cannot be prioritized, the reasons should be explained to the child.

6. **Treat every child fairly and equally (principle of non-discrimination and inclusiveness).** All children should be offered the same high-quality care and treatment, regardless of their race, religion, gender, family situation or the status of their caregivers, cultural background, financial situation, or unique abilities or disabilities, thereby giving them opportunities to reach their maximum potential. No child should be treated unfairly for any reason.

7. **Strengthen children's resiliencies.** Each child has unique capacities and strengths and possesses the capacity to heal. It is the responsibility of service providers to identify and build upon the child and family's natural strengths as part of the recovery and healing process. Factors which promote children's resilience should be identified and built upon during service provision. Children who have caring relationships and opportunities for meaningful participation in family and community life, and who see themselves as strong will be more likely to recover and heal from abuse.

Obtaining Permission from a Child

How to obtain permission from children and caregivers

Explaining case management services, including the need to collect, store and possibly share their information, and obtaining permission to proceed does not need to be complicated. However, caseworkers are required to know how to obtain permission based on local laws, the child's age and maturity level, and the presence of non-offending caregivers.

As a general principle, permission to proceed with case management (and other case actions) is sought from the child as well as the parent or caregiver, unless it is deemed inappropriate to involve the child's caregiver. Permission to proceed with case management and other care and treatment actions (e.g., referrals) is sought by obtaining "informed consent" from caregivers or older children and/or "informed assent" from younger children. Informed consent and informed assent are similar, but not exactly the same.

- **"Informed consent"** is the voluntary agreement of an individual who has the legal capacity to give consent. To provide "informed consent" the individual must have the capacity and maturity to know about and understand the services being offered and be legally able to give their consent. Parents are typically responsible for giving consent for their child to receive services until the child reaches 18 years of age. In some settings, older adolescents are also legally able to provide consent in lieu of, or in addition to, their parents.

- **"Informed assent"** is the expressed willingness to participate in services. For younger children who are by definition too young to give informed consent, but old enough to understand and agree to participate in services, the child's "informed assent" is sought.

Guidelines for obtaining informed consent/assent from children and caregivers

The age at which parental consent is needed for a child depends on the laws of the country. This means that when the child is under the age of legal consent, caregiver consent is required. In the absence of any clear laws or adherence to laws, children under the age of 15 require caregiver consent as a general rule.

Infants and toddlers (ages 0–5)

Informed consent for children in this age range should be sought from the child's caregiver or another trusted adult in the child's life, not from the child. If no such person is present, the service provider (case worker, child protection worker, health worker, etc.) may need to provide consent for the child, in support of actions that support their health and well-being.

Very young children are not sufficiently capable of making decisions about care and treatment. For children in this age range, informed assent will not be sought. The service provider should still seek to explain to the child all that is happening, in very basic and appropriate ways.

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1   Available at: <http://gbvresponders.org/response/caring-child-survivors/>.

Younger children (ages 6–11)

Typically, children in this age range are neither legally able nor sufficiently mature enough to provide their informed consent for participating in services. However, they are able to provide their informed assent or "willingness" to participate. Children in this age range should be asked their permission to proceed with services and actions which affect them directly. This permission can be provided orally by the child, and documented as such on the informed consent form. For children in this age range, written parental/caregiver informed consent is required, along with the child's informed assent. If it is not possible to obtain informed consent from a parent or caregiver, then another trusted adult, identified by the child, who can be safely brought into care and treatment decisions should be approached to consent for the child.

Younger adolescents (ages 12–14)

Children in this age range have evolving capacities and more advanced cognitive develop-ment, and, therefore, may be mature enough to make decisions on and provide informed assent and/or consent for continuing with services. In standard practice, the caseworker should seek the child's written informed assent to participate in services, as well as the parent/caregiver's written informed consent. However, if it is deemed unsafe and/or not in the child's best interest to involve the caregiver, the caseworker should try to identify another trusted adult in the child's life to provide informed consent, along with the child's written assent. If this is not possible, a child's informed assent may carry due weight[2] if the caseworker assesses the child to be mature enough, and the caseworker can proceed with care and treatment under the guidance and support of his/her supervisor. In these situations, caseworkers should consult with their supervisors for guidance.

Older adolescents (ages 15–17)

Older adolescents, ages 15 years and above, are generally considered mature enough to make decisions. In addition, 15-year-olds are often legally allowed to make decisions about their own care and treatment, especially for social and reproductive healthcare services. This means that older adolescents can give their informed consent or assent in accordance with local laws. Ideally, supportive and non-offending caregivers are also included in care and treatment decision-making from the outset and provide their informed consent as well. However, decisions for involving caregivers should be made with the child directly in accor-dance with local laws and policies.

If the adolescent (and caregiver) agrees to proceed, the caseworker documents their informed consent using a client consent form or documenting on the case record that they have obtained verbal consent to proceed with case management services.

Special situations

If it is not in the best interest of the child to include a caregiver in the informed consent process, the caseworker needs to identify whether there is a trusted adult in the child's life who can provide consent. If there is no other trusted adult to provide consent, the case-worker needs to determine the child's capacity in decision-making based on their age and level of maturity.

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2   Due weight refers to the proper consideration given to the child's views and opinions based on factors such as his or her age and maturity.

If a child under 15 does not assent but caregivers do OR if both the child and caregiver do not consent OR the child above 15 does not consent, the caseworker needs to decide on a case-by-case basis and based on the child's age, level of maturity, cultural/traditional factors, the presence of caregivers (supportive), and the urgency of care needs, whether it is appropriate to go against the wishes of the child and/or caregiver to proceed with case management and assisting the child so that they can receive needed urgent care and treatment services.

In situations where children and/or caregivers are hesitant to proceed, caseworkers should ask additional questions to determine the cause of the hesitation to receive services. Perhaps, for example, the child and/or caregiver are afraid of losing their confidentiality because of a mandatory reporting law. In this situation, the caseworker can further discuss the client's right to participate in how to share information if warranted (e.g., in a mandatory reporting situation) and/or further discuss the risks of reporting. If serious risks are identified, then it may not be in the best interest to report, and the caseworker can further explain and discuss this with the child client and subsequently with his/her supervisor. Caseworkers should take the time to discuss the child's and caregiver's fears and concerns around proceeding with case management, and provide clear and accurate answers to help address these specific fears and concerns.

Primary and Secondary Data in Emergencies

Primary data is generally understood as data gathered directly from the information source and which has not undergone analysis before being included in the needs assessment. Primary data is collected directly from the affected population by the assessment team through field work.

Primary data is most often collected through face-to-face interviews or discussions with members of the affected community or those in direct contact with them, such as service providers; however, it can also be gathered through other methods, such as phone interviews, radio communication, email exchange and direct observation.

Secondary data is information which has typically been collected by researchers not involved in the current assessment and has undergone at least one layer of analysis prior to inclusion in the needs assessment.

- Secondary data can include published research, internet materials, media reports, and data which has been cleaned, analysed and collected for a purpose other than the needs assessment (such as academic research or agency- or sector-specific monitoring reports).

- During an initial emergency assessment, the majority of data used to build a shared picture of the disaster-affected area and populations comes from secondary sources. This is largely because time constraints during the first few days following a sudden-onset disaster prohibit a large scale field data collection exercise.

- As the emergency evolves, and humanitarian stakeholders and the assessment team have greater direct access to the affected population, the proportion of primary data will increase, and the consolidated analysis of both types of data is necessary.

- Clearly understanding the information gleaned from secondary sources frees the primary data collection from a joint or coordinated needs assessment to focus on key information gaps (issues that are presently unknown) and on ensuring that the voices, needs and priorities of an affected population are captured and shared.

- All field and desk information gathering activities for needs assessments will:

  - Collect evidence on the impact of the emergency across sectors.

  - Produce findings about the disaster which are not already known.

  - Triangulate information collected to confirm or dispute findings.

  - Investigate the effect of a change of circumstance (directly or indirectly due to the disaster) on a population.

  - Use a pre-defined set of research techniques to ensure consistency in data collection, analysis and presentation of findings.

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1   Available at: <www.acaps.org/library/assessment>.

Non-State Armed Actors

Definition

A Non-State Actor (NSA) is defined as any organised group with a basic structure of command operating outside state control that uses force to achieve its political or allegedly political objectives. Such actors include 'rebel groups' and governments of entities which are not (or not widely) recognised as states. This definition excludes paramilitaries that are under the 'effective control' of a state,but it does not exclude when an NSA is fighting another NSA. The criterion of a basic command structure is especially important for humanitarian practitioners, since in the absence of a chain of command the NSA is more a loose grouping of armed individuals than a defined actor.

Normally the focus of conflict scholars and humanitarian practitioners is on politically motivated groups, i.e., those who articulate a political agenda rather than private (including economic) goals, though without a requirement of elaborated political manifestos. The concept used by many practitioners is the term 'armed group' or 'non-state armed group,' while many academics also employ terms such as 'rebel groups' and 'insurgents.' However, there are also NSAs who exercise de facto control over a territory and have reached a level of organization similar to that of states and who are in active conflict or in situations of 'no peace, no war' with states.

Characteristics of NSAs

In spite of some similarities among them, NSAs represent a great deal of heterogeneity. Some may have clearly defined political objectives, while this may be less clear-cut in other cases. Some may control territory and have established administrative structures parallel to or instead of those of the state, while others have loose command structures and weak control over members. Some operate in rural areas conducting guerrilla type warfare, while others are mainly urban phenomena. Some concentrate on attacking military targets, while others attack civilians as a matter of strategy. NSAs may be composed of men, women and children. In some groups, female members comprise an important percentage of combatants and other members. Members may be recruited forcefully or join voluntarily. Certain NSAs have set up structures to provide elaborate services that look after the needs of their members. Three issues according to which NSAs can be understood and differentiated are: territory, identity/resources and relationship to the wider society.

1   Available at: <https://www.dcaf.ch/armed-non-state-actors-current-trends-future-challenges>.

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