

UNHCR Uganda

SGBV Fact Sheet | Southwest Uganda | 2014

Background

Global statistics suggest that up to six out of every ten women experience physical and/or sexual violence in their lifetime. During war or other humanitarian crises - such as that faced by refugees currently fleeing the Democratic Republic of the Congo (DRC) - the risks to women, girls and men are heightened. In south west Uganda 76% of all refugees are from eastern DRC and 51% of them are women.

The recurrent conflict in DRC North Kivu province has led to an alarming rise in rapes and violence against women and girls. In 2013 UNHCR in the DRC registered 5,855 cases of sexual violence including 4,456 cases of rape.

Official UN figures also show that recorded cases of sexual violence in North Kivu soared from 4,689 cases in 2011 to 7,075 in 2012. UNFPA reported that over 65% of victims during the past 15 years were children. As a result eastern DRC has been referred to as the “most dangerous place on earth to be a woman”.

Incidents of GBV are mainly discussed and solved through customary mechanisms and issues generally remain unspoken due to taboo and fear of stigmatization. As a consequence, GBV cases are under-reported.

Types of SGBV

Types of gender-based violence include sexual abuse and exploitation, rape, domestic violence, early and forced marriage and physical assault.

The main types of SGBV reported in south west Uganda are rape, domestic violence and early marriage. **Of rape cases reported over 70% happened back in their home country.**

The main victims of SGBV are young girls of school going age, women and some men (23.6% of men in the Eastern Region of eastern DRC country have been exposed to sexual violence, with 4-10% of all rape victims being men)¹.

The main perpetrators are gangs of youths and young men – particularly those belonging to armed elements. Out of the 705 cases reported to UNHCR in eastern DRC in 2013, 62% (434 cases) were perpetrated by armed elements.



A woman tells of a Lord's Resistance Army attacks on her village in north-east Congo. UNHCR / M. Hofer / March 2012

Causes of SGBV within Uganda

The main causes of incidents of SGBV amongst refugees in south west Uganda are: conflict back in their home countries and the socio-economic conditions within Uganda such as high levels of domestic violence in the refugee communities. Causes expressed by refugees in Uganda come from poor living conditions, traditional

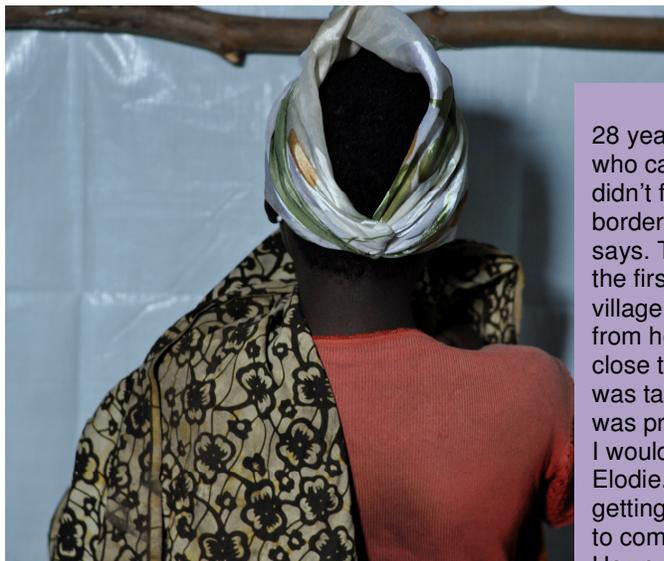
¹ According to research conducted by *The Journal of the American Medical Association* in 2010

gender discrimination and marital infidelity. The lack of livelihood opportunities which are believed to frustrate men - often leading to alcohol abuse and violence – are also a major cause of SGBV incidents.

Having to travel long distances to collect water and firewood for cooking is also one key cause of SGBV incidents within the refugee settlements in Uganda as women often have to walk long distances to find firewood due to deforestation in and around the settlements.

Many refugees also lack any means of earning any income- especially female headed household (which make up around 51% of total registered households) - and have to send their children to go work for local Ugandans which then puts them at risk. Others exchange sex for money or services in order to make a living.

Case Study



28 year old Elodie* was raped by 2 men in military uniform who came with guns to her home in eastern DRC. “At first I didn’t feel any pain from the attack, but after I walked to the border with Uganda I realised I was in quite a lot of pain” she says. This was the second time in her life she was raped – the first being back in 2007 when rebels also came to her village. During this time she was also permanently separated from her husband. When UNHCR staff at the transit centre, close to the DRC border, discovered she was bleeding she was taken to the health centre where she found out that she was pregnant with her rapist’s child. “My biggest fear was that I would have HIV if the attackers were HIV positive,” recounts Elodie. Luckily tests came back negative. “I thought about getting rid of it [the baby] knowing this would be the fifth child to come into the world with no father to care for them.” However, through counselling sessions provided by UNHCR and the Agency for Cooperation and Research in Development (ACORD) at the transit centre, she made the decision to keep the baby.

**Name changed for protection reasons*

Stats

In 2013 a total of **325 GBV cases** were reported in Nyakabande transit centre close to the DRC border of which **302 (92%) happened within the DRC and 214 (66%) were rape cases.**

A total of **716 GBV cases** (of which 250 were cases of rape) were reported across the 4 settlements in south west Uganda in 2013:

Locations	Total reported SGBV cases 2013	% rape cases	% children victims of SGBV	% male victims of SGBV
Nakivale	125	54 %	25 %	13 %
Rwamwanja	325	40 %	16 %	21 %
Oruchinga	88	22 %	13 %	17 %
Kyaka II	178	20 %	20 %	7 %
TOTAL	716	n/a	n/a	n/a

SGBV Partners

Implementing partners: American Refugee Committee (ARC), Danish Refugee Council (DRC), Lutheran World Federation (LWF), Humanitarian Initiative Just Relief Aid (HIJRA), Windle Trust Uganda (WTU).

Operational partners: United Nations Population Fund (UNFPA) through Agency for Cooperation and Research in Development (ACORD), African Humanitarian Action (AHA) and Medical Teams International (MTI).

Refugees and Internally displaced people (IDPs) are among the most vulnerable people on earth.
Please get involved. Visit www.unhcr.org

UNHCR response

1. Prevention:

Addressing the root causes of SGBV such as long distance to collect firewood through a multi-sectoral approach including livelihoods opportunities, empowering girls and women and improving provision of services such as access to water and education.

2. Response:

As soon as a case is reported medical, psychosocial and legal services are provided concurrently. Community based solutions are used to strengthen, identify, report, assist and protect SGBV survivors.

UNHCR supports both GBV prevention and response by providing:

- Legal assistance
- Psychosocial counseling
- Health Care
- Community based solutions
- Empowerment of girls and women
- Environmental preservation

Community based solutions

Sensitization campaigns are conducted jointly by partners and SGBV committees. A community based approach is used to involve the communities and tackles issues including traditional harmful practices, gender discrimination, domestic violence, meaningful participation.

Survivors of rape also often face discrimination from their communities - they are seen as impure and can be thrown out of their homes by family, rejected by husbands and potential husbands and isolated by their communities and UNHCR and partners work to combat these stigmas and provide support to survivors through community mechanisms.

Psychosocial counseling

Survivors of SGBV experience post-traumatic stress, depression, fear, or anxiety. UNHCR through its individual case management system offers psycho-social counseling sessions, individual assistance and follow-up. In 2013 960 people received psycho-social counseling and assistance across the 4 settlements in south west Uganda.

Health care

The health consequences of GBV can be particularly serious. Many survivors suffer sexually transmitted infections, reproductive injuries, fistula, pregnancy and a wide range of other physical injuries. UNHCR through its healthcare partners AHA and MTI provides **Post-Exposure Prophylaxis (PEP) kits** to help in the exposure to the HIV virus (which is administered in the first 72 hours after exposure and taken as a course for 28 days), emergency contraception and STI prophylaxis.

Environmental preservation



A Congolese refugee woman shows off her energy saving stove. Deforestation for firewood and building is a big problem in Nakivale. ©UNHCR/L.Beck

Did you know?

According to a 2011 study by the American Journal of Public Health 1,152 women are raped every day in the Democratic Republic of Congo – which is equal to 48 per hour.



The Ugandan Legal system: SGBV is recognized as a human rights violation and the laws of Uganda provide legal safeguards for preventing and responding to SGBV. Compensation under the 2007 Penal Code amendments is also offered for some SGBV survivors. However, certain crimes such as marital rape and the rape of men are still not captured in Ugandan domestic law.

UNHCR, through its partners, provide **legal counseling and advice** to survivors of SGBV. They are involved in interviewing witnesses and assisting in investigations with police. If a suspect is apprehended the survivor is assisted throughout the court proceedings; taking their witnesses to court, preparing witnesses for court, outsourcing legal services for them from legal aid service providers and follow-up of the case until it is concluded. In certain cases where the SGBV survivor's safety is felt to be at risk refugees are also housed in special protection houses within the settlements where physical security is provided.

Under Ugandan law the police are the first point of contact in the criminal justice system. As a result **training is also carried out with police officers** on what constitutes SGBV crimes, how to prevent sexual violence and handle rape cases.

Achievements

- Set up in 2013 of a mobile courts pilot project in Nakivale settlement to increase SGBV survivor's access to justice for crimes.
- By the end of 2013 8,892 energy saving stoves had been set up in settlements across southwest Uganda. In 2013 5,443 rocket lorena energy saving stoves and 58 fire shield stoves were set up.
- Increase in the number of SGBV reported crimes, especially of rape back in the country of origin, in Nakivale, Kyaka II and Oruchinga settlements from 302 in 2012 to 716 in 2013. In Rwamwanja, in particular, reported cases of SGBV increased from 142 in 2012 to 325 in 2013.

Mobile Courts

In May 2013 a mobile court pilot scheme was set up in Nakivale refugee settlement to increase refugees' access to justice within the settlement and encourage refugees to report crimes such as SGBV as well as demystifying the Ugandan court process and building confidence in the justice system. The Mobile Court pilot project is run in collaboration with the Government of Uganda and the process is entirely free of charge to the refugees, with pro-bono lawyers provided by the government. Since May, two separate court sessions - lasting between 5-15 days - have run in Nakivale and a total of 45 cases have been heard which is already more than was heard in the whole of 2012.



Defendants are briefed by their pro-bono lawyer at the mobile court in Nakivale. ©UNHCR/L.Beck

Challenges

- Distances to services such as health centres, schools, water points and to collect firewood are still great.
- Livelihoods opportunities remain limited especially those for women and girls.
- Access to legal justice for refugees remains a problem for all refugees in settlements in terms of long distances to travel, an over stretched national judiciary and cultural/familial pressure discouraging refugees from reporting SGBV crimes.
- The fact that the vast majority of rapes are perpetrated in the refugee country of origin means that first response medical assistance is often too late by the time the incident is reported and legal recourse and evidence gathering is difficult.
- SGBV incidents are under-reported in all settlements and there is a lack of staff capacity to address SGBV.