

Central African Republic

SUBMISSION TO THE UNITED NATIONS HUMAN RIGHTS COMMITTEE

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ALL SURVIVORS PROJECT

All Survivors Project (ASP) provides research to improve the global response to every survivor of sexual violence in situations of conflict and displacement. We document cases of abuse against men and boys to supplement work on women and girls to support a global response that includes all victims of violence. We are an independent, international research project working with individuals and organisations to strengthen communities by upholding the dignity of each individual.

Summary

ASP makes this submission to the United Nations (UN) Human Rights Committee in advance of its consideration of the periodic report of the Central African Republic (CAR) at the 128th Session. This submission focuses on sexual violence against men and boys in the context of the armed conflict in CAR. It relates to Articles 7 and 9 of the International Covenant on Civil and Political Rights (the Covenant).

ASP conducted research on the subject of conflict related sexual violence (CRSV) against men and boys in CAR in 2017 and early 2018 and examined factors which contribute to male vulnerability. ASP's findings point to a discernible pattern of sexual violence against men and boys within the context of the conflict that warrants urgent attention. This submission updates findings contained in the ASP's research report published in February 2018.¹

1. Conflict-related sexual violence against men and boys in the Central African Republic

Sexual violence has been widely documented in CAR during the armed conflict.² Women and girls are disproportionately affected by conflict related sexual violence in CAR, but ASP's research identified distinct patterns and causes of sexual violence against men and boys committed primarily by non-state armed groups since 2013.

¹ See All Survivors Project and UCLA School of Law, *"I don't know who can help" Men and boys facing sexual violence in Central African Republic*, February 2018, <https://allurvivorsproject.org/wp-content/uploads/2018/03/ASP-Central-African-Republic.pdf>

² See, OHCHR, Reporting of the Mapping Project documenting serious violations of international human rights law and international humanitarian law committed within the territory of the Central African Republic between January 2003 and December 2015, 2017 (OHCHR Mapping Report, 2017), www.ohchr.org/EN/Countries/AfricaRegion/Pages/CARProjetMapping2003-2015.aspx; Human Rights Watch, *"They Said We Are Their Slaves": Sexual Violence by Armed Groups in the Central African Republic*, 2017, www.hrw.org/report/2017/10/05/they-said-we-are-their-slaves/sexual-violence-armed-groups-central-african; and Amnesty International, *CAR: Civilians facing atrocities in Basse-Kotto as UN protection proves ineffective*, 2017, www.amnesty.org/en/latest/news/2017/09/central-african-republic-civilians-facing-atrocities-in-basse-kotto-as-un-protection-proves-ineffective/

- In Basse-Kotto prefecture, which was the scene of fierce fighting between non-state armed groups throughout 2017, ASP recorded information on a possible 41 cases in which adult males were subjected to rape or other forms of sexual violence by members of non-state armed groups.
- ASP also documented 10 possible incidents of sexual violence against men and boys in or around the town of Kaga Bandoro in Nana-Grébizi prefecture in 2017 where high levels of armed violence took place between non-state groups fighting for control of the area.
- In Obo, the capital of Haut-Mbomou prefecture in the southeast of the country, an international provider of psychosocial support and other gender-based violence services reported having received 121 male survivors of sexual violence in its facilities in the town between January and October 2017. The cases consisted of 86 men and 35 boys, of whom 93 were allegedly abused by members of non-state armed groups, predominantly the Lord's Resistance Army (LRA).

The most common forms of male sexual violence reported in CAR included:

- **Rape, including gang rape.** Multiple forms of rape carried out against men or boys, including the penetration of the anus with penis and objects such as sticks or guns. Victims were subjected to anal rape over several days by different people.
- **Forced rape or other acts of sexual violence on fellow captives.** Male survivors were forced to engage in oral sex with and to touch the genitals of other males. This may be a deliberate tactic to increase the sense of shame of victims by making it appear that they have engaged in a homosexual act. This is particularly stigmatising in CAR where homophobic attitudes are widespread.
- **Genital violence**, such as blunt trauma to the testicles or penis and mutilation.
- **Other acts of sexual violence**, such as forced masturbation, forced nudity, witnessing of sexual violence on other male prisoners, and other forms of sexual humiliation.

In the cases documented by ASP, sexual violence was most common during armed attacks or when men and boys were held captive by armed groups. There were also verified incidents in which men were subjected to sexual violence because they refused to join armed groups, as well as indications that boys associated with armed groups may be vulnerable to sexual violence while in the ranks.

ASP documented the following cases ³ of sexual violence against men in 2017-18:

- “Jacques, a Christian businessman from Mobaye, was abducted by members of the Union pour la Paix en Centrafrique (UPC) on 17 May 2017 during armed attacks by the ex-Séléka group on the city. He was taken with nine other men to a nearby UPC camp. According to Jacques, four of the captives were killed almost immediately while he and the five surviving men were subjected to rape and other forms of sexual violence on a daily basis over the course of one week. Jacques told ASP that he was forced to strip at gunpoint and was raped by up to three people every day of his captivity and subjected to regular beatings including on his back and kidneys. He was also forced to give oral sex to his captors and to masturbate in front of them. On some occasions, he was given food or water in exchange for being raped. Jacques explained that threats of violence were used to force compliance: “When they want to take you to sexually abuse you and you refuse, that’s when they tell you that ‘if you don’t, I’ll kill you. I’m going to burn down your parents’ house. I’ll hurt your parents’.” Jacques

³ Names are changed to protect the security of the survivors.

and his fellow detainees were released after one week and, after a period in hiding, he made his way to Bangui to seek medical treatment.”

- “In an earlier incident on 25 February 2017, Theodore, a Christian farmer, fisherman and a father of four children from the Mingala area, was captured during an attack by UPC forces. Theodore was taken with 21 adult men to a nearby UPC military base where he was held for around one week in a house-turned-prison which was guarded at all times by six armed men. Theodore described to ASP how, during the course of the week, he was raped “more than four times”; each time by one person while another watched and stood guard. He was also beaten on his back with a rifle, made to drink his own urine and threatened with death. In his own words: “I was first abused and beaten and weakened. After five days of detention, I no longer had strength to resist so they took advantage of my powerlessness and had sex with me like a woman... I couldn’t defend myself in any way, because these armed men had rifles and had tied me up. Suddenly, they [would] strip me to rape me...When it was happening, when you are in that position, tied up and bent over with the person coming from behind, what control do you have?... I thought I was dead. Thanks to God, I survived.” Theodore was also forced to watch other detainees being raped by their captors. He explained that “there were many cases that happened in the same room. So I cannot count how many people were victims. Since there were also dead bodies, there was blood on the floor.” Like Jacques, Theodore made his way to Bangui after his release where he sought medical care for his injuries.”
- “ASP interviewed Emmanuel, a male survivor from Nana-Grébizi who was captured by members of the MPC in April 2017 during an attack on his village near to Kaga Bandoro. On the day of the attack, Emmanuel returned from work at a nearby river to find that his wife and children had been killed. After burying his family, he was captured and beaten before being taken to a temporary military base in the bush. He explained to ASP: “They tied me to a tree trunk and physically abused me, accusing me of being an anti-Balaka member.” The soldiers told him “we will kill you,” and said that they wanted to “exterminate Christians and make them suffer.” Emmanuel was held with six men and one boy who had been captured at the same time, all of whom were Christians between the ages of 17 and 28 years old. During approximately one month of captivity, he endured repeated rape, sexual assault and other forms of physical violence. “They stripped and tortured me until I had no more strength.” They beat him with their weapons and then raped him. Later his genitals were also beaten. “Some soldiers amused themselves with my penis. They amused themselves with my body.” According to Emmanuel, a leader of the group with the rank of colonel was among those who participated in rape and other violence.⁴ On some occasions, Emmanuel was raped by several people in succession and had a stick forced into his anus which left him in so much pain that he could not sleep. He was also forced to perform oral sex on armed group members and to have anal sex with the other prisoners. Emmanuel also described seeing his fellow captives being raped, and said he sometimes witnessed soldiers recording the acts on their cell phones, which can magnify the shame felt by victims. His attempts to resist were useless: once when he tried he was beaten and left unconscious. “They said they were doing this to dominate us and make us fear them” he said. In addition, he described seeing the death of a young boy who was accused of being anti-Balaka and who was forced to drink acid. Emmanuel managed to escape with another captive after being sent to collect firewood. In all, he was raped at least a dozen times.”

⁴ The survivor gave the name of the colonel, which ASP has on file.

On 31 May 2019 the CAR government signed, at the initiation of the Special Representative of the Secretary-General on Sexual Violence in Conflict, a Joint Communiqué with the United Nations on preventing and combating CRSV. The Joint Communiqué recognises the specific protection and service needs of “women, girls, men and boy survivors”. Elsewhere, the communiqué commits to fighting CRSV particularly against “women and children” but does not reference men.⁵ Some armed groups also made commitments to end sexual violence. The Mouvement Patriotique pour la Centrafrique (MPC) and the Front Populaire pour la Renaissance de la Centrafrique (FPRC) signed action plans with the UN in June 2018 and July 2019 respectively that include commitments and measures to prevent and end sexual violence.

Despite these commitments, reports by UN experts and international non-governmental organisations reaffirm that sexual violence, including against men and boys, continues to take place.⁶ Exact figures are elusive. In 2018, there were 1,969 cases of sexual violence of women, men, boys and girls reported to the Gender Based Violence Information Management System (GBV-IMS), and a further 4,256 were identified in Médecins Sans Frontières/ Doctors Without Borders (MSF) projects. However, the actual figure is likely to be much higher given limited access to services by survivors and the fact that underreporting of cases remains high.⁷

2. Survivors’ access to medical and other services

Sexual violence can have serious and damaging short and long-term physical, sexual, psychological and social consequences on survivors. Male survivors may suffer a range of physical injuries, both genital and non-genital. All rape survivors are at an increased risk of sexually transmitted infections (STIs), including HIV/AIDS, and may also experience incontinence, genital and rectal trauma, fistulas and fissures, impairment and damage to reproductive capacity or sexual dysfunction.⁸ Mental health impact on sexual violence survivors can be severe and can include feelings of guilt, shame, anger, post-traumatic stress disorder, anxiety and suicidal ideation. Some survivors may also experience confusion regarding their sexual orientation after experiencing sexual violence.

Sensitisation campaigns and community awareness programmes have been carried out in CAR with the aim of enhancing understanding of different types of violence, including sexual violence against men and boys, and to create awareness of available services and support.

However, the availability of services remains very limited. The public health sector in CAR has long been degraded by successive armed conflicts and all survivors of sexual violence face huge difficulties in accessing

5 See Joint Communiqué on prevention and response to conflict-related sexual violence between the Central African Republic and the UN, 31 May 2019, www.un.org/sexualviolenceinconflict/digital-library/jointcommuniques/

6 The UN Independent Expert on the human rights situation in CAR noted that “from 1 July 2018 to 30 June 2019, members of armed groups such as the anti-balaka, the Union pour la paix en Centrafrique, the Front populaire pour la renaissance de la Centrafrique, the Front populaire pour la renaissance de la Centrafrique/Mouvement patriotique pour la Centrafrique coalition and Retour, réclamation et réhabilitation were allegedly responsible for 226 incidents of sexual violence, mainly rape cases involving 279 victims (164 women, 109 girls, 4 boys and 2 men).” Report of the Independent Expert on the situation of human rights in the Central African Republic, Human rights situation in the Central African Republic, UN Doc. A/HRC/42/61 (2019), para 54.

7 MSF (2019), *Nowhere to go: Challenges faced by sexual violence survivors in accessing services in Bangui, Central African Republic*, November 2019, <https://arhp.msf.es/humanitarian-practice-people-and-violence/nowhere-go>

8 See WHO, Guidelines for medico-legal care for victims of sexual violence, 2003, https://www.who.int/violence_injury_prevention/publications/violence/med_leg_guidelines/en/

care and support. The Independent Expert noted that “medical, judicial and psychosocial services have very limited capacity to respond to cases.”⁹

During its research, ASP was repeatedly told that, even where medical facilities exist, expertise on sexual violence is low. Even the main public health facilities in Bangui lack specialised services and refers complex cases to international NGOs. Public mental health and psychological services are even more limited in CAR. With the severe limitation of government services, international humanitarian organisations, such as MSF, are providing medical and psychosocial care to survivors of sexual violence in CAR including male survivors.¹⁰

There are many high obstacles for survivors access to care services, including lack of minimum care package for sexual violence at primary health level; limited capacity of health staff to recognise and treat cases of sexual violence; extremely limited provision of mental health support; insecurity which can interrupt services or prevent people from travelling to places where services are available; and prohibitive costs.

ASP’s research and subsequent reports (including by MSF) found that men and boys face specific barriers obstacles to accessing care services. These include:

- the fact that men are more likely to be perceived as perpetrators rather than victims;
- the stigma associated with male sexual violence, including social attitudes towards homosexuality and the fear of survivors of being perceived as homosexual if they disclose or report to services;
- the fact that “many programmes, (including MSF’s), are based in maternity wards, which can create a barrier for children, adolescents and males seeking treatment, as they may not want to be seen in such an environment”;¹¹
- low levels of expertise on sexual violence against males among humanitarian service providers, with the vast majority of humanitarian organisations with which ASP met acknowledging that their staff had not received detailed training on how to recognise and respond to sexual violence against males;
- lack of information about the available services and how to access them confidentially.

3. Impunity

The criminal justice system has not yet effectively been restored throughout the country. Outside Bangui, the capacity and functioning of national judicial and prison structures remain limited. A total of 15 of the 27 first instance and appellate courts are beginning to operate, including 13 outside Bangui.¹²

Despite the establishment of a police unit dedicated to investigating sexual violence and the establishment of the Special Criminal Court, impunity persists. The 2019 report of the Independent Expert notes that cases

9 Report of the Independent Expert on the situation of human rights in the Central African Republic, Human rights situation in the Central African Republic, UN Doc. A/HRC/42/61 (2019), 9 August 2019, para 56.

10 A report published by MSF in November 2019 documents the numerous challenges faced by sexual violence survivors in accessing services in Bangui. See MSF, *Nowhere to go: Challenges faced by sexual violence survivors in accessing services in Bangui, Central African Republic*, November 2019, <https://arhp.msf.es/humanitarian-practice-people-and-violence/nowhere-to-go>

11 See MSF, *Nowhere to go*, November 2019

12 Final report of the Panel of Experts on the Central African Republic extended pursuant to Security Council resolution 2454 (2019), UN Doc. S/2019/930 (2019), para 82.

of sexual violence are often underreported and that victims are often reluctant to file a complaint for fear of reprisals and stigmatisation.¹³

Unité Mixte d'Intervention Rapide et de Répression des violences sexuelles faites aux femmes et aux enfants (UMIRR)

A joint police/gendarmerie unit, the Joint Unit for Rapid Intervention and Eradication of Sexual Violence against Women and Children (UMIRR), was established specifically to investigate and prosecute crimes of sexual violence and provide support to victims/survivors.¹⁴ In addition to law enforcement officials, the unit offers legal and psychosocial services and has developed referral systems to medical NGOs for victims/survivors.

According to the 2019 Report of the UN Secretary-General on CRSV, UMIRR had registered 33 victims of CRSV including 27 women, 4 girls and 2 men. While the low numbers of reported incidents involving males compared to females may reflect patterns of sexual violence in CAR, ASP was told that, despite its name, UMIRR can receive and follow up on cases of sexual violence against men and boys. However, a senior UMIRR official acknowledged that it is more focused on women, and this is evident from the cases that UMIRR has handled so far.¹⁵

In April 2018 the Director of UMIRR cited significant limitations for the effective functioning of the unit, including its location, lack of infrastructure and most notably of measures to safeguard the protection of survivors and witnesses.¹⁶ The UN Panel of Experts reported that of the 320 cases of sexual violence that were submitted by the Unit to the Bangui Criminal Court between June 2017 and June 2018, few had resulted in trials. In 2016 the re-qualification of sexual violence crimes from misdemeanours or minor offences to criminal offences by the Ministry of Justice recognised the necessity of stronger sanctions as part of efforts to deter such crimes. However, as noted by the Panel of Experts, “on numerous occasions there was no trial for sexual violence because the office of the public prosecutor reclassified the case as mere indecent behaviour (“attentat à la pudeur”).”¹⁷

Special Criminal Court (SCC)

The SCC is a hybrid body, with national and international judges and prosecutors, embedded within CAR’s criminal justice system.

13 Report of the Independent Expert on the situation of human rights in the Central African Republic, UN Doc. A/HRC/42/61 (2019), para 56.

14 Decree No. 15.007 of 8 January 2015 and subsequent orders, as noted in the Combined third periodic report submitted by the Central African Republic under article 40 of the Covenant, due in 2010, UN Doc. CCPR/C/CAF/3 (2018), p.16. UMIRR is supported by the UN Team of Experts on the Rule of Law and Sexual Violence in Conflict, the UN Multidimensional Integrated Stabilization Mission in the Central African Republic (MINUSCA) and the United Nations Development Programme (UNDP).

15 Interview with senior UMIRR official, Bangui, 6 October 2017.

16 Office of the Special Representative for Sexual Violence in Conflict, L’UMIRR, une unité pour faire face aux violences sexuelles en République Centrafricaine, 23 April 2018, <https://www.un.org/sexualviolenceinconflict/lumirr-une-unite-pour-faire-face-aux-violences-sexuelles-en-republique-centrafricaine/>

17 Report of the Security Council Sanctions Committee Panel of Experts, UN Doc. S/2018/1119 (2018), paras. 164-165.

“Rape, sexual aggression and sexual slavery” are among the international crimes explicitly prioritised in the prosecution strategy of the SCC with explicit reference to boys as well as girls.¹⁸

Although it remains to be seen to what extent sexual violence against males will feature in prosecutions, in an encouraging sign the Special Prosecutor has indicated that the SCC’s outreach strategy will seek to reach victims/survivors, including men and boys, who are reluctant to speak out.

As noted by Human Rights Watch, the SCC is facing significant challenges, including staffing and programs such as witness and victim protection and support and legal assistance for accused and victims.¹⁹

4. Recommendations

In light of the above considerations, ASP encourages the Human Rights Committee to include the following recommendations to the government of CAR:

- **Strengthen data gathering and safe, anonymous information sharing on sexual violence against men and boys as part of broader efforts to monitor and report on CRSV.** There should be a working assumption that men and boys may be at risk of sexual violence, and data gathering, and monitoring processes should be designed to identify male and female survivors. Data sharing and co-ordination among stakeholders should be strengthened while prioritising at all times the safety and wellbeing of survivors.
- **Ensure that awareness raising and sensitisation activities on sexual violence are gender inclusive.** Concerted effort is needed to build broader awareness of sexual violence against men and boys in CAR and to counter the stigma associated with it, including by ensuring that messages on sexual violence are gender inclusive, and awareness and outreach activities are designed to reach men and boy survivors and others who are in a position to support them. This effort should include engagement with and training of community-based protection mechanisms and community leaders in community sensitisation initiatives. Care should be taken that these activities do not detract or otherwise negatively impact from the specific and grave needs of female survivors of sexual violence.
- **Strengthen provision of comprehensive care for sexual violence survivors, in particular medical, mental health and psychosocial services so that they are available to all survivors of sexual violence.** Accelerated efforts are needed to strengthen availability, accessibility and quality of services for all survivors and to ensure that gender-competent services for men and boys are integrated into programme delivery without jeopardising access, confidentiality, safety and security for female survivors.
 - Minimum responses should include immediate access to safe, free, confidential, survivor-centred, and high quality medical care for men and boys in public hospitals, health centres or in mobile clinics and in facilities run or supported by non- governmental health providers;

¹⁸ The SCC was established in June 2015 to investigate and prosecute grave human rights violations and serious violations of IHL in CAR since 2003. The SCC’s strategy is available in French at: https://cps-rca.cf/fichiers_joints/Strategie_de_poursuite_CPS.pdf

¹⁹ Human Rights Watch, *Central African Republic: New Court Should Step Up Effort*, 24 July 2019, <https://www.hrw.org/news/2019/07/24/central-african-republic-new-court-should-step-effort>

- Minimum responses should also include access to psychosocial support for male and female sexual violence survivors, witnesses and, if needed, for their family members. These services should be widely advertised and made available to survivors;
- Improve coordination among key stakeholders, especially child protection, gender-based violence and health actors; and adoption and implementation of safe and confidential referral systems for male survivors to providers of medical, psychosocial and legal services;
- Develop specialised services for child survivors of sexual violence including boys. Special attention should be paid to children associated with armed forces and armed groups, unaccompanied children and other groups who may be at particular risk of sexual violence;
- Conduct safety assessments for survivors, including in family or social contexts, and explore options for the prompt removal if necessary to safe, secure and confidential accommodation for men and boy survivors pending longer-term solutions;
- Consult with and prioritise the perspectives, needs and interests of male and female survivors, and centre these in developing and implementing interventions towards response and prevention.
- **End impunity for crimes of sexual violence and fulfil victims' right to remedy by holding perpetrators to account and providing comprehensive reparations to survivors.**
 - Ensure that UMIRR is accessible to male survivors, that it proactively investigates reports of sexual violence against men and boys, and that it refers them to services that can provide appropriate support. Consideration should be given to changing its name (currently the Joint Unit for Rapid Intervention and Eradication of Sexual Violence against Women and Children) to include men so that a clear message is sent that UMIRR is gender inclusive;
 - Prioritise sexual violence, including against men and boys, in investigation and prosecution strategies of the SCC. Dedicated capacity on sexual violence should be created within the Office of the Prosecutor including through the appointment of senior gender advisors with expertise on sexual violence against both females and males;
 - Strengthen the capacity of the regular judicial system to investigate and prosecute CRSV;
 - Strengthen victims and witness protection, with particular attention to survivors of sexual violence who face stigma and reprisal;
 - Ensure that all survivors of sexual violence have access to free legal services and other support to enable them to pursue justice and participate in criminal justice processes.