

# SOUTH SUDAN: HEALING FROM PERVASIVE SEXUAL VIOLENCE

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Nearly two years since the warring parties signed the Revitalized Agreement on the Resolution of Conflict in South Sudan (R-ARCSS) in September 2018, South Sudanese women, children, and men continue to suffer from pervasive sexual and gender-based violence (SGBV). Stigmatization of SGBV survivors, weak rule of law, and impeded access to post-incident services discourage survivors from seeking life-saving assistance and deprive them of a chance to recover from traumatic experiences.

## Breaking the silence

On Monday, May 25, 2020, NP staff received a call from a health partner to inform NP that three women had been sexually assaulted, beaten, and robbed in their homes in Unity State by a group of armed men and needed protective accompaniment to a safe place. Concerned that there could be another attack the following day, NP immediately went to the location to provide protective presence and assess the situation.

*“When NP arrived in the place of the attack, it became apparent to our Protection Officers that there were more than three survivors who had not sought medical support in fear of being stigmatized by the community,”* said Thiago Wolfer, the Interim Head of Mission of Nonviolent Peaceforce (NP) in South Sudan. Wolfer added, *“NP encourages survivors to seek critical post-incident service ensuring that survivors know his/her options and can make informed decisions. Whatever the survivor chooses to do, NP is available to support, treating each case with confidentiality and respect.”*

After NP raised awareness to the community on post-incident services available in the area and assisted the first three survivors, other survivors felt comfortable coming forward and seeking help. From May 25 to June 17, 2020, NP helped 16 women and one minor from a single village access critical post-incident support. On average, the team supported four survivors at a time by providing protective accompaniment to safety, referring them to relevant post-incident services and transporting them to and from follow-up services.

Spikes in SGBV can be attributed to a multitude of reasons – from increased intra- and intercommunal violence to the presence of armed actors in close proximity to civilian places, to weak rule of law. Though localized trends do not necessarily reflect the current scale or scope of SGBV across the country, large scale SGBV incidents unfortunately are common in South Sudan. Earlier this year, NP observed an increase of SGBV in a location in Western Equatoria State, where 26 cases of sexual assault

were reported in a single month. From January to June 2020, NP referred at least 94 survivors across South Sudan to police, legal aid, and clinical support services. And they reached thousands of people in hot-spot and hard-to-reach areas with awareness activities about SGBV prevention and response.

As survivors continue being silenced by stigma and fear, the real scale of SGBV in South Sudan is impossible to assess and invisible wounds are hard to heal.

### **Improving access to life-saving services and justice**

The lack of awareness and underlying stigma surrounding SGBV has compounded a breakdown of formal and informal protection mechanisms, posing significant challenges for survivors to report SGBV and access post-incident services and justice in a safe and dignified manner. Today, in light of the COVID-19 pandemic, SGBV survivors face even more hindrances such as increased transportation costs and movement restrictions when accessing support.

In areas where NP established and strengthened referrals, it has noted increased reporting of SGBV cases and improved access to services. However, more needs to be done to prevent SGBV and protect survivors while they access treatment and justice. Actions needed include providing a stable security environment, establishing temporary safe spaces for SGBV survivors in hot-spot areas, regularly updating and strengthening referral pathways, training various local actors in SGBV case management and preventive measures, ensuring easily accessible and quality medical treatment, and creating an enabling environment for unimpeded and equal access to justice.

### **Preventing SGBV through behavioral change**

SGBV is pervasive throughout South Sudan with women, children, the elderly, and people with disabilities the most heavily impacted by this violence. In response, NP has been engaging with all members of society, tailoring transformative activities to different age, demographic and power groups that facilitate positive changes to behavior, social norms, coping mechanisms, and community-based protection and response mechanisms.

In Unity State, where the level of SGBV is consistently high, NP has devised creative solutions to break the cycle of violence and engender real cultural and behavioral change at the grassroots level. NP's Beyond Bentiu Response (BBR) team has been meeting with pre-teen and teenaged boys and girls every week, training them on non-violence, protection, gender, and equality. According to NP's BBR Team Leader, Darren Clark, "When we thought about ways of eradicating root causes of SGBV in South Sudan, we noticed that the main focus of all work that has been done in this field was on women and girls. Little engagement on the subject was done with men and boys." Clark added, "We have already seen an impact of engaging boys on topics such as gender equality and discrimination as many parents remarked to NP that their sons started to help with household duties and became more polite. The Girls' Club, on the other hand, aims to empower girls to self-advocate and claim their rights."

Further, engagement with armed actors, law enforcement officers, women, and youth has resulted in significant achievements in prevention and response to SGBV. For example, in Western Equatorial State, NP has observed a decrease in SGBV perpetrated by armed actors as well as increased prosecution of perpetrators. Additionally, the development, mentoring, coaching and support to Women and Youth Protection Teams (W/YPT), has enabled community members to confront SGBV nonviolently, de-escalate violent situations, protect the most vulnerable, assist survivors in accessing lifesaving treatment, and advocate for the next generation of girls. As women take on leadership roles in peace and security through these protection teams, they become safer as individuals and extend that security to other women and their communities.

As we finish writing this, another message from the team appears on the computer screen saying that they have just supported another survivor. This is a painful reminder that the elimination of SGBV in South Sudan remains a work in progress that should not stop until the underlying causes are eradicated.

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