Sexual violence in conflict

In the forthcoming open debate on sexual violence in conflict, Member States should defend the centrality of gender equality and the human rights of all women and girls in all international peace and security processes and unequivocally state, in all outcome documents, that the full scope of women and girls’ human rights must be protected in crises. Gender-based violence (GBV) undermines the realization of women and girls’ rights and their ability to equally and meaningfully participate in peace, political and security processes and public life. Sustainable and inclusive peace, in which GBV is prevented, requires a two-track approach that addresses immediate protection needs while also investing in long-term prevention, including addressing systemic discrimination and inequality. We call on all Member States to:

- Address the root causes of violence, such as militarism and the proliferation of weapons, inequality and discrimination, including by increasing attention to achieving Sustainable Development Goals 5 and 16, and centering long-term, bottom-up solutions to preventing violence and sustaining peace. There must be investment in early warning systems that are gender-responsive, disability-accessible, inclusive and informed by indicators that monitor violation of human rights, including GBV, as a sign of impending conflict.
- Address, respond to and prevent GBV, including domestic violence, which has been increasing due to COVID-19 containment measures, by prioritizing survivor-centered approaches that are rights-based, victim-informed, disability-accessible, non-discriminatory, and designed, implemented and monitored in partnership with diverse survivors and victims, in line with existing commitments, including the Call to Action Road Map 2016 - 2020. Survivor-centered approaches must be rights-based and include the provision of comprehensive and non-discriminatory services to all survivors and victims, including sexual and reproductive health services.
- Ensure women’s full, equal and meaningful participation in public life, including political, humanitarian, peace and security processes, is not undermined and threatened by targeted violence, including GBV. Create a safe and enabling environment that ensures women leaders, women human rights defenders and women’s civil society organizations can operate without restriction or fear of retaliation.
- Invest in holistic, comprehensive and multi-level accountability for GBV, which balances criminal and legal accountability with restorative justice, such as reparations, grounded in international human rights and humanitarian law (IHL). Efforts to address GBV must take into account the continuum of violence experienced by women throughout all life stages, before, during and after conflict. Importantly, in addition to meeting immediate protection needs, long-term reparations processes, parallel and complementary to formal justice processes, must incorporate compensation, restitution, rehabilitation, satisfaction and guarantees of non-repetition, and must be designed and implemented in consultation with survivors and their communities.

Democratic Republic of the Congo (DRC)

The population of the DRC is facing multiple public health challenges in addition to COVID-19, including ongoing violence in eastern DRC and widespread displacement (OHCHR, UNHCR). There is an urgent need to address the lack of timely and adequate multi-sectoral assistance for survivors of GBV, including medical, psychosocial, legal and socio-economic support. The Council should request updates from senior UN leadership on the extent to which there have been consultations with women’s civil society organizations in efforts to enact legal reform in the context of a comprehensive reparations law and the addition of domestic violence and marital rape to the penal code. Further, the Council should request updates on the UN’s support to women’s groups in efforts to address GBV and domestic violence, which is increasing due to COVID-19 containment measures (CEDAW/C/COD/CO/8).

Libya

Despite calls for a ceasefire in response to the COVID-19 pandemic, violence and attacks against civilians continues to increase, displacing thousands and increasing the risk of COVID-19 spreading (ICRC, Amnesty, ACLED, IOM). In line with Resolution 2532 (2020), in its discussions on the situation, the Council must reiterate its demand for an immediate
and unconditional ceasefire and condemn actions inconsistent with the arms embargo (S/RES/2510 (2020), S/2020/63), in order to ensure all civilians and civilian objects are protected in accordance with IHL, and hold accountable all parties that utilize violence and carry out human rights abuses, including forced disappearances, and targeting of detainees in official and unofficial places of detention (HRW). Further, Council members should call for women human rights defenders, peacebuilders and political leaders to be able to carry out their work without restriction or fear of retaliation, and inquire about the extent to which the UN’s response to COVID-19 is gender-responsive (Cordaid).

Syria

As 11 million people are still in dire need of humanitarian assistance, particularly in the north of the country due to Syria’s 10-year conflict, and testing equipment must be adequately available to prevent (or minimize the magnitude of) a potential Covid-19 outbreak in the country (HRW, ERC/USG), the Council is urged to renew the mandate for the authorization of cross-border humanitarian aid into Syria through two border crossings, Bab al-Salam and Bab al-Hawa in the north-west (S/RES/2504 (2020), OP 3) for an additional 12 months, and to reauthorize the reopening of the Al-Yarubiyah crossing in the north-east (S/RES/2165 (2014), OP 2, OP 3). The Council should also call on its members and parties in Syria to uphold the ceasefire in the north-west and call for a complete and nationwide ceasefire, in line with Resolution 2532 (2020), to allow the country to address its ongoing health and humanitarian crises (ERC/USG). Further, in light of the fact that women and children comprise 80% of all displaced persons, with a particular emphasis on women with disabilities (who are 28% of all displaced women), the Secretary-General should include gender-sensitive conflict analysis regarding the situation of displaced women (CEDAW/C/Syr/CO/2, OCHA, UNFPA, HNAP). The Council must call for rights-based, survivor-centered humanitarian action that is gender-responsive, disability-inclusive and provides immediate and non-discriminatory aid and quality health care, including sexual and reproductive health services and GBV prevention and response services. The Office of the Special Envoy (OSE) should prioritize meaningful participation, dialogue and inclusion of women activists, peacebuilders and human rights defenders in its work, and further ensure that gender equality, international human rights law and IHL is a priority in the outcomes of any processes (CEDAW/C/Syr/CO/2). Further, the Council should reinforce and support the OSE’s call for the release of all detainees, including women, in light of the COVID-19 pandemic. Finally, the outcomes of the February 2020 meeting of the Security Council Informal Expert Group on WPS should be reflected throughout all future meetings on Syria.

Yemen

The Security Council’s discussions on the situation in Yemen have historically failed to reflect important gender dimensions of the situation, despite multiple meetings of the Security Council Informal Expert Group on WPS (S/2017/627, S/2017/1040, S/2019/253) and briefings by civil society in 2017, 2018 and 2019. The emergence of COVID-19 in the region has exacerbated the already dire humanitarian situation and fragile health infrastructure in Yemen. Fatality rates are among the highest in the region, and public health officials warn that extreme vulnerability combined with low general immunity puts Yemen at exceptional risk (OCHA). Ongoing violence in Yemen has undermined the ability of humanitarian actors to provide assistance and to respond to outbreaks of COVID-19 and other preventable diseases, resulting in increased rates of violence, including GBV. In the context of the renewal of the mandate of the UN Mission to support the Hudaydah Agreement, the Council should emphasize the urgency of upholding and supporting a sustainable and nationwide ceasefire in line with Resolution 2532 (2020), which would support viable conditions for the delivery of humanitarian aid and lead to a resumption of peace negotiations. Renewed negotiations for a political settlement, in keeping with the principles of WPS, necessitate women’s full, equal and meaningful participation, and active engagement with women and women’s organizations on the ground. The Council must continue to pressure all parties to implement the Stockholm Agreement and comply with their obligation under IHL to allow and facilitate impartial, rapid and unimpeded delivery of humanitarian assistance. Such assistance must be gender-responsive, take into account the needs of frontline health workers, and be developed in partnership with local civil society. It should consist of a full range of medical services, including psychosocial and sexual and reproductive health services, as well as access to legal assistance, education and employment, and other health and sanitation services before, during and after armed conflict (S/RES/2122 (2013), CEDAW/C/Yem/Q/7-8). The Council must continue to emphasize the necessity of women’s full, equal, and meaningful participation in formal peace and political processes, as well as in parallel or complementary processes taking place at the local level, and must ensure the 30% quota of women in all processes as a matter of urgency (WILPF).