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RIGHTS
WATCH

“They Said We Are Their Slaves”

Sexual Violence by Armed Groups in the Central African Republic

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Sexual Violence by Armed Groups in the Central African
Republic

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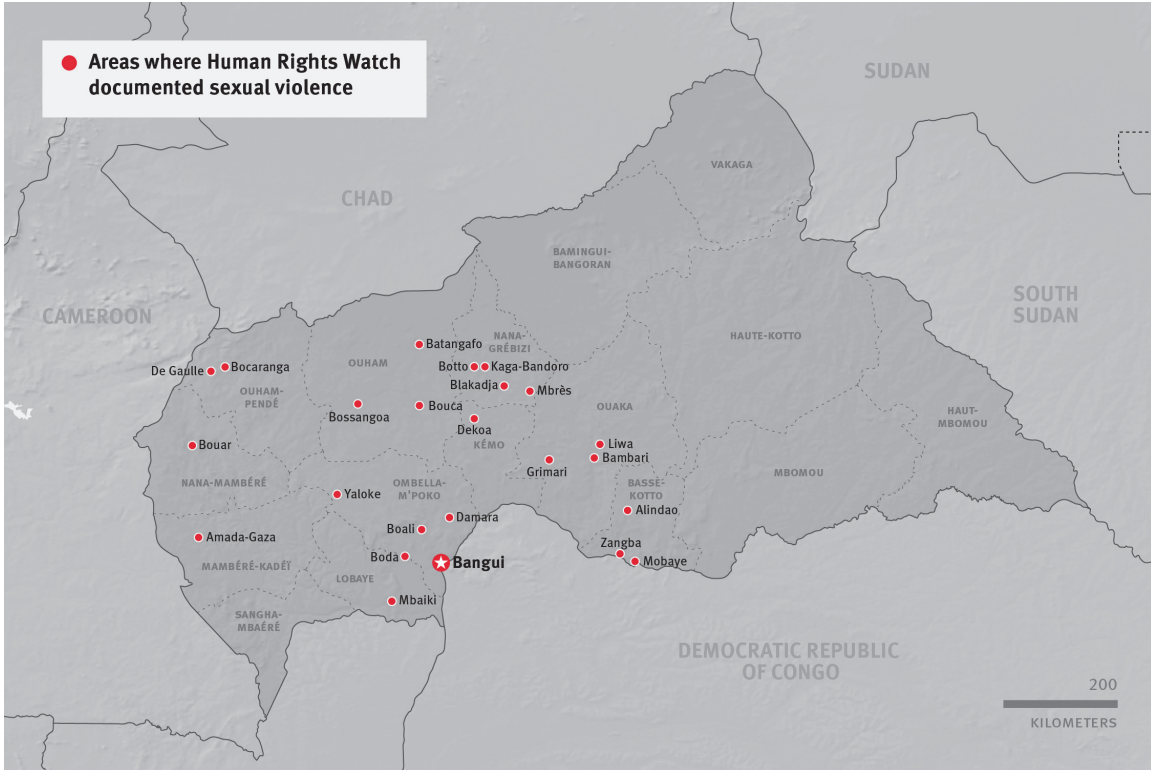
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Sexual Violence by Armed Groups in the Central African Republic

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Map



SUMMARY AND KEY RECOMMENDATIONS

SUMMARY

Since late 2012, the Central African Republic has been wracked by bloody armed conflict in which civilians have paid the price. Armed groups have brazenly violated the laws of war with impunity, attacking civilians and civilian infrastructure, and leaving trails of death, displacement, and destitution in what was already one of the world's poorest countries.

During nearly five years of conflict, armed groups have also brutalized women and girls. The predominantly Muslim Seleka and the largely Christian and animist militia known as "anti-balaka," two main parties to the conflict, have both committed sexual slavery and rape across the country. Human Rights Watch documented fighters using sexual violence to punish women and girls, frequently along sectarian lines, as recently as May 2017.

People displaced by the fighting wait on the road to Lere for humanitarian aid to arrive.

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Armed groups have not simply committed sexual violence as a byproduct of fighting, but, in many cases, used it as a tactic of war. Commanders have consistently tolerated sexual violence by their forces and, in some cases, they appear to have ordered it or to have committed it themselves.

Though it continues to haunt women and girls physically, emotionally, socially, and economically, sexual violence—like other conflict-related crimes—has thus far gone unpunished. To date, no member of an armed group has been arrested or tried for committing sexual slavery or rape.



We spent a week there. [The anti-balaka] raped us every day.... We had become their “wives.” It was us who prepared the food.... At any moment, they would want to sleep with you and, if you resisted, they threatened to kill you....

I said I am the daughter of a Christian. [Their leader] said, “No, you are the daughter of a Muslim.” I said no. He said, “Those are your brothers who have killed our brothers. It’s you who are going to pay.” ... I was 12 years old at the time.

[After we escaped,] when I arrived [in Boda] there was no hospital, nothing. Later, when [an aid organization] got here they did a urine test, blood test. At the hospital, I didn’t explain what had happened. I couldn’t explain. I said I was taken by anti-balaka, but not that I was raped.

—ZEINABA, 15, BODA, APRIL 2016

Nalia (all survivors’ names have been changed), 38, said that more than 20 anti-balaka fighters came to her house in Bangui in February 2014 while she was having breakfast with her husband and five children. “We came because of the Muslims,” she heard the armed men say. The anti-balaka then tried to take Nalia and her 14-year-old son away, saying, “Since you are a little Muslim, we are going to bring you with your mother.” When her son resisted, she recalled, the anti-balaka shot him in the back. The fighters took Nalia to their nearby base, where four of them raped her. “They took everything from me,” she said. “My 14-year-old boy, they killed. Everything was pillaged from my home. I didn’t have anything left.” After the rape, Nalia began falling sick regularly. When she eventually sought medical care, in May 2015, she tested positive for HIV. She has now started a community association to help women survivors of sexual violence get medical care and socio-economic support.





I was with my husband in the house. The Seleka came.... They pushed my husband to the ground and two pointed their guns at him. Then four of them rushed at me and pushed me to the ground. Each of the four then raped me. My husband was in the room, but they would not let him move.

I have thought about what these men did and justice for myself. I want these men brought to justice and put in prison.

--MARIE, 30, BAMBARI, JANUARY 2016

Following years of disenfranchisement and neglect, rebel groups consisting primarily of Muslim fighters formed in the northeast under the banner of the Seleka in late 2012 and launched attacks that killed scores of civilians, burned and pillaged homes, and displaced thousands. In response, Christian and animist militia known as anti-balaka emerged in mid-2013 and began to organize counterattacks. Associating all Muslims with the Seleka, the anti-balaka carried out large-scale assaults on Muslim civilians in Bangui and western parts of the country. As the Seleka and the anti-balaka engaged in reprisal attacks, at times both sides targeted civilians along sectarian lines. By mid-2014, after having been ousted from Bangui by African Union and French forces, the Seleka split into several factions. These Seleka groups have at times allied and fought each other, sometimes making alliances with anti-balaka groups.

Based primarily on interviews with 296 survivors, this report documents pervasive sexual violence against women




and girls perpetrated by Seleka and anti-balaka fighters from early 2013 to mid-2017. It presents detailed cases of rape, sexual slavery, physical assault, and kidnapping of women and girls between the ages of 10 and 75, primarily in the capital, Bangui, and in and around the towns of Alindao, Bambari, Boda, Kaga-Bandoro, and Mbrès.

The report presents the most comprehensive documentation to date of widespread sexual violence against women and girls by fighters affiliated with the anti-balaka and the various Seleka factions. It details how these armed groups have subjected women and girls to violent and sometimes repeated rape resulting in long-term consequences, including illness and injury, unwanted pregnancy, stigma and abandonment, and loss of livelihoods or access to education. The report also exposes the immense barriers that impede survivors from accessing even basic medical and psychosocial care following rape.

Valérie, 38, said she was at her house near Yaloké, in the Ombella-M'poko province, with her husband and four children in February 2015 when six Seleka fighters burst in and demanded money or weapons. Her husband said the family had neither, and the fighters threatened to kill him or rape Valérie. "One hit me with his gun," she said. "Another said, 'We are speaking to you!' I told them to rape me and leave my husband." A Seleka fighter raped her in front of her husband and children. The fighters then tied up the couple's two teenage sons to take them away, Valérie recalled. When her husband tried to intervene, the fighters shot and killed him. Valérie said she wept and fell on her husband's body as the fighters took her sons. She later heard rumors about her sons' whereabouts but has not seen them since. Valérie said she suffers from physical pain, as well as emotional and economic repercussions of the attack. "I am not like before," she said. "Before, I didn't have problems. I was a seller. But when the crisis started I lost everything."



A photograph showing a woman on the left side of the frame, holding a young child. The woman is wearing a yellow and dark-colored top. The child is wearing blue pants and yellow sandals. They are sitting on a wooden chair. The background is dark and filled with a pattern of light-colored, circular shapes, possibly a wall or a large piece of fabric. The lighting is dim, creating a somber atmosphere.

Angèle, 27, holds her child in Bangui. Seleka fighters killed her husband and parents, and later captured her near Bambari in June 2014, she said. They held her in sexual slavery for nine months with five other women and girls. Multiple fighters raped her repeatedly. “During the day they did it [rape] one time,” she said. “At night it was another [fighter] who would call us. We would think it was to prepare the tea, but it was to rape us. They said we are their slaves.” She said the fighters also forced the women to cook for them. “If we didn’t prepare [the food] very well, they hit us with the butts of their guns [and] whips they used for horses,” she said. The fighters continued to rape Angèle after she became pregnant in captivity. She eventually escaped just before giving birth, but did not seek medical treatment. Angèle said she has come to love and accept her child but she struggled at first; her family rejected her, blaming her for having a child “without a father.” Initially, she said, “I thought that the baby should die, or I should die with the baby.”



Arlette, around 60 years old, said she was returning from her fields with two of her sons when fighting erupted near Mbrès, in the Nana-Grebizi province, in early 2014. As they reached their house, two Seleka fighters shot and killed her sons, ages 23 and 26, and one of the fighters raped her. “He punched me in the jaw,” she said. “I had a broken tooth. He threw me on the ground by force. He tore off my clothes and started to rape me.” The fighters then set fire to her house, killing her ill husband who was trapped inside. “I saw the house burn with my own eyes,” she remembered. After the fighters left, she fled with her two younger sons. She sought medical care at a local clinic, but felt too ashamed to tell them about the rape. “You see my age?” she said. “I shouldn’t be having sex with men. How am I going to explain my situation?”

The United Nations peacekeeping mission, authorized to have 12,870 armed forces in the country, has a mandate to protect civilians, including from sexual violence, but it has struggled to prevent armed groups from committing crimes against women and girls and to respond adequately in cases of sexual violence.

The government retains primary responsibility for protecting women and girls from sexual violence but, with fighting having decimated the country’s institutions, including courts and detention facilities, authorities lack capacity to prevent, investigate, and prosecute sexual violence or to ensure availability of critical services for survivors. Still, government and other service providers have not always taken all possible measures to provide necessary assistance to survivors who report the crime.

In a country where the justice system is largely dysfunctional—with only a handful of operational courts, few lawyers and judges, and minimal capacity to investigate sexual violence or detain perpetrators—survivors have little or no opportunity to seek redress. Though the Central African Penal Code punishes rape and sexual assault as criminal offenses, no member of an armed group has been tried for rape during the conflict. Only 11 of the 296 sexual violence survivors interviewed by Human Rights Watch said they attempted to file a criminal complaint. They reported powerful deterrents to seeking justice, including death threats and physical attacks for daring to come forward, and feeling intimidated and powerless when seeing their known attackers move freely around their villages and towns.

An ongoing International Criminal Court (ICC) investigation into crimes committed in the country since August 2012 could bring a measure of justice for crimes in the conflict. But the ICC, which only investigates those responsible for the gravest international crimes, can prosecute only a small number of individuals at high levels of power.

The recently-established Special Criminal Court—a novel, hybrid domestic and international court embedded within the national justice system—offers hope for greater justice for the war crimes and possible crimes against humanity that have plagued the Central African Republic since 2003. Its success, however, depends on sustained political and financial backing from the government and the country’s international partners, as well as effective procedures to protect witnesses, victims, and court personnel.

This report offers recommendations to mitigate risks for women and girls, and to ensure that survivors of sexual violence access essential medical care, psychosocial support, and justice. Curbing Seleka and anti-balaka abuses and holding perpetrators to account requires a long-term, multi-pronged approach, but the government,

the United Nations, and international donors can take immediate steps to strengthen protection for civilians at risk of sexual violence and to improve services for sexual violence survivors.



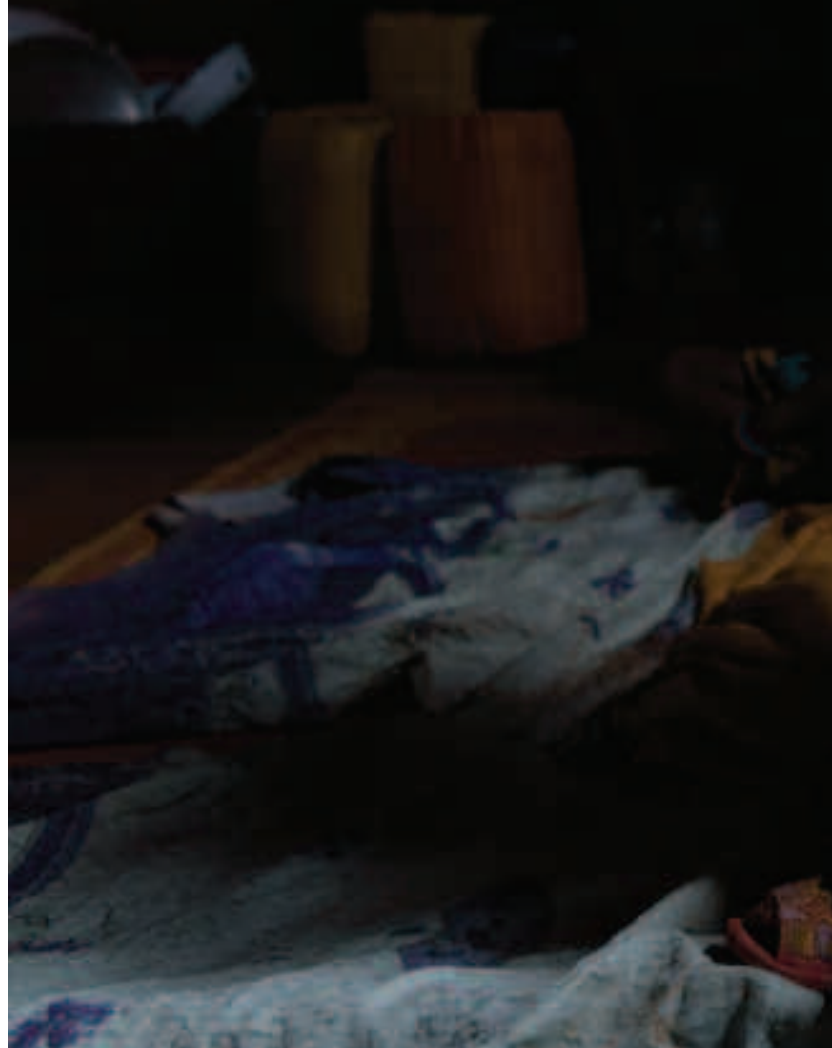
Rape as a Tactic of War

Commanders from the two main parties to the conflict have tolerated sexual violence by their forces; in some cases, they appear to have ordered and committed it. At times, rape formed an integral part of armed assaults and was used as a weapon of war.

Members of armed groups committed rape during attacks on towns and villages, sometimes during door-to-door searches for men and boys. Seleka and anti-balaka fighters also attacked women and girls as they carried out essential tasks such as going to markets, cultivating or harvesting crops, and going to and from school or work. Perpetrators often directed attacks at women and girls due to their presumed religious affiliation, with the predominantly Muslim Seleka fighters targeting women and girls from Christian communities, and the anti-balaka targeting Muslim women and girls.

In many cases, survivors said their attackers used sexual violence as a form of retribution for perceived support of those on the other side of the sectarian divide. Seleka fighters taunted women and girls by calling them “anti-balaka wives” and anti-balaka fighters accused their victims of supporting Muslims. In some instances, armed groups used sexual violence as punishment for the alleged alliances of survivors’ male relatives. In one instance, a survivor said fighters raped her husband, forcing her to watch, before killing him and raping her.

Josephine, 28, said she fled her home in Bangui with her husband and five young children due to fighting in the city in October 2014. When she returned to her neighborhood to collect clothes and dishes for the family, three anti-balaka stopped her and took her to a compound, where they raped her with a broken beer bottle. “When they pushed it in, blood flowed out and I lost consciousness,” she said. “After, they went in the neighborhood and said, ‘We stopped a wife of Muslims.’” Following the rape, her husband called her “a wife of the anti-balaka” and eventually they separated. Josephine said she suffers constant headaches, and is haunted by memories of the violence.







Alice, 21, was traveling in a shared taxi in April 2016 when four anti-balaka fighters armed with rifles, machetes, and knives stopped the car near Mbaiki, in Lobaye province. The fighters slashed the taxi's tires, shot the driver in the leg, and took Alice and five other women and girls to a nearby base, where they were held as sexual slaves for three days, she said. Two of the fighters raped Alice repeatedly. "They said if I try to flee they are going to kill me," she said. "The two raped me one by one in the morning, and one by one in the evening." Alice said the fighters also beat her with a belt, and forced her to wash their clothes and cook. She managed to escape after three days in captivity but, despite ongoing abdominal and pelvic pain, she had not sought medical care because she didn't know where or how to get help.





Martine, 32, said she was at her family's home in Bambari when Seleka forces attacked the town in December 2013. She watched as Seleka fighters forced her husband and older brother to dig two graves and then shot them. The Seleka took Martine captive along with more than 20 other women and girls, some as young as 12. During their first week as sexual slaves, Martine said the women were bound at the ankles and wrists. "They untied us to have sex. Then after they finished, they tied us up again," she said. "At all hours they did that, several times during the day. It wasn't just one person, it was different people [raping us]. There were four or five different people [raping us] each day. It was never the same person." The Seleka also forced the women and girls to collect water, cook, and wash dishes. Martine's mother and three daughters, who fled during the attack on Bambari, were killed when a church sheltering civilians was shelled during the fighting.

In most cases, survivors said that multiple perpetrators raped them—sometimes 10 men or more during a single incident. The rapes of these women and girls, which resulted in injuries ranging from broken bones and smashed teeth to internal injuries and head trauma, constitute torture. Torture was exacerbated in some cases by additional violence, including rape with a grenade and a broken bottle. Perpetrators also tortured women and girls by whipping them, tying them up for prolonged periods, burning them, and threatening them with death. Sexual slavery survivors were held captive for up to 18 months, repeatedly raped—some taken as fighters' "wives"—and forced to cook, clean, and collect food or water.

Members of armed groups aggravated the humiliation by raping some women and girls in front of their husbands, children, and other family members. Survivors told Human Rights Watch they witnessed fighters rape their daughters,



mothers, or other female family members or kill and mutilate their husbands and other relatives.

In interviews with 253 women and 52 girls (ages 17 and under) Human Rights Watch documented 305 cases of sexual violence by members of armed groups. At least 13 of the women survivors were girls at the time of the violence. Some survivors experienced sexual violence multiple times, on separate occasions. In some cases of sexual slavery—wherein fighters committed sexual violence and exerted ownership over victims—women or girls experienced multiple rapes over a period of days, weeks, or months. In 21 additional cases, 17 women and 4 girls said they experienced violence by armed groups—including abduction, beatings, and other physical abuse—but did not discuss sexual violence. Two of these women told Human Rights Watch about other incidents of sexual violence they experienced by members of armed groups.

During an April 2013 attack on Bangui's Boy-Rabe neighborhood, six Seleka fighters armed with rifles and machetes came to the house of Marie, 30. Marie explained how two of the fighters held her husband down at gunpoint while the others pushed her to the ground. "Each of the four then raped me," she said. "My husband was in the room but they would not let him move." Marie did not get medical care or an HIV test after the rape due to a lack of money. "I have thought about what these men did and justice for myself," she said. "I want these men brought to justice and put in prison."



Nicole, 26, said she was working as a street seller in Bangui in December 2013 when seven heavily armed Seleka fighters fleeing an anti-balaka attack captured her at gunpoint and tied her up. They took her money and, when anti-balaka gunfire erupted, forced her into a house where they kept her hostage for one day. In the house, three of the fighters took turns raping her and then debated whether to keep her so she could cook for them. They eventually let her go, tying her pagne (sarong) around her hands and over her mouth. After the rape, Nicole said, "I was already dead." When she told her husband about the attack, their relationship changed. "He didn't treat me well," she said. "He didn't want to give me money for food." Eventually they divorced.

The number of incidents reflects those documented by Human Rights Watch during research for this report and does not indicate an attempt to provide a comprehensive record of incidents of sexual violence committed by armed groups in the Central African Republic at any period. As a result of stigma, under-reporting by survivors, and time constraints and security-related restrictions on research, the cases documented in this report likely represent a small proportion of all sexual violence incidents perpetrated by armed groups in the country during the period covered. The United Nations, for example, recorded over 2,500 cases of sexual violence in 2014 alone.

Some survivors said they could identify the men who abused them or commanded the fighters committing the abuse. This report names six individuals in leadership positions of armed groups whom three or more survivors identified as having committed sexual violence or having had fighters under their command and control who committed such crimes.

Human Rights Watch also heard credible reports of armed groups committing sexual violence against men and boys, but research conducted for this report focuses on violence against women and girls.

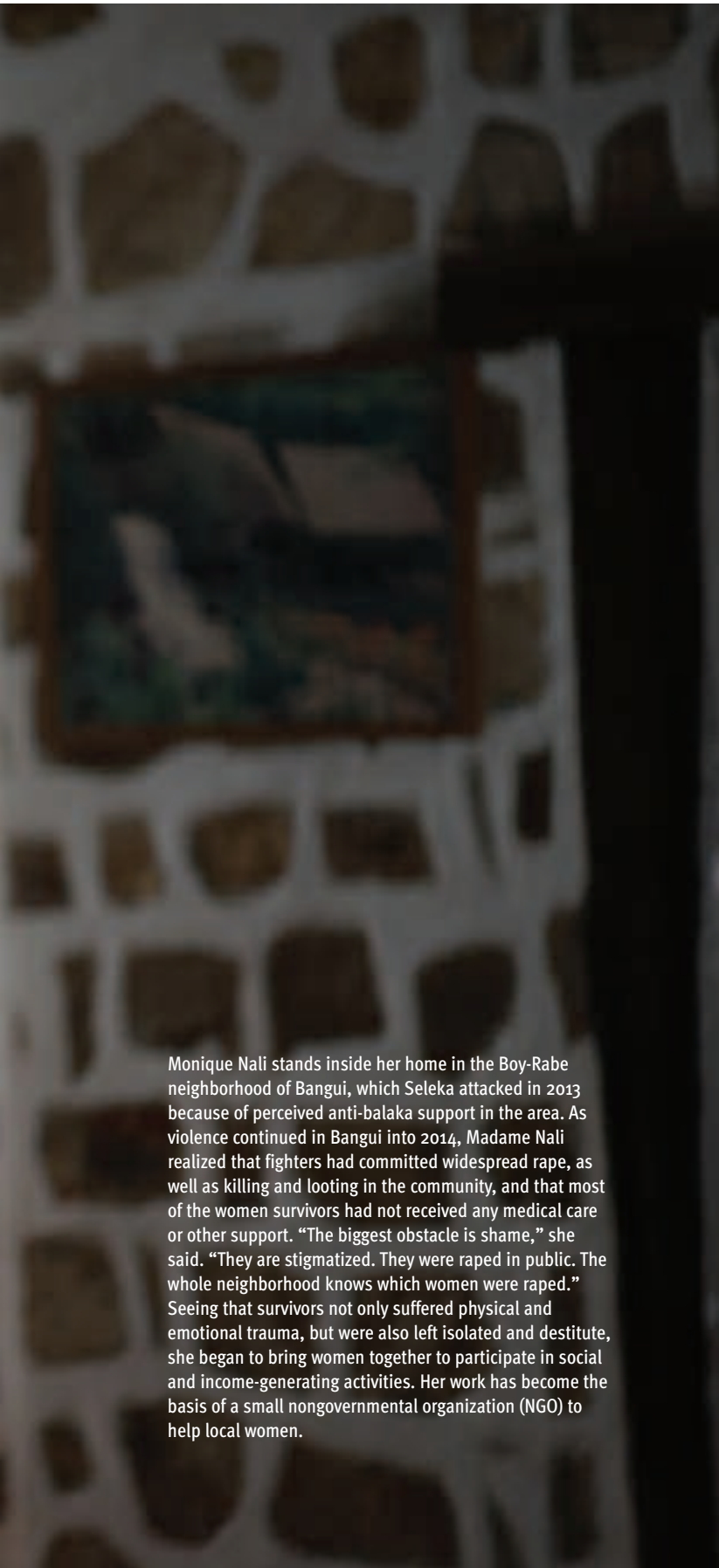
The report does not address sexual exploitation and abuse, including rape, committed by members of the United Nations peacekeeping force, some cases of which Human Rights Watch has previously documented, or by members of non-UN peacekeeping forces operating in the Central African Republic.



Early one morning in February 2014, anti-balaka fighters encircled the home of Natifa, 35. She fled to a neighbor's house and heard the anti-balaka yelling, "Where is she? The Muslim woman, we came because of her." Natifa's neighbor gave her up when the anti-balaka threatened to kill him and the fighters took Natifa by force to their base. "[Their commander] ordered his men to bring me into the house," Natifa recalled. "They started to torture me. One had a grenade in his hand. He told me to undress. He put the grenade in my genitals. One said, 'No, why are you doing that? If that explodes, we will all die.'" Two of the anti-balaka raped her and other men beat her with batons and belts before shutting her inside a house. Natifa said she escaped when the fighter standing guard told her to run away because the other anti-balaka were planning to kill her that night. Three months pregnant at the time of the rape, Natifa suffered a miscarriage one week later. When she told her husband about the attack, his family pressured him to take their children and leave her.







Monique Nali stands inside her home in the Boy-Rabe neighborhood of Bangui, which Seleka attacked in 2013 because of perceived anti-balaka support in the area. As violence continued in Bangui into 2014, Madame Nali realized that fighters had committed widespread rape, as well as killing and looting in the community, and that most of the women survivors had not received any medical care or other support. “The biggest obstacle is shame,” she said. “They are stigmatized. They were raped in public. The whole neighborhood knows which women were raped.” Seeing that survivors not only suffered physical and emotional trauma, but were also left isolated and destitute, she began to bring women together to participate in social and income-generating activities. Her work has become the basis of a small nongovernmental organization (NGO) to help local women.

Care Denied

Sexual violence has been life-altering for most of the women and girls Human Rights Watch interviewed. Only 145 of the 296 sexual violence survivors had accessed any post-rape medical care due to a range of obstacles, such as a lack of medical facilities, cost of travel to such facilities, and fear of stigma and rejection. Of these, only 83 survivors confirmed that they had disclosed the sexual violence to health care providers, thus allowing for comprehensive post-rape health care. In only 66 cases had survivors received any psychosocial support.

Human Rights Watch interviewed women and girls who face incapacitating physical injury and illness. Others became pregnant from rape, sometimes bearing children that present an emotional and financial burden. Mental health consequences are no less dire. Women and girls described symptoms consistent with post-traumatic stress and depression, including suicidal thoughts, fear and anxiety, sleeplessness, and an inability to complete daily tasks. Unable to continue work or other activities for sustenance, many said they are struggling to resume their lives and support themselves and their families. Girls sometimes dropped out of school due to fear of repeated violence, risk of stigma, or continued insecurity or displacement.

Fear of stigma and rejection often keeps women and girls from disclosing rape, even to close friends and family members, and from seeking help. The risk is all too real: women and girls told Human Rights Watch about husbands or partners abandoning them, family members blaming them, and community members taunting them after rape.

Stigma is one of many barriers to accessing critical health and psychosocial services. With a substantial proportion of health facilities destroyed by conflict and insecurity restricting access to others, service availability remains limited, especially outside major towns. Where services are available, they often do not offer comprehensive, confidential post-rape care or appropriate referrals for medical treatment or psychosocial support.

The government has committed to providing free health services for sexual violence survivors, but some women and girls said that service providers required payment for tests or treatment. Others said they did not seek health care because they believed it would cost money they did not have, or because they could not pay for transport to services.

Crimes Unpunished

Most of the cases documented in this report are not only crimes under Central African law, but constitute war crimes. In some cases, the conduct of both the Seleka and anti-balaka may constitute crimes against humanity. Despite this, not a single member of either armed group is known to have been punished for committing sexual violence. Perpetrators continue to hold positions of power in armed groups and exercise control over civilian populations. Several survivors said they saw their tormenters walking free after having committed rape.

The Central African government, donor governments, and the United Nations have publicly committed to support the fight against impunity for war crimes, but accountability remains a fragile hope, especially for conflict-related sexual violence. Nearly five years of conflict have left an already-faltering national justice system with few functioning courts or jails and limited capacity among judges, attorneys, and the security sector. In many areas where armed groups maintain control, national police and gendarmes are entirely absent.

Survivors expressed little faith in the justice system and often believed that their attackers would never be investigated, arrested, or prosecuted, and historic impunity for sexual violence provides little evidence otherwise. Only 11 survivors interviewed by Human Rights Watch said they had attempted to initiate a criminal investigation. Those who informed authorities faced mistreatment, including victim-blaming, failure to investigate, and even demands to present their own perpetrators for arrest. Family pressure, economic strain, and fear of reprisals further deter survivors from seeking justice. In at least three cases, survivors or their family members who directly confronted members of the armed group responsible for sexual violence were killed, beaten, or threatened with death. Witness and victim protection—currently non-existent in the national justice system—will be essential to facilitating accountability. Other obstacles to investigation and prosecution include difficulty identifying perpetrators and inconsistent provision of medical reports attesting to signs of rape.

The government has no national strategy to prevent or address sexual violence, though some consultations to develop one had taken place at time of writing. Under national, regional and international law, the Central African Republic has obligations to prevent and respond to sexual violence, and to hold perpetrators accountable. Even with its limited capacity, the government can and should take measures to strengthen protections for women and girls, and improve access to services and justice for sexual violence survivors. Donor governments and international agencies providing aid to the country also play an essential

role in supporting efforts to enhance protection from and response to sexual violence.

Without significant action to prevent sexual violence by armed groups, assist survivors, and end impunity for perpetrators, women and girls in the Central African Republic will continue to suffer not only at the hands of their attackers, but also from systemic failures to provide protection, support, and justice.



Captain Paul Amédée Moyenzo in front of the building in Bangui housing the Mixed Unit for Rapid Intervention and Suppression of Sexual Violence against Women and Children, known by its French acronym, UMIRR. The specialized unit of police and gendarmes trained to register, investigate, and respond to cases of sexual and gender-based violence and child abuse became operational in mid-2017 with Captain Moyenzo as its commander. UMIRR will refer cases to the new Special Criminal Court, a novel hybrid court embedded in the national justice system to investigate and prosecute human rights violations. “Those who committed abuses, they have to be arrested,” Captain Moyenzo said. “Because if they are not arrested and held right now, no victims will be able to go before the courts, and it will make justice inaccessible. We have to fight impunity.” At time of writing, UMIRR had received only around 10 complaints of sexual violence perpetrated by members of armed groups. To date, not a single member of an armed group is known to have been arrested or tried for sexual violence during the current conflict.

Women walk through a village on the outskirts of Bangui.





KEY RECOMMENDATIONS

Full recommendations can be found at the end of this report.

To prevent sexual violence against women and girls and to assist those who have suffered the abuse, Human Rights Watch recommends:

- **That Seleka and anti-balaka leadership immediately cease attacks on civilians and issue clear, public orders to their respective forces to stop all sexual violence—including harassment and intimidation—in areas under their control.**
- **That the government of the Central African Republic:**
 - **Issue a public and unambiguous message to Seleka and anti-balaka leadership that it will show zero tolerance for sexual violence and make every effort to bring all perpetrators of sexual violence to account.**
 - **Provide free and confidential health and psychosocial services to survivors of sexual violence, including comprehensive post-rape medical care, with support from the United Nations agencies, donor governments, and nongovernmental organizations.**
 - **Train police, gendarmes, prosecutors, and judges in how to respond to, investigate, and prosecute cases of sexual and gender-based violence. Provide ongoing support for the Mixed Unit for Rapid Intervention and Suppression of Sexual Violence against Women and Children (*Unité Mixte d’Intervention Rapide et de Répression des Violences Sexuelles Faites aux Femmes et aux Enfants*, UMIRR) to investigate sexual violence in accordance with international best practice standards. This includes recruiting and hiring female personnel, appointing and training focal points in all provinces, and working towards replication of the Mixed Unit at the provincial level.**
 - **In cooperation with UN agencies and the UN mission, urgently develop and implement a national strategy to combat and respond to sexual violence, including conflict-related sexual violence.**
 - **Develop and implement, in collaboration with the United Nations mission (MINUSCA), a strategy for civilian protection, including specific measures to protect women and girls and to mitigate the risk of sexual violence.**
 - **In conjunction with the UN mission, expedite the operationalization of the Special Criminal Court and give the court full political support to fulfill its mandate, while respecting its independence.**

- **That the UN Mission to the Central African Republic:**
 - **Assist authorities to identify, arrest, and prosecute perpetrators of crimes of sexual violence committed by armed groups as per the mission’s mandate.**
 - **Bolster training and funding to police and other rule of law institutions, including prosecutors, judges, and those deployed to the Special Criminal Court (SCC) and UMIRR, on investigation and prosecution of sexual violence. Prioritize inclusion of female personnel in teams working on such cases.**
 - **Incorporate witness and victim protection into support for the SCC and other judicial institutions, particularly for sensitive cases such as those involving sexual violence, in which witnesses or victims face risk of stigma, threats, injury, or death.**
- **That the UN Security Council:**
 - **Impose targeted sanctions against Seleka and anti-balaka commanders responsible for committing, ordering, or tolerating sexual violence.**
- **That foreign donor governments:**
 - **Provide additional resources and technical support for essential medical, psychosocial, and legal services for survivors of sexual violence.**
 - **Expand support for efforts to re-establish the national judicial system and to train police, prosecutors, and judges in investigation and prosecution of sexual and gender-based violence.**
 - **Give sustained political and financial support to the Special Criminal Court.**

Methodology

This report is based on research conducted in the Central African Republic between July 2015 and August 2017. Researchers from Human Rights Watch interviewed survivors of violence, service providers, United Nations personnel, government officials and representatives of armed groups in Bangui in December 2015, January 2016, April and May 2016, and August 2017. Human Rights Watch also conducted interviews in the following locations: Bambari, in the Ouaka province (January 2016), Boda, in the Lobaye province (April 2016), Kaga-Bandoro, in the Nana-Grébizi province (May 2016), and Bocaranga, in the Ouham-Pendé province (November 2016). The report also draws from research Human Rights Watch conducted in Yaloké, in the Ombella-M'poko province, and in Kaga-Bandoro in April 2015. Human Rights Watch researchers conducted additional interviews with service providers and with government and UN representatives in Bangui in July 2015, June 2016, October 2016, and April 2017. For security reasons, representatives of government, UN agencies, and non-governmental organizations have not been named in this report.

Human Rights Watch makes every effort to abide by best practice standards for ethical research and documentation of sexual violence. In all but nine cases, survivors were offered the option to speak with a female researcher and female interpreter. Researchers conducted interviews in French with interpretation from Sango. In one case, a community member known to Human Rights Watch interpreted from Peuhl (Fulani) to Sango, which an interpreter working with Human Rights Watch then translated to French.

For reasons of security and privacy, all survivors are identified by pseudonyms. Human Rights Watch took measures to access and meet with survivors discreetly in confidential settings, keep identifying details confidential, and use interview techniques designed to minimize the risk of re-traumatization. Human Rights Watch preceded all interviews with a detailed informed consent process to ensure that survivors understood the nature and purpose of the interview and could choose whether to speak with researchers. Human Rights Watch informed survivors that they could stop or pause the interview at any time and could decline to answer questions or discuss particular topics. In cases where survivors said they were experiencing, or they appeared to be experiencing, significant distress, researchers sometimes limited questions about the incident of sexual violence or concluded the interview early. Some women and girls did not discuss experiences of

sexual violence. Among these people, some may have experienced sexual violence but elected not to discuss it.

In cases of children who experienced sexual violence, especially for those aged 10 to 14, Human Rights Watch researchers took special care to avoid re-traumatization and did not ask survivors to describe incidents of sexual violence in detail. In some cases, researchers interviewed a survivor's parent or other family member with knowledge of the incident instead of or in addition to the survivor. In the case of a woman with an intellectual disability, the researcher interviewed the survivor individually and then with her mother after obtaining the survivor's consent.

Human Rights Watch did not pay for interviews, but did cover transportation costs to and from interview locations as needed. Researchers also arranged referrals to medical, psychosocial, and legal services for survivors where possible and with their informed consent.

In some cases, survivors had difficulty specifying the date of an assault. This was likely due to factors including low literacy, insignificance of calendar dates to daily life, and/or trauma resulting from the incident. In these cases, Human Rights Watch sought to establish the timing of incidents through other details provided by the interviewee and members of the community, as well as information about the activity of armed groups in the area. Because some interviewees could not provide their exact age or the date of the attack, in three cases Human Rights Watch could not determine with certainty whether the survivor was a child (under 18 years old) or an adult when the violence occurred.

Terminology

In this report, **“child”** refers to anyone under the age of 18. **“Girl”** refers to a female child.

Human Rights Watch uses the World Health Organization's (WHO) definition of **sexual violence** as “[a]ny sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to traffic or otherwise directed against a person's sexuality using coercion, by any person regardless of their relationship to the victim, in any setting.”¹

¹ World Health Organization, “Violence against women fact sheet,” November 2016, <http://www.who.int/mediacentre/factsheets/fs239/en/> (accessed August 17, 2017).

The WHO defines **rape** as “the physically forced or otherwise coerced penetration of the vulva or anus with a penis, other body part or object.”² International bodies have clarified that determining whether an act amounts to rape is not dependent on use of physical force but rather on lack of consent of the victim and coercive circumstances, whether or not such circumstances include physical violence or threats of physical violence.³ Human Rights Watch abides by the WHO definition of rape, with the understanding that “physically forced or otherwise coerced” circumstances include a lack of consent on the part of the victim or any form of coercion or threat.

Human Rights Watch refers to elements of the definition of **sexual slavery** elucidated by the Rome Statute of the International Criminal Court: “The perpetrator exercised any or all of the powers attaching to the right of ownership over one or more persons, such as by purchasing, selling, lending or bartering such a person or persons, or by imposing on them a similar deprivation of liberty” and “the perpetrator caused such person or persons to engage in one or more acts of a sexual nature.”⁴

² Ibid.

³ Committee on the Elimination of Discrimination against Women (CEDAW Committee), Communication No. 18.2008, U.N. Doc. CEDAW/C/46/D/18/2008, http://www2.ohchr.org/english/law/docs/CEDAW.C.46.D18.2008_en.doc (accessed August 17, 2017), paras. 8.5, 8.7; United Nations Department of Economic and Social Affairs, Division for the Advancement of Women, *Handbook for Legislation on Violence against Women*, UN publication ST/ESA/329 (New York: United Nations Publications, 2009), p. 26-27.

⁴ “Elements of Crimes of the Rome Statute of the International Criminal Court (Elements of Crimes of the Rome Statute),” U.N. Doc. E/03/V/2, September 2002, <https://www.icc-cpi.int/NR/rdonlyres/336923D8-A6AD-40EC-AD7B-45BF9DE73D56/0/ElementsOfCrimesEng.pdf> (accessed August 17, 2017), Arts. 7 (1)(g)-2, 8(2)(b)(xxii)-2. See also International Committee of the Red Cross, Customary International Humanitarian Law, Rule 94. Slavery and Slave Trade, https://ihl-databases.icrc.org/customary-ihl/eng/docs/v1_rul_rule94 (accessed August 17, 2017).

I. Background—Violence in the Central African Republic

The current conflict in the Central African Republic began in late 2012 when three rebel groups from the northeast, angered by years of neglect and maltreatment by the government of then-President François Bozizé, emerged under the banner of the Seleka (“alliance” in the Sango language)⁵: the Convention of Patriots for Justice and Peace (*Convention des Patriotes pour la Justice et la Paix*, CPJP), the Patriotic Convention for the Salvation of Kodro (*Convention Patriotique de Salut du Kodro*, CPSK), and the Union of Democratic Forces for Unity (*Union des Forces Démocratiques pour le Rassemblement*, UFDR).⁶ Many Seleka fighters were mercenaries from Chad and Sudan. While the Seleka did not profess a religious affiliation, their fighters were overwhelmingly Muslim.

Beginning in the northeast and moving towards the capital, Bangui, the Seleka launched attacks in late 2012 and 2013 during which they killed scores of civilians, burned and pillaged homes, and left over 850,000 people displaced.⁷

In March 2013, the Seleka seized control of Bangui, ousting President Bozizé and his government. Forces attacked and pillaged entire neighborhoods, killing and raping civilians.⁸ Seleka leaders denied that their fighters had targeted civilians, despite overwhelming evidence to the contrary.⁹

In response to the widespread killings and destruction, local self-defense groups called “anti-balaka” (“anti-bullet”) began to emerge. While some anti-balaka groups are affiliated with or

⁵ Along with French, Sango is an official language of the Central African Republic.

⁶ From September 2013 through 2014, observers and analysts, including Human Rights Watch, referred to the group as the “ex-Seleka” in publications. Human Rights Watch has reverted to using the “Seleka,” largely because Seleka commanders refer to themselves as such. For further discussion of these groups, see Human Rights Watch, *I Can Still Smell the Dead: The Forgotten Human Rights Crisis in the Central African Republic*, September 2013, <https://www.hrw.org/report/2013/09/18/i-can-still-smell-dead/forgotten-human-rights-crisis-central-african-republic>, pp. 29-30.

⁷ “Central African Republic: Rampant Abuses After Coup,” Human Rights Watch news release, May 10, 2013, <https://www.hrw.org/news/2013/05/10/central-african-republic-rampant-abuses-after-coup>; “Central African Republic: Seleka Forces Kill Scores, Burn Villages,” Human Rights Watch news release, June 27, 2013, <https://www.hrw.org/news/2013/06/27/central-african-republic-seleka-forces-kill-scores-burn-villages>.

⁸ Human Rights Watch, *I Can Still Smell the Dead*.

⁹ These leaders included Michel Djotodia, the former president, and Nouredine Adam, the former minister of public security and head of the intelligence. See Human Rights Watch, *I Can Still Smell the Dead*.

coordinated by former members of the national army or Bozizé's presidential guard, most are relatively autonomous, operating in specific regions with loose ties to a central command.

The anti-balaka quickly demonstrated an anti-Muslim bias, equating all Muslims with Seleka sympathizers. By August 2013, the anti-balaka began launching attacks against the Seleka in the center of the country, targeting both Seleka fighters and Muslim civilians, including women, children, and the elderly.¹⁰

In September 2013, interim president Michel Djotodia, who had suspended the constitution and installed himself in power, announced that the government had dissolved the Seleka, but its fighters continued to operate around the country, with civilians bearing the brunt of the violence.

The Seleka splintered in 2014, eventually splitting into multiple groups including the Union for Peace (*l'Union pour la Paix en Centrafrique*, UPC), the Popular Front for the Renaissance of Central Africa (*Front Populaire pour la Renaissance de la Centrafrique*, FPRC), and the Central African Patriotic Movement (*Mouvement Patriotique pour la Centrafrique*, MPC).

Throughout 2013 and 2014, the Seleka and anti-balaka engaged in reprisal attacks, with both sides at times targeting civilians along sectarian lines.¹¹ In early 2014, due to anti-balaka attacks, as well as pressure from international peacekeeping forces based in the country (see below), the Seleka consolidated its operations in the country's center and east, where they established strongholds and continued to abuse local communities.

¹⁰ Human Rights Watch, *They Came to Kill: Escalating Atrocities in the Central African Republic*, December 2013, <https://www.hrw.org/report/2013/12/18/they-came-kill/escalating-atrocities-central-african-republic>.

¹¹ For more see Amnesty International, "Central African Republic: War crimes and crimes against humanity in Bangui," December 19, 2013, <https://www.amnesty.org/en/latest/news/2013/12/central-african-republic-war-crimes-and-crimes-against-humanity-bangui/> (accessed August 16, 2017); "Civilians deliberately targeted in large-scale killings in Central African Republic," United Nations Human Rights Office of the High Commissioner, news release, January 17, 2014, <http://www.ohchr.org/EN/NewsEvents/Pages/Civiliansdeliberatelytargetedinlarge-scalekillingsinCAR.aspx> (accessed August 16, 2017).

Anti-balaka forces also committed serious abuses, including mass killings, against Muslims fleeing the southwest.¹² They continued to threaten Muslims living in UN-protected enclaves in the west while fighting the Seleka in the center of the country.

In addition, the Peuhl (or Fulani), a Muslim nomadic or semi-nomadic people, have aligned themselves with the Seleka and at times fought with Seleka forces. Anti-balaka have targeted Peuhl civilians because of this alliance or because they are Muslim.¹³ Some Peuhl joined the Seleka and committed abuses, including the deliberate killing of civilians and burning of villages.¹⁴

Michel Djotodia stepped down as interim president on January 14, 2014, but intense fighting continued. Multiple efforts at national and international peace deals, including three major peace agreements in 2014 and 2015, failed to end the fighting.¹⁵

A transitional government was formed in January 2014, headed by Bangui's former mayor, Catherine Samba-Panza, with a key goal of paving the way for elections. Presidential and parliamentary elections finally took place in early 2016, and Faustin-Archange Touadéra, who had served as prime minister from 2008 to 2013, won the presidency.¹⁶ The peaceful transfer of power offered hope for peace but the conflict's underlying causes—a security vacuum, impunity for perpetrators of abuse, failed disarmament and reintegration efforts, and lack of meaningful reconciliation between warring groups—remained unaddressed. The struggle for control of resources exacerbated the crisis.

Eight anti-balaka leaders campaigned for parliamentary seats in the January 2016 elections. Three were elected, including Alfred Yékatom, alias “Rombhot,” an anti-balaka

¹² “Central African Republic: Massacres in Remote Villages,” Human Rights Watch news release, April 3, 2014, <https://www.hrw.org/news/2014/04/03/central-african-republic-massacres-remote-villages>.

¹³ “Central African Republic: Muslims Trapped in Enclaves,” Human Rights Watch news release, December 22, 2014, <https://www.hrw.org/news/2014/12/22/central-african-republic-muslims-trapped-enclaves>.

¹⁴ Human Rights Watch, *I Can Still Smell the Dead*, pp. 35-38.

¹⁵ See Human Rights Watch, *Killing Without Consequence: War Crimes, Crimes against Humanity and the Special Criminal Court in the Central African Republic*, 2017, Annex I: Attacks by Seleka UPC, Annex II: Attacks by Seleka FPRC, and Annex III: Attacks by Anti-Balaka.

¹⁶ “Central African Republic: Prioritize Protection, Justice,” Human Rights Watch news release, March 29, 2016, <https://www.hrw.org/news/2016/03/29/central-african-republic-prioritize-protection-justice>.

leader who has been identified as responsible for abuses against civilians, including sexual violence, and is a commander on the United Nations sanctions list.¹⁷

In 2016, armed groups continued to perpetrate violence, including against civilians, especially in the central regions of Ouaka, Mbomou, and Haute-Kotto.¹⁸ The Seleka factions attempted to reunify in August 2016, but the alliance was short-lived.¹⁹ Fighting among Seleka factions in November 2016 intensified as Seleka factions allied with anti-balaka forces in Ouaka province in December 2016.²⁰ In 2017, fighting spread southeast to Haute-Kotto and Mbomou provinces, including in the key towns of Bria, Bangassou, and Zemio.

On June 19, the government and 13 of the 14 active armed groups signed a peace deal mediated by the Community of Sant'Egidio in Rome—an association close to the Vatican that promotes inter-faith dialogue—that includes a ceasefire and political representation for armed groups. The accord acknowledges the work of the Special Criminal Court and the International Criminal Court and includes a truth and reconciliation commission.²¹ One day after the deal was signed, up to 100 people were reportedly killed in Bria in fighting between anti-balaka fighters and the FPRC.²²

¹⁷ United Nations Panel of Experts on the Central African Republic, Midterm Report of the Panel of Experts on the Central African Republic, August 11, 2016, published in Letter dated 9 August 2016 from the Panel of Experts on the Central African Republic established pursuant to Security Council Resolution 2262 (2016) addressed to the President of the Security Council, S/2016/694, <https://documents-dds-ny.un.org/doc/UNDOC/GEN/N16/225/76/PDF/N1622576.pdf?OpenElement> (accessed August 21, 2017), para. 23; Human Rights Watch, *Killing Without Consequence*, pp. 21-22.

¹⁸ “Central African Republic rebels kill 26 villagers: presidential spokesman,” Reuters, September 17, 2016, <http://www.reuters.com/article/us-centralafrica-killings-idUSKCN11NoR7> (accessed August 16, 2017); OCHA, “Aperçu humanitaire au 12 septembre 2016,” Office for the Coordination of Humanitarian Affairs, September 12, 2016, https://www.humanitarianresponse.info/fr/system/files/documents/files/rca_ocha_161209_apercu_humanitaire.pdf (accessed August 16, 2017).

¹⁹ Bienvenue Marina Moulou-Gnatho, “Centrafrique : Des regroupements de combattants ex-Séléka signalés à Bria,” *Réseau des journalistes pour les droits de l'homme*, August 18, 2016, <http://rjdh.org/centrafrique-regroupements-de-combattants-ex-seleka-sigales-a-bria/> (accessed August 16, 2017).

²⁰ “Central African Republic: Civilians Killed During Clashes,” Human Rights Watch news release, December 5, 2016, <https://www.hrw.org/news/2016/12/05/central-african-republic-civilians-killed-during-clashes>; “Central African Republic: Executions by Rebel Group,” Human Rights Watch news release, February 16, 2017, <https://www.hrw.org/news/2017/02/16/central-african-republic-executions-rebel-group>.

²¹ “Accord politique pour la paix en République Centrafricaine,” Entente de Sant'Egidio, June 19, 2017, http://www.santegidio.org/documenti/doc_1063/accord_politique_pour_la_paix_en_republique_centrafricaine_entente_d_e_sant_egidio.pdf (accessed August 16, 2017).

²² “CAR Violence: Deadly Clashes in Bria Despite Ceasefire Deal,” BBC, June 21, 2017, http://www.bbc.com/news/world-africa-40350057?utm_source=Sailthru&utm_medium=email&utm_campaign=ed%20pix&utm_term=%2AMorning%20Brief (accessed August 16, 2017).

United Nations peacekeeping forces have struggled to protect civilians.²³ Fighting between various Seleka groups and anti-balaka remains a serious threat to civilians in the center of the country. The Seleka operate in the center and east, resulting in a de facto partitioning of the country. The UPC were based in Bambari, in Ouaka province, until early 2017 when the UN Multidimensional Integrated Stabilization Mission in the Central African Republic (MINUSCA) demanded they leave the town to avoid further bloodshed. The group then established a base in Alindao, in Basse-Kotto province, from where they continued to attack civilians in the region. UPC fighters and local Muslims killed at least 136 civilians over two days when they attacked the Paris-Congo and Banguville neighborhoods in Alindao in May 2017 after people reported the presence of anti-balaka fighters in the area. At least 32 civilians were killed by the UPC in August as they tried to leave the town's displacement camp in search of food and firewood.²⁴

Humanitarian needs are dire, with an estimated 50 percent of the population dependent on humanitarian aid and some 2 million people facing extreme food insecurity.²⁵ A resurgence of violence between January and July led to revision of the Humanitarian Response Plan for 2017. At time of writing, less than 24 percent of the UN's US\$497 million humanitarian appeal for 2017 had been funded. Internal displacement had risen to around 600,000 as a result of increased violence, and around 2.4 million people—nearly half the population—depend on humanitarian aid to survive. At the same time, over 200 attacks on aid workers during the first six months of 2017 made it one of the most dangerous countries for humanitarian actors to operate and hindered provision of critical assistance.²⁶ Women and girls told Human Rights Watch about sexual violence that occurred while they were seeking resources or work, saying they had no choice but to venture out in order to support their families.

²³ "Central African Republic: Executions by Rebel Group," Human Rights Watch news release, February 16, 2017, <https://www.hrw.org/news/2017/02/16/central-african-republic-executions-rebel-group>; "Central African Republic: Armed Groups Target Civilians," Human Rights Watch news release, May 2, 2017, <https://www.hrw.org/news/2017/05/02/central-african-republic-armed-groups-target-civilians>.

²⁴ Human Rights Watch interviews with survivors of violence, Alindao, August 26-27, 2017.

²⁵ United Nations Security Council, "Report of the Secretary-General on the Central African Republic," U.N. Doc. S/2017/94, February 1, 2017, http://www.un.org/ga/search/view_doc.asp?symbol=S/2017/94 (accessed August 16, 2017), para. 53.

²⁶ OCHA Central African Republic, "In Central African Republic, a sharp deterioration of the situation necessitated revision of the Humanitarian Response Plan," news release, August 17, 2017, <http://reliefweb.int/report/central-african-republic/central-african-republic-sharp-deterioration-situation-necessitated> (accessed August 20, 2017); Financial Tracking Service, "Central African Republic 2017 (Humanitarian response plan)," <https://fts.unocha.org/appeals/549/summary> (accessed August 16, 2017).

International Intervention

In late 2013, the African Union (AU), which had contributed peacekeeping forces in the country since 2002, authorized a more robust peacekeeping mission, the International Support Mission to the Central African Republic, known as MISCA. Shortly thereafter, France added soldiers to its small Bangui-based force to help the AU restore order.²⁷

Violence continued despite the AU and French troops, and in April 2014 the United Nations Security Council authorized a new peacekeeping mission called the Multidimensional Integrated Stabilization Mission in the Central African Republic, known by its French acronym, MINUSCA. The mission had a multi-pronged mandate: protecting civilians; facilitating humanitarian access; monitoring, investigating, and reporting on human rights abuses; and supporting the political transition.²⁸ MINUSCA took over from MISCA on September 15, 2014, with 11,820 military personnel. French troops remained in the country until October 2016.

The UN Security Council Resolution that established MINUSCA prioritizes protection of civilians “from threat of physical violence,” including sexual violence.²⁹ Under its human rights mandate, MINUSCA is tasked with monitoring, investigating and reporting on all forms of sexual violence in the conflict, preventing such abuses, and helping to identify and prosecute perpetrators.³⁰ MINUSCA is authorized to use all necessary means to carry out its mandate in its areas of deployment.³¹

The resolution calls on all parties to the conflict, including both Seleka and anti-balaka, “to issue clear orders against sexual and gender based violence.”³² It appeals to authorities to ensure timely investigation of abuses and “facilitate immediate access for victims of sexual violence to available services.”³³

²⁷ The Sangaris mission ended in October 2016. Approximately 300 French troops remain in the country.

²⁸ Security Council, Resolution 2149 (2014), S/RES/2149 (2014), [http://www.un.org/en/ga/search/view_doc.asp?symbol=S/RES/2149\(2014\)](http://www.un.org/en/ga/search/view_doc.asp?symbol=S/RES/2149(2014)) (accessed on August 16, 2017).

²⁹ *Ibid.*, para. 30 (a).

³⁰ *Ibid.*, para. 30(e)(ii).

³¹ *Ibid.*, para. 29.

³² *Ibid.*, para. 15.

³³ *Ibid.*, para. 15. Subsequent MINUSCA mandates in 2015 and 2016 include similar language on prevention of and response to sexual violence by parties to the conflict. The UN Security Council passed Resolution 2217 in April 2015. United Nations

In December 2013, the Security Council created a panel of experts to track developments in the Central African Republic, monitor sanctions implementation, and identify potential targets for sanctions.³⁴ In January 2017, the Security Council revised the criteria for designation to include involvement in planning, directing, or committing sexual violence as a specific criterion for sanctions.³⁵ At time of writing, no individuals or entities have been sanctioned for planning, directing, or committing sexual violence in the Central African Republic's civil war.³⁶

As of May 2017, MINUSCA had 9,885 troops and 1,806 police deployed in the country.³⁷

Lack of Accountability

President Touadéra's government inherited a broken national justice system, with little capacity to investigate and prosecute serious crimes, let alone war crimes or crimes against humanity committed by armed groups.³⁸ Efforts to rebuild the judicial system have been painfully slow, hampered by ongoing insecurity—including in areas where armed groups retain control—lack of infrastructure and supplies, and limited capacity and

Security Council, Resolution 2217 (2015), SC/11875, <http://www.un.org/press/en/2015/sc11875.doc.htm> (accessed on August 16, 2017), para. 19. The UN Security Council passed Resolution 2301 in July 2016. United Nations Security Council, Resolution 2301 (2016), SC/12462, <http://www.un.org/press/en/2016/sc12462.doc.htm> (accessed on August 16, 2017), paras. 19, 21.

³⁴ In May 2014, the Security Council imposed targeted measures, asset freezes and travel bans, on three individuals. In August 2015, the Council added one entity and three other individuals to its lists, subjecting them to sanctions as well. "Security Council Committee Concerning Central African Republic Lists Three Individuals Subject to Measures Imposed by Resolution 2134 (2014)," UN news release, May 9, 2014, <http://www.un.org/press/en/2014/sc11389.doc.htm> (accessed August 16, 2017); "Security Council Committee Concerning Central African Republic Lists One Entity, Three Individuals Subject to Measures Imposed by Resolution 2196 (2015)," UN news release, August 20, 2015, <http://www.un.org/press/en/2015/sc12018.doc.htm> (accessed August 16, 2017).

³⁵ "Unanimously adopting Resolution 2339 (2017), Security Council Extends Arms Embargo, Other Sanctions on Central African Republic," UN news release, January 27, 2017, <https://www.un.org/press/en/2017/sc12697.doc.htm> (accessed August 16, 2017).

³⁶ Joseph Kony and his Lord's Resistance Army have both been designated for sanctions, in part, due to acts of sexual violence the group has committed in an unrelated conflict. Security Council Committee established pursuant to resolution 2127 (2013) concerning the Central African Republic, Narrative Summaries of Reasons for Listing, CFI.009 Joseph Kony, <https://www.un.org/sc/suborg/en/sanctions/2127/materials/summaries/individual/joseph-kony> (accessed August 20, 2017).

³⁷ United Nations Peacekeeping, "Peacekeeping Fact Sheet," <http://www.un.org/en/peacekeeping/resources/statistics/factsheet.shtml#MINUSC> (accessed August 16, 2017).

³⁸ Human Rights Watch interview with judicial official, Bangui, April 11, 2017. See also Human Rights Watch, *I Can Still Smell the Dead*. Crimes committed by the Seleka, the anti-balaka, and other armed groups that are not part of the national armed forces fall under the jurisdiction of the criminal justice system; military courts have no jurisdiction over such crimes. Human Rights Watch interview with judicial official, Bangui, April 11, 2017.

training of police and judicial officials. The country has 198 magistrates—many of whom have not resumed their posts since the Bozizé government fell—and 80 lawyers, most of whom are based in Bangui.³⁹ Judicial police often fail to investigate criminal cases.⁴⁰ The detention system is in shambles: while there were 28 detention centers nationwide before the current crisis, at time of writing only six were in operation, two of which are in the capital.⁴¹ Mass escapes have occurred at several of the remaining prisons.⁴²

Historical impunity for sexual violence casts a shadow over the judicial system. In its May 2017 review of human rights violations in the country between 2003 and 2015, the United Nations describes the conflict-affected Central African Republic as “an environment in which perpetrators of sexual violence enjoy unbridled impunity as a result of widespread insecurity and dysfunctional or collapsed institutions, a situation which persists to date.”⁴³ To accelerate the processing of some criminal cases, in 1998 the General Prosecutor ordered re-classification of offences—including rape—to allow for their trial in civil courts, where sanctions are less harsh than in criminal courts.⁴⁴ This order remained in place until March 2016, when the minister of justice instructed judges and court officials to cease this practice for cases of sexual violence, noting concern over high rates of the crime and the lack of accountability.⁴⁵

³⁹ Human Rights Watch interview with international legal expert, Bangui, June 13, 2016. See also Amnesty International, *The Long Wait for Justice, Accountability in the Central African Republic*, January 11, 2017, <https://www.amnesty.org/en/documents/afr19/5425/2017/en/> (accessed August 16, 2017).

⁴⁰ Human Rights Watch interview with international legal expert, Bangui, June 13, 2016.

⁴¹ Email communication from MINUSCA justice expert, September 12, 2017.

⁴² “Central African Republic: New Spate of Senseless Deaths,” Human Rights Watch news release, October 22, 2015, <https://www.hrw.org/news/2015/10/22/central-african-republic-new-spate-senseless-deaths>.

⁴³ United Nations Multidimensional Integrated Stabilization Mission in the Central African Republic (MINUSCA), United Nations Development Programme (UNDP), Office of the United Nations High Commissioner for Human Rights (UNOHCHR), UN Office of the Special Representative of the Secretary-General on Sexual Violence in Conflict, “Central African Republic 2003-2015: Report 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,” May 2017, http://www.ohchr.org/Documents/Countries/CF/Mapping2003-2015/2017CAR_Mapping_Report_EN.pdf (accessed August 17, 2017), p. 207.

⁴⁴ Lettre Circulaire sur la Correctionnalisation et Contraventionnalisation de Certains Crimes et Délits, Cour d’Appel de la République Centrafricaine, No. 416/CA/PGCA/98, May 19, 1998, on file with Human Rights Watch.

⁴⁵ Lettre Circulaire, Ministère de la Justice, Chargé de la Réforme Judiciaire et des Droits de l’Homme, No. 055.MJRJDH/DIRCAB.16, March 8, 2016, on file with Human Rights Watch.

Criminal trials should take place during special criminal sessions held twice per year in one of four appeals courts throughout the country.⁴⁶ However, no criminal trials took place between 2009 and 2014. With the support of MINUSCA and the United Nations Development Programme (UNDP), criminal court sessions adjudicated criminal cases in Bangui in June 2015 and in August and September 2016.⁴⁷ Only three rape cases—none perpetrated by members of armed groups—were prosecuted during the 2016 criminal sessions.⁴⁸

The International Criminal Court (ICC) has launched an investigation into grave crimes committed during the conflict in the Central African Republic since 2012. At time of writing, the investigation was ongoing and no charges had been issued. The ICC’s investigation offers the chance to bring a measure of accountability for crimes but will likely try only a small number of cases.

A 2015 law establishing a Special Criminal Court (SCC), a hybrid national and international court embedded in the national justice system, also offers hope of accountability for serious crimes committed during the current conflict.⁴⁹ While a special prosecutor was appointed to the SCC in February 2017, and international and domestic judges were appointed in subsequent months, the court has been slow to become operational; in addition, only the first year of the court’s five-year mission had been funded at time of writing.⁵⁰

Sexual Violence in the Conflict

From the beginning of the conflict in December 2012, the United Nations Special Representative on Sexual Violence in Conflict has noted “consistent reports” of sexual

⁴⁶ The criminal session is the equivalent of a “*cour d’assises*” in the French system. Criminal courts are in Bangui, Bouar, and Bambari. According to the Code of Criminal Procedure, the Ministry of Justice, after deliberation with the general assembly of the court of appeals, is to organize criminal trial sessions. Loi N° 10.002 du 06 janvier 2010, Code de Procédure Pénale de la République Centrafricaine, arts. 219, 220.

⁴⁷ “Projet de role de la première session de la Cour criminelle de Bangui,” 2016, copy on file with Human Rights Watch.

⁴⁸ “Résultats des audiences de la Première Session Criminelle de la cour d’appel de Bangui tenue du 26 août au 26 septembre 2016,” copy on file with Human Rights Watch.

⁴⁹ “Taking Justice to a New Level: The Special Criminal Court in the Central African Republic,” Human Rights Watch news release, July 13, 2015, <https://www.hrw.org/news/2015/07/13/taking-justice-new-level-special-criminal-court-central-african-republic>.

⁵⁰ “A Step Toward Justice in the Central African Republic,” Human Rights Watch commentary, February 21, 2017, <https://www.hrw.org/news/2017/02/21/step-toward-justice-central-african-republic>; United Nations Security Council, “Report of the Secretary-General on the Central African Republic,” February 1, 2017, <http://reliefweb.int/sites/reliefweb.int/files/resources/N1701475.pdf> (accessed August 17, 2017), para. 47. See also Section V. Access to Justice in this report.

violence, particularly in areas where armed groups were present or had control.⁵¹ In annual reports on sexual violence in conflict from 2013 to 2017, the UN Secretary-General has highlighted the use of sexual violence by armed groups to terrorize and punish civilians in the Central African Republic, saying that “women and girls have been systematically targeted.”⁵² In his 2016 report on children and armed conflict, he noted sexual violence against girls by armed groups, including as sex slaves, and impunity for perpetrators.⁵³ The 2017 report referred to “a pattern of conflict-related sexual violence of an ethnic and sectarian nature” in the Central African Republic, with incidents perpetrated by both Seleka and anti-balaka forces, at times “aimed at humiliating or punishing the target population.”⁵⁴

An International Commission of Inquiry, tasked by the UN Security Council in December 2013 with investigating international human rights and humanitarian law violations in the conflict, reported evidence of rape, gang rape, and other forms of sexual violence at the hands of both Seleka and anti-balaka fighters between January 1, 2013, and November 1, 2014.⁵⁵ “The widespread nature of these forms of violence is undisputed,” the Commission said.⁵⁶ In July 2017, the Panel of Experts on the Central African Republic affirmed the

⁵¹ “UN expert on sexual violence in conflict wraps up visit to Central African Republic,” United Nations Radio, December 12, 2012, <http://www.unmultimedia.org/radio/english/2012/12/un-expert-on-sexual-violence-in-conflict-wraps-up-visit-to-central-african-republic/> (accessed August 17, 2017). See also: International Federation for Human Rights (FIDH), “Central African Republic: They Must All Leave or Die, investigative report no. 636a,” June 2014, https://www.fidh.org/IMG/pdf/rapport_rca_2014-uk-04.pdf (accessed August 17, 2017).

⁵² Security Council, “Conflict-related Sexual Violence: Report of the Secretary-General,” U.N. Doc. S/2015/203, March 23, 2015, http://www.un.org/en/ga/search/view_doc.asp?symbol=S/2015/203 (accessed August 17, 2017), para. 14; United Nations Security Council, Report of the Secretary-General on Conflict-related Sexual Violence, U.N. Doc. S/2016/361, April 20, 2016, <http://www.undocs.org/S/2016/361> (accessed August 17, 2017), para. 26. HRW recognizes that armed groups also perpetrate sexual violence against men and boys in armed conflict, including in the Central African Republic. However, international bodies have recognized the particular impact of conflict-related sexual violence on women and girls: “It is indisputable that, while all civilians are adversely affected by armed conflict, women and girls are primarily and increasingly targeted by the use of sexual violence, including as a tactic of war to humiliate, dominate, instill fear in, disperse and/or forcibly relocate civilian members of a community or ethnic group.” Committee on Elimination of Discrimination Against Women (CEDAW Committee), General recommendation No.30, on women in conflict prevention, conflict, and post-conflict situations, U.N. Doc. CEDAW/C/GC/30, October 18, 2013, <http://www.ohchr.org/documents/hrbodies/cedaw/gcomments/cedaw.c.g.30.pdf> (accessed August 17, 2017), para. 35.

⁵³ United Nations General Assembly, “Children and armed conflict: Report of the Secretary-General,” UN Doc. A/70/836-S/2016/360, April 20, 2016, http://www.un.org/ga/search/view_doc.asp?symbol=S/2016/360&referer=/english/&Lang=E (accessed August 17, 2017), paras. 35, 37.

⁵⁴ Security Council, “Report of the Secretary-General on Conflict-Related Sexual Violence,” U.N. Doc. S/2017/249, April 15, 2017, <http://www.undocs.org/S/2017/249> (accessed August 17, 2017), para. 20.

⁵⁵ The International Commission of Inquiry was formed under Security Council Resolution 2127 on December 5, 2013. United Nations Security Council, Resolution 2127 (2013), U.N. Doc. S/RES/2127 (2013), December 5, 2013, [https://www.un.org/en/ga/search/view_doc.asp?symbol=S/RES/2127\(2013\)](https://www.un.org/en/ga/search/view_doc.asp?symbol=S/RES/2127(2013)) (accessed August 17, 2017), para. 24.

⁵⁶ International Commission of Inquiry on the Central African Republic, Final Report, U.N. Doc. S/2014/928, Annex, Letter dated 19 December 2014 from the Secretary-General addressed to the President of the Security Council,

ongoing nature of the problem, saying that sexual and gender-based violence are “a recurrent and widespread phenomenon in the entire country.”⁵⁷

In its 2014 review of the Central African Republic, the UN Committee that monitors implementation of the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW Committee) pointed to the government’s longstanding failure to ensure non-discrimination and to address gender-based violence as contributing factors to conflict-related sexual violence.⁵⁸

The absence of systematic data collection has hindered attempts to assess the scale of the problem. The United Nations Population Fund (UNFPA), which leads the humanitarian coordination group on gender-based violence (the GBV sub-cluster) and GBV information management system, registered 11,110 cases of sexual and gender-based violence between January and December 2016, of which 2,313 constituted sexual violence. Non-state armed actors committed approximately 12.5 percent of total incidents, but the information is not disaggregated to show the number of cases of sexual violence (versus other gender-based violence) perpetrated by armed men.⁵⁹ The UN Secretary-General’s 2017 annual report on sexual violence in conflict states that MINUSCA recorded 179 cases in 2016, perpetrated by a variety of armed groups.⁶⁰ The Panel of Experts reported receiving

<http://undocs.org/S/2014/928> (accessed August 17, 2017), para. 462 and Executive Summary, p. 7. A 2014 report by the FIDH also described “unprecedented violence,” following the Seleka takeover, including killings, torture, and rape and gang rape perpetrated by both the Seleka and the anti-balaka. FIDH, “Central African Republic: They Must All Leave or Die,” investigative report no. 636a, June 2014, https://www.fidh.org/IMG/pdf/rapport_rca_2014-uk-04.pdf (accessed August 17, 2017), p. 3.

⁵⁷ Security Council, Letter dated 26 July 2017 from the Panel of Experts on the Central African Republic extended pursuant to Security Council resolution 2339 (2017) addressed to the President of the Security Council, Midterm Report of the Panel of Experts on the Central African Republic extended pursuant to Security Council resolution 2339 (2017), U.N. Doc. S/2017/639, July 26, 2017, <http://undocs.org/S/2017/639> (accessed August 17, 2017), para. 113.

⁵⁸ CEDAW Committee, “Concluding observations on the combined initial and second to fifth periodic reports of the Central African Republic,” U.N. Doc. CEDAW/C/CAF/CO/1-5, http://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?symbolno=CEDAW%2fC%2fCAF%2fCO%2f1-5&Lang=en (accessed August 17, 2017), para. 11. See also MINUSCA et al., “Central African Republic 2003-2015,” p. 207.

⁵⁹ Comité de Pilotage National et Groupe Technique de GBV-IMS, “Rapport Annuel des Incidents de VBG 2016,” http://reliefweb.int/sites/reliefweb.int/files/resources/rapport_annuel_incidents_vbg_2016_gbvimis_rca-2.pdf (accessed August 17, 2017), pp. 9, 15.

⁶⁰ Security Council, “Report of the Secretary-General on Conflict-Related Sexual Violence,” U.N. Doc. S/2017/249, April 15, 2017, para. 19. The report states that the 179 cases were “committed primarily by ex-Séléka, anti-balaka and Révolution et Justice elements and by the Lord’s Resistance Army.”

information about 59 cases of rape throughout the country between January and July 2017, but noted persistent underreporting of sexual violence.⁶¹

Data discrepancies result from multiple factors, including inconsistent definitions of “conflict-related sexual violence,” varied methods for collecting and verifying information, and differing capacities across UN and non-governmental agencies. In her July 2016 report, the UN’s Independent Expert on the Central African Republic noted that such inconsistencies point to a need for greater attention from national authorities and the international community to sexual and other gender-based violence. She expressed concern that the lack of reliable data would harm efforts to provide services for survivors and combat impunity.⁶²

Prior to the Bangui Forum on Reconciliation, Reconstruction and Durable Peace in May 2015—intended to launch initiatives on reconciliation, disarmament, and the reassertion of state control—over 200 female leaders from across the country participated in a consultation organized by the transitional government. The women identified conflict-related sexual violence as a key priority, and called for an end to impunity for perpetrators as well as greater access to justice and services for survivors.⁶³ Their first recommendation was that all parties to the conflict respect prior peace accords and “put an end to human rights violations against the civilian population, and especially sexual violence.”⁶⁴

⁶¹ Security Council, Letter dated 26 July 2017 from the Panel of Experts on the Central African Republic extended pursuant to Security Council resolution 2339 (2017) addressed to the President of the Security Council, para. 113 and Annex 8.2: Cases of Rape Reported, January to July 2017.

⁶² Human Rights Council, “Report of the Independent Expert on the situation of human rights in the Central African Republic,” U.N. Doc. A/HRC/33/63, July 22, 2016, <https://documents-dds-ny.un.org/doc/UNDOC/GEN/G16/164/08/PDF/G1616408.pdf?OpenElement> (accessed August 17, 2017), para. 71. The CEDAW Committee has also called on states to ensure standardized collection of data on incidence and prevalence of sexual and gender-based violence in all conflicts. CEDAW Committee, General recommendation no. 30 on women in conflict prevention, conflict and post-conflict situations, U.N. Doc. CEDAW/C/GC/30, November 1, 2013, http://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?symbolno=CEDAW/C/GC/30&Lang=en (accessed August 17, 2017), para. 38(d).

⁶³ Femmes Africa Solidarité, “Consultation des femmes de Centrafrique sur la paix, la réconciliation nationale et le développement durable en préparation du Forum de Bangui,” May 2015, p. 10-13.

⁶⁴ *Ibid.*, p. 10.

II. Sexual Violence against Women and Girls by Armed Groups

Both Seleka and anti-balaka fighters have committed widespread sexual violence in the ongoing Central African Republic conflict, with Human Rights Watch having documented cases that occurred as recently as May 2017. Women and girls told Human Rights Watch of sexual slavery and rape, usually by multiple perpetrators, accompanied by physical violence and acts of humiliation. Perpetrators beat women and girls, tied them up, burned them, and raped them with objects. When anti-balaka or Seleka fighters held women as sexual slaves, survivors said fighters typically raped them repeatedly for days or even months on end. The fighters also forced women and girls to do domestic work and sometimes laid claim to them as “wives.”

Survivors said that fighters sometimes forced their husbands to watch their rapes, or that their children witnessed the violence. In some cases, survivors saw armed groups torture, kill, and dismember their husbands or family members before or after the sexual violence. In one instance, a survivor said fighters raped her husband, forcing her to watch, before killing him and raping her. Multiple women and girls said fighters raped them while they were pregnant.

Women and girls frequently described armed groups using sexual violence as punishment, usually because of a perceived affiliation with a rival faction. Perpetrators often targeted women and girls on the basis of their presumed religious affiliation—using it as grounds to assume support for opposing fighters—as well as for allegedly conducting trade across sectarian lines, or because of their husbands’ or family members’ purported allegiances.⁶⁵

⁶⁵ In addition to rape and sexual slavery, Human Rights Watch documented 21 cases of abduction, harassment, and physical abuse of women and girls that did not occur in conjunction with sexual violence, though in five cases the abuse was accompanied by sexual harassment or assault (such as forced undressing). Some of the women and girls may have experienced sexual violence but chose not to discuss it. In at least six of the cases, members of armed groups abducted women and girls and demanded ransom for their release. In fifteen cases, the survivors said that anti-balaka were responsible for the attacks, and in six cases, survivors said that the perpetrators were members of the Seleka.

Human Rights Watch documented several clusters of sexual violence incidents linked to specific attacks or periods of violence, as well as isolated cases in different locations or during different time periods. The annex at the end of this report shows the location, date, and armed group with which the perpetrators of sexual violence were affiliated for each case documented. As noted above, given underreporting of sexual violence and limited access to some areas, the cases documented here do not in any way purport to be a comprehensive account of all incidents across the country, but more likely only reflect a fraction of such assaults.⁶⁶ The United Nations, for example, recorded over 2,500 cases of sexual violence in 2014 alone.⁶⁷

Sexual Slavery and Forced Labor

Since early 2013, both Seleka and anti-balaka forces have raped women and girls—often repeatedly and by multiple assailants—and also held them captive, denied them liberty, and forced them to do domestic work. Under international law, these offenses amount to sexual slavery and may be considered crimes against humanity and war crimes.⁶⁸

According to the Rome Statute of the International Criminal Court, sexual slavery occurs when a perpetrator commits at least one act of sexual violence and exerts “ownership” or control over the victim through sale, exchange, or deprivation of liberty.⁶⁹ The UN Special Rapporteur on Contemporary Forms of Slavery has noted that, as per the 1926 Slavery Convention, the right of ownership in “slavery” may be exhibited by “sexual access through rape or other forms of sexual violence.”⁷⁰

⁶⁶ United Nations Security Council, Letter dated 26 July 2017 from the Panel of Experts on the Central African Republic extended pursuant to Security Council resolution 2339 (2017), para. 113.

⁶⁷ Security Council, “Conflict-related sexual violence: Report of the Secretary-General,” U.N. Doc. S2015/203, March 23, 2015, para. 14.

⁶⁸ Rome Statute of the International Criminal Court (Rome Statute), UN Doc. A/CONF.183/9, July 17, 1998, entered into force July 1, 2002, ratified by the Central African Republic on October 3, 2001, <https://www.legal-tools.org/doc/7b9af9/pdf/> (accessed August 17, 2017); Elements of Crimes.

⁶⁹ Rome Statute, Arts. 7(g), 8.2 (b)(xxii); Elements of Crimes, arts. 7 (i)(g)-2, 8(2)(b)(xxii)-2.

⁷⁰ Systematic rape, sexual slavery, and slavery-like practices during armed conflict, Final report submitted by Ms. Gay J. McDougall, Special Rapporteur on Contemporary Forms of Slavery, U.N. Doc. E/CN.4/Sub.2/1998/13, United Nations Commission on Human Rights, Sub-Commission on Prevention of Discrimination and Protection of Minorities, fiftieth session, June 22, 1998, <http://www.refworld.org/docid/3boof44114.html> (accessed August 17, 2017), para. 27. The 1926 Slavery Convention defines slavery as “the status or condition of a person over whom any or all of the powers attaching to the right of ownership are exercised.” Slavery Convention, Geneva, September 25, 1926, entered into force on March 9, 1927, <http://www.ohchr.org/EN/ProfessionalInterest/Pages/SlaveryConvention.aspx> (accessed August 17, 2017), Art. 1.1.

Human Rights Watch interviewed 44 women and girl survivors of sexual slavery, who said that they were held captive with a total of at least 167 other women and girls who were also sexual slavery victims. In two cases, armed groups held the women and girls for over a year. Thirty-five of the 44 women and girls said that multiple men raped them repeatedly, sometimes every day. At least nine survivors became pregnant during the time they were held as sexual slaves, including girls aged 14 and approximately 16 at the time, and at least five gave birth to children from the rapes.⁷¹

Human Rights Watch documented physical and psychological abuse of women and girls held captive by both anti-balaka and Seleka fighters that may amount to torture.⁷² This included hitting women and girls with whips, tying them up for prolonged periods of time, burning them with hot plastic, and threatening them with death.

Sexual Slavery by Seleka

Human Rights Watch interviewed at least 18 survivors of sexual slavery who were taken by Seleka fighters between late 2013 and mid-2017.⁷³ Fourteen incidents occurred in and around Bambari, including eight cases during or just after an assault on the town in June 2014 (see “Sexual Slavery by Seleka fighters in Bambari”).⁷⁴ Three of the survivors gave birth to babies conceived while they were held as sexual slaves.

Human Rights Watch also documented Seleka forces holding a woman as a sexual slave in Bangui, another near Baoro, another near Bossangoa, and another in Kaga-Bandoro.

Women and girls subjected to sexual slavery described recurring sexual violence and forced labor. Victoire, 39, told Human Rights Watch that Seleka fighters took her and four other women to a camp in Bambari in mid-2014. She said that during the month she spent there, multiple fighters raped the women and the fighters’ commander took her as his “wife”:

⁷¹ Some survivors had not had pregnancy tests at the time of their interviews with Human Rights Watch, and had not yet determined definitively whether they had become pregnant while held as sexual slaves.

⁷² Rome Statute; Elements of Crimes, Art. 7(1)(f), “Crime against humanity of torture,” p. 7.

⁷³ In two cases, survivors did not wish to or were unable to complete interviews and thus Human Rights Watch was unable to confirm whether rapes committed by Seleka fighters amounted to sexual slavery.

⁷⁴ The attack occurred after a Seleka assault on the nearby town of Liwa set off a cycle of reprisal attacks between anti-balaka and Seleka. “Central African Republic: Sectarian Violence Escalating,” Human Rights Watch news release, July 15, 2014, <https://www.hrw.org/news/2014/07/15/central-african-republic-sectarian-violence-escalating>.

They [the Seleka] were many. Each one took us turn by turn. Each one raped us each day, one by one.... The chief came, saw me, took me and put me to the side. After that, he raped me, every day. If he didn't go out [of the camp] he would do it to me three times in a day.... [When] they demanded sex from a woman, if she refused, they hit her, beat her.⁷⁵

Sophie, 22, said that two different groups of Seleka fighters held her as a sexual slave in separate incidents. After the Seleka burned down her family home in Bambari around June 2014, Sophie fled into the bush with four other young women. She described how Seleka fighters caught the group and kept them captive in the forest:

They gave us work to do. Sometimes preparing food, doing the laundry. Sometimes when you were preparing food they would come and three of them would rape you. They did that three or four times a day, several men—different men.... All five girls were raped like this.⁷⁶

The young women escaped a week later, but after two months in a village, another group of Seleka caught them. “Four of them took me and threw me on the ground. They started taking turns raping me,” Sophie said. She said she saw the Seleka push pieces of wood into the vaginas of two young women who refused to sleep with them, killing the women. For three days, she said, Seleka fighters repeatedly raped her and the other surviving women and forced them to prepare food and draw water. She said that at least 12 fighters raped her during that time.⁷⁷

Some women told Human Rights Watch that Seleka fighters targeted them because of their religion. Denise, 20, said that Seleka fighters seized her in December 2014 while she was going to buy vegetables in Bangui's Boeing neighborhood. The Seleka said, “You are a woman of a balaka,” and insulted her for being Muslim. Four fighters raped her and tied her to a tree, she said, before bringing her to a compound in the Ramandji neighborhood where they held her for two days with 10 other women they had taken from Boeing and raped.⁷⁸

⁷⁵ Human Rights Watch interview with Victoire, Bangui, April 24, 2016.

⁷⁶ Human Rights Watch interview with Sophie, Bangui, April 25, 2016.

⁷⁷ Ibid.

⁷⁸ Human Rights Watch interview with Denise, Bangui, December 11, 2015.

The Seleka also targeted women and girls because of their families' perceived support for the anti-balaka. Noelle, 25, said that Seleka fighters found the family in their fields about 25 kilometers from Baoro on the Baoro–Bangui road in December 2013, and accused her brother, who sold bullets, of providing ammunition to anti-balaka forces. "They tied up me and my sister-in-law," she said. "They started to torture us with the butts of their guns. They hit us on the head and stomped on us with their feet.... The five who took us started to rape me, all five of them."⁷⁹

Sexual Slavery by Seleka in Bambari

Since June 2014, multiple attacks in and around Bambari, the capital of the Ouaka province, have led to mass civilian displacement as well as injury and death. By June and July 2014, control of Bambari was split between rival Seleka forces that would eventually become the RPRC (*Rassemblement Patriotique pour le Renouveau de Centrafrique*), led by Gen. Joseph Zoundeko, who was installed as the military commander of the then-unified Seleka in May 2014, and the Union for Peace in the Central African Republic (UPC), which Gen. Ali Darassa Mahamant created in September 2014 with himself as president and commanding general.⁸⁰ The UPC retains control of parts of the Ouaka province. Darassa's UPC repeatedly targeted civilians they believe to be allied or affiliated with the anti-balaka.⁸¹

On June 9, 2014, Seleka fighters and ethnic Peuhl attacked Liwa, a predominantly Christian village 10 kilometers south of Bambari. Witnesses and victims' family members told Human Rights Watch that fighters shot and hacked people to death as they tried to escape. The entire village of 169 homes was destroyed.⁸²

⁷⁹ Human Rights Watch interview with Noelle, Bangui, January 26, 2016.

⁸⁰ Gen. Joseph Zoundeko was killed when MINUSCA forces opened fire on FPRC forces in February 2017 after FPRC troops had crossed a "red line" established by MINUSCA to separate FPRC and UPC troops and protect civilians. "Central African Republic: Executions by Rebel Group," Human Rights Watch news release, February 16, 2017, <https://www.hrw.org/news/2017/02/16/central-african-republic-executions-rebel-group>.

⁸¹ Human Rights Watch, *Killing Without Consequence*, pp. 15-17. Gen. Ali Darassa and the UPC left Bambari in early 2017, after MINUSCA demanded that they depart the area, and established a base in Alindao, in the Basse-Kotto province. See also Section I. Background – Violence in the Central African Republic and Section II. Sexual Violence Against Women and Girls by Armed Groups – Rape by Seleka in Basse-Kotto, 2017.

⁸² "Central African Republic: Sectarian violence Escalating," Human Rights Watch news release, July 15, 2014, <https://www.hrw.org/news/2014/07/15/central-african-republic-sectarian-violence-escalating>.

The assault on Liwa set off a cycle of reprisal attacks in neighboring communities, culminating in Seleka attacks on Christian neighborhoods in Bambari in late June that left at least 32 dead.⁸³ On July 7, Seleka fighters attacked Bambari's Saint Joseph's Parish, where thousands of displaced had taken shelter, killing at least 27 people.⁸⁴

Human Rights Watch documented 14 cases in which Seleka fighters held women as sexual slaves in and around Bambari between late 2013 and late 2015. Seven survivors told Human Rights Watch that Seleka took them from the Kidigra neighborhood in Bambari during attacks in late June and early July 2014, and one said she was held by Seleka in that neighborhood.

The Seleka held the women, then aged between approximately 20 and 73, for periods ranging from three days to over a year. Survivors said that at least 89 other women and girls held with them also endured sexual violence and forced work. All of the women were raped by multiple men, often repeatedly on different days. Two survivors described how streams of various fighters raped them when they rotated through the bases where the women were held. One told Human Rights Watch that on her first day in captivity, about 15 men raped her and four other women.⁸⁵

Jeanne, 30, said that a group of 20 Seleka caught her and nine other women and girls—some as young as 16—as they fled when the Kidigra neighborhood came under attack in June 2014. She said the Seleka held her at a base for six months:

The first day, five Seleka raped me. Every day we could not rest—every day there was rape, by different fighters.... We became their wives. Each fighter who arrived at the base, it was to rape us. If we refused, they hit us.... I went to look for firewood. I drew water, looked for water at the river, prepared their food. All of the women did this. All the women were raped each night.⁸⁶

⁸³ For more see “Central African Republic: Sectarian Violence Escalating,” Human Rights Watch news release, July 15, 2014, <https://www.hrw.org/news/2014/07/15/central-african-republic-sectarian-violence-escalating>. The Liwa area continues to be a flashpoint for violence in the Ouaka province. For more see “Dispatches: Central African Republic's Biggest Challenge,” Human Rights Watch dispatch, March 17, 2016, <https://www.hrw.org/news/2016/03/17/dispatches-central-african-republics-biggest-challenge>.

⁸⁴ “UN in Central African Republic condemns attack on civilians sheltering in church,” UN News Centre press release, July 9, 2014, <http://www.un.org/apps/news/story.asp?NewsID=48234#.V-uVlVl97lW> (accessed August 17, 2017).

⁸⁵ Human Rights Watch interview with Anne, Bangui, April 24, 2016.

⁸⁶ Human Rights Watch interview with Jeanne, Bangui, May 9, 2016.

Five of the women and girls became pregnant, but had no means to terminate the pregnancies, Jeanne said. “In the bush, what could they do?” Jeanne asked. “They had to keep the pregnancy. The Seleka didn’t react. They still raped the pregnant women.”⁸⁷

Other survivors also found that pregnancy did not shield them from sexual violence. Angèle, 27, became pregnant and gave birth to a child as a result of repeated rape after Seleka fighters took her near Bambari in June 2014 and held her in sexual slavery for nine months with five other women and girls. She said the Seleka “considered us like their wives”:

[At the base] we prepared the food. If we didn’t prepare it very well, they hit us with the butts of their guns. They [also hit us with] whips they used for horses.... During the day, they did it [rape] one time. At night, it was another [fighter] who would call us. We would think it was to prepare the tea, but it was to rape us.⁸⁸

Angèle said that the Seleka fighters raped her vaginally and anally, and continued to do so during her pregnancy. “They said we are their slaves,” she recalled.⁸⁹

In some cases, survivors said that they watched Seleka fighters kill their family members. Christine, 63, said the Seleka murdered her husband and subjected her to sexual and physical violence in June 2014 as the couple fled the Kidigra neighborhood in Bambari:

Those who raped me, I don’t know their number exactly. I tried to scream but they shut my mouth with their hands and started to rape me one by one. When I said I was tired, they didn’t care. They started to punch me. When they finished raping me, they took the cloth off [that they had used to cover] my eyes. They showed me the corpse of my husband. They had cut his throat.⁹⁰

⁸⁷ Ibid.

⁸⁸ Human Rights Watch interview with Angèle, Bangui, May 9, 2016.

⁸⁹ Ibid.

⁹⁰ Human Rights Watch interview with Christine, Bangui, May 8, 2016.

Christine said the Seleka held her for five days with young girls whose ages she did not know.⁹¹

Girls were also subjected to sexual slavery. Martine, 32, said that Seleka fighters took her and around 19 others, including girls, during the July 2014 attack on St. Joseph's Parish and held them in the bush near Bambari for two weeks. "There were young girls [who were] 12 years old," she said. "We spent a week with ropes around our feet and hands.... They untied us to have sex. Then, after they finished, they tied us up again.... There were four or five different people [raping us] each day."⁹²

Henriette, 50, told Human Rights Watch that in June 2014, around 15 Seleka fighters broke into her home in the Kidigra neighborhood, raped her, and held her and her 6-year-old daughter captive. "Nearly 10 of them raped me," she said. "In the bush I became their domestic worker, drawing water. I was there with my youngest daughter. They gave her little jerry cans also to draw water."⁹³

Human Rights Watch also documented 22 cases of rape without sexual slavery committed by Seleka and Seleka-Peuhl fighters in and around Bambari between December 2013 and December 2015 (see "Rape by Seleka in Liwa and Bambari"). The Seleka and UPC, under the command of Darassa as their local leader, maintained control of large parts of the Ouaka province, including Bambari, from the start of the crisis until January 2017.

In June 2014, General Zoundeko told Human Rights Watch that no Seleka fighters took part in fighting in Liwa or Bambari.⁹⁴

In a September 2014 meeting with Human Rights Watch, Ali Darassa denied that his men were involved in any fighting around Bambari in June and July 2014.⁹⁵ While some reports indicate that Darassa was not in control of all armed Peuhl in Bambari in mid-2014, multiple witnesses to the attack on St. Joseph's church told Human Rights Watch that they

⁹¹ Human Rights Watch interview with Christine, Bangui, May 8, 2016.

⁹² Human Rights Watch interview with Martine, Bangui, December 5, 2015.

⁹³ Human Rights Watch interview with Henriette, Bangui, May 8, 2016.

⁹⁴ Human Rights Watch interview with Gen. Joseph Zoundeko, Bambari, June 25, 2014.

⁹⁵ Human Rights Watch interview with Gen. Ali Darassa Mahamant, Bambari, September 6, 2014.

recognized men they understood to be under Darassa’s control among the attackers.⁹⁶ In January 2016, Darassa told Human Rights Watch that all of his fighters are aware that certain actions, including sexual violence, are crimes under international law, and that they have never committed rape. He said: “Our fighters are known by everyone. We have never received any complaints [of rape], so one can say that the fighters respect the law.”⁹⁷

Sexual Slavery by Anti-Balaka

Human Rights Watch interviewed 26 women and girls who were held as sexual slaves by anti-balaka between December 2013 and April 2016, primarily in Bangui and Boda. Like those who suffered sexual slavery by the Seleka, the survivors described repeated rapes, often by multiple assailants, as well as beatings, humiliation, and being taken as fighters’ “wives.”⁹⁸

Anti-balaka held five females, including girls as young as 12, as sexual slaves in and around Boda, about 100 kilometers west of Bangui, where the anti-balaka had a well-known base near the Catholic mission (see “Rape by Anti-Balaka in and around Boda”). Human Rights Watch also documented cases in which the anti-balaka held six women and girls as sexual slaves in Bangui, two near Yaloké, and another in Bambari, and captured three women on the Oubangui River between Mobaye and Bangui, another on the road to Mbaïki, and another on the Bouar road near Baoro, all of whom they then held as sexual slaves.⁹⁹

The length of survivors’ captivity ranged from a few days to well over a year. Amira, 16, said that anti-balaka held her near Yaloké, in the Ombella-M’poko province, for 18 months beginning around February 2014, along with two other Muslim women who suffered similar abuse, one of whom was pregnant at the time.¹⁰⁰ Amira described how

⁹⁶ UN Panel of Experts on the Central African Republic, Final Report of the Panel of Experts on the Central African Republic, October 29, 2014, published in Letter dated 28 October 2014 from the Panel of Experts on the Central African Republic established pursuant to Security Council Resolution 2127 (2013) addressed to the President of the Security Council, S/2014/762, para. 58; Human Rights Watch interviews with survivors, Bambari, September 5, 2014.

⁹⁷ Human Rights Watch interview with Gen. Ali Darassa, Bambari, January 17, 2016.

⁹⁸ See also, MINUSCA et al., “Central African Republic 2003-2015,” pp. 221-222.

⁹⁹ In April 2015, Human Rights Watch documented cases in which the anti-balaka held two sisters in sexual slavery for 14 months in the southwestern village of Pondo, near Yaloké, in the Ombella-M’poko Province. “Central African Republic: Muslims Held Captive, Raped,” Human Rights Watch news release, April 22, 2015, <https://www.hrw.org/news/2015/04/22/central-african-republic-muslims-held-captive-raped>.

¹⁰⁰ Human Rights Watch interview with Amira, Bangui, December 6, 2015.

the anti-balaka hit her with a whip and a machete, subjected her to repeated gang rape, and made her do housework:

They raped me. Four of them. They did it again every night, always the four of them.... They also hurt me physically. Always with the whips, they hit me. There was forced labor. They made me draw water, prepare the food to eat, do the dishes. They talked about me as their wife.¹⁰¹

Virginie, 16, and Patricia, 22, said in separate interviews that anti-balaka abducted them individually while they were selling cassava leaves at a market in Bangui in April 2016 and brought them to a nearby base. Virginie said that anti-balaka held her there for five days, during which time they raped her, hit her with a whip, and punched her when she cried:

They could have sexual relations five times a day if their commander left. The same three men [raped me] during the night. When I slept deeply they did it also—once per person—and [then] they left me. They did this all five days.¹⁰²

Patricia said that two anti-balaka fighters raped and beat her at the base for two days. When she tried to flee, the anti-balaka caught her, tied her up, and left her overnight.¹⁰³

Like Seleka fighters, members of the anti-balaka targeted women because of their presumed religious affiliation or that of their relatives. Leila told Human Rights Watch that anti-balaka took her near Baoro in April 2016 because her husband is Muslim. “They cut my breast, put a knife to the throat of my baby and said they would kill him because my husband is Muslim and the baby is Muslim,” she said.¹⁰⁴ Leila said the anti-balaka held her for two days with nine other women and girls, raping them repeatedly in front of each other.¹⁰⁵

Rachida, 25, said that anti-balaka took her hostage as she exited the Muslim PK5 neighborhood in Bangui to sell vegetables in August 2015. She said they held her for three

¹⁰¹ Ibid.

¹⁰² Human Rights Watch interview with Virginie, Bangui, May 6, 2016.

¹⁰³ Human Rights Watch interview with Patricia, Bangui, May 5, 2016.

¹⁰⁴ Human Rights Watch interview with Leila, Bangui, May 6, 2016.

¹⁰⁵ Ibid.

weeks at St. Denis Church in the third arrondissement towards the Kattin neighborhood, raping her repeatedly and accusing her of fraternizing with Muslims:

Each day, four men came to have sex with me in the morning. Then five men at 3:00 p.m. and again at 7:00 p.m. In the morning four men, in the afternoon and evening, the commander plus four men.... They said, “You look like a Christian girl. You sell your sex to Muslims. Today you will see.”¹⁰⁶

Rachida said the anti-balaka held four other young women with her in the church and raped each of them three times a day. She said the men killed one of the women. “They dug a grave and they put her in it, alive,” she said.¹⁰⁷ At the time of her interview with Human Rights Watch, Rachida was pregnant due to the rapes.

Many survivors said that, like the Seleka, the anti-balaka referred to women and girls in captivity as “wives.” Caroline was around 17 years old when 15 anti-balaka fighters took her and four others to a base in Boboua village, near Boda on the road to Mbaïki, in late 2013, where they were already keeping more than 10 young girls, and raped them all. “They said we killed their relatives so they’ll take us for marriage and we’ll become their own wives,” Caroline recalled.¹⁰⁸

Human Rights Watch interviewed eleven girls who were between the ages of 13 and 17 when anti-balaka fighters held them as sexual slaves; they said that at least 20 other girls were held with them, some as young as 12.¹⁰⁹ Thérèse, 14, said that she and her younger sister were returning to Boda in early 2014 after collecting cassava when anti-balaka fighters captured them, brought them to their base, and held them for two days with eight older girls. Thérèse described how the anti-balaka accused them of providing food to Muslims and raped them:

¹⁰⁶ Human Rights Watch interview with Rachida, Bangui, December 4, 2015.

¹⁰⁷ Ibid.

¹⁰⁸ Human Rights Watch interview with Caroline, Boda, April 28, 2016.

¹⁰⁹ Because survivors could not always confirm the ages of others held with them as sexual slaves, in some cases it is not possible to confirm whether they were women or girls.

I was 13, my sister was 12. They took me and my sister, took off our clothes, threw us on the ground and started to rape us.... They said, “We are suffering because of you, because you take the cassava and sell it to the Muslim community—you are traitors.” There were four anti-balaka. Among the four, three raped us.¹¹⁰

In some cases, anti-balaka fighters appeared to hold women for domestic servitude. In separate interviews, Joséphine, 40, and Annette, 27, said that anti-balaka captured them and another woman in March 2016 as they were returning to Bangui by river from the market in Mobaye. The anti-balaka stopped their boat, demanded payment, and took their merchandise before forcing the women to walk several hours into the bush and holding them for four days. Annette explained how the anti-balaka abused the women and used them for domestic work:

The men said, “We brought you here to prepare food for us because out here in the bush we don’t have anyone to do that work for us.” When we arrived, they started to beat us. They took a cord and tied my knees together. They then started to tie my hands behind my back. I started to cry out and they hit me in the face with the butt of a gun. The hit knocked my two front teeth out. I was shocked after the blow and a man ripped my clothes off. I started to bleed out of my mouth a lot.... [One of the men] pulled the cord off my legs, but my hands were still tied behind my back. He then raped me.¹¹¹

Annette, who was missing her two front teeth when she spoke with Human Rights Watch, said she also saw three of the fighters stuff the other women’s mouths with cloth and rape them. The anti-balaka forced the two uninjured women to do domestic work and raped Joséphine repeatedly. “I became their wife,” Joséphine said. “They said with their own mouths that it had been a long time since they had had the chance to rape a woman.”¹¹²

¹¹⁰ Human Rights Watch interview with Thérèse, Boda, April 29, 2016.

¹¹¹ Human Rights Watch interview with Annette, Bangui, May 5, 2016.

¹¹² Human Rights Watch interview with Joséphine, Bangui, May 6, 2016.

Human Rights Watch documented cases in which multiple survivors identified three known anti-balaka leaders as those perpetrating or commanding perpetrators of sexual violence: Rodrique Ngaïbona, alias Andilo (see “Sexual Slavery by Anti-Balaka Under Rodrique Ngaïbona, alias Andilo”); Alfred Yékatom, alias Rombhot; and François Wote.

Sexual Slavery by Anti-Balaka Under Rodrique Ngaïbona, alias Andilo

In separate interviews, five survivors named Andilo, the alias of Rodrique Ngaïbona, as the fighter or commander of the fighters who raped them. Fighters under Andilo’s command participated in anti-balaka counteroffensives in 2014, including active combat with the Seleka around Andilo’s hometown of Batangafo in the Ouham province and in Bangui’s Boy-Rabe neighborhood. In 2014, the UN Panel of Experts named him “the most enigmatic, feared and powerful military commander of the anti-balaka.”¹¹³ The national prosecutor issued a warrant for his arrest in May 2014. After MINUSCA peacekeepers detained him on January 17, 2015, in Bouca, about 195 miles north of Bangui, Andilo’s men undertook a series of high-profile kidnappings, demanding his release.¹¹⁴

At time of writing, Andilo is held in Camp de Roux detention center in Bangui, a facility for detainees designated as extremely dangerous. He had not been formally charged or put on trial, despite reaching the pre-trial detention limits prescribed by Central African law.¹¹⁵

¹¹³ United Nations Security Council, Letter dated 28 October 2014 from the Panel of Experts on the Central African Republic established pursuant to Security Council resolution 2127 (2013) addressed to the President of the Security Council, U.N. Doc. S/2014/762, October 29, 2014, <http://reliefweb.int/sites/reliefweb.int/files/resources/N1453897.pdf> (accessed August 17, 2017), para. 79.

¹¹⁴ In January 2015, immediately following Andilo’s arrest, his men kidnapped a French national and a Central African priest and demanded Andilo’s release. The anti-balaka released the hostages on January 23, but two days later Andilo’s men kidnapped Arnel Sayo, a former rebel leader and the minister of youth and sport. The group demanded Andilo’s release and a sum of 4 million central African francs (about US\$6,669). They released Sayo on February 11 without receiving any payment. “Central African Republic: UN mission captures militia leader in high-profile arrest,” UN news release, January 19, 2015, <http://www.un.org/apps/news/story.asp?NewsID=49840#.WVlxuyvylU> (accessed August 17, 2017); “UN worker kidnapped in Central African Republic released,” France 24, January 20, 2015, <http://www.france24.com/en/20150120-un-peacekeeper-kidnapped-central-africa-republic-released> (accessed August 17, 2017); “RCA: qui est Andilo, l’homme réclamé par les preneurs d’otages?,” RFI Afrique, January 22, 2015, <http://www.rfi.fr/afrique/20150122-rca-centrafrique-andilo-portrait-otages-therese-claudia-priest-frere-gustave> (accessed August 17, 2017); “RCA: le ministère des Sports, l’ex-rebelle Arnel Sayo, est libre,” RFI, February 11, 2015, <http://www.rfi.fr/afrique/20150211-rca-le-ministre-sports-ex-rebelle-arnel-sayo-libere> (accessed August 17, 2017).

¹¹⁵ Human Rights Watch meeting with judicial official, Bangui, April 11, 2017. For more see Amnesty International, “The Long Wait for Justice,” p. 19.

Four survivors told Human Rights Watch they were traveling to sell goods in mid-2014 when anti-balaka stopped their vehicles north of Bangui.¹¹⁶ Three of the four women said they saw and recognized the group’s leader as Andilo; one said she was taken as Andilo’s “wife.”

Sabine, 43, was traveling with a group including her husband when anti-balaka fighters stopped their vehicle. She said that Andilo and the other fighters—who referred to Andilo as “chief”—called the women’s husbands “Muslim criminals” before slitting her husband’s throat and tying her up.¹¹⁷ Three of the anti-balaka raped her and brought her to their base, Sabine said, where Andilo took her as his “wife” and subjected her to sexual slavery for nearly seven months. She explained:

He told me if I don’t have sex with him he would kill me. He did it every day. If he wasn’t tired, it was multiple times a day. If I said I was tired, he would hit me. When he went out to go somewhere and he spent three or four days out of the base, I could rest. But when he came back, [resting] was finished. It was like that all six to seven months.... I couldn’t do anything but give in.¹¹⁸

The anti-balaka also stopped Zara and Prudence, both 28, with Sabine. Prudence said that she saw Andilo give the other fighters orders after they had stopped the vehicles. Zara said that approximately 30 anti-balaka held the women at gunpoint and accused them of supporting the Seleka. “They said to us, ‘All the merchandise that you buy is to resell to the Seleka and when they have eaten, they are going to come with force and kill us all with our families,’” Zara said.¹¹⁹ Prudence also recalled how the anti-balaka claimed the women were feeding the opposition, saying, “It’s you who are nourishing the Seleka.”¹²⁰ The anti-balaka accused the women of hiding money in their genitals, and raped and physically abused them, Zara said. She showed Human Rights Watch scars above her breast where she said they burned and cut her. She explained:

¹¹⁶ Month and precise location of the attack withheld for security of the survivors.

¹¹⁷ Human Rights Watch interview with Sabine, Bangui, May 6, 2016.

¹¹⁸ Ibid.

¹¹⁹ Human Rights Watch interview with Zara, Bangui, April 30, 2016.

¹²⁰ Human Rights Watch interview with Prudence, Bangui, April 30, 2016.

They said, “Get out the money that’s in your vagina,” and they started to cut our bodies with a knife. [They cut me] on the chest, on my knees.... Two men raped me, one after the other, in the vagina. One did it twice. When one left, I lost consciousness. They took water and poured it on me to wake me up. I don’t know what happened after that. When I woke up, I was soaking wet and I was in the mud.... I didn’t have the strength to get up off the ground. My body was all soaked in blood from where they cut it.¹²¹

Zara said the anti-balaka released her after two days while Prudence said the fighters held her for six months. Prudence said that, during her captivity, she saw Andilo come and go at the base, and that two fighters under his control took her as a “wife.”¹²²

Noémie, 26, who was captured with Zara, Prudence, and Sabine in July 2014 and held as a sexual slave for seven months, also said that she saw Andilo at the base and that he commanded the anti-balaka fighters who held them with about 12 other women. She said two different anti-balaka fighters raped her up to three times a day, with one taking her as his “wife,” and tortured her. “They would hit me with a whip used on cows,” she said. “The colonel would shoot his gun in front of my face and tell me to admit that I was going to sell things to the Seleka.”¹²³

Noémie said that she tried to escape at one point, but the anti-balaka fighters caught her, beat her severely, and melted plastic on her.¹²⁴ She showed Human Rights Watch scars consistent with burns. Noémie became pregnant in captivity and the anti-balaka released her when she was five months pregnant. She does not know who fathered her daughter, 11 months old at the time of the interview, and cried as she said, “When I look at the baby, I think of the violence that was done to me.”¹²⁵

A fifth survivor also said that an anti-balaka fighter under Andilo’s command took her as his “wife” and raped her repeatedly around October or November 2015. Béatrice, 18, said

¹²¹ Human Rights Watch interview with Zara, Bangui, April 30, 2016.

¹²² Human Rights Watch interview with Prudence, Bangui, April 30, 2016.

¹²³ Human Rights Watch interview with Noémie, Bangui, April 26, 2016.

¹²⁴ Ibid.

¹²⁵ Ibid.

that the fighter killed some of her relatives and then said, “I am going to take you as a wife and if you refuse I will kill you.”¹²⁶

The fighter raped Béatrice four times in 24 hours and told her to come with him to his hometown. When he left her in the house, she escaped into the bush. She became pregnant from the rape, and wanted to terminate the pregnancy but did not know how to get an abortion and had not accessed medical care when she spoke with Human Rights Watch.¹²⁷ Béatrice’s attacker later ran unsuccessfully for parliamentary deputy of Bouca in the national elections in January 2016.¹²⁸

In one case, a survivor told Human Rights Watch that anti-balaka fighters made her a sexual slave out of vengeance for the earlier arrest of their commander, Alfred Yékatom, alias Rombhot. A master corporal in the national army before the conflict, Rombhot promoted himself to “colonel” when he became a key anti-balaka leader in 2013. On June 23, 2014, Sangaris troops arrested Rombhot, but released him shortly thereafter. On August 20, 2015, Rombhot was added to the United Nations Security Council Committee’s sanctions list for undermining national peace and security by “engaging in or providing support for acts ... that threaten or impede the political transition process ... or that fuel violence.”¹²⁹

One sexual slavery survivor told Human Rights Watch that she and five other women and girls were held, repeatedly raped, and forced to work for three days in April 2016 by men who said they were under Rombhot’s command. Alice said that anti-balaka fighters stopped the vehicle she was riding in with her husband on the Mbaïki–Bangui road, near Rombhot’s home town of Mbaïki, where he is known to operate a base. “They said they are fighters of Rombhot,” Alice said. “Because Rombhot was arrested, [the men said] if they see people on the road they will hurt them.”¹³⁰

¹²⁶ Human Rights Watch interview with Béatrice, Bangui, January 13, 2016.

¹²⁷ See Section III. Impact of Sexual Violence: Unwanted Pregnancy.

¹²⁸ Campaign poster on file with Human Rights Watch.

¹²⁹ “Security Council Committee Concerning Central African Republic Lists One Entity, Three Individuals Subject to Measures Imposed by Resolution 2196 (2015),” UN Security Council press release, SC/12018, August 20, 2015, <http://www.un.org/press/en/2015/sc12018.doc.htm> (accessed August 17, 2017); Security Council Committee Established Pursuant to Resolution 2127 (2013) Concerning the Central African Republic, Narrative Summaries of Reasons for Listing, CFI.004 Alfred Yékatom, <https://www.un.org/sc/suborg/en/sanctions/2127/materials/summaries/individual/alfred-yekatom> (accessed August 17, 2017).

¹³⁰ Human Rights Watch interview with Alice, Bangui, May 6, 2016.

Alice said the anti-balaka brought her to a base where she was held with five other women and girls, some around 15 years old. “They said if I try to flee they were going to kill me,” she said. “I was raped for two days. On the second day, two of them continued to rape me. The two did it one by one in the morning, and one by one in the evening.”¹³¹ She said the anti-balaka fighters also hit the women and girls with belts and forced them to wash clothes and cook until they escaped after three days.

In January 2016, Rombhot won the parliamentary seats representing Mbaïki in Lobaye province. The United Nations Panel of Experts cited evidence of Rombhot “intimidating voters and harassing political competitors in his constituency,” but national authorities could not stop his candidacy or invalidate the election results because no national warrant had been issued for his arrest and he had not been convicted of any crime.¹³² Despite remaining on the UN Security Council Committee’s sanctions list, Rombhot has retained his parliamentary seats. The addition of sexual violence as a criterion for UN sanctions designation in January 2017 could provide clear rationale for retaining Rombhot on the sanctions list, regardless of whether he is perceived to be playing a constructive role politically. Introduction of vetting procedures for public office holders could force him to forgo his parliamentary seats, and would prevent those who have participated in or tolerated conflict-related sexual violence by those under their command from taking office.

In April 2015, Human Rights Watch documented the case of two Peuhl sisters held as sexual slaves for 14 months in 2014-2015 by anti-balaka fighters under the command of François Wote in the southwestern village of Pondo, near Yaloké, in the Ombella-M’poko Province.¹³³ During research for this report, Human Rights Watch documented two additional cases in which anti-balaka fighters held a 16-year-old girl and a 27-year-old woman separately near Yaloké.

¹³¹ Ibid.

¹³² The Panel of Experts report goes on to note that “the Panel considers that possible salary payments to Yékatom resulting from his seating in parliament are violations of the asset freeze, similar to his salary payments as an army officer. Through various channels, the Committee and the Panel have duly informed the authorities of the Central African Republic.” UN Panel of Experts on the Central African Republic, Midterm Report of the Panel of Experts on the Central African Republic, August 11, 2016, published in Letter dated 9 August 2016 from the Panel of Experts on the Central African Republic established pursuant to Security Council Resolution 2262 (2016) addressed to the President of the Security Council, S/2016/694, para. 23.

¹³³ “Central African Republic: Muslims Held Captive, Raped,” Human Rights Watch news release, April 22, 2015, <https://www.hrw.org/news/2015/04/22/central-african-republic-muslims-held-captive-raped>.

Amira, 16, and also Peuhl, said that anti-balaka held her captive for 18 months beginning around February 2014, though she did not identify them specifically as Wote’s men. Amira described how the anti-balaka hit her with a whip and a machete, injuring her back, subjected her to repeated gang rape, and made her do household work. “They raped me. Four of them. [T]hey did it again every night, always the four of them,” she said.¹³⁴ When they released her, she said, she discovered she was pregnant from the repeated rapes.

Amira told Human Rights Watch that the anti-balaka held two other Muslim women at the house, one of whom was pregnant. She said that they beat the pregnant woman severely, and that the woman confided that the anti-balaka had raped her as well.¹³⁵

François Wote, an anti-balaka commander in Pondo, near Yaloké, from 2014 to May 2015, reported to Guy Wabilo, the zone commander of the Gadzi region. In May 2015, Wabilo told Human Rights Watch that he knew Wote was committing sexual slavery in Pondo. “Yes, they [the Peuhls] were there for 14 months and the women were raped by François Wote,” Wabilo said.¹³⁶ Wabilo also said that Wote was under the command of Patrice-Edouard Ngaïssona, one of several Central Africans who claim leadership of the anti-balaka.¹³⁷

Rape

In the current conflict, both the Seleka and the anti-balaka armed groups have committed rape during targeted attacks on neighborhoods and villages and used rape to punish and terrorize women and girls as they performed daily tasks, such as going to and from markets and seeking food or firewood. Other violence against family members, including killings and dismemberment, accompanied rapes that Human Rights Watch documented, and perpetrators often committed rape in front of victims’ family members.

Rape by Seleka

The Seleka committed widespread rape in Bangui, particularly in conjunction with attacks in April 2013 and December 2013 and again during an outbreak of violence between

¹³⁴ Human Rights Watch interview with Amira, Bangui, December 6, 2015.

¹³⁵ Ibid.

¹³⁶ Human Rights Watch interview with Guy Wabilo, Gadzi, May 24, 2015.

¹³⁷ Ibid.

September and November 2015, as well as in and around the towns of Bambari and Kaga-Bandoro. Seleka fighters often perpetrated rape during searches for men and boys, and used sexual violence as punishment for perceived allegiance to the anti-balaka.

Human Rights Watch documented 168 cases of rape by Seleka and affiliated fighters that occurred between March 2013 and May 2017, most of which involved multiple perpetrators. These include: 72 cases of rape by Seleka fighters in Bangui (22 cases during the Seleka takeover in December 2013 and 10 cases during the April 2013 attack on the Boy-Rabe neighborhood); 21 cases in and around Kaga-Bandoro; 19 in and around Bambari; 11 in Alindao; 7 in Mbrès; 3 in Botto; 2 in Yaloké/Pondo; 2 in Batangafo; and 2 in Bossangoa.¹³⁸ An additional four rape survivors identified their attackers as Peuhls, seven identified them as Mbororo, and three as Muslim fighters.

Many survivors told Human Rights Watch that Seleka fighters raped them during armed attacks on their communities. Often, the fighters were seeking men during door-to-door raids and used rape as punishment for allegedly sympathizing with or hiding anti-balaka fighters.

Rape by Seleka in Basse-Kotto, 2017

Seleka UPC fighters, under the command of Gen. Ali Darassa, engaged in acts of sexual violence against civilians, including rapes of both men and women, in Basse-Kotto province during attacks on local communities in May 2017.

On May 9, UPC fighters and local Muslims attacked Alindao, targeting the Paris-Congo and Banguiville neighborhoods. Local sources told Human Rights Watch that sightings of anti-balaka in these areas were most likely the reason for the attacks. Survivors and witnesses described how UPC fighters conducted door-to-door searches of homes, looking for men to kill and, in some instances, women or girls to rape. UPC fighters and local Muslims killed

¹³⁸ This includes five cases in which survivors identified perpetrators as Seleka-Peuhl. For more on December 2013 attacks by Seleka and anti-balaka in Bangui see Amnesty International, “Central African Republic: War crimes and crimes against humanity in Bangui,” December 19, 2013, <https://www.amnesty.org/en/latest/news/2013/12/central-african-republic-war-crimes-and-crimes-against-humanity-bangui/> (accessed August 17, 2017); “Civilians deliberately targeted in large-scale killings in Central African Republic,” United Nations Human Rights Office of the High Commissioner, news release, January 17, 2014, <http://www.ohchr.org/EN/NewsEvents/Pages/Civiliansdeliberatelytargetedinlarge-scalekillingsinCAR.aspx> (accessed August 17, 2017). For more on Seleka attacks around Kaga-Bandoro and Mbres, see Human Rights Watch, *I Can Still Smell the Dead*.

at least 136 civilians in the attack on Alindao that began on May 9, which set off a cycle of revenge attacks that spread to the Zangba and Mobaye sub-prefectures throughout May. Attacks in Alindao continued later in 2017; in August, fighters killed at least 32 civilians as they tried to leave Alindao's displacement camp in search of food and firewood. Human Rights Watch documented the killing of at least 156 people since May in and around the towns of Alindao, Mobaye, and Zangba in Basse-Kotto province.¹³⁹

Human Rights Watch documented 25 cases in which Seleka UPC and affiliated fighters raped women during attacks in Basse-Kotto in May 2017, including the rape of a woman who was five months pregnant. Twelve cases occurred in or around Alindao, six in or around Mobaye, and seven cases in or around Zangba. In eleven of these cases, fighters also killed survivors' husbands or children, and in one case they killed the survivor's father and grandfather. Survivors told Human Rights Watch that they witnessed Seleka UPC fighters rape at least 30 other women and 1 man.

Women interviewed by Human Rights Watch described being raped in their homes during door-to-door raids or while fleeing violence. In several cases, survivors also experienced other abuses, including torture or killing of survivors' family members. Fighters raped some survivors in front of their children or other relatives.

Irène, 36, was outside her house in Alindao's Banguiville neighborhood on May 9 when Seleka UPC fighters demanded her husband, who was inside the house. The fighters shot her husband in both legs as he tried to flee. When their five-year-old daughter began to cry, Irène said, the Seleka tied the girl to a post on the house's veranda. She described how the Seleka fighters then raped and tortured her and her husband:

When one [fighter] took me by force, my husband said, "No, that's a poor woman. Don't do anything to her." One came and told him to be quiet and that he should undress..... The leader said, "Me, I'm going to sleep with her husband." When I lowered my head, he told me to lift my head and watch. When I cried out, "There's no reason to hurt us both," one of them said, "Shut up." Then they put cloth over my mouth. Two came and took my two

¹³⁹ Human Rights Watch interviews with survivors of violence, Alindao, August 26-27, 2017.

legs. They held them open. When the first one finished raping me, he called another one to bring a piece of clothing. He took [the clothing] and put it inside my vagina to clean out where the first man had been. I didn't know what to do but scream. It hurt too much.

My daughter was crying. One said, "Why is the child crying like that?" I heard them shoot the child. I cried to Jesus, "How can you allow this to happen?" I just cried for my child.... I heard them fire and then it was silent. I didn't hear her anymore.

They shot my husband in the head with two bullets.... Before they raped me, I saw them start to torture him. They took a piece of wood and hit him with it. They took a military knife and cut his arms. They wrote their names on his arms. I started to cry and cry.¹⁴⁰

Irène said that two of the fighters raped her, and she saw one who appeared to be their leader rape her husband. Her daughter was also killed during the attack.

Nancy, 33, said that Seleka UPC fighters raped her and killed her husband during the May attack on Alindao. Fighters caught the family, including five children ages 2 to 10, as they fled to their fields to escape the attack. Nancy said her husband begged them to take money instead of his cattle, which he needed for cultivation:

One [armed group member] said, "Why are you discussing this with us? Why are you being difficult?" They shot my husband in the neck. He fell on the ground. I fell on him, crying. One [armed man] slapped me. He started to say that I know how to cry a lot. He said they were going to show me today what should make me cry.... He took me by force. I resisted. The one who shot my husband said that if I continued to resist they were going to do the same thing to me [as they had done to my husband]. Two of them raped me.... When they finished, they said that since I had loved my husband so

¹⁴⁰ Human Rights Watch interview with Irène, Bangui, August 21, 2017.

much I should bury him.... My kids were next to me, crying. They younger ones had seen the violence.... These men have already killed me.¹⁴¹

Nadine, 34, said that Seleka Peuhl fighters caught her and her five children, ages 5 to 15, as they fled to their fields during an attack on Zangba on May 21. Two fighters raped her in front of her children:

They hit me and threw me on the ground. They started to rape me. My child [around 10 years old]—he saw, he wanted to help me. He came towards me. They shot him in the side. He died. I had to abandon the body of my son because other armed groups were coming and we had to flee.¹⁴²

Some survivors told Human Rights Watch that they heard Seleka UPC fighters speaking about intentionally seeking to kill men and rape women. Geraldine, 50, said that two Seleka fighters raped her in the bush near Mobaye, but another fighter refused, saying, “I can’t do that to an old woman. We’re looking for young men to kill and also young women [to rape].”¹⁴³ Another survivor said that two Seleka Peuhl fighters raped her and told her that “if I weren’t a woman they would kill me.”¹⁴⁴

Seleka UPC fighters are under the command of the group’s founder, Gen. Ali Darassa, who led the fighters in establishing a base in Alindao following their departure from Bambari in early 2017. (See also Rape by Seleka in Liwa and Bambari, 2014-2015, and Sexual Slavery by Seleka in Bambari.) Many of the survivors who experienced sexual violence in Alindao, Mobaye, and Zangba described their attackers as “men of Ali Darassa,” in part due to knowledge that Gen. Darassa and his men had infiltrated the area but also because they said that fighters had introduced themselves as such upon arriving in the area or during attacks.

¹⁴¹ Human Rights Watch interview with Nancy, Bangui, August 21, 2017.

¹⁴² Human Rights Watch interview with Nadine, Bangui, August 22, 2017.

¹⁴³ Human Rights Watch interview with Geraldine, Bangui, August 22, 2017.

¹⁴⁴ Human Rights Watch interview with Sandra, Bangui, August 22, 2017.

Rape by Seleka in Bangui, December 2013 and September-December 2015

In early December 2013, a large-scale anti-balaka assault on Seleka forces in Bangui prompted the Seleka to commit vicious reprisal attacks.¹⁴⁵ Fierce fighting ensued, and both sides targeted civilians along sectarian lines. Human Rights Watch documented 31 cases of rape in Bangui during this period, of which Seleka fighters were responsible for 23. Twenty-one of these were gang-rapes.

Sandrine, 18, said that four Seleka fighters entered her house in the Lando neighborhood of Bangui on December 5, 2013, and accused her of hiding anti-balaka fighters:

[One] said, “In the bush, the anti-balaka are killing our relatives, our women and men and children. We are looking for them. As you have hidden your brothers, we will now do harm to you that will shock your brothers and they will have to come out.”... [O]ne covered my eyes with a shirt and the other covered my mouth with a shirt and said, “If you make a noise we will kill you. You will see.” Three of them raped me.¹⁴⁶

Louise, 32, said that seven Seleka fighters came to her home in Bangui’s Fondo neighborhood on December 3, 2013, and forced her husband, a corporal in the government’s armed forces, to watch them rape her before they killed him:

[My husband] was crying out, “No, leave my wife alone. If you want to kill me, kill me.” And so they shot him. It was as I was being raped that they shot him. Before he was shot they made sure that my husband saw me being raped. After they killed him, they continued to rape me. The other three took their turn. My husband’s body was on the floor.¹⁴⁷

Louise’s seven children—then ages 8 to 19—witnessed the rape.¹⁴⁸

¹⁴⁵ See MINUSCA et al., “Central African Republic 2003-2015,” p. 220.

¹⁴⁶ Human Rights Watch interview with Sandrine, Bangui, January 23, 2016.

¹⁴⁷ Human Rights Watch interview with Louise, Bangui, January 22, 2016.

¹⁴⁸ *Ibid.*

Human Rights Watch also documented 36 cases of rape and 2 of attempted rape by members of armed groups in Bangui in 2015. (Seleka fighters were responsible for 16 incidents of rape, and anti-balaka fighters for 20.)

Thirty-four of the incidents occurred between September and December 2015 during and immediately after renewed fighting between Seleka and anti-balaka, prompted by the killing of a 17-year-old Muslim motorcycle taxi driver. UN police under MINUSCA were unable to stem the violence, which left about 100 dead, including at least 31 civilians.¹⁴⁹ Violence again erupted between October 20 and November 13, 2015, when anti-balaka fighters killed two Seleka UPC representatives visiting the capital, leading to tit-for-tat attacks between Muslim self-defense groups and anti-balaka that resulted in the deaths of at least 15 civilians. Overall, the spate of violence displaced an estimated 35,000 people.¹⁵⁰ Human Rights Watch documented 10 cases of rape by Seleka forces in Bangui that took place between September and December 2015, most of which were committed by multiple perpetrators and often targeted women for sectarian reasons.

Nathalie, 29, said that Seleka fighters assaulted her in Bangui's 3rd arrondissement as she was seeking vegetables to sell in mid-November 2015. The fighters wanted to punish her husband, whom they accused of sending information about the Seleka to the anti-balaka:

One said, "That's the wife of who we've been looking for, for a long time—we're going to take her and hurt [her husband]." Six of them came towards me.... When I fell down, two came and held my arms to the ground. Another one, then a second, then a third raped me. Then a fourth said he was going to take his part.¹⁵¹

Another survivor recalled that Seleka fighters sought out women for purposes of rape. Bernadette, 22, and her 25-year-old sister told Human Rights Watch in separate interviews that Seleka fighters raped them in late September 2015 when they returned from a

¹⁴⁹ For more see "Central African Republic: New Spate of Senseless Deaths," Human Rights Watch news release, October 22, 2015, <https://www.hrw.org/news/2015/10/22/central-african-republic-new-spate-senseless-deaths>.

¹⁵⁰ For more see "Central African Republic: New Wave of Killings," Human Rights Watch news release, November 26, 2015, <https://www.hrw.org/news/2015/11/26/central-african-republic-new-wave-killings>.

¹⁵¹ Human Rights Watch interview with Nathalie, Bangui, December 5, 2015.

displacement site to collect clothing at their house in Bangui's Sara neighborhood. Bernadette, who has an intellectual disability, said that three Seleka brought her inside the house, where two of them raped her, saying, "What we came for in the neighborhood, that's what we already have."¹⁵²

Rape by Seleka in Boy-Rabe

Some of the worst violence Seleka committed in 2013—including sexual violence—was in the Bangui neighborhood of Boy-Rabe, which the Seleka perceived as a stronghold of support for former president Bozizé, and thus allied with the anti-balaka.¹⁵³ Then-minister of public security and former Seleka general Nouredine Adam told Human Rights Watch that Seleka attacks on the neighborhood were part of "organized disarmament operations."¹⁵⁴

Human Rights Watch documented 22 cases of rape by Seleka fighters in Boy-Rabe between March and December 2013: 7 of these cases occurred during an April attack on the neighborhood; 12 cases occurred in November and December as anti-balaka were advancing on the city; and three cases occurred in mid-2013.

The Seleka often committed rape as they searched for men and boys, and used rape as punishment for perceived allegiance to the anti-balaka.

Mathilde, 21, said she was at home in April 2013 with her husband and young sons, then ages four months and two, when Seleka fighters attacked the neighborhood. She described what happened as the Seleka approached:

My husband left the house. He wanted to flee. They shot him directly and he died. I started to cry and cry.... Two [Seleka] came into the house. They told me to undress, that they were going to rape me. I started to fight back. They said if I didn't undress—they cocked their guns to shoot me.... The two raped me one by one.¹⁵⁵

¹⁵² Human Rights Watch interview with Bernadette, Bangui, April 23, 2016.

¹⁵³ See Human Rights Watch, *I can Still Smell the Dead: The Forgotten Human Rights Crisis in the Central African Republic*, September 2013, p. 53; MINUSCA et al., "Central African Republic, 2003-2015," p. 219.

¹⁵⁴ *Ibid.*, page 53.

¹⁵⁵ Human Rights Watch interview with Mathilde, Bangui, January 14, 2016.

The Seleka continued to terrorize the neighborhood in the days following the April attacks. Susanne, 25, said six Seleka fighters stopped her at a checkpoint as she was returning to Boy-Rabe from the La Kouanga neighborhood:

I was taken into a house at the gendarmerie. Arriving there, I saw a Seleka fighter raping a woman in a room. She was being forced while men held their guns on her. The boss brought me into the same room where the girl was being raped [and] at the same time he raped me. After the boss raped me, another man came in and raped me.¹⁵⁶

Anti-balaka groups increasingly attacked Seleka positions outside the capital in November 2013. In turn, the Seleka targeted Boy-Rabe, which they considered sympathetic to the anti-balaka. As one survivor told Human Rights Watch, “If they found men, they killed them. The women who resisted [rape] were also killed.”¹⁵⁷

Having stayed behind with her ill sister, Chantal, 30, said that Seleka fighters entered her house in November 2013 and accused her of hiding male fighters before raping her:

They said, “There are military brothers here with you.” We said, “We don’t have any military brothers.” They said that I was lying.... [One] pointed a gun at my head [and] said that he will kill me if I cry. One took me by force.... After, another came and raped me. And another.¹⁵⁸

Jocelyne, 14, recounted how five Seleka fighters came to her family’s home in Boy-Rabe on December 5, 2013, and threatened to shoot if they did not open the door:

My father opened the door and they shot him instantly. They saw my brother and they said to him, “Do you want to run?” But just after they said that, they shot him, too. I was just next to him. They then looked at me and said, “Take off your clothes.” I said no. They shot in the air and one ripped

¹⁵⁶ Human Rights Watch interview with Susanne, Bangui, January 14, 2016.

¹⁵⁷ Human Rights Watch interview with Diane, Bangui, December 7, 2015.

¹⁵⁸ Human Rights Watch interview with Chantal, Bangui, December 7, 2015.

my clothes off. Two of them raped me. After they left I stayed next to the bodies of my brother and my father, crying.¹⁵⁹

While under Seleka control between March 2013 and February 2014, Col. Zacharia Santiago, known locally as “Colonel Kondo,” led fighters in Boy-Rabe.¹⁶⁰ In May 2016, Santiago told Human Rights Watch that he was “sent by the Seleka to put Boy-Rabe in order” and that he commanded the area at the time of the April offensive. Santiago denied that his forces had committed rape or any other crimes. “I have been trained as a commando in many things, including international law,” he said. “I know my men and they respected and obeyed my orders. They could not have raped women.”¹⁶¹ Santiago told Human Rights Watch that, while in control of Boy-Rabe, he reported to Gens. Mahamat Alkatim, Moussa Assimeh, and Oumar Sodium.¹⁶² Santiago left Bangui in early 2014. At time of writing, he serves as head of operations for a Seleka faction, the FPRC, based out of Kaga-Bandoro.

Rape by Seleka in Liwa and Bambari, 2014-2015

Survivors recounted similar experiences of sexual violence by Seleka fighters during attacks in and near Bambari in 2014. On June 9, 2014, Seleka and ethnic Peuhl fighters attacked Liwa, a predominantly Christian village 10 kilometers south of Bambari, destroying all 169 homes in the village. The assault on Liwa set off a cycle of vicious reprisal attacks in neighboring communities, culminating in Seleka attacks on Christian neighborhoods in Bambari in late June. On July 7, Seleka fighters struck Saint Joseph’s Parish, where thousands of displaced had taken shelter.¹⁶³ Human Rights Watch

¹⁵⁹ Human Rights Watch interview with Jocelyne, Bangui, January 14, 2016.

¹⁶⁰ *Kondo* is Sango for chicken. The origin of the name comes from 2013 when Santiago was reported to have announced to a local population in Boy-Rabe, “The price of a human is 25 CFA (approximately US\$0.04). A chicken is more expensive than that.” A former Seleka general told Human Rights Watch that Santiago is a Chadian national and that his real name may be Zacharia Oual Dagal. Human Rights Watch interview with former Seleka general, Bangui, January 21, 2016.

¹⁶¹ Human Rights Watch interview with Zacharia Santiago, Kaga-Bandoro, May 3, 2016.

¹⁶² Human Rights Watch has reported in the past on Alkatim. See Human Rights Watch, *Killing Without Consequence*, pp. 15-16.

¹⁶³ “Central African Republic: Sectarian Violence Escalating,” Human Rights Watch news release, July 15, 2014, <https://www.hrw.org/news/2014/07/15/central-african-republic-sectarian-violence-escalating>; “UN in Central African Republic condemns attack on civilians sheltering in church,” UN News Centre press release, July 9, 2014, <http://www.un.org/apps/news/story.asp?NewsID=48234#.V-uVlVl97IW> (accessed August 17, 2017). The Liwa area continues to be a flashpoint for violence in the Ouaka province. See “Dispatches: Central African Republic’s Biggest Challenge,” Human Rights Watch commentary, March 17, 2016, <https://www.hrw.org/news/2016/03/17/dispatches-central-african-republics-biggest-challenge>; “UN in Central African Republic condemns attack on civilians sheltering in church,” UN News Centre press release, July 9, 2014, <http://www.un.org/apps/news/story.asp?NewsID=48234#.V-uVlVl97IW> (accessed August 17, 2017).

documented nine cases of rape by Seleka and Seleka-allied fighters during attacks in Liwa and Bambari in June and July 2014. Civilians bore the brunt of this violence as well as ongoing bouts of insecurity; Human Rights Watch documented eight cases of rape by Seleka fighters that occurred in Bambari in 2015.

During the attack on Liwa village, Julie, 20, said that Seleka fighters surrounded her house and set it on fire. When her husband attempted to flee, the Seleka shot him twice in the chest. Julie said she was too afraid to resist as five Seleka fighters raped her one by one, next to her husband's body. "If I cried or said anything, they would kill me. Everything they did to me, I had to stay quiet." After the rape, she said, "I thought I was already dead."¹⁶⁴

Agathe, 50, said that three Seleka fighters raped her when she did not have the strength to flee during the attack on St. Joseph's church. The fighters told her they were retaliating for a June 23, 2014, anti-balaka assault on the Peuhl community in nearby Ardondjobdi village, next to Liwa, that left at least 20 dead. "[The Seleka] said [that] we are all wives of the anti-balaka," she said. She recalled the Seleka fighters going on to say, "At Liwa [Ardondjobdi], the anti-balaka killed all the women and the men, so we can't just let you go."¹⁶⁵

Seleka fighters also used tactics of humiliation. Claudette, 22, said she was returning to a displacement camp in Bambari known as "Sangaris camp" in December 2015 when three Seleka fighters caught her, yelling, "We have the wife of the balaka! Today we will have sex with the wife of balaka!" After they raped her, she said, "They grabbed me by my arms and legs and threw me out of the compound. I was totally nude. People were staring at me."¹⁶⁶

Four women told Human Rights Watch that their rapists were men under the control of Gen. Ali Darassa Mahamant. They said this because Darassa controlled Bambari at the time, and the fighters were wearing military uniforms, as do UPC members. The survivors were raped during military attacks committed by Darassa's fighters, including attacks on Liwa and on St. Joseph's church, the Akpe neighborhood, and at a barrier manned by the UPC

¹⁶⁴ Human Rights Watch interview with Julie, Bambari, January 18, 2016.

¹⁶⁵ Human Rights Watch interview with Agathe, Bambari, January 17, 2016.

¹⁶⁶ Human Rights Watch interview with Claudette, Bambari, January 17, 2016.

near St. Christoph's in Bambari.¹⁶⁷ Darassa, who created and appointed himself leader of the Seleka UPC, told Human Rights Watch that his men were not involved in fighting around Bambari in June and July 2014, or in committing rape at any time.¹⁶⁸ (See "Sexual Slavery by Seleka in Bambari.")

Rape by Seleka in Nana-Grebizi Province

The roads between Kaga-Bandoro and Botto and between Kaga-Bandoro and Mbrès, as well as the town of Mbrès itself, have seen numerous attacks by armed groups, particularly since December 2014.¹⁶⁹ Seleka forces have controlled Kaga-Bandoro town, the provincial capital, since the start of the conflict in 2013. Human Rights Watch documented 42 cases of rape by Seleka and Seleka-allied fighters that occurred in and around the towns of Kaga-Bandoro, Mbrès, and Botto in the Nana-Grebizi province between early 2013 and April 2016. Human Rights Watch also received reliable information on eight additional cases of rape by Seleka fighters in Kaga-Bandoro between March and May 2017, including rapes of two men and one girl.¹⁷⁰

Nineteen women told Human Rights Watch that Seleka or allied fighters raped them in and around Kaga-Bandoro between March 2013 and April 2016. In some cases, survivors said rape was clearly used as punishment. Elisabeth, 24, said that when several Seleka fighters came to their door in Kaga-Bandoro around April 2015, her husband escaped. "When he fled, they said they're going to exact their law on me," Elisabeth said. "One pointed the gun behind my ear.... He started to rape me. He did it two times. My eldest [5-year-old] daughter was stomped on, with military boots. They stomped on her. After, I took her on my knees and she was already dead."¹⁷¹

The Seleka sometimes used tactics to cause pain and humiliation. Lorraine, 30, and her family were foraging for cassava in Kpokpo village near Kaga-Bandoro around April 2015

¹⁶⁷ For more on the Seleka and attacks on Liwa and St. Joseph's, see "Central African Republic: Sectarian Violence Escalating," Human Rights Watch news release, July 15, 2014, <https://www.hrw.org/news/2014/07/15/central-african-republic-sectarian-violence-escalating>.

¹⁶⁸ Human Rights Watch interview with Gen. Ali Darassa, Bambari, September 6, 2014.

¹⁶⁹ See Human Rights Watch, *Killing Without Consequence*, pp. 42-46, 50-51.

¹⁷⁰ Human Rights Watch interview with local activist, Bangui, August 13, 2017.

¹⁷¹ Human Rights Watch interview with Elisabeth, Kaga-Bandoro, May 2, 2016.

when Seleka fighters came upon them and threatened to kill her or her daughter, who was about eight years old. She recalled:

They threw me by force onto the ground. One took his finger and put it into my vagina. He wanted to tear my clitoris out.... The one who put his finger in, he left me and went into the bush to find [my daughter]. [Another] one started to rape me until I was exhausted.... Blood started to come out of my vagina.... Until today, when I go to the bathroom, urine mixes with blood.¹⁷²

In at least three cases, the Seleka demanded that women choose between rape and death. Seleka fighters attacked Édith, 44, in her fields outside of Kaga-Bandoro in November 2015. “One of the Seleka asked me, ‘Do you want life or death?’” she said. “I made a sign that I did not want to die. Three of them took off their pants and had sex with me. After, they did not say anything. They just smiled, hit me, and left.”¹⁷³

Seleka fighters also threatened to kill survivors if they informed anyone about the rapes. Carine, 28, said she was walking to her fields in Kaga-Bandoro in July 2015 when four armed Peuhl raped her in front of her 4-year-old daughter and warned her to keep quiet about the attack:

[The first one] gave his gun to another man and raped me. Then he gave me some water. He said I was to clean my genitals and come back so the others could rape me. The second then raped me. After him I had to clean myself off and [then] the third raped me.... One of the men who raped me said, “If you tell your relatives, the next time we will kill you.”¹⁷⁴

On December 16, 2014, fighting erupted between anti-balaka and Seleka FPRC in Mbrès town, approximately 77 kilometers southeast of the provincial capital of Kaga-Bandoro. Residents of Mbrès told Human Rights Watch that anti-balaka fighters moved through neighborhoods

¹⁷² Human Rights Watch interview with Lorraine, Kaga-Bandoro, May 3, 2016.

¹⁷³ Human Rights Watch interview with Édith, Bangui, December 10, 2015.

¹⁷⁴ Human Rights Watch interview with Carine, Kaga-Bandoro, May 3, 2016.

to attack the Seleka FPRC and, in the counterattack, FPRC fighters targeted civilians and homes. At least 107 homes were burned and 29 civilians killed over two days.¹⁷⁵

Human Rights Watch interviewed six women and girls who said that Seleka fighters raped them during the December 2014 attack on Mbrès. Sylvie, 23, said that the Seleka fighters came to her house and demanded to see her husband, saying that they knew he owned a motorcycle and cows. When one fighter fired a shot into the air, Sylvie said her daughter came to the room:

When the Seleka saw her, two of them threw her on the ground. I said, “It is better to rape me instead of my daughter.” But the two men raped her. She was nine or ten years old. I was there watching. [The Seleka] said, “Because you won’t show us the motorcycle and the cows we will rape you, too.” They raped me, one by one.¹⁷⁶

Seleka forces from Kaga-Bandoro also repeatedly attacked Botto, a village 40 kilometers from Kaga-Bandoro, between December 2013 and mid-2015.¹⁷⁷ By February 2015, the Seleka had fragmented and those in the area were members of the Seleka FPRC.¹⁷⁸ Human Rights Watch documented four cases of rape perpetrated by Seleka FPRC and Peuhl fighters during attacks on Botto.

Solange, 34, said she was two months pregnant when five Seleka fighters found her hiding in the bush with her 3-year-old son during an attack in Botto around February 2015. Two of the fighters raped her, she said, and she later miscarried.¹⁷⁹ Another survivor, Jaqueline, 45, said she was three or four months pregnant when three Peuhl fighters raped her in the fields near Botto in December 2014, and she lost the pregnancy later that day.¹⁸⁰

¹⁷⁵ Human Rights Watch, *Killing Without Consequence*, p. 44.

¹⁷⁶ Human Rights Watch interview with Sylvie, Kaga-Bandoro, May 3, 2016.

¹⁷⁷ Human Rights Watch, *Killing Without Consequence*, p. 48.

¹⁷⁸ See Section I. Background—Violence in the Central African Republic, p. 33.

¹⁷⁹ Human Rights Watch interview with Solange, Kaga-Bandoro, April 6, 2015.

¹⁸⁰ Human Rights Watch interview with Jaqueline, Kaga-Bandoro, April 6, 2015.

In May 2016, Human Rights Watch asked the general coordinator of the FPRC in Botto, Moussa Maloud, about allegations of rape by Seleka FPRC. Maloud told Human Rights Watch that FPRC fighters have not committed attacks on civilians:

If we find out that someone has committed rape, we will punish that individual and we will take him to MINUSCA. If someone is accused, then we will do an investigation. But to date, no FPRC have been accused. These cases you are talking about, are there medical reports? If so, I would like to see them because these cases do not exist.¹⁸¹

Rape by Anti-Balaka

Like the Seleka, anti-balaka fighters committed rape during attacks on communities, and targeted women and girls as they conducted daily activities to provide for themselves and their families. Human Rights Watch documented 74 cases of rape by anti-balaka fighters, which occurred primarily in Boda and Bangui between December 2013 and December 2015. Twenty-three of the survivors Human Rights Watch interviewed were children (under age 18) at the time of the rape, and 44 of the incidents involved more than one rapist.

Thirty-three survivors told Human Rights Watch that the anti-balaka targeted them for sectarian reasons, saying that, for example, anti-balaka raped them after calling them Muslim wives or “concubines,” or accusing them of being “traitors” for selling goods to Muslims.¹⁸²

Rape by Anti-Balaka in Bangui

Human Rights Watch documented 35 cases of rape by anti-balaka fighters in Bangui, including four girls ages 11 to 17. The rapes primarily occurred in late 2013 to early 2014, when anti-balaka fighters launched significant attacks on Seleka forces in the capital, and between September and December 2015, during and immediately following outbreaks of sectarian violence.

¹⁸¹ Human Rights Watch interview with Moussa Maloud, Kaga-Bandoro, May 2, 2016.

¹⁸² Human Rights Watch interviews with Claire, Bangui, January 22, 2016, and Emmanuelle, Bangui, January 13, 2016.

Human Rights Watch interviewed six survivors who said that anti-balaka raped them during a surge of attacks in Bangui beginning in December 2013. Physical violence, including killing and dismemberment, accompanied several of the rapes. Anti-balaka fighters came to Marie-Claire’s house in Bangui’s Fondo neighborhood in late December 2013, and accused her husband of belonging to the Seleka. She explained:

[O]ne told my husband to lie down on the ground. He said no, he didn’t want to. One cut his ear off, [and] also a finger at the first knuckle.... They almost cut his arm off—it was detached except for a piece of skin. [They did] it in front of me. They then shot him in the head and he fell on the ground. The three [of them] raped me ... one after another. ¹⁸³

Marie-Claire, 24, was two months pregnant at the time, but, like other survivors, she said it did not deter her attackers. “I told them that I was pregnant,” she recalled. “They said it wasn’t their problem—if I want it or not, they are going to rape me.”¹⁸⁴

Anti-balaka fighters used tactics to inflict extra pain and humiliation, committing rape with objects and in front of victims’ family members. Natifa, 35, said that in February 2014, a group of anti-balaka came to her house in Bangui’s Combattants neighborhood, shouting, “Where is she? Where is she? The Muslim woman, we came because of her.”¹⁸⁵ She said the anti-balaka claimed her husband was keeping guns and took her to a house they were using as a base, where they raped her multiple times, including with a grenade:

[Their commander] ordered his men to bring me into the house. They started to torture me. One had a grenade in his hand. He told me to undress. He put the grenade in my genitals. One said, “No, why are you doing that? If that explodes, we will all die.”¹⁸⁶

¹⁸³ Human Rights Watch interview with Marie-Claire, Bangui, May 5, 2016.

¹⁸⁴ Ibid.

¹⁸⁵ Human Rights Watch interview with Natifa, Bangui, April 24, 2016.

¹⁸⁶ Ibid.

Natifa said that four of the men raped her and continued to beat her. “[T]hey hit me with sticks, belts—I had scars on my skin,” she said. “Even on my genitals—I had problems sitting down [afterwards].”¹⁸⁷

Having fled violence, Joséphine, 28, said she was returning to collect belongings from her home in Bangui in October 2014 when anti-balaka caught her in the Fondo neighborhood. She described how anti-balaka raped her with a bottle at a house inside a compound:

There was a bottle of Castel beer. They broke it and pushed it into my vagina. When they pushed it in, blood flowed out and I lost consciousness.... After [they finished] they went in the neighborhood and said, “We stopped a wife of Muslims.”¹⁸⁸

Anti-balaka targeted Muslim women as a form of vengeance against the Seleka. Estelle, 44, said that she was three months pregnant when anti-balaka fighters surrounded Bangui’s Malimaka neighborhood in January 2014. Estelle said the fighters put a knife to the throat of her husband, a Muslim convert, and dragged him outside. They threatened to kill her, then tied her up and raped her, although she protested that she was pregnant. “There were five of them on me. The first was raping me and the others said, ‘Do it fast, we need our turn also,’” she recalled. “During the third one I lost consciousness.”¹⁸⁹

Estelle’s attackers repeatedly said they were raping her because of her faith:

[One] said, “It’s [because of] what the Seleka did to us—we’re not going to spare a Muslim.” They said they were going to start by cutting up my son piece by piece in front of me.... They said, “Muslim women have done too much. We have found a Muslim vagina today and we have profited.”¹⁹⁰

Estelle suffered a miscarriage after the attack.

¹⁸⁷ Ibid.

¹⁸⁸ Human Rights Watch interview with Joséphine, Bangui, April 25, 2016.

¹⁸⁹ Human Rights Watch interview with Estelle, Bangui, April 25, 2016.

¹⁹⁰ Ibid.

Anti-balaka fighters also harmed and even killed survivors' family members in conjunction with sexual violence. Nalia, 38, described how anti-balaka came to her house in Bangui's PK10 neighborhood in February 2014, saying, "We came because of the Muslims." The anti-balaka took her and her 14-year-old son, saying, "Since you are a little Muslim we are going to bring you with your mother." When her son resisted, she said, the anti-balaka shot him in the back.¹⁹¹ The fighters took Nalia to a nearby base, where four of them raped her. "They took everything from me. My 14-year-old boy, they killed," she said. "Everything was pillaged from my home. I didn't have anything left."¹⁹²

Human Rights Watch also documented 18 cases of rape by anti-balaka fighters that occurred between September and December 2015, during and immediately following outbreaks of sectarian violence that erupted after the killing of a Muslim moto driver. (See Rape by Seleka in Bangui.)

Anti-balaka fighters assaulted women as punishment for their husbands' or family members' religious affiliation. Clarice, 20, said that six members of the anti-balaka raped her for six hours in Bangui in October 2015, saying they were sending a message to her Muslim father. "One said, 'It is intentional.' He said they had to rape me so that my father hears it," she said.¹⁹³

The anti-balaka accused survivors of providing food or supplies to the Seleka. Vivienne, 20, and six other women were going to buy vegetables in Bangui's Boeing neighborhood around December 2014 when they ran into a group of at least seven anti-balaka. She said the fighters took turns raping all the women:

They said, "There where you're going, it is to buy vegetables for Muslims to eat, then they come and kill us. We will rape you so your Muslim husbands will know you are already dead." It took two hours; four of them raped me.¹⁹⁴

¹⁹¹Human Rights Watch interview with Nalia, Bangui, January 24, 2016.

¹⁹² Ibid.

¹⁹³ Human Rights Watch interview with Clarice, Bangui, May 5, 2016.

¹⁹⁴ Human Rights Watch interview with Vivienne, Bangui, December 10, 2015.

Of 19 incidents of sexual violence that Human Rights Watch documented that occurred in Bangui between September and December 2015, nine took place in or near the M’poko displacement camp.¹⁹⁵ Established in December 2013 when tens of thousands of civilians sought safety around M’poko International Airport as Seleka and anti-balaka fought for control of Bangui, the camp held approximately 20,000 people following renewed fighting in September and October 2015. Anti-balaka fighters largely controlled the camp, and Central African military police would not enter the camp at the time due to insecurity. The government dismantled M’poko camp between December 2016 and January 2017 and encouraged residents to return to their homes. Human Rights Watch documented eight incidents of rape and one of attempted rape, as well as ten incidents of abduction and physical assault, that occurred between September and December 2015 in and around the M’poko camp.¹⁹⁶

Michelle, 23, said that she was returning to M’poko camp after buying firewood in November 2015 when three anti-balaka coming from the camp demanded money. When she told them she only had 500 CFA (approximately US\$0.82), one anti-balaka fighter threw her on the ground and began to rape her. The commander told his men, “That’s merchandise that is there—profit from it,” Michelle recalled, and said that two more fighters also raped her. “When they finished raping me, I couldn’t walk.”¹⁹⁷

Corinne, 27, said she was going from M’poko camp to the Cinq Kilo neighborhood to find food in November 2015 when anti-balaka armed with rifles and machetes accused her of seeking goods to sell to Muslims:

They approached with their machetes and said, “If you don’t tell the truth, we will kill you.” I said, “No, I am not selling things to the Muslims.” Three of them then brutalized me. I was raped.... I have not gone back to [the neighborhood] because I am scared I could be raped again.¹⁹⁸

¹⁹⁵ For more on rape by anti-balaka fighters during the September and October 2015 violence in Bangui, see MINUSCA et al., “Central African Republic 2003-2015,” p. 223.

¹⁹⁶ See “Central African Republic: Amid Conflict, Rape,” Human Rights Watch news release, December 17, 2015, <https://www.hrw.org/news/2015/12/17/central-african-republic-amid-conflict-rape>.

¹⁹⁷ Human Rights Watch interview with Michelle, Bangui, May 5, 2016.

¹⁹⁸ Human Rights Watch interview with Corinne, Bangui, December 8, 2015.

Six survivors who were abducted, held for ransom and physically and verbally abused in and around M’poko camp identified Emar Nganafeï as among their attackers or their attackers’ leader. Between mid-2014 and January 2016 Nganafeï served as commander of an anti-balaka group that ran a base in Zone 3 of M’poko camp, near a hospital.¹⁹⁹ One survivor said she saw Nganafeï at the anti-balaka base where fighters held her captive for 14 hours in September 2015 after beating her.²⁰⁰ Two other survivors said that Nganafeï threatened to kill them when anti-balaka abducted and held them captive together for 10 hours in October 2015, and one said Nganafeï held a pistol to her head.²⁰¹

Rape by Anti-Balaka in and around Boda

Human Rights Watch documented 17 cases of rape by anti-balaka in and around Boda between November 2013 and May 2015. Fifteen of the survivors were girls, one as young as 10 years old. Survivors described how anti-balaka fighters attacked them as they were collecting food or water in groups and sometimes raped multiple women or girls. The survivors said that anti-balaka raped nine other women and girls between the ages of 10 and 19 who were with them during the attacks, or a total of 25 women and girls. In some cases, girls said that members of the anti-balaka raped them and then threatened or killed family members who confronted the armed group.²⁰²

Anti-balaka ramped up attacks in and around Boda in 2014. The UN Panel of Experts reported in October 2014 that attacks by anti-balaka forces increased in the latter part of that year and that fighters had killed at least 168 civilians, including five children.²⁰³ The Panel also reported that anti-balaka leader Patrice-Edouard Ngaïssona was appointing commanders to the area in mid-2014.²⁰⁴

¹⁹⁹ “Central African Republic: Amid Conflict, Rape,” Human Rights Watch news release, December 17, 2015, <https://www.hrw.org/news/2015/12/17/central-african-republic-amid-conflict-rape>.

²⁰⁰ Human Rights Watch interview with Evangeline, Bangui, December 12, 2015.

²⁰¹ Human Rights Watch interviews with Esther and Gloria, Bangui, January 25, 2016.

²⁰² See also “Fear of Reprisals and Lack of Protection” in Section V: Accountability Mechanisms and Access to Justice of this report.

²⁰³ UN Panel of Experts on the Central African Republic, Final Report of the Panel of Experts on the Central African Republic, October 29, 2014, published in Letter dated 28 October 2014 from the Panel of Experts on the Central African Republic established pursuant to Security Council Resolution 2127 (2013) addressed to the President of the Security Council, S/2014/762, para. 202 and annex 63.

²⁰⁴ Ibid.

The anti-balaka often attacked women and girls around Boda as they sought food and other necessities. As in other areas, perpetrators targeted women and girls along sectarian lines. Marlène, 16, said that anti-balaka fighters attacked her and her aunt in a village near Boda in January 2014 as they were looking for avocados to sell. Marlène said the anti-balaka killed her aunt and then chased her until she fell and broke her arm. “They said if I refused to sleep with them they were going to kill me like they killed [my aunt],” she recalled. “They said, ‘The avocados, you’re going to sell them to Muslims. That’s why we killed her.’”²⁰⁵ One of the fighters then raped her, Marlène said.

Priscille, 16, told Human Rights Watch that her family fled to the fields during attacks on Boda in early 2014. As she and her 10-year-old sister were returning to the fields from selling cassava in town, three anti-balaka caught the two girls:

One said, “You need to take your clothes off so that we can have sex with you.” I said, “I am still a virgin.” He said, “If you are still a virgin, then we will break you in today.” One ripped my clothes off and the other ripped off my underwear. The one that ripped off my underwear had [a] machete. One grabbed my throat and threw me on the ground. He held my mouth shut while the first man raped me. I started to bleed. When the first was done the second man said, “I can’t leave you like this, I must rape you too.” So he raped me as well.²⁰⁶

Priscille said she could not get medical care after the assault because health facilities in the area were not functioning at the time.²⁰⁷ She also could not find her younger sister. Priscille told her parents of the rape and her father left to find the attackers. When he ran into some anti-balaka fighters and said that their fellow fighters had raped his daughter, Priscille said, “The anti-balaka shot him in the back.” Her father was killed.

Hours later, Priscille’s 10-year-old sister came back to the family and said that the anti-balaka had taken her into the bush, tied her up, and raped her. “She returned to the camp

²⁰⁵ Human Rights Watch interview with Marlène, Boda, April 29, 2016.

²⁰⁶ Human Rights Watch interview with Priscille, Boda, April 29, 2016.

²⁰⁷ The director of Boda’s hospital confirmed to Human Rights Watch that the hospital was not operational at that time due to insecurity. See Section IV. Barriers to Medical and Psychosocial Services: Lack of Available Services.

crying, with her arms to her sides in pain,” Priscille recalled. “The anti-balaka ruined our lives. They said they were there to attack Muslims, but they attacked everyone.”²⁰⁸

Four survivors, interviewed separately, identified their attackers as fighters under the command of Gilbert Wité. Wité commanded anti-balaka troops operating out of a base near the Catholic church in Boda. In April 2016, a local official told Human Rights Watch that Wité still controlled fighters in the area.²⁰⁹ One survivor said that Wité was present while his fighters raped her, and another said that Wité threatened her family after the attack.

Isabelle, 14, said she had gone to draw water for her family after they fled to the bush outside of Boda in 2014. Five of Wité’s fighters stopped her and said, “If you don’t accept that we sleep with you, we’ll kill you.”²¹⁰ She said they slapped her and one of the men raped her, and that Wité witnessed the rape. “Their chief was called Wité—he was there,” she said. “He didn’t react [during the rape]. He left and sat under a tree with the others. He knew.”²¹¹

Camille, 15, said that anti-balaka fighters under Wité’s command caught her and a friend as they were fleeing in early 2014 and demanded money. “We refused, so they hit us and they ripped our clothes off and started to rape us,” she said. “They each chose one of us to rape.”²¹² Camille described how her mother later confronted Wité about the incident:

The next day she went to Wité and said, “Your men raped my daughter.”
Wité pointed his gun at my mother. She went to see him again, but he pointed his gun at her a second time. He said, “If you continue to come and talk to me, I’ll kill you.” So my mother dropped it.²¹³

In April 2016, the anti-balaka’s coordinator for Boda since 2013, Aimé Dobo, confirmed that anti-balaka remained in the sub-prefectures of Boda, Boganagone and Boganda. Dobo said that all three areas fall under the command of Patrice Ngaïssona. Dobo told Human

²⁰⁸ Human Rights Watch interview with Priscille, Boda, April 29, 2016.

²⁰⁹ Human Rights Watch phone interview with local judicial official, Boda, April 10, 2016.

²¹⁰ Human Rights Watch interview with Isabelle, Boda, April 29, 2016.

²¹¹ Ibid.

²¹² Human Rights Watch interview with Camille, Boda, April 29, 2016.

²¹³ Ibid.

Rights Watch that he had not heard of cases of rape perpetrated by anti-balaka fighters, but that if they had, they would impose punishment: “At the coordination we never heard of these cases you talk about it. Now we would take them to the tribunal, but before we would [have given] a traditional punishment.”²¹⁴

Rape by Anti-Balaka in Bambari

In 2014, anti-balaka groups moved into Bambari from Bangui and engaged in sporadic combat with Seleka fighters.²¹⁵ Human Rights Watch documented seven cases of rape perpetrated by anti-balaka in Bambari between late 2013 and late 2015.

Seleka and anti-balaka forces controlled opposite sides of the river in Bambari from 2014 until February 2017. Women and girls on the Seleka-controlled side had to cross the river to access markets on the other side. Two survivors said that anti-balaka raped them and another said they physically assaulted her at checkpoints they had established at river crossings. Anti-balaka raped Victoire, 40, around July 2014 when she could not pay the fee they demanded at a checkpoint. She recalled:

They thoroughly beat me.... They took my clothes off and came to rape me. They took their turns—five of them.... If the anti-balaka take a woman [to the base], they finish doing what they want with her, take her to the side of the road and leave her and bring another [woman] in.²¹⁶

Anti-balaka fighters attacked some women for alleged alliances with the Seleka. Cécile, 50, said that three anti-balaka found her retrieving baggage from her house in Bambari’s Akpe neighborhood in January 2015 and accused her of conspiring with the Seleka:

[The anti-balaka fighter] said, “You have a choice, because we know you have given our position to the Muslims.” He showed me bullets and said, “Either we kill you or you sleep with all of us.”... I was obliged to let them have sex with me.²¹⁷

²¹⁴ Human Rights Watch interview with Aimé Dobo, Boda, April 29, 2016.

²¹⁵ Panel of Experts on the Central African Republic, Final Report, October 29, 2014, para. 59.

²¹⁶ Human Rights Watch interview with Victoire, Bambari, January 17, 2016.

²¹⁷ Human Rights Watch interview with Cécile, Bambari, January 17, 2016.

Rape by Anti-Balaka in Nana-Grebizi Province

Between 2014 and 2016, armed groups committed numerous attacks on the roads between Kaga-Bandoro and Botto and between Kaga-Bandoro and Mbrès, as well as in the town of Mbrès itself. Human Rights Watch documented seven cases of rape by anti-balaka fighters in the area, including five cases in and around Mbrès between December 2014 and early 2015. Three of these incidents occurred in or near Blakadja, a village approximately 20 kilometers from Mbrès, where Franco Yagbegue, also known as Pelé, served as zone commander under the anti-balaka structure coordinated by Maxime Mokom. Human Rights Watch has previously documented attacks by Pelé and his fighters on the Kaga-Bandoro–Mbrès road in 2015.²¹⁸

Catherine, 25, said that Pelé was among those who raped her when anti-balaka stopped her in the bush in January 2015 near Blakadja. Catherine described how the fighters hit her in the back with a gun and then two of them raped her:

One pointed his gun at me. The other tore my clothes and started to rape me. One took his turn and finished. He got up and the other also came and took his part.... One told me to go far away from Mbrès. I told them I don't have the strength to walk now [after the rape]. One started to laugh [and] said they were going to continue to do violence to me. They took off their belts and started to hit me with their belts. They said it's God who gave me to them; they already found me, now they are going to do what they want with me.²¹⁹

Catherine said that one of the anti-balaka called the other one Pelé, and that Pelé was one of the two who raped her.²²⁰ “When Pelé finished raping me, he ordered his fighter to also come and take his part,” she said.²²¹

²¹⁸ Human Rights Watch, *Killing Without Consequence*, pp. 61-62. See also Final Report of the Panel of Experts on the Central African Republic extended pursuant to Security Council Resolution 2196 (2015), U.N. Doc. S/2015/936, December 21, 2015, http://www.securitycouncilreport.org/atf/cf/%7B65BFCF9B-6D27-4E9C-8CD3-CF6E4FF96FF9%7D/s_2015_936.pdf (accessed August 17, 2017), para. 177.

²¹⁹ Human Rights Watch interview with Catherine, Kaga-Bandoro, May 3, 2016.

²²⁰ Final Report of the Panel of Experts on the Central African Republic extended pursuant to Security Council Resolution 2196 (2015), U.N. Doc. S/2015/936, December 21, 2015, http://www.securitycouncilreport.org/atf/cf/%7B65BFCF9B-6D27-4E9C-8CD3-CF6E4FF96FF9%7D/s_2015_936.pdf (accessed August 17, 2017), para. 177.

²²¹ Human Rights Watch interview with Catherine, Kaga-Bandoro, May 3, 2016.

Another survivor, Sylvie, 23, told Human Rights Watch that she was with a group of about 30 people fleeing Mbrès after the December 2014 fighting when they ran into anti-balaka fighters in Blakadja, who then raped the 10 women in the group. She said that she heard other fighters calling one of the anti-balaka by the name Pelé and that he was among the group of fighters who committed the assault. “They ripped off our clothes and each anti-balaka took his turn with a woman. I was raped by one anti-balaka. He is the father of my baby,” she recalled.²²² At the time of her interview with Human Rights Watch, she had an approximately one-year-old daughter as a result of the rape.

Judith, 24, also said that two anti-balaka fighters raped her in Blakadja in February 2015. She said that the fighters were under Pelé’s command, based on knowledge that they share a base and Pelé led the anti-balaka in the area.²²³

Emergence of 3R and Rape by 3R Fighters

An armed group called “Return, Reclamation, Rehabilitation,” or 3R, emerged in the Ouham-Pendé province in late 2015 and committed a range of abuses, including attacks on civilians, forced displacement, and sexual violence.²²⁴ Under the command of self-appointed Gen. Sidiki Abass, who claims to be protecting the Peuhl population in the region, 3R carried out its largest attack, on De Gaulle in the Kouï sub-prefecture, on September 27, 2016, killing at least 17 civilians. Many people displaced from the fighting in De Gaulle and surrounding villages fled to Bocaranga, the capital of the Ouham-Pendé province.

Individuals monitoring sexual violence in the area, who did not want to be identified due to security concerns, told Human Rights Watch they had recorded 43 cases in which women and girls said 3R fighters raped them; 23 of these occurred during or just after the attack on De Gaulle. While some of these cases may have been recorded by more than one person or agency, the total number of cases is likely higher due to underreporting of sexual violence.

²²² Human Rights Watch interview with Sylvie, Kaga-Bandoro, May 3, 2016.

²²³ Human Rights Watch interview with Judith, Kaga-Bandoro, May 3, 2016.

²²⁴ See “Central Africa Republic: Mayhem by New Group,” Human Rights Watch news release, December 20, 2016, <https://www.hrw.org/news/2016/12/20/central-african-republic-mayhem-new-group>.

Human Rights Watch interviewed two women and one girl who said that 3R fighters raped them. Both women said the rapes occurred during the September 27 attack on De Gaulle, and that their children witnessed the rapes. Agnès, 33, said she ran into the woods with her husband and their 7-year-old son when 3R fighters attacked De Gaulle. As they fled, her husband was shot in the leg and she and her son became separated from him:

[My son and I were] walking when we came upon a group of 10 fighters from Sidiki's group. Two of them raped me... One of them pointed his gun and said, "If you don't have sex with me, I'll kill you."... They raped me one by one. My son was right there throughout it all. They forced me to just put him to the side. He was crying.²²⁵

Delphine, 14, said that she and her father fled their village after a 3R attack in the days before the attack on De Gaulle. They were approaching De Gaulle at dawn when a 3R fighter armed with a rifle came up behind them:

He grabbed me and when my father attempted to react [he] grabbed my father's throat. I screamed because I thought he was going to kill my father. He let my father go and instead grabbed me by the throat. He threw me on the ground and hit me on the side with his rifle. He pointed his gun at me and said, "If you don't sleep with me I'll kill you." He then pointed the gun at my father and said, "If I don't sleep with your daughter I will kill you." My father had to stay under a tree some distance away. Then he forced himself on me... When he finished the act he left without saying a word... Sometimes I dream that I am being raped by this man and that he is going to kill me after he is done.²²⁶

In an interview on November 22, 2016, Sidiki denied all allegations of abuse and said his fighters respect human rights.²²⁷ Three days later, a spokesman for 3R and the group's general secretary denied that 3R fighters had committed any rapes.²²⁸

²²⁵ Human Rights Watch interview with Agnes, Bocaranga, November 24, 2016.

²²⁶ Human Rights Watch interview with Delphine, Bocaranga, November 25, 2016.

²²⁷ Human Rights Watch phone interview with Sidiki Abass, November 22, 2016.

Service providers in Bocaranga told Human Rights Watch that few rape survivors were able to access medical services due to insecurity. One service provider said that most survivors of sexual violence have not received post-rape care, including post-exposure prophylaxis (PEP) to prevent HIV transmission. Between September 27 and October 11, 2016, organizations providing assistance to rape survivors were forced to evacuate Bocaranga due to the fighting. They had to suspend services again on February 2, 2017, when the 3R attacked Bocaranga and fighting between anti-balaka and 3R left several civilians dead and the compound of one international NGO damaged by fire.²²⁹ At time of writing, NGOs had restarted their work.

In its July 2017 midterm report, the Panel of Experts on the Central African Republic reported having received information about three cases of rape allegedly perpetrated by 3R fighters in Niem in May 2017.²³⁰

²²⁸ Human Rights Watch interview with Bashir, spokesman, and Patrick Gombado, general secretary, De Gaulle, November 25, 2016.

²²⁹ “CAR Acting Humanitarian Coordinator calls for protection of civilians and respect of International Humanitarian Law,” UN Office of the Coordination of Humanitarian Affairs, news release, February 2, 2017, https://gallery.mailchimp.com/ec65ff95b00a3e0f330508b82/files/53a766a3-0a43-4b76-bd9d-fd3228af843c/OCHA_CAR_Press_Release_Violences_in_Bocaranga_02022017.pdf (accessed August 17, 2017).

²³⁰ Security Council, Letter dated 26 July 2017 from the Panel of Experts on the Central African Republic extended pursuant to Security Council resolution 2339 (2017), para. 113.

III. Impact of Sexual Violence

For virtually all the women and girls Human Rights Watch interviewed, the impact of sexual violence lingers long after the attack. For some, including those who became pregnant from rape, the physical effects of sexual violence are life-changing. Many survivors said the psychological effects are equally devastating, describing symptoms consistent with depression or post-traumatic stress disorder (PTSD) and, in some cases, suicidal thoughts. Some women may have contracted HIV from the rapes or while they were held as sexual slaves.²³¹

As in countries around the world, survivors of sexual violence in the Central African Republic often face stigma and rejection by family and community members. As a result, many survivors said they had not told family members or close friends about the violence, nor had they sought help, including essential medical care.

Moreover, some women and girls said that sexual violence compounded obstacles wrought by the conflict: following the violence, they faced additional barriers to conducting income-generating activities or accessing education.

Stigma and Rejection

Most of the women and girls Human Rights Watch interviewed voiced concerns about the social repercussions of rape. They described family or community members blaming them for being raped and publicly humiliating them, including by “pointing fingers” at them or calling them names. To avoid such shaming, women and girls often said that they did not divulge the sexual violence, which significantly impacted their ability to access critical post-rape medical and psychosocial care. In 66 cases that Human Rights Watch

²³¹ Women and girls interviewed for this report who tested HIV-positive following rape could not confirm that HIV resulted from rape. However, researchers have found heightened risk of HIV among women who have experienced sexual violence due to a number of factors, including lack of condom use during sexual violence and increased likelihood of genital tears and abrasions. See, for example, American Foundation for AIDS Research (amfAR), “Gender-Based Violence and HIV Among Women: Assessing the Evidence,” Issue Brief No. 3, June 2005, http://thehill.com/sites/default/files/WomenIB_o.pdf (accessed August 17, 2017); Seth C. Kalichman, Leickness Simbayi, Michelle R. Kaufman, and Vuyisile Mathiti, “Gender attitudes, sexual violence, and HIV/AIDS risks among men and women in Cape Town, South Africa,” *Journal of Sex Research*, 42(4), November 2005, pp. 299-305.

documented, women and girls specifically cited fear of stigma or rejection as a deterrent to seeking help.

Stigma

Women and girls told Human Rights Watch about husbands, relatives and community members blaming them, taunting them, and humiliating them following rape.

Michelle said that three anti-balaka raped her as she returned to the M'poko camp after buying wood in November 2015. When Human Rights Watch interviewed her in May 2016, she said she had stopped leaving the camp, largely due to mocking from fellow residents. "There is a change in my life," she said. "What I did before I can't do now because if I go out the men in our zone don't do anything but laugh at my history."²³²

Having tested HIV-positive following her rape by Seleka fighters in 2013, Danielle, 40, said she faces a double stigma. "[My] relatives knew about [the rape] and I was stigmatized by them," she said. "Some people treat me as though I am very sick, so I am stigmatized at the [displacement] site as well. I was even attacked at the site. Some people won't let me dry my clothes on the clothesline."²³³ It is unclear whether Danielle contracted HIV from the rape as she did not know her HIV status prior to the sexual violence.

Genevieve told Human Rights Watch that her husband publicly humiliated her when she tested HIV-positive after two Seleka fighters raped her in Bangui in December 2013. "[A]fter the HIV exam he went around the neighborhood and declared that he was innocent," she said of her husband. "He said [my HIV status] was not his fault and he is free of the virus, [even though] he has not gone for an exam. We are still together, but it is not really like it was before."²³⁴

In several cases, survivors said that their loved ones blamed them for the violence. Yvette, 27, described facing stigma both in public and at home after two Seleka fighters raped her in Kaga-Bandoro in early 2013:

²³² Human Rights Watch interview with Michelle, Bangui, May 5, 2016.

²³³ Human Rights Watch interview with Danielle, Bangui, January 24, 2016.

²³⁴ Human Rights Watch interview with Genevieve, Bangui, December 5, 2015.

I was traumatized because on the street people would say, “There she is, the woman who was raped by the Seleka.” At the house my husband said, “You accepted that the Seleka raped you. Why did you not cry out? Take your things and leave.”²³⁵

Though Yvette’s parents and a midwife convinced her husband to stay with her, she said he often raises the incident. “We are together now, but every time there is even a little problem he brings up the rape,” she explained. “He says, ‘No, go, you are the woman of the Seleka.’ When he says that, sometimes I go three or four days without eating and we don’t talk.”²³⁶

Many survivors said they do not trust family members or health workers to maintain privacy. “You know, in Central African families there aren’t secrets,” said Constance, 22, who was raped by four Seleka fighters in Bangui in December 2013. “People are going to talk, talk everywhere.”²³⁷ After Elise, 20, confided in her mother-in-law that Seleka fighters raped her in October 2015, mockery from community members left her afraid to go out:

When I told [my mother-in-law], she told the neighbors. When I stayed [at her house], they saw me leaving, then they started to laugh at me. I was ashamed. When I arrived back at M’poko [camp], I went directly to my house. I just cried. I did nothing but cry. I had difficulty even leaving the house.²³⁸

Survivors frequently told Human Rights Watch that fear of stigma or rejection factored into decisions not to seek care. Marianne, 30, said a lack of confidentiality kept her from getting health care after a Seleka fighter raped her in Mbrès around December 2014. “I didn’t go to the hospital,” she said. “I said, [if] I go to the hospital, I will have to explain to them and they are going to start talking about me and it is going to become a joke.”²³⁹

Even when women and girls did seek medical care, fear of stigma sometimes prevented them from disclosing rape to health workers, hindering them from receiving

²³⁵ Human Rights Watch interview with Yvette, Kaga-Bandoro, May 2, 2016.

²³⁶ Ibid.

²³⁷ Human Rights Watch interview with Constance, Bangui, January 23, 2016.

²³⁸ Human Rights Watch interview with Elise, Bangui, January 13, 2016.

²³⁹ Human Rights Watch interview with Marianne, Kaga-Bandoro, May 4, 2016.

comprehensive post-rape care. After seven anti-balaka raped her vaginally and anally in Bangui in December 2015, Colette, 22, said, “I couldn’t walk or sit down. I have stomach pain. I am constantly sick.” Despite this, Colette did not reveal the cause of her pain when she went to a health center two days after the rape. She explained:

I had a lot of worries that if I told them, they were going to tell the secret to all my friends. I was too afraid. [People] are going to point at me, that I am a victim of the armed group. They have done that to others—sometimes when the anti-balaka stop and hit people, others begin to point at that person as the victim of anti-balaka.²⁴⁰

Because the health workers did not know about her rape, Colette did not receive treatment to prevent HIV or unwanted pregnancy, despite visiting the health center within the timeframe necessary for these medications to be effective.²⁴¹

Abandonment by Loved Ones

Fear of exposure stems in part from the risk of rejection survivors face. Human Rights Watch interviewed 38 women and girls who said that their husbands, partners, or family members abandoned them after rape.

Claire, 36, said that her husband left her in their displacement camp after two anti-balaka raped her in Bangui in October 2015. “He abandoned me to go to another tent,” she said. “He said, ‘I don’t want you anymore.’”²⁴²

Rebecca, 36, described her husband’s reaction after a Seleka fighter raped her outside of Kaga-Bandoro in December 2014. “When I arrived [home] my husband said, ‘It is not worth us staying together. If a Seleka rapes a man’s woman, he should not stay with her,’” she recalled.²⁴³

²⁴⁰ Human Rights Watch interview with Colette, Bangui, May 5, 2016.

²⁴¹ See Section IV. Access to Services for Survivors of Sexual Violence: Barriers to Medical and Psychosocial Services.

²⁴² Human Rights Watch interview with Claire, Bangui, January 22, 2016.

²⁴³ Human Rights Watch interview with Rebecca, Kaga-Bandoro, May 2, 2016.

For many survivors, abandonment is as much a financial burden as an emotional one. Odile said her husband left her and their four children, including three under age 18, after two Seleka fighters raped her in Bangui in December 2013. “My husband said he couldn’t stand to be with me after the rape,” she said. “I wrote him to ask for money, but he hasn’t given any. I don’t have any support for my children.”²⁴⁴

In several cases, women said that abandonment was linked to fear of sexually transmitted infections. Prudence, 28, told Human Rights Watch that her husband left her after anti-balaka held her in sexual slavery for six months beginning in July 2014. “I don’t know what is in your body,” she recalled her husband saying.²⁴⁵ Rachele, 35, said her husband abandoned her after three Seleka fighters raped her in Bangui in December 2013, saying she was “going to give him infections.”²⁴⁶

Other survivors said that testing HIV-positive following rape led their husbands or partners to leave them. “When [doctors] did exams they found AIDS, and it was then that my husband abandoned me,” said Hélène, 35, who tested HIV-positive after three anti-balaka fighters raped her in Kaga-Bandoro in 2014.²⁴⁷

Physical and Psychological Trauma

Almost all the survivors Human Rights Watch interviewed said they suffer ongoing physical and psychological effects of the sexual violence they endured. In some cases, these are debilitating and even life-threatening, whether due to illness and injury or suicidal thoughts. Even when physical and psychological consequences may not be obvious, women and girls said the sexual violence had dramatically altered their lives.

Injury and Illness

Nearly every woman and girl that Human Rights Watch interviewed described ongoing abdominal, pelvic, and/or back pain following sexual violence. Research has shown links

²⁴⁴ Human Rights Watch interview with Odile, Bangui, January 14, 2016.

²⁴⁵ Human Rights Watch interview with Prudence, Bangui, April 30, 2016.

²⁴⁶ Human Rights Watch interview with Rachele, Bangui, January 23, 2016.

²⁴⁷ Human Rights Watch interview with Hélène, Kaga-Bandoro, May 2, 2016.

between sexual abuse, particularly rape, and long-term physical symptoms including chronic pelvic and other pain and gastrointestinal disorders amongst female survivors.²⁴⁸

Human Rights Watch spoke to survivors who also described ongoing vaginal or rectal pain, in some cases during urination or menstruation, as well as an inability to urinate or defecate normally or to have sexual intercourse. Many women said they experience vaginal bleeding during or after sexual violence and abnormal vaginal discharge long after.²⁴⁹

Martine, 32, said that, for six months after the Seleka held her captive and raped her daily for two weeks in December 2013, she had pain when she went to the bathroom and felt her health deteriorating. Neighbors brought her to a Bangui hospital around June 2014, where a doctor performed emergency abdominal surgery. “[The doctor] said my intestines were all ruined,” she said. “It was linked to the sexual violence.”²⁵⁰

Women and girls described other symptoms including difficulty walking, impaired vision, jaw pain, vertigo, weight loss, headaches, rapid heartbeat, fevers, and other body pain, some of which likely resulted from physical injury sustained during the attacks. Marie-Claire, 26, said that four anti-balaka punched and slapped her when they raped her in December 2013, causing persistent eye problems. “When they started to rape me, they hit my face very hard,” she said. “After, I had red eyes. Until now I don’t see well with my eyes. Sometimes it’s like water runs from them.”²⁵¹

²⁴⁸ Molly L. Paras, Mohammad Hassan Murad, Laura P. Chen, Erin N. Goranson, Amelia L. Sattler, Kristina M. Colbenson, Mohamed B. Elamin, Richard J. Seime, Larry J. Prokop, Ali Zirakzadeh, “Sexual Abuse and Lifetime Diagnosis of Somatic Disorders: A Systematic Review and Meta-Analysis,” *Journal of the American Medical Association*, Vol. 302., No. 5, August 5, 2009, pp. 550-561; Lisa A. Goodman, Mary P. Koss, Nancy Felipe Russo, “Violence against Women: Physical and mental health effects. Part I: Research Findings,” *Applied and Preventive Psychology*, 2:79-89, 1993, p. 81.

²⁴⁹ Some symptoms described by survivors, such as vaginal leakage and gastrointestinal problems, may be consistent with traumatic fistula, an abnormal opening between the reproductive tract and one or more body cavities or surfaces, caused by sexual violence. No survivors said that they had been diagnosed with fistula. However, because most survivors did not have medical diagnoses, medical documentation, or had not accessed medical care, Human Rights Watch cannot determine whether any of the survivors interviewed had traumatic fistula resulting from the sexual violence they experienced. See Ahuka Ona Longombe, Kasereka Masumbuko, Claude, and Joseph Ruminjo, “Fistula and Traumatic Genital Injury from Sexual Violence in a Conflict Setting in Eastern Congo: Case Studies,” *Reproductive Health Matters*, vol. 16, Issue 31, May 2008, [http://www.tandfonline.com/doi/full/10.1016/S0968-8080\(08\)31350-0](http://www.tandfonline.com/doi/full/10.1016/S0968-8080(08)31350-0) (accessed August 17, 2017), pp.132-141.

²⁵⁰ Human Rights Watch interview with Martine, Bangui, January 25, 2016.

²⁵¹ Human Rights Watch interview with Marie-Claire, Bangui, May 5, 2016.

One rape survivor suffered a head injury, which she and her mother said resulted in cognitive impairment. Ornella, 21, said she was returning from the family's fields near Mbrès in July or August 2015 when three Seleka attacked her, beat her, and cut her with machetes before taking her into the bush where they each raped her. She showed Human Rights Watch scars behind her ear and on her neck where she said she had been struck with a piece of wood. "I always have vertigo," Ornella said nine months after the attack. "[T]hey hit me in the pelvis, on the back. I have pain."²⁵² Ornella's mother, who found her daughter propped up against a tree after the attack, described Ornella's injuries. "She had knife cuts on her thigh, behind her ear, on her shin. They had hit her on the head with [a piece of] wood," she said. "She had head trauma.... Before, she didn't have problems. Now after you say something, she forgets it quickly. She doesn't reason well."²⁵³

Ornella's mother explained how her daughter's head injury has impacted their lives:

Before, she was in a good state. She accompanied me to the fields, she went to buy merchandise. Since then she can't walk around alone. I have to accompany her everywhere because of her trauma.... I don't have the means to take care of her. What am I going to do?²⁵⁴

Miscarriage and Complications During Pregnancy

Both Seleka and anti-balaka fighters knowingly committed rape against pregnant women and girls. Twenty-six women and one girl told Human Rights Watch that fighters raped them while pregnant. Eight survivors said they suffered pregnancy complications following sexual violence, including six who said they had miscarriages.

Zeinaba, around 16 years old, said she was three months pregnant when anti-balaka fighters held her for one week near Boda in February or March 2014. The anti-balaka raped and physically assaulted her, which she said caused her to miscarry:

In the forest, one kicked me in the pelvis. Blood started to flow.... I said I was pregnant. They said they didn't care. When I got to the [anti-balaka]

²⁵² Human Rights Watch interview with Ornella, Kaga-Bandoro, May 3, 2016.

²⁵³ Human Rights Watch interview with mother of Ornella, Kaga-Bandoro, May 3, 2016.

²⁵⁴ Ibid.

base I had pain in my pelvis. Two days later I had a miscarriage.... I told them I had pain and I was pregnant. They said, “If you give birth to a boy, we’re going to kill him the next day.” They knew when I miscarried. Since there was blood, it soaked my outfit... They didn’t react.²⁵⁵

Emilie, 25, also said she lost her baby after Seleka raped her in Bambari in December 2015. “When they raped me, I was four months pregnant,” she said. “At five and a half months, the child was born. It was a still-birth.”²⁵⁶

HIV and Other Sexually Transmitted Infections

Many women and girls told Human Rights Watch that they worry about the possibility of contracting sexually transmitted infections from rape, particularly HIV. According to the UN agency on HIV and AIDS (UNAIDS), the 2015 HIV prevalence rate for people aged 15-49 in the Central African Republic was 3.7 percent.²⁵⁷

Fifteen women told Human Rights Watch that they tested positive for HIV after they were raped. Though they attributed their contraction of HIV to rape, it is impossible to confirm when they became infected as their HIV status immediately prior to the rapes was unknown. Researchers have found gender-based violence, particularly violent sexual assault, to increase the risk of HIV infection, in part due to likelihood of genital cuts and abrasions.²⁵⁸ Only 92 out of the 296 survivors Human Rights Watch interviewed said that they had undergone HIV testing since experiencing sexual violence. Even then, the testing was often inconclusive as it had not been administered repeatedly or after the time delay necessary to determine infection. For many survivors, their HIV status remained a primary concern. Lucie, 28, who was raped by a Seleka fighter in Bangui in 2013, echoed many women and

²⁵⁵ Human Rights Watch interview with Zenaiba, Boda, April 28, 2016.

²⁵⁶ Human Rights Watch interview with Emilie, Bambari, January 18, 2016.

²⁵⁷ Joint United Nations Programme on HIV/AIDS (UNAIDS), Central African Republic HIV and AIDS estimates (2015), <http://www.unaids.org/en/regionscountries/countries/centralafricanrepublic> (accessed August 17, 2017).

²⁵⁸ American Foundation for AIDS Research (amfAR), “Gender-Based Violence and HIV Among Women: Assessing the Evidence,” Issue Brief No. 3, June 2005, http://thehill.com/sites/default/files/WomenIB_o.pdf (accessed April 24, 2017); Seth C. Kalichman, Leickness Simbayi, Michelle R. Kaufman, and Vuyisile Mathiti, “Gender attitudes, sexual violence, and HIV/AIDS risks among men and women in Cape Town, South Africa,” *Journal of Sex Research*, 42(4), November 2005, pp. 299-305.

girls when she said that she constantly questions her condition: “I ask myself, ‘Did he give me AIDS? What [other] disease? How is my health? Will I die soon?’”²⁵⁹

Four women and one girl said they tested positive for other sexually transmitted infections (STIs), including syphilis and gonorrhea, following sexual violence. Many others told Human Rights Watch they had symptoms consistent with infection, but had not received medical care or been tested for STIs.

Unwanted Pregnancy

Human Rights Watch interviewed 13 survivors, including three girls, who said they became pregnant from rape. Another survivor said she had not menstruated since the violence the previous month and that her period was approximately three weeks late, but she had not taken a pregnancy test. Survivors held as sexual slaves said they knew of at least five other women and girls who became pregnant while held captive.

Most survivors who had babies from rape said the children serve as reminders of the violence. “My [son] is a child of the Seleka,” said Clarice, 37, who endured repeated rapes by multiple Seleka fighters during a year of captivity in Bambari beginning in June 2014.²⁶⁰ “When I see the baby I can’t do anything but remember how I became pregnant.”

Some survivors told Human Rights Watch about additional stigma they face due to the children they bore from rape. Angèle, 27, said she became pregnant when Seleka fighters raped her repeatedly during nine months of captivity near Bambari beginning around October 2014. She explained how her family rejected her, leading her to have suicidal thoughts:

My family knows [about the rapes] and they said it’s not their problem... They said I went and got myself into a mess and gave birth to a baby without a father, and I should go back to Bambari to find the father... I have spent two months in Bangui. No one in my family has helped me... I thought that the baby should die, or I should die with the baby.²⁶¹

²⁵⁹ Human Rights Watch interview with Lucie, Bangui, January 14, 2016.

²⁶⁰ Human Rights Watch interview with Clarice, Bangui, May 9, 2016.

²⁶¹ Human Rights Watch interview with Angèle, Bangui, May 9, 2016.

Evelyne was approximately 15 years old when an anti-balaka fighter raped her near Boda around May 2015. She had a two-month-old baby from the rape when Human Rights Watch interviewed her in April 2016. Her mother and father were killed during the crisis and, since the birth of her child, she said that community members in Boda taunt her:

When people found out they said, “You’re an orphan. The man who did that, who is going to take responsibility for you?” ... Some mock me and say I became pregnant from a father who doesn’t exist. I ask their forgiveness.²⁶²

Survivors who bore children from rape often described feeling added financial pressure. Rachida, 25, was eight months pregnant when interviewed in December 2015 after five anti-balaka held her as a sexual slave for three weeks in Bangui. She said she was living under a tarp at a displacement camp in the capital. “People give me a bit of money,” she said. “The day I give birth I will put my life in God’s hands. I don’t even have a layette.”²⁶³

Though abortion is legal in cases of rape in the Central African Republic, significant barriers to access remain, even for survivors of sexual violence (see “Difficulty Accessing Abortion”). Béatrice, 18, told Human Rights Watch that a member of the anti-balaka killed her mother and aunt and then raped her repeatedly near Bouca around November 2015. Interviewed nearly three months later, she was pregnant from the rapes and wanted an abortion, but had not accessed medical care and did not know how to do so. “What am I going to do with this baby?” Béatrice asked. “I did not want it. Who will take care of it? My family is all dead and I have a murderer’s baby.”²⁶⁴

Sophie, 22, realized she was pregnant while in a village after fleeing from sexual slavery by Seleka fighters in Bambari in 2014. She recalled:

I said to myself, “If I had medicine, I would abort the pregnancy. But since I don’t know of anything, I have to stay like this until I give birth.” I didn’t go

²⁶² Human Rights Watch interview with Evelyne, Boda, April 29, 2016.

²⁶³ Human Rights Watch interview with Rachida, Bangui, December 4, 2015.

²⁶⁴ Human Rights Watch interview with Béatrice, Bangui, January 13, 2016.

to the hospital. I didn't get any medical care up until the birth. There was a health center in the village but there was no one there—everyone had fled.

Sophie said she worries about how to support the baby, and that the rape haunts her. “When I see men pass by, I wonder if perhaps they are some of the men who [raped] me.”²⁶⁵

Trauma, Emotional Distress and Risk of Suicide

Almost all of the survivors Human Rights Watch interviewed said they experience symptoms consistent with trauma, depression, or post-traumatic stress, including insomnia, nightmares, anxiety or panic attacks, frequent crying, listlessness, inability to concentrate, and mentally replaying the traumatic experience.²⁶⁶ In some cases, survivors said they had contemplated suicide.

Like many of the survivors Human Rights Watch interviewed, Carole, 25, said that memories of her 2013 rape by Seleka fighters in Bangui haunt her. “I relive it in my mind like it is a film,” she said.²⁶⁷ Henriette, 50, who said the Seleka held her as a sexual slave for three months beginning around May 2014, reflected what many survivors told Human Rights Watch, saying, “I don't sleep at night because of the violence I lived through. And if I try to sleep, sleep doesn't come.”²⁶⁸

Prudence, 28, described how her life changed after anti-balaka fighters held her as a sexual slave for six months beginning in July 2014. “Before, when I wasn't a victim, I was tranquil,” she said. “I can't think of anything except that I fell into the hands of armed groups.”²⁶⁹

Sabine, 43, said she watched anti-balaka fighters cut her husband's throat and then spent nearly seven months as the “wife” of a commander beginning around July 2014. After her release in February 2015, she was too scared to leave Bangui's Muslim neighborhood to

²⁶⁵ Human Rights Watch interview with Sophie, Bangui, April 26, 2016.

²⁶⁶ See Goodman et al., “Violence against Women: Mental Health Effects. Part I,” pp. 82-84; Carol E. Jordan, Rebecca Campbell, and Diane Follingstad, “Violence and Women's Mental Health: The Impact of Physical, Sexual, and Psychological Aggression,” *Annual Review of Clinical Psychology*, 6:607-28, 2010, pp. 613-617; Lisa A. Goodman, Mary P. Koss, Nancy Felipe Russo, “Violence against Women: Mental Health Effects. Part II.: Conceptualizations of posttraumatic stress,” *Applied and Preventive Psychology*, Vol. 2, 1993, pp. 123-130.

²⁶⁷ Human Rights Watch interview with Carole, Bangui, January 14, 2016.

²⁶⁸ Human Rights Watch interview with Henriette, Bangui, May 8, 2016.

²⁶⁹ Human Rights Watch interview with Prudence, Bangui, April 30, 2016.

access health care. “I feel like there are armed groups that could come take me again,” she said. “Now I don’t know if it is a Saturday or a Sunday. I don’t know the day or the date.”²⁷⁰

Seven survivors described experiencing suicidal thoughts. Aimée, 23, said a Seleka fighter raped her and threatened to kill her in Bangui in March 2013. “When I think about it, I don’t want to live anymore,” she said.²⁷¹

Experiences of stigma or rejection exacerbated survivors’ despair. Zara said that anti-balaka fighters raped and tortured her on the outskirts of Bangui for two days in July 2014. Following her release, her husband abandoned her and community members shamed her:

When I left [the anti-balaka’s] hands I wanted to kill myself and also kill my children. When I walk in the neighborhood, I am not treated like I was before.... My life has no meaning. When I think about everything they did to me, the anti-balaka who took everything from me.... I always have the thought in my head of killing myself.²⁷²

Survivors also said they are plagued by concern for the emotional state of children who witnessed the violence done to them. Louise said her seven children—then ages 8 to 19—watched four Seleka rape her and kill her husband in Bangui in December 2013. “They saw everything,” she said. “Two of my kids are not well in their heads since then.”²⁷³

The 5-year-old son of Giselle, 28, watched as two Seleka fighters raped her in December 2013. “I continue to think about the act and when I see my child, I think about how he was right next to me when I was raped,” she said.²⁷⁴

Even when women did access psychosocial care themselves—which was uncommon (see “Barriers to Medical and Psychosocial Services”)—they consistently said that their children received no such care. A psychologist working with an international nongovernmental

²⁷⁰ Human Rights Watch interview with Sabine, Bangui, May 6, 2016.

²⁷¹ Human Rights Watch interview with Aimée, Bangui, January 14, 2016.

²⁷² Human Rights Watch interview with Zara, Bangui, April 30, 2016.

²⁷³ Human Rights Watch interview with Louise, Bangui, January 22, 2016.

²⁷⁴ Human Rights Watch interview with Giselle, Bangui, January 14, 2016.

organization (INGO) voiced significant concerns about the lack of psychosocial support for children who have witnessed violence, including rape, and the lasting impact this could have on Central African society.²⁷⁵

Loss of Livelihoods and Access to Education

Some survivors said that sexual violence directly impacted their ability to work, provide for their families, or attend school. Often this was due to fear, a heightened sense of vulnerability to further violence, and, consequently, restrictions on their freedom of movement. In other cases, sexual violence occurred in conjunction with theft, pillage, or forced displacement that led to loss of livelihoods and some girls dropping out of school. Not only do such limitations add to financial strain on survivors and their families, they also curb women's and girls' independence and self-sufficiency.

Impact on Livelihoods

Incidents of sexual violence left many survivors afraid to conduct daily activities crucial to their livelihoods. Survivors who previously provided for themselves and their families told Human Rights Watch that the violence limited their autonomy.

In some cases, women said that the inability to continue income-generating activities left them dependent on others to meet their basic needs. “When I was at my house, I did small business—made cakes and so forth,” said Clarice, 20, of her life before six anti-balaka raped her in Bangui in October 2015. “Since the violence, I’m afraid. Now I don’t walk around anymore. It is my aunt who feeds me.”²⁷⁶

Florence, 32, was a vegetable seller in Bangui who said she stopped working after a Seleka fighter raped her on the way to the market in March 2013. Her husband abandoned her and

²⁷⁵ Human Rights Watch interview with international nongovernmental organization (INGO) psychologist, Bangui, December 4, 2015. In their guidelines on mental health in emergencies, the Inter-Agency Standing Committee (IASC) notes that “witnessing physical or sexual violence, and other distressing events can undermine ... healthy long-term social and emotional development” of children up to 8 years old, and calls for specific measures to offer support to children in crisis situations, as well as to those caring for them. “IASC Guidelines on Mental Health and Psychosocial Support in Emergency Settings,” IASC: 2007, Action Sheet 5.4: Facilitate Support for Young Children (0-8 years) and their caregivers, pp. 110-115.

²⁷⁶ Human Rights Watch interview with Clarice, Bangui, May 5, 2016.

she has no money to purchase vegetables, she said. “I was tall, I was a seller,” she explained. “Now I am not that anymore.”²⁷⁷

Many women who spoke with Human Rights Watch stressed their need for economic as well as medical, psychosocial, and legal assistance. Genevieve, 33, said she struggles to support a husband who does not work and also pay for the medications she needs after testing HIV-positive following rape. “I was a businesswoman before all this, and my life was ruined,” she said. “I need help in getting my life restarted.”²⁷⁸

Access to Education

Six girls said that sexual violence interrupted their education, either temporarily or long-term, due to fear of stigma, insecurity, or additional violence.

Patricia, 15, was in the sixth class in primary school (approximately equivalent to US grade 6) when two anti-balaka raped her and held her for two days in Bangui in April 2016. Afterwards, she said, she did not return to school due to stigma:

My grandmother explained [that I was raped] to her friend and I am in the same class as her granddaughter.... They spoke about me, [saying] that I am the wife of anti-balaka, and they started to laugh.²⁷⁹

Djamila and Fatima, sisters aged 13 and 17, said they had not returned to school since anti-balaka fighters raped them in Bangui in September 2015. They said their father would not permit them to return to their former school because of fears for their safety, and the family could not afford the school fees at the displacement site where they now lived. Djamila, 13, said she and her sister don’t leave the site’s confines.²⁸⁰

Evelyne, about 16 years old, said her family forbid her from attending school when she became pregnant after anti-balaka raped her near Boda around May 2015. “I was very

²⁷⁷ Human Rights Watch interview with Florence, Bangui, January 14, 2016.

²⁷⁸ Human Rights Watch interview with Genevieve, Bangui, December 5, 2015.

²⁷⁹ Human Rights Watch interview with Patricia, Bangui, May 5, 2016.

²⁸⁰ Human Rights Watch interview with Djamila, Bangui, December 7, 2015.

angry because I couldn't go to school," she said. "My aunt refused. She said I need to give birth first."²⁸¹ Evelyne returned to school after the child's birth, but said she feels unable to focus on her studies because she worries about the baby left at home.²⁸²

²⁸¹ Human Rights Watch interview with Evelyne, Boda, April 29, 2016.

²⁸² *Ibid.*

IV. Access to Services for Survivors of Sexual Violence

Survivors of sexual violence face immense challenges in accessing post-rape health, psychosocial, and legal services in the Central African Republic. In addition to the stigma and rejection described above, survivors have limited awareness of and access to these services, or believe the services' associated costs are prohibitive. When survivors do access services, they are not always comprehensive or sensitive to survivors' needs.

International standards explicitly call for provision of comprehensive medical and psychosocial services for survivors of sexual violence in humanitarian settings. Clinical management of rape should include post-exposure prophylaxis (PEP) to prevent HIV, treatment of other sexually transmitted infections (STIs), and availability of emergency contraception, all with the survivor's informed consent.²⁸³ Sexual violence response should also include referral and access to psychosocial and mental health services.²⁸⁴ Service providers should offer care for sexual violence survivors compassionately, confidentially, and in a manner that protects sensitive information, and should ensure as quickly as possible that community members know how, where, and why to access post-rape care.²⁸⁵ Such principles for provision of care are also laid out in the Standard Operating Procedures for Prevention and Response to Gender-Based Violence in the Central African Republic (GBV SOPs), an agreement developed by key GBV actors in the country and signed by the government, international nongovernmental organizations (INGOs), nongovernmental organizations (NGOs), and UN agencies including the United Nations Population Fund (UNFPA), the United Nations Children's Fund (UNICEF), World

²⁸³ Sphere Project, "Humanitarian Charter and Minimum Standards in Humanitarian Response," Chapter 2.3. Essential health services—sexual and reproductive health, Guidance Note 3: Sexual Violence, 2011, <http://www.spherehandbook.org/en/essential-health-services-sexual-and-reproductive-health-standard-1-reproductive-health/> (accessed August 17, 2017), p. 327; Inter-Agency Standing Committee (IASC), "Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action: Reducing Risk, promoting resilience, and aiding recovery," 2015, https://interagencystandingcommittee.org/system/files/2015-iasc-gender-based-violence-guidelines_lo-res.pdf (accessed August 17, 2017), p. 150; Inter-Agency Working Group on Reproductive Health in Crisis (IAWG), "Minimum Initial Services Package," Chapter 3: Prevent and Manage the Consequences of Sexual Violence, <http://iawg.net/wp-content/uploads/2015/09/chapter3.pdf> (accessed August 17, 2017), pp. 27, 32.

²⁸⁴ Sphere Project, p. 327.

²⁸⁵ IAWG, "Minimum Initial Services Package," p. 26-27; see also IASC, "Guidelines for Integrating GBV Interventions in Humanitarian Action," p. 156.

Health Organization (WHO) and some MINUSCA divisions.²⁸⁶ Human Rights Watch found that service providers in the Central African Republic were not consistently adhering to such guidelines.

Barriers to Medical and Psychosocial Services

Of 296 survivors of sexual violence interviewed for this report, fewer than half—145—had accessed any medical care prior to being interviewed by Human Rights Watch. Of these, only 83 confirmed having disclosed the sexual violence to health care providers, thus allowing for comprehensive post-rape health care, including PEP to prevent HIV and emergency contraception to prevent unwanted pregnancy. However, among those who did disclose rape, many said service providers did not offer them critical elements of post-rape care, including PEP, emergency contraception, testing for HIV and other STIs, and psychosocial support.

Both service providers and survivors said that, of survivors who access post-rape care, very few do so immediately. The UN reported that “owing to the lack of available health services and the prohibitive cost of travel from remote locations,” in 2016 only 32 percent of sexual violence survivors in the Central African Republic accessed help within 72 hours, the timeframe in which PEP must be administered following HIV exposure.²⁸⁷ Only 41 of the survivors Human Rights Watch interviewed said they accessed medical care within 72 hours of rape. While some forms of emergency contraception may be effective for up to five days, and national guidelines on pregnancy prevention in cases of rape adhere to this timeframe, some health care providers in the Central African Republic told Human Rights Watch that they only prescribe it within the 72-hour or three-day period following a rape.²⁸⁸

²⁸⁶ Sous-Cluster Violences Basées sur le Genre, “Procédures Operationelles Standards pour la Prévention et la Réponse à la Violence Basée sur le Genre en République Centrafricaine,” Bangui, July 24, 2015, https://www.humanitarianresponse.info/system/files/documents/files/pos_vbg_rca_version_finale.pdf (accessed August 17, 2017).

²⁸⁷ UN Secretary-General’s report on Sexual Violence in Conflict, 2017, para. 22. The midwife in charge of reproductive health at Boda’s hospital said that of 30 rape survivors who came for services between April and December 2015, only five arrived within 72 hours of the incident. Human Rights Watch interview with midwife, Boda Hospital, April 28, 2016. At Hôpital Communautaire in Bangui, service providers said that they treated 114 rape survivors between March 1 and April 14, 2016, of whom only 15 arrived within the 72 hours following the violence. Human Rights Watch interview with doctor and reproductive health services staff, Hopital Communautaire, Bangui, April 22, 2016.

²⁸⁸ Human Rights Watch interviews with doctor, Bambari Hospital, January 16, 2016; Human Rights Watch interview with doctor, Boda Hospital, April 29, 2016; Human Rights Watch interview with doctor, Kaga-Bandoro Hospital, May 4, 2016; Ministère de la Santé et de la Population, Organisation Mondiale de la Santé, United Nations Children’s Fund (UNICEF),

A doctor at an INGO in Boda said that fear of shame and reprisals prevent survivors from seeking care quickly.²⁸⁹ Survivors and even service providers also remain unaware that crucial medical interventions are available but time-sensitive. As one INGO health worker said, “Even health workers don’t know the importance of coming within 72 hours.”²⁹⁰

Lack of Available Services

Survivors face the additional challenge of navigating a largely broken health care system. The health care system in the Central African Republic operates at three levels: peripheral, or local, including health posts (*postes de santé*) and health centers (*centres de santé*), which serve as a first point of care, and district hospitals, which serve as a first point of referral for one or more sub-prefectures; intermediary, or regional, which includes regional hospitals covering several health districts that are the second level of referral for a health region; and central, which includes national hospitals and universities in the capital and provision of more specialized care.²⁹¹ A Ministry of Health official told Human Rights Watch that health facilities in Bangui are able to offer post-rape care including PEP, emergency contraception, and antibiotics, but that such service provision remains challenging outside the capital, where NGOs manage most post-rape care.²⁹²

Although the government pledged in December 2012 to work with the UN to offer “greater support for basic services for survivors, including in the clinical management of rape and psychosocial support,” damage to health facilities and generalized insecurity led to reduced availability of all health services since 2013.²⁹³ In 2015, the World Health Organization reported that 34 percent of health facilities were partially or totally destroyed, half of functioning secondary health facilities could not provide trauma care, and 43 percent of staff at health structures were community health workers without consistent

United Nations Population Fund (UNFPA), and United Nations Development Programme (UNDP), “Protocole de la prise en charge médicale des survivantes de viol,” undated, on file with Human Rights Watch.

²⁸⁹ Human Rights Watch interview with doctor, international nongovernmental organization (INGO), Boda, April 29, 2016.

²⁹⁰ Human Rights Watch interview with health worker, INGO, Bangui, July 27, 2015.

²⁹¹ Ministère de la Santé Publique de la Population et de la Lutte Contre le SIDA, “Normes Relatives au District de Santé en République Centrafricaine,” Bangui, October 17, 2016, <http://m.20-bal.com/buhgalteriya/839/index.html> (accessed August 17, 2017), p. 9.

²⁹² Human Rights Watch interview with Ministry of Health official, Bangui, April 11, 2017.

²⁹³ Letter dated 4 January 2013 from the Secretary-General addressed to the President of the Security Council, Annex I: Joint Communiqué of the Government of the Central African Republic and the United Nations (Bangui, 12 December 2012), U.N. Doc. S/2013/8, para.(e).

training.²⁹⁴ The Ministry of Health noted that only 10 of 21 voluntary HIV and STI testing centers nationwide remained operational in 2015.²⁹⁵

Even functioning services have operated intermittently due to insecurity. A doctor at a health center in Bangui's PK5 neighborhood, for example, said the clinic closed from December 2013 to January 2014 and again in March 2014 due to fighting. During those times, he said, "It was not possible for anyone to come [to the clinic]. We open, things heat up, we pull out."²⁹⁶ When open, the clinic still could not provide 24-hour care as of May 2016. "We work only days, because of the continuing insecurity," he said. "[At night] a survivor would have to go elsewhere."²⁹⁷

A midwife at Kaga-Bandoro hospital also told Human Rights Watch in May 2016 that insecurity prevented staff from providing round-the-clock services, which could delay urgent post-rape care. "Before, when people called at night, we came out [to the hospital]," she said. "But now we can't for our own security."²⁹⁸

Some survivors said that health facilities were non-operational at the time of their rapes. Mélanie, 31, did not get immediate health care after two Seleka fighters raped her in May 2017 because "in Alindao, there was no hospital," she said. "It was ransacked."²⁹⁹ Catherine, 25, described trying to access health care after two anti-balaka raped her near Mbrès in January 2015. "When I arrived at the health center in Blakadja, because of the crisis there were no health personnel, no medicines," she recalled. "But they gave me pills for pain. I didn't find personnel there—only the guard. He gave me a prescription."³⁰⁰

²⁹⁴ World Health Organization (WHO), "Central African Republic Humanitarian Response Plan 2016," <http://www.who.int/hac/crises/caf/appeal/en/> (accessed August 17, 2017); WHO, "Briefing notes on health situation in Central African Republic," <https://reliefweb.int/report/central-african-republic/briefing-notes-health-situation-central-african-republic> (accessed September 17, 2017).

²⁹⁵ Ministère de la Santé et de la Population de la République Centrafricaine, "Plan de Transition du Secteur Santé en République Centrafricaine," 2015-2017, February 2017, p. 17.

²⁹⁶ Human Rights Watch interview with doctor, Centre de Santé Mamadou Mbaïki, Bangui, May 9, 2016.

²⁹⁷ Ibid.

²⁹⁸ Human Rights Watch interview with midwife, Kaga-Bandoro Hospital, May 3, 2016.

²⁹⁹ Human Rights Watch interview with Mélanie, Bangui, August 21, 2017.

³⁰⁰ Human Rights Watch interview with Catherine, Kaga-Bandoro, May 3, 2016.

Several survivors in Boda told Human Rights Watch that they could not access health care following rape because the hospital was not functioning. “In 2014 there was a problem because a lot of women were raped,” a midwife at Boda hospital said. “But as there was no hospital and they weren’t informed [of where to go], they just had to keep quiet.”³⁰¹ The director of Boda’s hospital confirmed that insecurity led to closure of the hospital between December 29, 2013, and March 30, 2014, and services did not fully resume until June 2014.³⁰²

Where health facilities were operational, insecurity sometimes prevented women and girls from reaching care or accessing follow-up services. Estelle said she was three months pregnant when anti-balaka fighters raped her in January 2014. After the rape, she went to the Mosque Centrale displacement camp in Bangui, where she miscarried. She said the camp did not have medical facilities, and she could not leave to visit a hospital due to insecurity. As a Muslim, she felt especially afraid to move around Bangui. “If you went out [of the IDP site] to go to the hospital, they were going to kill you,” she said.³⁰³

Fees for Post-Rape Health Care

Fifty-three women and girls told Human Rights Watch that costs—including for consultations, medications, and transport to and from services—hindered their access to medical care. Guidelines on gender-based violence in emergencies published by the Inter-Agency Standing Committee (IASC), the mechanism for inter-agency coordination of humanitarian assistance among all key actors, recommend that health facilities offer free or reduced-fee services to survivors of sexual and other gender-based violence.³⁰⁴ The GBV SOPs agreed upon by government ministries, UN agencies, and INGOs for the Central African Republic call for free post-rape care.³⁰⁵ Providers at Hôpital de l’Amitié, Hôpital Communautaire, Hôpital des Castors, Hôpital Général, and Centre de Santé Mamadou

³⁰¹ Human Rights Watch interview with midwife, Boda Hospital, April 28, 2016.

³⁰² Human Rights Watch interview with hospital director, Boda, April 28, 2016.

³⁰³ Human Rights Watch interview with Estelle, Bangui, April 25, 2016.

³⁰⁴ IASC Guidelines, p. 149. The IASC Global Health Cluster has concluded that user fees for essential health care should be eliminated during humanitarian emergencies, where “user fees refer to formal as well as informal payments for basic and higher level services, drugs, diagnostic investigations, medical supplies, entrance or consultation fees, or a combination of these.” IASC Global Health Cluster, “Removing User Fees for primary health services during humanitarian crises,” March 24, 2010, http://www.who.int/hac/global_health_cluster/about/policy_strategy/EN_final_position_paper_on_user_fees.pdf (accessed August 17, 2017), p. 1.

³⁰⁵ Sous-Cluster Violences Basées sur le Genre, July 24, 2015, p. 19.

Mbaïki in Bangui, and at hospitals in Bambari, Boda, and Kaga-Bandoro, told Human Rights Watch that they offer post-rape care free of charge, often with support from INGOs.

A Ministry of Health official told Human Rights Watch that health facilities offer free post-rape care, but that survivors' lack of familiarity with services hinders access:

We have done outreach campaigns on both public and private radios, but still some women go to the wrong place and they end up thinking they must pay. Care is free to children up to age five and pregnant women, and some women get confused and think victims of rape are not taken care of, but they are. The care is free, they just don't go to the right place.³⁰⁶

However, several survivors who disclosed sexual violence to health personnel told Human Rights Watch that medical providers asked for payment for exams, tests, or medications.

Survivors in Kaga-Bandoro told Human Rights Watch that hospital personnel demanded fees for consultations and treatment. Lorraine, 30, explained what happened when she visited Kaga-Bandoro hospital twice about a year after Seleka fighters raped her in April 2015:

They told me to pay for medicines and I don't have the means. It was for injections, serums, antibiotics—4,500 CFA (US\$7.67), 2,500 CFA (\$4.26).... [The doctor] did a consultation. He said I had internal injuries. I explained the rape to him. They didn't do an HIV test. He told me that to do an HIV test I had to pay 1500 CFA (\$2.56).³⁰⁷

Lydie, 38, said she spoke with a nurse at Kaga-Bandoro hospital after five Seleka fighters raped her around January 2013, but did not disclose the rape because of fees:

They told me to pay for the medical booklet—100 CFA (\$0.17)—and the consultation—1000 CFA (\$1.72)—and I didn't have the means.... I didn't

³⁰⁶ Human Rights Watch interview with Ministry of Health official, Bangui, October 26, 2016.

³⁰⁷ Human Rights Watch interview with Lorraine, Kaga-Bandoro, May 3, 2016.

explain what happened because I didn't pay for the consultation. If I had paid for the consultation, I would have explained everything.³⁰⁸

Despite these testimonies from survivors, hospital staff in Kaga-Bandoro told Human Rights Watch that they provide free post-rape medical care to all survivors.³⁰⁹

Survivors in Bangui said that personnel at various health care facilities also asked them to pay for tests or medications and, in some cases, did not provide comprehensive post-rape care. Patricia, 15, said she told staff at Bangui's Hôpital Communautaire about her rape, but her grandmother had to pay 500 CFA (about \$0.86) for medications, and personnel said she would need to pay for an HIV test. "I haven't had an HIV test yet," she said in May 2016. "It's a problem of money, of [paying for] transport and paying for the exams."³¹⁰ Patricia said she had missed her period following the rapes, but hospital staff had not done a pregnancy test.³¹¹

The mere possibility of having to pay for services deterred some survivors from seeking medical care. Explaining why she had not sought health care since two Seleka raped her in Mbrès in April 2015, Élodie, 39, said, "I don't manage to eat. If I want to buy food, I have to go look for sticks and sell them. [The hospital] will cost money."³¹²

Even when services were free, survivors sometimes said they could not afford the cost of transport to health facilities. Fleure, for example, said, "I want to go to the hospital, but I don't have money. I have a problem of [paying for] transport as well as treatment."³¹³ Although service providers said the government has agreed to provide free HIV testing for rape survivors and free anti-retroviral treatment (ARVs) for HIV-positive patients, some medical service providers and survivors told Human Rights Watch about barriers to

³⁰⁸ Human Rights Watch interview with Lydie, Kaga-Bandoro, May 2, 2016.

³⁰⁹ Human Rights Watch interviews with midwife, Kaga-Bandoro Hospital, May 3, 2016, and doctor, Kaga-Bandoro Hospital, May 3, 2016.

³¹⁰ Human Rights Watch interview with Patricia, Bangui, May 5, 2016.

³¹¹ Ibid.

³¹² Human Rights Watch interview with Élodie, Kaga-Bandoro, May 2, 2016.

³¹³ Human Rights Watch interview with Fleure, Bangui, January 23, 2016.

access.³¹⁴ In some cases, survivors said they were told to pay for HIV tests, or believed they would have to pay.

Aimée, 22, said financial concerns prevented her from getting an HIV test after three armed Mbororo raped her near Kaga-Bandoro in December 2015. Her husband called her “contaminated” after the rape and left her, but she thought the cost of an HIV test would be prohibitive. “I am scared because I have not done an exam to know if I am infected,” she said. “I would do the exam but I [would] have to pay 1500 CFA (about \$2.29).”³¹⁵

Financial concerns also deterred some HIV-positive survivors from getting care. Agathe, 50, said she tested HIV-positive after three Seleka raped her in Bambari in July 2014. She said she worries about her health, but also about how to buy medication when she can hardly afford food. “They told me to come to the HIV testing center for medicine,” she explained. “I said, ‘I am already dying. Why should I come here and get medicine at the hospital?’... [W]hen I take the medicine, I will go hungry. How am I going to eat?”³¹⁶

At least one survivor said that after an initial six-month period of free medication, she had to begin paying for ARVs.³¹⁷ Several survivors also said that disruptions in the stock of ARVs prevented them from taking the medications during some periods.

Lack of Comprehensive Post-Rape Care

According to the protocol on clinical management of rape in the Central African Republic agreed to by the Ministry of Health, World Health Organization (WHO), United Nations

³¹⁴ Human Rights Watch interviews with program director, medical NGO, Bangui, December 8, 2015, gynecologist, Hôpital Communautaire, Bangui, April 22, 2016, doctor, medical INGO, Boda, April 29, 2016, midwife, Kaga-Bandoro, May 4, 2016, gynecologist, Hôpital Amitié, Bangui, May 9, 2016. A national action plan on the fight against HIV and AIDS for 2012-2016 notes that the government, with financial support from international donors, is to provide care for HIV-positive people free of charge, but also notes the lack of a national strategy to provide free and adequate care for sexually transmitted infections. Comité National de Lutte Contre le SIDA (CNLS), “Présidence de la République Centrafricaine, Cadre Stratégique National de Lutte Contre le VIH et le SIDA 2012-2016,” Bangui, May 2012, http://www.ilo.org/wcmsp5/groups/public/---ed_protect/---protrav/---ilo_aids/documents/legaldocument/wcms_301805.pdf (accessed August 17, 2017). The UN has also reported interruptions in HIV-related services due to the conflict. See Aikaterini Kitidi, “HIV/AIDS: conflict in Central African Republic disrupts treatment,” UNHCR, September 3, 2014, <http://www.unhcr.org/uk/news/latest/2014/9/540716716/hiv-aids-conflict-central-african-republic-disrupts-treatment.html> (accessed August 17, 2017).

³¹⁵ Human Rights Watch interview with Aimée, Kaga-Bandoro, May 2, 2016.

³¹⁶ Human Rights Watch interview with Agathe, Bambari, January 17, 2016.

³¹⁷ Human Rights Watch interviews with Hélène, Kaga-Bandoro, May 2, 2016, Nalia, Bangui, January 24, 2016, and Genevieve, Bangui, December 5, 2015.

Children’s Fund (UNICEF), the United Nations Population Fund (UNFPA), and the United Nations Development Programme (UNDP), medical care for rape survivors should include, with the patient’s consent, wound care, treatment of pain, antibiotics to prevent and treat sexually transmitted infections, tetanus and Hepatitis B vaccines, and HIV testing. The protocol also calls for treatment with PEP when survivors arrive within 72 hours of a rape and with emergency contraception for those who arrive within five days (120 hours) of a rape. The existing protocol lacks any mention of pregnancy testing, access to safe abortion for women who may be pregnant due to rape, or referrals to psychosocial, legal, or other support services.³¹⁸

Multiple women and girls who disclosed sexual violence at health facilities told Human Rights Watch that health personnel failed to offer complete post-rape services or refer them elsewhere for such services, including PEP, emergency contraception, physical examinations, and tests for pregnancy, HIV, and other sexually transmitted infections.

Nicole said that she went to the clinic at the Monastère displacement camp in December 2013 after three Seleka raped her in Boy-Rabe. She said they gave her medicine for pain and inflammation but did not examine her, telling her she should leave quickly because they had “too many people to see.”³¹⁹

Aurore, 50, said that clinic personnel in the Sangaris displacement camp in Bambari did not provide physical exams after Seleka fighters raped her and her two daughters in 2014:

I explained everything. They said, “We don’t have injections to stop diseases in the body.” They only gave me medicine for malaria. They didn’t refer me to another hospital.³²⁰

The Ministry of Health has listed improvement of response to sexual violence among its priorities in its transitional health plan for 2015-2017. Targeted activities include providing

³¹⁸ Ministère de la Santé et de la Population et al., “Protocole de la prise en charge médicale des survivantes au viol.”

³¹⁹ Human Rights Watch interview with Nicole, Bangui, January 14, 2016.

³²⁰ Human Rights Watch interview with Aurore, Bambari, January 18, 2016.

technical assistance for holistic management of sexual violence, and developing protocols for and expanding case management of sexual violence based on UN programming.³²¹

Difficulty Accessing Abortion

Access to abortion in the Central African Republic remains limited, including for women and girls who become pregnant from rape. According to both the 2010 Penal Code and the 2006 Law on Reproductive Health, abortion is legal under certain circumstances, including in cases of pregnancy due to rape or incest.³²² However, the laws contain contradictory provisions and fail to state a clear process for authorizing abortions. The Penal Code says that “therapeutic abortion” may be acceptable under the advice of an association of doctors.³²³ The reproductive health law states that “voluntary interruption of a pregnancy” must be authorized by “an association of doctors, by specialists, or, in cases of necessity, by a doctor,” and the doctor or doctors must register the decision in an official report.³²⁴ Neither specifies exactly how permission for an abortion may be granted. Despite the legality of abortion for survivors of rape, the clinical management of rape protocol agreed upon by the Ministry of Health, WHO, and UN agencies fails to mention safe abortion access as an element of post-rape care.

When asked about the availability of abortion for pregnant survivors of sexual violence, a Ministry of Health official said:

Abortion is not legal in the Central African Republic. We can only do it if the woman’s life is in danger and it is only a doctor who can make that decision. After an act of rape, we will try to convince the women to keep the baby, but... if she does not want to or cannot, then an abortion can be done. However, this is not systematic. It is done rarely, and it is case by case.³²⁵

³²¹ Ministère de la Santé et la Population, “Plan de Transition du Secteur Santé en République Centrafricaine 2015-2017,” Bangui, February 2015, Ch. 4.3.3, on file with Human Rights Watch.

³²² Loi No. 10.001 du 6 Janvier 2010 Portant Code Pénal Centrafricain, Journal Officiel de la République Centrafricaine, Art. 79; Loi No. 06.005 du 20 Juin 2006 Bangayassi Relative à la Santé de Réproduction, Journal Officiel de la République Centrafricaine, Edition de Septembre 2007, Art. 25.

³²³ Loi No. 10.001, Art. 79.

³²⁴ Loi No. 06.005, Art. 25.

³²⁵ Human Rights Watch interview with Ministry of Health official, Bangui, October 26, 2016.

Confusion about the legality of abortion and the procedure for obtaining permission extends to medical providers. Doctors, nurses, and midwives with whom Human Rights Watch consulted differed in their understanding of when an abortion can be performed and the authorization required to perform it. Two gynecologists in Bangui said that abortion is only permissible with three doctors' opinions and authorization by the prosecutor.³²⁶ A doctor in Kaga-Bandoro said that only one doctor's opinion plus a prosecutor's authorization are required.³²⁷ Two doctors said that abortion may be authorized up to the twelfth week of pregnancy, whereas a third said that it can be conducted up to the eighth week of pregnancy or tenth week of amenorrhea (absence of menstruation).³²⁸ As one doctor said, "The problem is that the current law is not clear."³²⁹

Women and girls may hesitate to request an abortion through official channels or seek care in cases of botched abortion, due to risk of punishment. A woman or girl who attempts to or procures an unlawful abortion, or consents to the use of any means to cause an abortion, faces a prison sentence of six months to two years and a 100,000 to 1,000,000 CFA fine (approximately \$171 to \$1,711).³³⁰

Anyone who aids in or performs unlawful abortion faces penalties including one to five years' imprisonment and a fine of 200,000 to 2,000,000 CFA (approximately \$342 to \$3,421).³³¹ If someone has performed abortions repeatedly, punishment increases to five to ten years' imprisonment and a 500,000 to 1,000,000 CFA fine (approximately \$855 to \$1,711).³³² Though a Ministry of Health official told Human Rights Watch that no prosecutions for conducting or seeking abortion took place in 2015 or 2016, health care personnel said that fear of penalties contributes to their cautious approach in seeking authorization for abortion.³³³ A doctor working for an international nongovernmental

³²⁶ Human Rights Watch interviews with gynecologist, Hôpital Communautaire, Bangui, April 22, 2016, and gynecologist, Hôpital de l'Amitié, Bangui, May 9, 2016.

³²⁷ Human Rights Watch interview with doctor, Hôpital Kaga-Bandoro, May 3, 2016.

³²⁸ Human Rights Watch interviews with gynecologist, Hôpital Communautaire, doctor, Hôpital Kaga-Bandoro, program director, medical INGO, Hôpital Castor, Bangui, December 8, 2015.

³²⁹ Human Rights Watch interview with gynecologist, Hôpital de l'Amitié, Bangui.

³³⁰ Penal Code 2010, Art. 78.

³³¹ Ibid.

³³² Ibid.

³³³ The Ministry of Health official said that women had been tried and convicted for having abortions prior to 2015. Human Rights Watch interview with Ministry of Health official, Bangui, April 11, 2017.

organization (INGO) in Boda said, “We can do [an abortion] but I would want to have all of the legal guarantees.... If I think medically [the pregnancy] will cause her a psychological problem, I will give my medical advice to the prosecutor. But if he says no, then I won’t touch it.”³³⁴

A midwife at Kaga-Bandoro hospital said that she would ultimately refer a woman requesting an abortion to a doctor, but she would strongly discourage pregnant rape survivors from terminating the pregnancy. “We ask the woman to keep the pregnancy even if she doesn’t want to,” she said. “That’s that. There is nothing I can do.”³³⁵

Such counsel from NGO or medical personnel, combined with social and religious pressures, may dissuade some women who want an abortion from seeking one even in cases of pregnancy due to sexual violence. Carine said she became pregnant after four armed Mbororo raped her in Kaga-Bandoro in July 2015 and she was influenced by staff at the hospital and midwives from two international organizations, none of whom provided information about the possibility of terminating her pregnancy. “On the contrary, the midwives advised me to keep the baby healthy until the birth,” Carine said.³³⁶

One survivor told Human Rights Watch that she obtained a clandestine abortion after becoming pregnant when anti-balaka fighters held her in sexual slavery for 18 months. She described paying “a man in the quartier” who is a “specialist in abortion” to terminate the pregnancy.³³⁷ Another survivor said she drank traditional medicine to cause a miscarriage.³³⁸ A midwife at Boda hospital said, “There are a lot of cases of clandestine abortions because of unwanted pregnancy, due to rape by armed groups.”³³⁹

³³⁴ Human Rights Watch interview with doctor, INGO, Boda, April 29, 2016.

³³⁵ Human Rights Watch interview with midwife, Hôpital Kaga-Bandoro hospital, May 3, 2016.

³³⁶ Human Rights Watch interview with Carine, Kaga-Bandoro, May 3, 2016.

³³⁷ Human Rights Watch interview with Amira, Bangui, December 6, 2015.

³³⁸ Human Rights Watch interview with Noura, Bangui, May 7, 2016.

³³⁹ Human Rights Watch interview with midwife, Hôpital Boda, April 28, 2016.

World Health Organization standards on post-rape care call for access to safe abortion for survivors of sexual violence, in accordance with national law.³⁴⁰ UN human rights bodies and experts, including the UN Human Rights Committee, the Committee on Economic, Social, and Cultural Rights (CESCR), the CEDAW Committee, the CRC Committee, and the Special Rapporteur on the right to health have noted that criminalization of abortion, including criminal penalties for women who have abortions, is discriminatory and puts women's lives, health, and rights at risk.³⁴¹

Lack of Screening for Sexual Violence

Some survivors who sought health services said they did not disclose rape because health providers did not ask about the circumstances leading to their illnesses or injuries.

Pernille, 47, said she went to the medical facility at the M'poko displacement camp after a Seleka fighter raped her in Bangui in 2013, but only received ibuprofen. "I did not say that I had been raped because they did not ask, so I just spoke about my pain," she said.³⁴² The IASC Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action recommend that agencies consider training health and other service providers in how to identify or screen for signs of sexual and other gender-based violence, emphasizing that personnel should only conduct such screening with proper training and

³⁴⁰ WHO, "Responding to Intimate Partner Violence and Sexual Violence against Women: WHO Clinical and Policy Guidelines," Section 3.1.2. Emergency Contraception, Recommendation 14, WHO: 2013, <http://www.who.int/reproductivehealth/publications/violence/9789241548595/en/> (accessed August 17, 2017), p. 27.

³⁴¹ See, for example, Human Rights Committee, Views adopted by the Committee under article 5(4) of the Optional Protocol, concerning communication No. 2324/2013, U.N. Doc. CCPR/C/116/D/2324/2013, http://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?symbolno=CCPR/C/116/D/2324/2013&Lang=en (accessed August 17, 2017), paras. 7-10; Committee on Economic, Social, and Cultural Rights (CESCR), General Recommendation No. 22 (2016) on the right to sexual and reproductive health (article 12 of the International Covenant on Economic, Social and Cultural Rights), UN Doc. E/C.12/GC/22, May 2, 2016, Art. 1, http://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?symbolno=E%2fC.12%2fGC%2f22&Lang=en (accessed August 17, 2017); CEDAW Committee, "Statement of the Committee on the Elimination of Discrimination against Women on sexual and reproductive health and rights: Beyond 2014 ICPD review," Fifty-seventh session, February 10-28, 2014, <http://www.ohchr.org/Documents/HRBodies/CEDAW/Statements/SRHR26Feb2014.pdf> (accessed August 17, 2017); UN Office of the High Commissioner of Human Rights, "Joint Statement by UN human rights experts, the Rapporteur on the Rights of Women of the Inter-American Commission on Human Rights and the Special Rapporteurs on the Rights of Women and Human Rights Defenders of the African Commission on Human and Peoples' Rights," September 24, 2015, <http://www.ohchr.org/EN/NewsEvents/Pages/DisplayNews.aspx?NewsID=16490&Langl> (accessed August 17, 2017); UN Committee on the Rights of the Child (CRC), General Comment No. 20 (2016) on the implementation of the rights of the child during adolescence, UN Doc. CRC/C/GC/20, December 6, 2016, <http://www.refworld.org/docid/589dad3d4.html> (accessed August 17, 2017), para. 60.

³⁴² Human Rights Watch interview with Pernille, Bangui, January 23, 2016.

confidentiality practices in place.³⁴³ Research has shown that, when appropriate conditions and prerequisites are met, screening for GBV at primary health facilities in humanitarian settings can encourage reporting of violence and facilitate survivors' access to services.³⁴⁴

Lack of Awareness and Misperceptions About Services

Lack of awareness also impeded survivors from accessing services quickly. When they did know of services, perceptions about available care and the quality of services, in addition to fear of fees, sometimes prevented them from seeking help.

Although an international nongovernmental organization (INGO) operates free, specialized services for sexual violence survivors in Bangui, Georgette, 47, said she did not believe that free care for rape survivors was available. She echoed several survivors when she said, “[The INGO] only treats for malaria and parasites. Even if the care is free you have to pay for prescriptions.”³⁴⁵ Another survivor said, “We thought of going to [the INGO] at the Hôpital Générale, but we learned that it is only for wounds and people who have broken bones.”³⁴⁶

Survivors had similar misperceptions of available medical care at displacement camps. Rachelle, 35, reflected the views of several women when she said that health services at her camp in Bangui are not for rape survivors. “They are there at the site, but the medicine there is not to treat us,” she said. “It is paracetamol, ibuprofen, but that’s not what will heal us.”³⁴⁷

Inadequate Referral Mechanisms

Many of the women and girls Human Rights Watch interviewed were unaware of available services for sexual violence survivors, in some cases despite interacting with service providers or others who should provide referrals for care. Referrals to specialized medical

³⁴³ IASC Guidelines, 2015, p. 153.

³⁴⁴ International Rescue Committee and Johns Hopkins University, “Feasibility and Acceptability of Gender-Based Violence Screening: Primary Health Facilities in Humanitarian Settings,” September 1, 2015, <https://www.rescue.org/sites/default/files/document/663/gbvscreeninglowres.pdf> (accessed August 17, 2017).

³⁴⁵ Human Rights Watch interview with Georgette, Bangui, January 23, 2016.

³⁴⁶ Human Rights Watch interview with Nadège, Bangui, May 7, 2016.

³⁴⁷ Human Rights Watch interview with Rachelle, Bangui, January 23, 2016.

care and psychosocial support are a cornerstone of comprehensive care for sexual violence survivors.³⁴⁸ The IASC guidelines prioritize the establishment of referral mechanisms that “safely and confidentially link survivors with additional services” across sectors, including health services, mental health care, and police and judicial support.³⁴⁹ Representatives of UNFPA, the UN agency responsible for coordination on gender-based violence (GBV), and INGOs operating GBV programs told Human Rights Watch that relevant agencies had established referral pathways for survivors in areas including Bangui, Bambari, Boda, and Kaga-Bandoro.

However, numerous women and girls who visited health centers told Human Rights Watch that personnel did not inform them about nearby health or psychosocial services for rape survivors. While some health center personnel and other service providers said they refer survivors to INGOs or local hospitals with comprehensive post-rape services, others said they were not aware of and had not referred women or girls to such services, or that such services were not consistently operational.³⁵⁰

Marguerite, 27, and Lucie, 28, said they received minimal care and no referrals at Bangui’s Monastère displacement camp after Seleka fighters raped them in Boy-Rabe in April 2013. Lucie said:

They didn’t do a blood test. No physical exam. They just gave me pills. They gave me Bactrum [antibiotics] and paracetamol so that I wouldn’t get sick. They didn’t refer me anywhere. They only said, “If the [security] situation improves, you need to try to go to the hospital for blood tests.”³⁵¹

In at least nine cases where survivors interacted with the UN peacekeeping mission MINUSCA immediately or soon after experiencing sexual violence, peacekeepers did not direct them to critical services. After Seleka fighters killed Christine’s husband, raped her and held her captive in Bambari in May 2014, she said that peacekeepers brought her from

³⁴⁸ Sphere Standards, p. 327.

³⁴⁹ IASC Guidelines, p. 157.

³⁵⁰ Human Rights Watch interviews with leaders of community survivor assistance projects, Bangui, December 3, 2015, and December 4, 2015; Human Rights Watch interviews with midwife, Boda, April 28, 2016, and doctor, medical INGO, Boda, April 29, 2016.

³⁵¹ Human Rights Watch interview with Lucie, Bangui, January 14, 2016.

Sibut, north of the capital, to Bangui and told her to go to a hospital in Bangui, but did not provide transportation or information about where to seek services:

I told [MINUSCA] I was a victim of sexual violence and [the anti-balaka] had killed my husband. They put me in a vehicle to come to Bangui.... They said when I arrived in Bangui I should go to the hospital to do blood tests.... They didn't bring us to the hospital.... I didn't go to the hospital.³⁵²

Nadège said that anti-balaka raped and held her and three others near Boali in March 2016. The anti-balaka fled when they heard a MINUSCA vehicle patrolling the road nearby. Nadège said the peacekeepers stopped a passing car to bring the women to Bangui, but did not direct them to any services. “They understood that we were raped by the anti-balaka,” Nadège said of the peacekeepers. “We were very traumatized. They sent us to Bangui alone.”³⁵³

According to training materials produced for UN peacekeepers dated February 2017, response to an incident of sexual violence should include survivor assistance, specifically through referral and transfer to a health facility for comprehensive post-rape care.³⁵⁴ MINUSCA is among the UN agencies that contributed to the development of the SOPs on GBV prevention and response in Central African Republic, which calls for anyone who receives a report of sexual violence to refer or, preferably, accompany the survivor to a health or psychosocial service provider.³⁵⁵

Lack of Referrals to Psychosocial Services

Only 66 of 296 sexual violence survivors had accessed any psychosocial support prior to meeting with Human Rights Watch. Even in areas with available psychosocial services—such as listening centers (*maisons d'écoutes*) that offer safe spaces for basic counseling—many survivors said they did not access or know about the services.

³⁵² Human Rights Watch interview with Christine, Bangui, May 8, 2016.

³⁵³ Human Rights Watch interview with Nadège, Bangui, May 7, 2016.

³⁵⁴ UN DPKO-DFS, “Prevention & Response to Conflict-Related Sexual Violence: Procedural Aspects,” UN DPKO-DFS Specialized Training Materials, <http://dag.un.org/bitstream/handle/11176/400575/III.%20Procedural%20Aspects%20to%20CRSV.pdf?sequence=11&isAllowed=y> (accessed August 17, 2017).

³⁵⁵ *Sous-Cluster Violences Basées sur le Genre*, July 24, 2015, pp. 12-15.

Though an INGO has operated mobile gender-based violence services and listening centers in Bambari since 2013, including at the displacement camp called Site Sangaris, several survivors living at the camp said they did not receive psychosocial support or information about services.³⁵⁶

After Seleka fighters raped Aurore and her daughters in Liwa in June 2014, she said that staff from the INGO came to the Sangaris camp, but failed to offer follow-up care or information about additional services. “I explained everything,” she said. “I only talked to them once. After that they didn’t come back. They didn’t tell me about the listening center [at the Sangaris camp].”³⁵⁷

Prisca, 28, who also lives at the Sangaris camp, said that she went to Bambari hospital after ten Seleka raped her 2014. She said that INGO staff there took her name and came once to counsel her at her shelter. When she sought further counseling at the site’s listening center, however, staff were unavailable. “They said everyone had gone out to the villages,” she recalled.³⁵⁸ Prisca said no one provided information about counselors’ availability, and in January 2016 she had not accessed additional care despite ongoing symptoms.³⁵⁹

When Sonia, 52, went to Kaga-Bandoro hospital one week after Seleka fighters raped her in 2013, hospital staff conducted HIV and urine tests and gave her medication, but did not refer her to the on-site psychosocial services provided through an INGO. Instead, she said, the doctor admonished her. “He didn’t refer me to psychosocial care, it was he who counseled me,” she said. “He told me that hunger doesn’t kill people. [He said that] during the crisis you shouldn’t go into the bush no matter what because there are armed groups. So you should stay calm and stay at home.”³⁶⁰

The midwife responsible for sexual violence services at Boda hospital said that staff refer survivors to an INGO for psychosocial support.³⁶¹ In April 2016, a supervisor at the INGO

³⁵⁶ Human Rights Watch interview with program manager, INGO, Bambari, January 18, 2016. Between February and July 2015, a second INGO provided GBV services in Bambari, including through two midwives who offered psychosocial support, but the project ended in July 2015.

³⁵⁷ Human Rights Watch interview with Aurore, Bambari, January 18, 2016.

³⁵⁸ Human Rights Watch interview with Prisca, Bambari, January 17, 2016.

³⁵⁹ Ibid.

³⁶⁰ Human Rights Watch interview with Sonia, Kaga-Bandoro, May 2, 2016.

³⁶¹ Human Rights Watch interview with midwife, Hôpital Boda, April 28, 2016.

told Human Rights Watch that a project operating eight listening centers had been suspended in 2015 and at the time no psychosocial support was available in Boda.³⁶²

Survivors at several displacement camps in Bangui told Human Rights Watch they did not access psychosocial care, even when they visited health facilities that say they offer integrated psychosocial services. A gynecologist at Hôpital Communautaire told Human Rights Watch that the hospital provides free care for survivors of sexual violence, including psychosocial assistance.³⁶³ Patricia said she went to Hôpital Communautaire after anti-balaka raped her and held her for two days in April 2016. Though she told a doctor about the rape, she said she received limited medical care and no referral for psychosocial support.³⁶⁴

Under their guiding principles for protection in humanitarian emergencies, the Sphere Standards call for all survivors of violence to have access to psychosocial support and mental health care, including via referral mechanisms.³⁶⁵ The WHO clinical and policy guidelines on sexual violence response call for health care providers to refer survivors for psychosocial support and specialized services.³⁶⁶

Lack of Confidential and Survivor-Centered Services

When survivors did seek services, failure to provide discreet, confidential, and sensitive care sometimes deterred them from disclosing sexual violence or successfully accessing help.

Some survivors told Human Rights Watch that they sought medical care but did not reveal their rapes to health personnel because services were not confidential. Estelle, 44, said she visited a health center in Bangui in January 2014, but did not explain that anti-balaka had

³⁶² Human Rights Watch interview with protection project supervisor, INGO, Boda, April 28, 2016. A new project, whose start date had not been determined, was expected to comprise two listening centers and two psychosocial agents in Boda rather than the eight employed under the previous project; the psychosocial agents were also to conduct outreach in sites on the Boda–Mbaïki road.

³⁶³ Psychosocial services for sexual violence survivors were being supported through a partnership with an INGO between January and May 2016, with possible continuation of support later into 2016.

³⁶⁴ Human Rights Watch interview with Patricia, Bangui, May 5, 2016.

³⁶⁵ Sphere Standards, “Protection Principle 4: Assist People to Claim their Rights, access available remedies and recover from the effects of abuse,” Guidance note: Community-based and other psychosocial support, p. 42. See also Sphere Standards, p. 327.

³⁶⁶ WHO, “WHO Clinical and Policy Guidelines,” p. 10. See also part 3 of the guidelines, “Clinical Care for survivors of sexual assault, for discussion of referrals and psychosocial support.”

gang-raped her: “There were too many patients—too many women there.... It was not private.”³⁶⁷ Aimée, 23, told Human Rights Watch that that she informed staff at the St. Bernard displacement camp in Boy-Rabe of her rape, but they did not give her a full exam because they lacked private facilities. “They said there was no place for them to do consultations,” she said. “They only had a tarp arranged [to block space for treating patients].”³⁶⁸

Many survivors said they did not trust medical personnel to maintain confidentiality, and feared that health staff would expose them to public ridicule. Anne-Marie went to the Kaga-Bandoro hospital but did not reveal her rape by five Seleka in January 2015. She explained:

If I go to the hospital and tell the midwife, she will give away the secret to others. I’ve heard them speak of others [who were raped]. Often when they go out in the bars to take their beers, they don’t talk of anything but that.³⁶⁹

Other survivors said that medical staff did not treat them respectfully. Leila said personnel turned her away when she went to the Castor Hospital in Bangui in April 2016 after anti-balaka held her and several other women in the bush for two days, raping them repeatedly. “I explained [the rape] to the midwife there,” she explained. “She said I wasn’t telling the truth. She said, ‘Those are lies.’ I didn’t get any medical care.”³⁷⁰

International guidelines on addressing gender-based violence, including in emergencies, emphasize provision of confidential services that ensure survivors’ safety and respect their needs.³⁷¹

³⁶⁷ Human Rights Watch interview with Estelle, Bangui, April 25, 2016.

³⁶⁸ Human Rights Watch interview with Aimée, Bangui, January 14, 2016.

³⁶⁹ Human Rights Watch interview with Anne-Marie, Kaga-Bandoro, May 2, 2016.

³⁷⁰ Human Rights Watch interview with Leila, Bangui, May 6, 2016.

³⁷¹ IASC, “Guidelines for Integrating Gender-Based Violence Interventions in Humanitarian Action,” Guiding Principles and Approaches for Addressing Gender-Based Violence, p. 45; WHO, “Responding to Intimate Partner Violence and Sexual Violence against Women: WHO Clinical and Policy Guidelines,” 2013, http://apps.who.int/iris/bitstream/10665/85240/1/9789241548595_eng.pdf?ua=1 (accessed August 17, 2017); IAWG, “Minimum Initial Services Package.”

V. Access to Justice

I have thought about justice. I have thought about all these things that the Seleka have done: they pillaged houses, raped women and killed people. I ask if justice is going to be done to them.

—Nora, 25, Bangui, January 2016

It is not the women who have been abused who should feel ashamed, but the perpetrators of this crime.... We will make sure that perpetrators are held accountable and we will not allow them any hiding place. And wherever we go, we will run after them.

—Zeinab Bangura, former UN Special Representative to the Secretary-General on Sexual Violence in Conflict, December 2012³⁷²

Despite the litany of grave crimes documented in this report, most women and girls interviewed by Human Rights Watch had little faith that their tormenters would be held to account, and their doubt is justified. Numerous barriers to justice remain in the Central African Republic, and survivors of sexual violence face particular challenges. Some survivors told Human Rights Watch about seeing their attackers walking free in their communities or even taking public office, while others recounted authorities demanding that they present their own rapists for investigation or prosecution. A history of impunity for gender-based violence fosters skepticism about criminal justice for sexual violence, and a dearth of resources, lack of infrastructure, and inadequate capacity hamper the judicial system in general. These and other barriers, including difficulty identifying perpetrators and a lack of financial resources or legal assistance, prevented the vast majority of the survivors Human Rights Watch interviewed from reporting cases to authorities.

In only 11 of the 305 cases of sexual violence that Human Rights Watch documented did survivors say they attempted to take steps to hold their attackers to account. Only nine reported their cases to the police, gendarmes, or other state authorities. In three of these

³⁷² “UN expert on sexual violence in conflict wraps up visit to Central African Republic,” United Nations Radio, December 12, 2012, <http://www.unmultimedia.org/radio/english/2012/12/un-expert-on-sexual-violence-in-conflict-wraps-up-visit-to-central-african-republic/> (accessed August 17, 2017).

cases, survivors also spoke with nongovernmental organizations that offer legal assistance; two additional survivors spoke with NGOs about bringing cases against their attackers but said they did not know whether any action had been taken to submit official complaints.

Seven survivors said that they or their family members reported the sexual violence to the UN Multidimensional Integrated Stabilization Mission in the Central African Republic (MINUSCA), and one said she reported it to French troops under the Sangaris peacekeeping mission, which operated in the country between December 2013 and October 2016.³⁷³ In only two of the cases reported to peacekeeping missions could survivors confirm that the incident was also reported to local authorities.

Six of the nine women and girls who did report the crime to state authorities said that authorities mistreated them, demanding that survivors track down their own abusers, refusing to accept complaints, or failing to follow up their cases.

In addition to the national justice system, the Special Criminal Court (SCC) and International Criminal Court (ICC) offer the possibility of justice for some survivors of conflict-related sexual violence. The SCC has faced delays and, while critical steps have been made towards it becoming operational, daunting challenges remain regarding witness and victim protection, capacity-building of personnel, and the sustained commitment of financial and technical resources. Meanwhile, the ICC focuses only on the gravest crimes and crimes perpetrated by senior commanders or officials, and is likely to prosecute a small number of cases given limited resources.

Despite such challenges, survivors want their attackers brought to justice. Like many women and girls Human Rights Watch interviewed, Carole, 25, said she had little hope of prosecution of the two Seleka fighters who raped her in Bangui in 2013, but that she deserves justice. “Who would I bring a case against? Who could I accuse?” Carole asked,

³⁷³ “Centrafrique: évolution de l’engagement des forces françaises au profit des forces internationales pour la stabilisation de la Centrafrique,” Ministère des Armées news release, updated June 26, 2017, <http://www.defense.gouv.fr/ema/operations/centrafrique/centrafrique-evolution-de-l-engagement-des-forces-francaises-au-profit-des-forces-internationales-pour-la-stabilisation-de-la-centrafrique> (accessed August 17, 2017).

saying she could not identify her rapists. “But I do know that this was a grave injustice done to me.”³⁷⁴

Mélanie, 31, said Seleka UPC fighters stormed her house during the May 2017 attack on Alindao, forced her husband to undress, bound him with rope, and took him away. After Mélanie found her husband’s corpse with his throat cut and bullets in his stomach, two Seleka fighters raped her, leaving her in severe pain. “I was really suffering,” she said. “I had wounds on my vagina—I couldn’t walk.”³⁷⁵ Mélanie, who later tested HIV-positive, said:

They killed my husband, raped me, I don’t have my house, I’m infected [with HIV]—that’s what they have done to me. I want to bring them to justice because they have ruined my life.³⁷⁶

Barriers to Justice for Sexual Violence

The recent conflict exacerbated existing weaknesses in the Central African national justice system, as well as social, financial, and other constraints that hinder access to justice for sexual violence survivors. Thus far, members of armed groups who have been identified as perpetrators by survivors are able to operate freely and without sanction.

The absence of a functioning national justice system, inappropriate response from authorities, fear of reprisals, costs associated with seeking justice, lack of legal assistance, and social norms limiting women’s autonomy all deter women and girls from seeking justice for sexual violence, or impede their attempts to do so. Practical challenges, such as difficulty identifying perpetrators or obtaining medical certificates, also create obstacles to justice.

Nicole, 26, who was raped by three Seleka fighters in December 2013, described a common lack of trust in the national justice system. “The law is neglected,” she said. “When you have no money to file a complaint they don’t do anything but keep your file.”³⁷⁷

³⁷⁴ Human Rights Watch interview with Carole, Bangui, January 14, 2016.

³⁷⁵ Human Rights Watch interview with Mélanie, Bangui, August 21, 2017.

³⁷⁶ Ibid.

³⁷⁷ Human Rights Watch interview with Nicole, Bangui, January 14, 2016.

Absence of a Functioning National Justice System

The new government inherited a broken justice system, unable to investigate and prosecute those responsible for serious crimes. Throughout much of the Central African Republic, and especially in the east, most judicial structures were not operational between early 2013 and 2017. At this writing some courts were functioning in nine areas of the country, including Bangui and Boda; no courts were functioning in Kaga-Bandoro, and areas of the north and east.³⁷⁸ As of April 2017, judicial officials told Human Rights Watch that courts across the country are officially operational, though some are not highly functioning.³⁷⁹

One hundred and thirteen registered lawyers serve the entire country, most of whom are based in Bangui. Several judges interviewed by Human Rights Watch said that the judicial police routinely fail to investigate criminal cases when the perpetrator does not confess.³⁸⁰

The Central African Penal Code includes rape and sexual assault as criminal offenses. However, in 1998 the office of the Public Prosecutor issued a memo instructing that acts of rape and some other crimes should be “corrected” (*“correctionnalisés”*), or prosecuted as misdemeanors (with lower penalties) rather than felony crimes, purportedly to hasten sluggish judicial processes.³⁸¹ Sources said that this re-classification further eroded confidence that the justice system takes sexual violence and punishment of perpetrators seriously.³⁸² This was changed when a new memorandum from the Ministry of Justice in March 2016 ordered an end to this practice in cases of sexual violence.³⁸³ However, a UN expert raised concerns in April 2017 that rape continues to be treated as indecent assault (*attentat à la pudeur*) by local officials.³⁸⁴

³⁷⁸ Human Rights Watch interview with judicial official, Bangui, October 26, 2016.

³⁷⁹ Human Rights Watch meeting with judicial official, Bangui, April 11, 2017.

³⁸⁰ Human Rights Watch interview with senior national prosecutor staff, Bangui, June 14, 2016.

³⁸¹ Parquet Général, Cour d’Appel de la République Centrafricaine, Lettre Circulaire aux Procureurs de la République près les Tribunaux (1^{ère} et 2^e classe), Présidents des Tribunaux de Grande Instance de 3^e Classe, No. 416/CA/PGCA/98, May 19, 1998, on file with Human Rights Watch. This is a criminal procedure practice in legal systems derived from the French or Napoleonic system known as *correctionnalisation* which allows a particular offence to be prosecuted as a misdemeanor even where the facts fit the elements of a more serious felony crime. Common law systems do not have an equivalent practice.

³⁸² Human Rights Watch interviews with UN human rights personnel, Bangui, April 20, 2016, judicial advisor, transitional government, Bangui, April 21, 2016, UN Women justice specialist, Bangui, April 24, 2016, secretary-general, legal services organization, Bangui, April 22 and April 26, 2016.

³⁸³ Ministère de la Justice, Chargé de la Réforme Judiciaire et des Droits de l’Homme, Lettre Circulaire, No. 055/MJRJDH/DIRCAB.16, March 8, 2016, on file with Human Rights Watch; see also Section IV. Legal Obligations of the Central African Republic.

³⁸⁴ Human Rights Watch meeting with MINUSCA expert, Bangui, April 7, 2017.

During the same period that crimes were treated as misdemeanors, criminal prosecutions were essentially non-existent in the country. Since the conflict began in late 2012, the government has conducted only two criminal court sessions in Bangui, one in 2015 and one in August 2016. Of 55 cases prosecuted during the 2016 session, three were cases of rape, but none of the perpetrators belonged to armed groups.³⁸⁵

Although 163 magistrates should operate in the country, numerous posts were unstaffed at time of writing. In many areas, prosecutors had not returned to their posts, had only recently arrived, or were stationed in the area part-time. As a 15-year-old survivor in Kaga-Bandoro said, “I want to file a complaint, but the judicial authorities need to be in place.”³⁸⁶

Government officials told Human Rights Watch that redeployment of judicial authorities is an essential first step to fighting impunity.³⁸⁷ Until that happens, many survivors would need to travel long distances to another jurisdiction just to lodge a criminal complaint.³⁸⁸

Before deploying judicial authorities, however, the government needs to regain control of the police and courts. In some towns, including Kaga-Bandoro, armed groups continue to control the local security sector, which deters people from reporting violence perpetrated by parties to the conflict. When Human Rights Watch visited Bambari in January 2016, a staff member at UNFPA, the lead UN agency on gender-based violence, said that the Seleka’s occupation of the police station and the court of appeals made pursuing accountability for sexual violence extremely difficult. “The armed groups can do anything without a worry,” the person said. “They can do something in front of anyone—it is hard to do anything because who dares?”³⁸⁹

Some survivors told Human Rights Watch that even if they wanted to pursue justice, there was nowhere to report cases. “I have not been to the gendarmerie,” said Claudette, who

³⁸⁵ Human Rights Watch interview with judicial official, Bangui, October 26, 2016; “Résultats des audiences de la Première Session Criminelle de la cour d’appel de Bangui tenue du 26 août au 26 septembre 2016,” copy on file with Human Rights Watch; United Nations Security Council, “Report of the Secretary-General on the Central African Republic,” February 2017, para. 48.

³⁸⁶ Human Rights Watch interview with Lydie, Kaga-Bandoro, May 2, 2016.

³⁸⁷ Human Rights Watch interview with judicial officials, Bangui, June 14 and June 16, 2016.

³⁸⁸ *Ibid.*, June 14, 2016.

³⁸⁹ Human Rights Watch interview with UNFPA personnel, Bambari, January 16, 2016.

was raped by Seleka in Bambari in December 2015. “They are not really operating, so how could [the gendarmes] go and look for Seleka like that?”³⁹⁰

In Kaga-Bandoro, a survivor told Human Rights Watch that she did not report her rape by Peuhls in 2015 because the Seleka controlled the town and its security services. “I can’t file a complaint because it is the Seleka who have the power in this town,” she said.³⁹¹

Ongoing security concerns also hinder the judicial process. Some judges and prosecutors have not returned to posts outside the capital due to insecurity, and some police and gendarmes hesitate to arrest alleged perpetrators due to concerns for their own safety.³⁹² The head of one police unit described the futility of identifying members of an armed group who had raped a 14-year-old girl in Bangui:

[W]e can’t go [to the neighborhood] to arrest them because they are armed and they will shoot at us. The girl can identify the perpetrators, but we could also be attacked if we go there. So she can name who raped her, but there is little we can do.³⁹³

Inadequate jail facilities compound the problem. Of 28 detention centers throughout the country, only six are operational, three of which are in or just outside the capital. At time of writing, two additional centers were slated to become operational. Mass escapes have occurred at some of the functioning prisons.³⁹⁴ Moreover, the lack of timely court proceedings can lead to lengthy and problematic pre-trial detention.

In April 2016, Boda’s then-prosecutor told Human Rights Watch that infrastructure gaps hindered his ability to prosecute criminals. Without a prison, which was destroyed during the conflict, he said he could not hold suspects. Any alleged perpetrators of serious crimes had to be sent to Bangui for prosecution, but he said he lacked the means to transfer

³⁹⁰ Human Rights Watch interview with Claudette, Bambari, January 17, 2016.

³⁹¹ Human Rights Watch interview with Bénédicte, Kaga-Bandoro, May 3, 2016.

³⁹² Human Rights Watch interview with judicial official, Bangui, June 16, 2016.

³⁹³ Human Rights Watch interview with police official, Bangui, January 21, 2016.

³⁹⁴ “Central African Republic: New Spate of Senseless Deaths,” Human Rights Watch news release, October 22, 2015, <https://www.hrw.org/news/2015/10/22/central-african-republic-new-spate-senseless-deaths>.

suspects securely. He described having around ten members of the anti-balaka and Seleka forces transferred to Bangui for alleged murder and rape, only to see them escape. “In Bangui, they fled and they are back in the bush,” he said. “They are still there. I don’t have the strength or the means to get them again.”³⁹⁵

Elinor, 27, said that after anti-balaka fighters raped her and killed and dismembered her husband in Bambari in 2014, one of the attackers was arrested. She later learned, however, that he and other detainees had escaped from jail, and she did not pursue justice further.³⁹⁶

Under urgent temporary measures specified in its mandate, MINUSCA troops can “arrest and detain in order to maintain basic law and order and fight impunity.”³⁹⁷ Following President Touadéra’s request in May 2016, the Security Council authorized extension of the urgent temporary measures until November 2017.³⁹⁸ While MINUSCA forces have arrested some anti-balaka leaders, such as Rodrigue Ngaïbona (alias Andilo), they have failed to arrest and detain Seleka commanders alleged to have committed abuses.³⁹⁹

The United Nations Development Programme (UNDP), with support from the United States and the European Union, is helping to bolster the national justice system. As well as restoring physical infrastructure, providing office equipment and facilitating training of judicial staff, funded activities include specific measures to address sexual violence through raising awareness about survivors’ rights, facilitating survivors’ access to services

³⁹⁵ Human Rights Watch interview with former prosecutor, Boda, April 29, 2016.

³⁹⁶ Human Rights Watch interview with Elinor, Bambari, January 19, 2016.

³⁹⁷ United Nations Security Council, Resolution 2301 (2016), SC/12462, passed July 26, 2016 <http://www.un.org/press/en/2016/sc12462.doc.htm> (accessed August 17, 2017), para. 34 (d)(i).

³⁹⁸ *Ibid.*

³⁹⁹ For example, MINUSCA failed to arrest prominent Seleka leaders Haroun Gaye and Abdoulaye Hissène, accused of kidnapping five police officers in Bangui in June 2016. Hissène was arrested by national gendarmes in March 2016 and was briefly detained in a Bangui police station before being freed by heavily armed men on the same day. In August 2016 MINUSCA intercepted Gaye and Hissène’s convoy as the men escaped Bangui, but failed to arrest them. See “RCA: Abdoulaye Hissène s’évade de prison avec l’aide de ses hommes,” RFI Afrique, March 17, 2016, <http://www.rfi.fr/afrique/20160316-rca-abdoulaye-hissene-evade-prison-aide-hommes> (accessed August 17, 2017); UN Panel of Experts on the Central African Republic, Final Report of the Panel of Experts on the Central African Republic, December 5, 2016, pursuant to Security Council Resolution 2262 (2016) addressed to the President of the Security Council, S/2016/1032, http://www.securitycouncilreport.org/atf/cf/%7B65BFCF9B-6D27-4E9C-8CD3-CF6E4FF96FF9%7D/s_2016_1032.pdf (accessed August 17, 2017), paras. 65-77.

via civil society organizations, and supporting establishment of a specialized unit to accept and manage complaints of sexual and gender-based violence.⁴⁰⁰

In January 2015, the transitional government issued a decree establishing a Mixed Unit for Rapid Intervention and Suppression of Sexual Violence against Women and Children in Bangui (*Unité Mixte d'Intervention Rapide et de Répression des Violences Sexuelles Faites aux Femmes et aux Enfants*, UMIRR).⁴⁰¹ Supported by UNDP and MINUSCA, UMIRR, which consists of national police and gendarmes trained to conduct investigations into sexual violence, is intended to accept all cases of sexual and gender-based violence and child abuse, whether conflict-related or not. Thirty-two personnel assigned to the unit participated in training on responding to sexual violence, interviewing survivors of trauma, providing medical referrals, and collecting forensic evidence. Following protracted delays due to problems of funding and logistics, UMIRR began work in June 2017. Questions remain about coordination between UMIRR and existing Children's Units (*Brigades des Enfants*) and gender desks installed at some police stations.⁴⁰²

In August 2017, a high-level member of UMIRR's staff said that the unit had received around 100 cases, only about 10 of which were conflict-related. He said UMIRR will refer conflict-related sexual violence cases to the Special Criminal Court following investigations, but that the unit faces ongoing challenges in investigating such cases—particularly outside of Bangui—due to insecurity in parts of the country, lack of protection for UMIRR personnel, and material and logistical constraints. “UMIRR has national authority, but it has to be able to deploy outside of Bangui,” he said.⁴⁰³

⁴⁰⁰ “Projet conjoint d'Appui à la Lutte Contre les Violations des Droits de l'Homme et à la Relance de la Justice en Centrafrique,” Programme de Travail Annuel 2015, <https://info.undp.org/docs/pdc/Documents/CAF/PTA%20PROJET%20CONJOINT%20JUSTICE%202015%20osign%C3%A9-1.pdf> (accessed August 17, 2017).

⁴⁰¹ Decret No. 15.007, portant Création d'une Unité Mixte d'Intervention Rapide et de Répression des Violences Sexuelles Faites aux Femmes et aux Enfants, January 8, 2015, on file with Human Rights Watch.

⁴⁰² Human Rights Watch meetings with MINUSCA expert, Bangui, April 7, 2017, and UMIRR official, Bangui, August 12, 2017.

⁴⁰³ Human Rights Watch interview with UMIRR official, Bangui, August 12, 2017.

Impunity, Retaliation, and Fear of Reprisals

Impunity reigns for members of armed groups who commit sexual violence in the Central African Republic, with fighters threatening and retaliating against victims and their family members, hindering investigations, and holding positions of power.

In explaining the necessity of rapidly making the Special Criminal Court operational, a lawyer who assists victims of sexual violence told Human Rights Watch: “The perpetrators are still around. They are walking free and the victims are too scared to denounce them.”⁴⁰⁴

Cécile, 50, who said that three anti-balaka raped her in Bambari in January 2015, described feeling powerless when she saw her attackers moving freely around the town:

When I would see them, I was so scared, but there is no law here so I would go into my hut and cry.... [I]f the courts opened, then I would open a case [against them]. But I did not go to the gendarmes, because there you have to pay, and in the end, they do nothing.⁴⁰⁵

Some survivors said they feared retribution if they named their attackers or attempted to file a complaint. Albertine, 30, said that after the head of an anti-balaka group raped her in Bangui in December 2015, she feared even knowing the perpetrator’s identity. “With what he did, I do not want to know his name because I am nervous.... I am scared that he could find me and do me harm,” she said.⁴⁰⁶

Two survivors told Human Rights Watch that anti-balaka under Gilbert Wité’s command in Boda had raped them and, when their family members confronted Wité or his men, the anti-balaka hurt or threatened them. Camille, 15, said that fighters under Wité’s control caught her and a friend as they were fleeing attacks on Boda around January 2014 and raped them both. The next day, Camille’s mother confronted Wité. Camille explained:

⁴⁰⁴ Human Rights Watch interview with Central African lawyer, Bangui, June 14, 2016.

⁴⁰⁵ Human Rights Watch interview with Cécile, Bambari, January 17, 2016.

⁴⁰⁶ Human Rights Watch interview with Albertine, Bangui, December 10, 2015.

She went to Wité and said, “Your men raped my daughter.” Wité pointed his gun at my mother. She went to see him again, but he pointed his gun at her a second time. He said, “If you continue to come and talk to me, I’ll kill you.” So my mother dropped it.⁴⁰⁷

Camille’s family faces ongoing intimidation. “My parents want to file a complaint but they are still threatened by the anti-balaka,” she said. “They are scared to submit a complaint.”⁴⁰⁸

Justine, 13, told Human Rights Watch how Wité’s men caught her returning from selling firewood in April 2015. She said the anti-balaka pushed her to the ground and one raped her. Justine said her family confronted Wité’s men:

My big sister went to the anti-balaka to ask about [the rape], but they beat her. They tied her hands behind her back and held her. Then her husband had to go [to the anti-balaka], but they beat him and tied him up, too.⁴⁰⁹

Justine said her uncle paid 20,000 CFA (about US\$33) for their release. “When I think of this, it hurts my heart,” she said of the assault and its aftermath. “When I think about how they raped me, I cry.”⁴¹⁰

Another survivor, Monique, 30, said she received threats after accompanying police and MINUSCA to identify the men who raped her. She said that Muslim fighters took her and three other women from Bangui’s PK5 market in April 2015, claiming that one of the women’s husbands was affiliated with the anti-balaka. Two of the men raped Monique before releasing her later that day; the three other women were never found and are presumed killed. Monique reported the case to MINUSCA, who told her to go to the police. MINUSCA and the police took her with them to identify her attackers in PK5, where a crowd of over 50 people accosted her for having spoken out about the attack. “The Muslims came to force me out of the car,” Monique recalled. “I was afraid. I started to cry.”⁴¹¹ The police

⁴⁰⁷ Human Rights Watch interview with Camille, Boda, April 29, 2016.

⁴⁰⁸ Ibid.

⁴⁰⁹ Human Rights Watch interview with Justine, Boda, April 29, 2016.

⁴¹⁰ Ibid.

⁴¹¹ Human Rights Watch interview with Monique, Bangui, December 8, 2015.

brought Monique back to the station and told her she was in danger. Shortly thereafter, she began receiving threatening phone calls. She tried to move to France, where her sister lives, but her visa application was denied.

Despite fears for her safety, Monique brought her case to an INGO, which located the perpetrators but told her that little could be done. “They said [the police] can’t arrest them now because there are people in the government protecting them,” Monique said. “They said after the [national] elections they can try to get their hands on them.”⁴¹² At time of writing, Human Rights Watch could not confirm whether authorities had taken additional measures to pursue the perpetrators.

Another survivor, Elisabeth, said that Seleka in Kaga-Bandoro held her for three days around February 2015, after raping her and killing her daughter. When they released her, they said they would kill her if they saw her walking around town.⁴¹³ Elisabeth reported the case to MINUSCA, which relocated her to Bangui, but she had not had any further contact with MINUSCA since returning to Kaga-Bandoro in May 2015. She said she was afraid to leave the house.⁴¹⁴

Several public officials and staff of legal assistance services told Human Rights Watch that protection of victims and witnesses, as well as lawyers and judges, will be essential to prosecuting serious crimes committed during the conflict, and that the current lack of such protection is a major obstacle to justice.⁴¹⁵ A lawyer who assists victims of sexual violence, for example, said that some of her clients had received threats but the authorities were powerless to respond. “We went to discuss these threats with the prosecutor, but he told us that the magistrates themselves have no security,” she said.⁴¹⁶

⁴¹² Ibid.

⁴¹³ Human Rights Watch interview with Elisabeth, Kaga-Bandoro, May 2, 2016.

⁴¹⁴ Ibid.

⁴¹⁵ Human Rights Watch meetings with judicial advisor, transitional government, Bangui, April 21, 2016, UN Women justice specialist, Bangui, April 22, 2016. See also, Human Rights Watch, *Killing Without Consequence*, pp. 90-91.

⁴¹⁶ Human Rights Watch interview with Central African lawyer, Bangui, June 14, 2016.

A justice expert at UN Women in Bangui confirmed that judicial authorities fear the armed groups. “The security matter is very challenging,” he said. “In private, judges say they are afraid; [they say,] ‘If we judge these people, we and our families are at risk.’”⁴¹⁷

An official at UMIRR also said that insecurity and lack of protection for personnel inhibits investigations of conflict-related sexual violence, particularly outside of Bangui. “If an investigator goes out to conduct an investigation in the field, he could be killed,” he said, noting that victims and witnesses face similar risks.⁴¹⁸ At time of writing, MINUSCA was developing a protection strategy for victims and witnesses in both the standard justice system and the SCC.⁴¹⁹

The UN Model Strategies on criminal justice for violence against women call for states to facilitate women survivors’ ability to participate in investigations and testify in criminal proceedings, including by ensuring their safety and “establishing comprehensive witness and victim protection programmes.”⁴²⁰

To counter impunity, intimidation and exertion of power by armed groups must also be stopped at the government level. Parliament should agree to lift parliamentary immunity to prosecute members of parliament accused of crimes. The law establishing the Special Criminal Court provides that the law applies equally to all persons, and Central African penal code provides that there should be no immunity for grave crimes, although the constitution also has a provision that allows parliamentary immunity.⁴²¹ A former member

⁴¹⁷ Human Rights Watch interview with UN Women personnel, Bangui, April 24, 2016.

⁴¹⁸ Human Rights Watch interview with UMIRR official, Bangui, August 12, 2017.

⁴¹⁹ Human Rights Watch interview with UN staff members, Bangui, June 13, 2016; Bangui, April 3, 2017; New York, May 9, 2017. Human Rights Watch email correspondence with consultant, August 9, 2016. See also “Un pas vers la protection des témoins et des victimes en Centrafrique,” MINUSCA news release, June 28, 2017, <https://minusca.unmissions.org/un-pas-vers-la-protection-des-t%C3%A9moins-et-des-victimes-en-centrafrique> (accessed August 17, 2017).

⁴²⁰ United Nations General Assembly (UNGA), Updated Model Strategies and Practical Measures on the Elimination of Violence against Women in the Field of Crime Prevention and Criminal Justice (Updated Model Strategies), Annex to UN Resolution 65/228, Strengthening crime prevention and criminal justice responses to violence against women, U.N. Doc. A/Res/65/228, adopted by the General Assembly on December 21, 2010, March 31, 2011, http://www.un.org/en/ga/search/view_doc.asp?symbol=A/RES/65/228 (accessed August 17, 2017), paras. 15(c), 15(i), 15(l).

⁴²¹ Loi Organique N° 15.003, portant création, organisation et fonctionnement de la cour pénale special, art. 56, on file with Human Rights Watch; Constitution of the Central African Republic, art. 67, on file with Human Rights Watch; Code pénal de la République Centrafricaine, 2010, Art. 162, on file with Human Rights Watch. See also Amnesty International, “The Long Wait for Justice, Accountability in the Central African Republic,” January 11, 2017, <https://www.amnesty.org/en/documents/afr19/5425/2017/en/> (accessed August 18, 2017), p. 41; Patryk Labunda, “The

of the National Transitional Council cited the election to parliament of anti-balaka leaders as a risk, noting that they could block the Special Criminal Court by opposing the adoption of its budget or resisting the elimination of parliamentary immunity for suspects. He said:

For immunities to be lifted, the court will need to be strong, otherwise these individuals will intimidate other parliamentarians. The parliament has become a nursery for war criminals.⁴²²

For example, he noted concerns about Rombhot holding parliamentary seats despite having allegedly committed potential war crimes, including sexual violence documented in this report.⁴²³

Mistreatment and Inadequate Response to Complaints

The experiences of the few women and girls who told Human Rights Watch they attempted to report sexual violence largely validated concerns of those who chose not to pursue justice. Survivors reporting violence described being sent from one office to the next, receiving no follow up, or even being told to track down the perpetrators themselves. In some cases, authorities exposed survivors to additional risk and trauma, and fostered impunity by failing to respond or actively hindering investigations.

Paulette, 14, said that she and her mother went to the Kaga-Bandoro gendarmerie the day after a Seleka fighter raped her near Kpokpo village in April 2016. She described how the gendarmes—themselves affiliated with the Seleka—effectively told her to do their work:

The gendarmes said to me and my mother that we had to go tell the Seleka to present themselves at the gendarmerie. We went to the checkpoint [manned by the perpetrators] and did what the gendarmes asked. The next day [the perpetrators] refused to come. The second time we went there with the gendarmes to ask again for them to come. They weren't there anymore.

Special Criminal Court in the Central Africa Republic: Failure or Vindication of Complementarity,” *Journal for International Justice*, 15 (1), 2017, pp. 195-199.

⁴²² Human Rights Watch interview with former member of the national transitional council, Bangui, June 14, 2016.

⁴²³ Ibid. See also Section II. Sexual Violence against Women and Girls by Armed Groups: Sexual Slavery by Anti-Balaka.

The gendarmes told us to return home and when they find them, they will arrest them. They said they are going to look for them, but if they don't find them, it's over. They [the perpetrators] fled the city.⁴²⁴

Interviewed in May 2016, Paulette said the men who raped her had not been arrested. Laure, 17, also said no action was taken after she reported to both gendarmes and MINUSCA that anti-balaka had raped her and her older sister in Bangui in August 2015. "I told MINUSCA what happened. They didn't do anything. They said, 'God now will fortify you, give you strength,'" she said. She said that MINUSCA peacekeepers brought her to the hospital, took information about her case, and brought her to the gendarmerie. "I filed a complaint with the gendarmerie, but there was no follow-up," she said. "The gendarmes didn't say anything, they didn't react. MINUSCA didn't tell us [anything] either."⁴²⁵

Some authorities said that local prosecutors and judges had received little if any training on investigating and prosecuting sexual violence.⁴²⁶ Others told Human Rights Watch that prosecutors and judges had received some training on sexual violence, such as how to prepare hearings or work in a manner sensitive to survivors. Regardless, capacity to respond to sexual violence remains inadequate.⁴²⁷ This includes capacity of police and gendarmes, and appropriate staffing at points of reporting.

Clémence, 53, said that lack of personnel presented significant obstacles to justice after two anti-balaka raped her and four other women between Aba and Amada-Gaza around September 2015. She said that the survivors went to the police unit in Amada-Gaza immediately following the incident and told an officer that the anti-balaka had caught them and stolen their goods. "We spoke with the unit's auxiliary officer (*auxilière de brigade*), a man," she said. "We were too ashamed to explain the rapes. There were no female personnel there. They said, 'We don't have the personnel here, but we will send a message to Berbérati to send personnel to help.' We have had no news until today."⁴²⁸

⁴²⁴ Human Rights Watch interview with Paulette, Kaga-Bandoro, May 3, 2016.

⁴²⁵ Human Rights Watch interview with Laure, Bangui, December 6, 2015.

⁴²⁶ Human Rights Watch interview with former General Prosecutor, Bangui, June 16, 2016.

⁴²⁷ Human Rights Watch interview with UN Women personnel, Bangui, April 24, 2016.

⁴²⁸ Human Rights Watch interview with Clémence, Bangui, May 7, 2016.

Among other provisions, international guidelines on judicial system response to violence against women ask that states ensure consistent and effective implementation of criminal laws and policies on violence against women. They also call for measures in line with best practice standards to facilitate investigations and prosecutions, including specialized training of police and prosecutors, and to combat attitudes among judicial sector personnel that perpetuate violence against women.⁴²⁹

Fees and Lack of Support

Many survivors said they did not report the crime to authorities because they believed filing a complaint would entail financial costs. “Justice here, that costs money,” said Merveille, 40, who said that Seleka raped her and held her for two days in Bambari around April 2014. “But how am I going to have money? If justice were free, I would go submit a complaint.”⁴³⁰

Some survivors indicated that they wanted to file a complaint but did not know how to do so. Although some nongovernmental organizations offer legal assistance, most survivors Human Rights Watch interviewed were unaware of such services.

Others felt they needed emotional support that was not available. Emmanuelle, 23, who was raped by a Seleka fighter in Bangui in early 2014, said she could not submit a complaint without support from a family member, but they had all fled the country. “If no one is here, I will let it go,” she said. “I need someone to accompany me to the court, through the whole process.”⁴³¹

Central African law does entitle some victims of crime to legal assistance, but there is no system to provide or ensure availability of such assistance.⁴³² A recently-developed national strategy on provision of legal aid includes revision and adoption of a draft legal aid law, developed with support from UNDP.⁴³³ If adopted, the law could improve legal assistance for survivors of sexual

⁴²⁹ UNGA, Updated Model Strategies, para. 16.

⁴³⁰ Human Rights Watch interview with Merveille, Bangui, April 24, 2016.

⁴³¹ Human Rights Watch interview with Emmanuelle, Bangui, January 13, 2016.

⁴³² Decree No. 113 of 12 April 1962 and Law No. 10.006 of 26 June 2010 of the Status of the Legal Profession in the Central African Republic; Ministère de la Justice, Stratégie Centrafricaine d’Aide Légale 2017-2022, March 2017, copy on file with Human Rights Watch, pp. 9, 21.

⁴³³ Ministère de la Justice, Stratégie Centrafricaine d’Aide Légale 2017-2022, p. 32.

violence and other crimes committed by armed groups. Under the draft law’s provisions, victims of crime who do not have sufficient resources can receive financial assistance for part or all of their legal costs.⁴³⁴ The national strategy’s robust measures for assisting victims throughout the judicial process could also be instrumental in facilitating access to justice for sexual violence survivors.⁴³⁵

International guidelines recommend the provision of free and accessible legal services for survivors of sexual and other gender-based violence.⁴³⁶ A 2010 UN General Assembly resolution also calls on states to eliminate barriers to legal assistance for women victims of violence so that they have adequate representation and can make informed decisions about legal proceedings.⁴³⁷ The UN’s Model Strategies on criminal justice for violence against women call for victim assistance, specifying that states should “ensure that women subjected to violence have full access to the civil and criminal justice systems, including access to free legal aid.”⁴³⁸

Family Pressure

In some cases, survivors said that family members had dissuaded them from filing a criminal complaint. Aisha said that seven anti-balaka fighters killed her husband and four children and then raped her in Bangui in December 2013, but her father discouraged her from reporting the case. “I wrote a complaint. I wanted to file it,” she said. “But my father said no.”⁴³⁹ Aisha said she did not feel she could disobey her father and she needed his permission to file the complaint.⁴⁴⁰

Jolie, 23, said that anti-balaka took her as a “wife” and subjected her to multiple rapes near Bambari in June 2014, but her husband would not allow her to go to the authorities. “I

⁴³⁴ Loi No. Xxx (not yet numbered) portant facilitation de l’accès à la justice et au droit en République Centrafricaine par l’aide juridique, draft on file with Human Rights Watch, received May 6, 2016.

⁴³⁵ Ministère de la Justice, Stratégie Centrafricaine d’Aide Légale 2017-2022.

⁴³⁶ IASC Guidelines, p. 252. The Sphere standards call for clinical management of sexual violence services to include access to legal assistance. Sphere standards, “Essential health services—sexual and reproductive health standard 1: Reproductive Health,” p. 325.

⁴³⁷ United Nations General Assembly, Resolution 65/228 (Strengthening crime prevention and criminal justice responses to violence against women), U.N. Doc. A/Res/65/228, adopted by the General Assembly on December 21, 2010, March 31, 2011, http://www.un.org/en/ga/search/view_doc.asp?symbol=A/RES/65/228 (accessed August 18, 2017), paras. 7, 12.

⁴³⁸ UNGA, Updated Model Strategies, para. 18(h).

⁴³⁹ Human Rights Watch interview with Aisha, Bangui, December 4, 2015.

⁴⁴⁰ Ibid.

want to submit a complaint, but the father of my children refused,” she explained. “He said it’s God who’s going to judge.”⁴⁴¹

Difficulty Identifying Perpetrators

Repeatedly, survivors told Human Rights Watch that they did not believe they could report cases to authorities or file criminal complaints because they could not identify their attackers or they did not know their attackers’ whereabouts. Lydie reflected the words of many survivors when she questioned the value of filing a complaint if she cannot identify the men who raped her. “I don’t know their faces,” she said of the five Seleka who raped her on the Kaga-Bandoro–Ndele road around January 2013. “If I submit a complaint today, I am going to have justice against whom?”⁴⁴²

Police in the Central African Republic have an obligation to open a case on a report of sexual violence, regardless of whether the survivor can identify the perpetrator.⁴⁴³ However, the former General Prosecutor said that the mobility of armed groups perpetrating violence, combined with survivors’ inability to identify them, pose significant obstacles to prosecuting sexual violence.⁴⁴⁴ Other judicial authorities confirmed that police would open an investigation against an unknown perpetrator, but the likelihood of finding the perpetrator is small. A national police official told Human Rights Watch that police had not recorded many cases of rape by armed groups as of early 2016. “That does not mean there are not these types of cases, but a major problem is we do not know [the identities of] the authors of these crimes,” she said.⁴⁴⁵

Some survivors expressed strong wishes to pursue justice regardless of whether they knew their attackers’ identities. Marie said that four Seleka fighters raped her in front of her husband in Boy-Rabe in April 2013. She said:

⁴⁴¹ Human Rights Watch interview with Jolie, Bangui, April 25, 2016.

⁴⁴² Human Rights Watch interview with Lydie, Kaga-Bandoro, May 2, 2016.

⁴⁴³ Human Rights Watch interview with former General Prosecutor, Bangui, January 14, 2016.

⁴⁴⁴ Ibid.

⁴⁴⁵ Human Rights Watch interview with police official, Bangui, January 21, 2016.

I have thought about what these men did and justice for myself. I want these men brought to justice and put in prison. I want to open a case against them, even if I don't know who they are.⁴⁴⁶

Authorities bear responsibility for investigating sexual violence, regardless of a survivor's ability to identify the aggressor(s). The UN's Model Strategies on criminal justice for violence against women specify that "the primary responsibility for initiating investigations and prosecutions lies with the police and prosecution authorities and does not rest with women subjected to violence, regardless of the level or form of violence."⁴⁴⁷ This includes investigation into the identity and whereabouts of alleged perpetrators.

Lack of Medical Certificates

Although criminal prosecution does not legally require a medical certificate attesting to signs of sexual violence, service providers and judicial authorities told Human Rights Watch that a conviction without one is unlikely. Completed by a doctor at the time of service provision—whether a survivor seeks services immediately or long after a rape—the medical certificate offers confirmation that a patient exhibits symptoms consistent with sexual violence, which may or may not be physical depending on the case and the delay between the incident and provision of care. "There needs to be a medical certificate to attest to sexual violence," the former General Prosecutor told Human Rights Watch. Without it, he said, "the only thing that remains is testimony."⁴⁴⁸ However, he added, authorities can still open cases and use other methods—including corroborating testimony and expert witnesses—to prosecute cases where a medical certificate is absent.⁴⁴⁹

A Ministry of Health official told Human Rights Watch that health care providers explain the value and importance of medical certificates to rape survivors, and provide the certificates free of charge directly to survivors upon request.⁴⁵⁰ However, the Standard Operating Procedures for GBV in the Central African Republic (SOPs) adopted by key agencies supporting gender-based violence initiatives note that medical certificates are not free

⁴⁴⁶ Human Rights Watch interview with Marie, Bangui, January 14, 2016.

⁴⁴⁷ UNGA, Updated Model Strategies, para. 15(b).

⁴⁴⁸ Human Rights Watch interview with former General Prosecutor, Bangui, January 14, 2016.

⁴⁴⁹ Ibid.

⁴⁵⁰ Human Rights Watch interview with Ministry of Health official, April 11, 2017.

“even though they constitute important medico-legal proof. Legal precedent shows that the certificate (or the report) often constitute the principal element of proof when a case of rape is brought before the justice system.”⁴⁵¹ According to the SOPs, medical certificates for rape incur a cost of 5,000 CAF (about US\$8.09) for documentation of a recent case or 20,000 CFA (about \$32.35) for an older case. The document notes that signatories advocate for free provision of medical certificates or reports.⁴⁵² Many service providers and authorities whom Human Rights Watch interviewed were unaware of any official policy regarding such fees, but said that providers at state-run clinics or hospitals do frequently charge for medical certificates.⁴⁵³

Practitioners at some INGOs and at Bangui’s Hôpital de l’Amitié and Hôpital Communautaire said they provide medical certificates at no cost to every survivor, and some survivors who visited these clinics confirmed receipt of certifications.⁴⁵⁴ However, only 14 of 112 survivors who disclosed rape at health facilities told Human Rights Watch that a health care provider had given them a medical certificate. In two cases, survivors said that the certificate was given to a family member rather than directly to them. Others said that they did not receive a certificate, or did not know whether one had been completed.

The father of 13-year-old Christelle recalled bringing his daughter to Bambari hospital after Seleka fighters raped her in November 2015. “They just gave us the medical booklet and told us to go from service to service,” he said. “There was no medical certificate.”⁴⁵⁵

Several survivors in Kaga-Bandoro told Human Rights Watch that hospital personnel completed medical certificates but kept them at the hospital. Staff told the survivors they would need to withdraw the certificates from the hospital if they wanted to file a

⁴⁵¹ Sous-Cluster Violences Basées sur le Genre, July 24, 2015, p. 19.

⁴⁵² Survivors who receive medical treatment soon after a rape receive a “medical certificate of rape” (*certificat médical du viol*), whereas survivors who seek treatment or a certificate for a historic case of rape receive a “medical report” (*rapport médical*), neither of which are systematically offered for free in the Central African Republic. Sous-Cluster Violences Basées sur le Genre, July 24, 2015, p. 19.

⁴⁵³ Human Rights Watch interviews with gynecologist, Hôpital Communautaire, Bangui, April 22, 2016; gynecologist, Hôpital de l’Amitié, Bangui, May 9, 2016; UMIRR official, Bangui, August 12, 2017.

⁴⁵⁴ Human Rights Watch interviews with personnel, medical INGO, Bangui, July 24, 2015, personnel, medical INGO, Bangui, July 27, 2015, gynecologist, Hôpital Communautaire, Bangui, April 22, 2016; gynecologist, Hôpital d’Amitié, Bangui, May 9, 2016.

⁴⁵⁵ Human Rights Watch interview with father of Christelle, Bambari, January 19, 2016.

complaint.⁴⁵⁶ Other women who sought care at Kaga-Bandoro hospital said they had no knowledge of a medical certificate at all.⁴⁵⁷

A midwife at Kaga-Bandoro hospital confirmed that the hospital retains medical certificates of sexual violence survivors until a judicial process is launched. When Human Rights Watch visited the hospital in May 2016, she said they were not providing medical certificates. “We cannot release a medical certificate now,” she said in May 2016. “We will wait until the justice system begins its work again.”⁴⁵⁸ She also said that staff do not complete medical certificates routinely, but rather upon a patient’s request. “It is when she asks for it that we pursue it,” she said. “It is not up to us to tell her.”⁴⁵⁹

A doctor at Bambari Hospital and a midwife at Boda hospital also said that their facilities only provide survivors with a medical certificate upon request.⁴⁶⁰ At Bambari Hospital, a doctor said he did not know if patients had to pay a fee for the certificate.⁴⁶¹

Some survivors believed they needed a medical certificate to file a complaint. Natifa said she could not submit a criminal complaint because hospitals were not operating when anti-balaka raped her in Bangui in February 2014 and she had no medical certificate. “If you go to the hospital and get a medical certificate, then you can go submit a complaint,” she said.⁴⁶²

The World Health Organization (WHO) guidelines on clinical management of rape in emergency settings state that post-rape care includes preparation of a medical certificate. “It is the responsibility of the health care provider who examines the survivor to make sure such a certificate is completed,” the guidelines say. “The medical certificate is a confidential medical document that the doctor must hand over to the survivor.”⁴⁶³ The GBV

⁴⁵⁶ Human Rights Watch interviews with Pasqualine, Kaga-Bandoro, May 2, 2016, and Ornella, Kaga-Bandoro, May 3, 2016.

⁴⁵⁷ Human Rights Watch interviews with Sonia and Pasqualine, Kaga-Bandoro, May 2, 2016, and Lorraine, Kaga-Bandoro, May 3, 2016.

⁴⁵⁸ Human Rights Watch interview with midwife, Kaga-Bandoro Hospital, May 3, 2016.

⁴⁵⁹ Ibid.

⁴⁶⁰ Human Rights Watch interview with doctor, Bambari hospital, January 18, 2016.

⁴⁶¹ Ibid.

⁴⁶² Human Rights Watch interview with Natifa, Bangui, April 24, 2016.

⁴⁶³ World Health Organization, “Clinical Management of Rape Survivors: Developing protocols for use with refugees and internally displaced persons,” Geneva: WHO/UNHCR, 2004,

SOPs in the Central African Republic advocate provision of medical certificates to survivors at no cost.⁴⁶⁴

Special Criminal Court

In June 2015, then-president Catherine Samba-Panza signed a law creating a temporary Special Criminal Court (SCC) to investigate and prosecute grave human rights violations committed in the country since 2003.⁴⁶⁵ This marked the first time a government had passed a law creating a hybrid court, consisting of national and international judges and prosecutors, embedded in its national judicial system. Given the weakness of the Central African national judicial system and the International Criminal Court's limited focus on prosecuting high-level perpetrators of the gravest crimes, the SCC could contribute significantly to combatting impunity for serious violations committed during armed conflict.⁴⁶⁶

The SCC's mandate includes investigation and prosecution of grave violations of human rights and international humanitarian law committed in the Central African Republic since January 1, 2003, "as defined by the Central African penal code and under international law obligations of the Central African Republic, notably the crimes of genocide, crimes against humanity and war crimes."⁴⁶⁷ The Central African penal code defines war crimes in accordance with the 1949 Geneva conventions and conforms to international customary humanitarian law.⁴⁶⁸ Crimes against humanity, as defined by the Central African penal

<http://www.who.int/reproductivehealth/publications/emergencies/924159263X/en/> (accessed August 18, 2017), p. 14. The WHO recommends that the health care provider retain a copy of the certificate, in a secure location and with identifying information removed, in case of loss or destruction of the survivor's document.

⁴⁶⁴ Sous-Cluster Violences Basées sur le Genre, July 24, 2015, p. 19.

⁴⁶⁵ "Central African Republic: UN Investigators urge establishment of war crimes tribunal," UN press release, January 21, 2015, http://www.un.org/apps/news/story.asp?NewsID=49863#.V_ahbigrKUI (accessed August 18, 2017); Republican Pact for Peace, Reconciliation and Reconstruction in the Central African Republic, Annex I to the letter dated 15 May 2015 from the Chargé d'Affaires a.i. of the Permanent Mission of the Central African Republic to the United Nations addressed to the President of the Security Council, U.N. Doc. S/2015/344, <http://www.refworld.org/pdfid/5587dc5e4.pdfS/2015/344> (accessed August 18, 2017), p. 5; Loi Organique N° 15.003, portant création, organisation et fonctionnement de la cour pénale speciale, art. 3, on file with Human Rights Watch.

⁴⁶⁶ See Human Rights Watch, *Killing Without Consequence*, pp. 69-86.

⁴⁶⁷ Loi Organique N° 15.003, art. 3.

⁴⁶⁸ Code pénal de la République Centrafricaine, 2010, art. 154.

code, include “rape, sexual slavery, forced prostitution, forced pregnancy, forced sterilization, or any other form of sexual violence of comparable gravity.”⁴⁶⁹

In its 2017 mapping report, the UN warns that, in view of the many and various crimes committed by armed groups, “there is a risk that evidence of sexual violence would be overlooked” by SCC investigators, as has happened historically in similar justice mechanisms.⁴⁷⁰ The report notes the urgency of prioritizing investigations into crimes of sexual violence, both in the national court system and the SCC, and protecting victims and witnesses in such cases.⁴⁷¹

The law establishing the SCC foresees that if the ICC and the SCC begin work on the same case, priority will go to the ICC.⁴⁷² In terms of jurisdiction over ordinary national courts, the SCC is given primary but not exclusive jurisdiction, meaning that the SCC has priority to select cases but ordinary courts can still try remaining cases of grave international crimes, in accordance with Central African law.⁴⁷³

Progress towards the court’s establishment has been slow due to delays resulting from ongoing insecurity, organization of national elections, and lengthy negotiations to determine tasks and responsibilities of the domestic and international authorities involved with the court, including MINUSCA.⁴⁷⁴

In a major step towards making the SCC operational, on February 15, 2017 President Touadéra appointed Toussaint Muntazini Mukimapa of the Democratic Republic of Congo as the SCC’s special prosecutor.⁴⁷⁵ On April 11, Minister of Justice Flavien Mbata announced the appointment of two international judges, followed on May 5 by the appointment of five

⁴⁶⁹ Code pénal de la République Centrafricaine, 2010, art. 153.

⁴⁷⁰ MINUSCA et al., “Central African Republic 2003-2015,” p. 233.

⁴⁷¹ Ibid.

⁴⁷² Loi Organique N° 15.003, art. 37, on file with Human Rights Watch.

⁴⁷³ Loi Organique N° 15.003, arts. 3 and 36, on file with Human Rights Watch.

⁴⁷⁴ Human Rights Watch interview with transitional government staff, Bangui, June 13, 2016.

⁴⁷⁵ “A Step Towards Justice in the Central African Republic,” Human Rights Watch commentary, February 21, 2017, <https://www.hrw.org/news/2017/02/21/step-toward-justice-central-african-republic>.

national judges. On June 6, President Touadéra appointed a deputy international prosecutor.⁴⁷⁶

Some judicial officials have expressed concerns that the SCC will divert critical personnel, international attention, and financial support from the national judiciary without reinforcing the national system.⁴⁷⁷ Once operational, the SCC should strive in its working methods to enhance—rather than undermine—the national judiciary’s capacity to try grave crimes.

A key challenge for the SCC and national courts is providing robust protection for witnesses and victims of sexual violence. At present, no such protection mechanism exists in the Central African Republic. No victims participated in the UN-assisted 2015 criminal session in Bangui, either as a witness or a civil party, in part out of security concerns.⁴⁷⁸ In the 2016 criminal session, four witnesses participated as civil parties; only one was a witness in a conflict-related case, which involved accusations of associating with criminals.

At time of writing, MINUSCA was providing security to Special Criminal Court officials appointed to date as per its mandate to assist the SCC.⁴⁷⁹ MINUSCA staff indicated that dedicated MINUSCA and Central African police will provide security for court personnel.⁴⁸⁰

As referenced, MINUSCA was developing a protection strategy for both the standard justice system and the SCC at time of writing.⁴⁸¹ Due to a lack of resources and capacity at the

⁴⁷⁶ “Deux nouveaux magistrats pour siéger à la cour pénale spéciale pour la Centrafrique,” MINUSCA news release, April 13, 2017, <https://minusca.unmissions.org/deux-nouveaux-magistrats-pour-si%C3%A9ger-%C3%A0-la-cour-p%C3%A9nale-sp%C3%A9ciale-pour-la-centrafrique> (accessed August 18, 2017); Judicael Yongo, “Centrafrique: Cinq magistrats nationaux nommés pour siéger à la Cour Pénale Spéciale,” *Réseau des journalistes pour les droits de l’homme*, May 8, 2017, <http://linkis.com/rjdh.org/centrafriqu/RjXcD> (accessed August 18, 2017); Judicael Yongo, “Centrafrique : Le Substitut international nommé pour siéger à la Cour Pénale Spéciale,” *Réseau des journalistes pour les droits de l’homme*, June 10, 2017, <http://rjdh.org/centrafrique-substitut-international-nomme-sieger-a-cour-penale-speciale/> (accessed August 18, 2017).

⁴⁷⁷ Human Rights Watch interview with national judicial official, Bangui, June 14 and June 16, 2016.

⁴⁷⁸ Human Rights Watch interview with Central African lawyer, Bangui, June 14, 2016. See Amnesty International, “The Long Wait for Justice, Accountability in the Central African Republic,” January 11, 2017, p. 7.

⁴⁷⁹ The UN Security Council passed Resolution 2301 in July 2016. United Nations Security Council, Resolution 2301 (2016), SC/12462, section 34 (d) paras. vi, vii, and viii.

⁴⁸⁰ Human Rights Watch interview with UN staff member, New York, June 15, 2017.

⁴⁸¹ Human Rights Watch interview with UN staff member, Bangui, June 13, 2016. Human Rights Watch email correspondence with consultant, August 9, 2016. Human Rights Watch interviews with UN staff member, Bangui, April 3, 2017, and UN staff member, New York, May 9, 2017.

national level, MINUSCA’s ongoing assistance to protect court staff, victims, and witnesses is critical.

International Criminal Court

The crimes documented in this report are subject to prosecution by the International Criminal Court (ICC), which has jurisdiction over the most serious crimes when states are unwilling or unable to investigate or prosecute them.⁴⁸² This includes crimes against humanity and war crimes.⁴⁸³

In May 2014, interim president Catherine Samba-Panza referred the situation in the Central African Republic to the ICC, inviting the prosecutor to investigate crimes within the court’s jurisdiction. In September 2014, the ICC Prosecutor announced the opening of an investigation into crimes allegedly committed in the Central African Republic since August 2012.⁴⁸⁴ The Prosecutor noted there was “a reasonable basis to believe that both the Séléka and the anti-balaka groups have committed crimes against humanity and war crimes,” including rape and murder.⁴⁸⁵

The Office of the Prosecutor deployed two teams to investigate grave crimes committed by the Seleka and anti-balaka. At time of writing, the ICC had yet to issue charges against any individuals.

The ICC’s investigation into crimes committed since 2012 represents the second such investigation in the Central African Republic. The first investigation, opened in May 2007, focused on crimes committed during the 2002 and 2003 political upheaval and Bozizé-led coup.⁴⁸⁶ As a result, the ICC investigated and prosecuted Jean-Pierre Bemba Gombo, former

⁴⁸² Rome Statute, arts. 1, 17(1).

⁴⁸³ Rome Statute, art. 5.

⁴⁸⁴ “Statement of the Prosecutor of the International Criminal Court, Fatou Bensouda, on opening a second investigation in the Central African Republic,” ICC press release, ICC-OTP-20140924-PR1043, September 24, 2014, <https://www.icc-cpi.int/Pages/item.aspx?name=pr1043> (accessed August 18, 2017).

⁴⁸⁵ *Ibid*; See also International Criminal Court (ICC), “Situation in the Central African Republic II: Article 53(1) Report,” September 24, 2014, https://www.icc-cpi.int/iccdocs/otp/Art_53_1_Report_CAR_II_24Sep14.pdf (accessed August 18, 2017), paras. 20-23.

⁴⁸⁶ ICC, “Central African Republic: Situation in the Central African Republic,” ICC-01/05, <https://www.icc-cpi.int/car> (accessed August 18, 2017).

vice-president of the Democratic Republic of the Congo, for abuses committed by his troops. In March 2016, the ICC convicted Bemba of war crimes and crimes against humanity, both of which included rape.⁴⁸⁷ The verdict set noteworthy precedents on accountability for sexual violence in conflict and individual culpability resulting from command responsibility.⁴⁸⁸ On June 21, 2016, Bemba was sentenced to 18 years in prison.⁴⁸⁹ The guilty verdict against Bemba entitles victims of sexual violence to submit claims for reparations.

⁴⁸⁷ *Prosecutor v. Jean-Pierre Bemba Gombo*, ICC, Case No. ICC-01/05-01/08, Judgment (Trial Chamber III), 21 March 2016, <https://www.icc-cpi.int/car/bemba> (accessed August 18, 2017).

⁴⁸⁸ Under the Rome Statute, commanders and other superiors may also be criminally liable as a matter of “command responsibility” for crimes committed by their subordinates if they knew, or had reason to know, of such crimes and failed to prevent the crimes or to punish those responsible. See Rome Statute, art. 28; “High-Profile ICC Warning to Commanders on Rape,” Human Rights Watch commentary, March 21, 2016, <https://www.hrw.org/news/2016/03/21/dispatches-high-profile-icc-warning-commanders-rape>.

⁴⁸⁹ *Prosecutor v. Jean-Pierre Bemba Gombo*, ICC, Case No. ICC-01/05-01/08-3399, Decision on Sentence Pursuant to Article 76 of the Statute, June 21, 2016, <https://www.icc-cpi.int/Pages/record.aspx?docNo=ICC-01/05-01/08-3399> (accessed August 18, 2017).

V. Legal Obligations of the Central African Republic

“We are innocents—we have nothing to do with the conflict. It’s the government’s responsibility to deal with its problems, but we are abandoned by our government. No one is giving us help.”

—Aisha, 37, Bangui

The acts of sexual violence documented in this report—as well as indiscriminate attacks on civilians, executions, torture, enslavement, and looting—violate international humanitarian and human rights law and may amount to war crimes and crimes against humanity. Rape and sexual slavery violate international and regional treaties to which the Central African Republic is a party, as well as its own national legislation.

International Humanitarian and Criminal Law

The conflict between Seleka and anti-balaka armed groups in the Central African Republic is a non-international armed conflict and thus subject to customary international humanitarian law applicable in non-international armed conflicts as well as article 3 common to the four Geneva Conventions (“Common Article 3”) and the Second Additional Protocol of 1977 to the Geneva Conventions (Protocol II), to which CAR is a party.⁴⁹⁰ Persons under the control of armed groups in an internal armed conflict must in all cases be treated in accordance with international humanitarian law, which incorporates important human rights standards.⁴⁹¹

International humanitarian law forbids deliberate harm to civilians and other persons not taking part in hostilities at the time. Customary international humanitarian law prohibits

⁴⁹⁰ The Central African Republic became a party to the Geneva Conventions of 1949 in August 1966 and a party to Protocol II in July 1984.

⁴⁹¹ The UN Human Rights Committee, the international expert body that monitors state compliance with the International Covenant on Civil and Political Rights (ICCPR), a multilateral treaty, stated that the covenant, “applies also in situations of armed conflict to which the rules of international humanitarian law are applicable. While, in respect of certain Covenant rights, more specific rules of international humanitarian law may be especially relevant for the purposes of the interpretation of Covenant rights, both spheres of law are complementary, not mutually exclusive.” Human Rights Committee, General Comment No. 31, Nature of the General Legal Obligation on States Parties to the Covenant, U.N. Doc. CCPR/C/21/Rev.1/Add.13(2004), para.11.

rape and other forms of sexual violence. Common Article 3 prohibits the infliction of “violence to life and person,” including “cruel treatment and torture,” as well as “outrages upon personal dignity, in particular humiliating and degrading treatment” on anyone not participating in the conflict.⁴⁹² These abuses are deemed to cover acts of rape and other sexual violence. Additionally, Protocol II to the Geneva Conventions sets out fundamental guarantees for protection of civilians that prohibit rape and indecent assault as well as all forms of slavery.⁴⁹³

Sexual Violence as a War Crime and Crime Against Humanity

Sexual violence perpetrated by armed groups in the Central African Republic since 2013 is a serious breach of international humanitarian law and will in most if not all cases constitute a war crime and may constitute a crime against humanity.

According to the statute establishing the International Criminal Court (the “Rome Statute”), war crimes and crimes against humanity under the court’s competence include rape, sexual slavery, enforced prostitution, forced pregnancy, enforced sterilization, or any other form of sexual violence of comparable gravity.⁴⁹⁴

Commanders and other superiors are criminally responsible for war crimes committed or attempted pursuant to their orders and may also be criminally liable under the principle of “command responsibility” for crimes committed by their subordinates if they knew, or had reason to know, of such crimes and failed to prevent the crimes or to punish those responsible.⁴⁹⁵ The ICC has jurisdiction to prosecute commanders and other superiors in such circumstances.

War Crimes

When committed willfully, “serious” violations of international humanitarian law, or violations that “endanger protected persons or objects or if they breach important values,”

⁴⁹² Convention (1) for the Amelioration of the Condition of the Wounded and Sick in Armed Forces in the Field, Geneva, 12 August 1949, Conflicts not of an International Character, <https://ihl-databases.icrc.org/applic/ihl/ihl.nsf/WebART/365-570006?OpenDocument> (accessed August 18, 2017), Arts. 3.1(a), (c).

⁴⁹³ Protocol Additional to the Geneva Conventions of 12 August 1949, and Relating to the Protection of Victims of International Armed Conflicts (Protocol II), adopted June 8, 1977, 1125 U.N.T.S. 3, entered into force December 7, 1978.

⁴⁹⁴ Rome Statute of the International Criminal Court (Rome Statute), A/CONF.183/9, July 17, 1998, entered into force July 1, 2002, ratified by the Central African Republic on October 3, 2001, arts. 7(1)(g), 8(2)(b)(xxii).

⁴⁹⁵ Rome Statute, art. 28.

amount to war crimes.⁴⁹⁶ This applies to both international and non-international armed conflict, and to both state and non-state actors.⁴⁹⁷ International humanitarian law obligates states to investigate and prosecute war crimes committed by their citizens or on their territory, whether during international or non-international armed conflict.⁴⁹⁸

The Rome Statute provides that the ICC may prosecute rape, sexual slavery and other forms of sexual violence as war crimes, where the elements of the crime exist.⁴⁹⁹ Rape was prosecutable as a war crime under the statute of the International Criminal Tribunal for Rwanda (ICTR)⁵⁰⁰ and the International Criminal Tribunal of the former Yugoslavia (ICTY) ruled that acts of rape committed during the conflict were war crimes.⁵⁰¹

International human rights bodies have determined that sexual violence can amount to torture, and this is clearly the case when rape takes place in the context of a deprivation of liberty.⁵⁰² In January 2016, the Special Rapporteur on Torture explicitly noted that rape and other sexual violence in conflict, whether committed by state or non-state actors, “unequivocally amount to torture” under international criminal jurisprudence, and are thereby a breach of international humanitarian law.⁵⁰³ Judgments by the ICTY defined rape as a form of torture.⁵⁰⁴

⁴⁹⁶ International Committee of the Red Cross (ICRC) Customary International Humanitarian Law, Rule 156. See also: Rome Statute, art. 28; Statute of the International Criminal Tribunal for the former Yugoslavia, SC Res. 827, U.N. Doc. S/RES/827 (1993), as amended, <http://www.securitycouncilreport.org/atf/cf/%7B65BF9B-6D27-4E9C-8CD3-CF6E4FF96FF9%7D/11%20SRES827.pdf> (accessed August 18, 2017), art. 7 (3); Statute of the International Criminal Tribunal for Rwanda, SC Res. 955, U.N. Doc. S/RES/955 (1994), as amended, <http://www.refworld.org/docid/3boof2742c.html> (accessed August 18, 2017), art. 6(3).

⁴⁹⁷ ICRC Customary International Humanitarian Law, Rules 151, 153, 156. The Statutes of the ICTR and the Special Court for Sierra Leone also specify that individuals can be held responsible for war crimes committed in non-international armed conflicts. See ICTR Statute, Arts. 4-5; Statute of the Special Court for Sierra Leone, Art. 1.

⁴⁹⁸ ICRC Customary International Humanitarian Law, Rule 158.

⁴⁹⁹ Rome Statute, Art. 8.1, 8.b.xxii.

⁵⁰⁰ ICTR Statute Art. 4.

⁵⁰¹ *Prosecutor v. Furundzija*, ICTY, Case No. IT-95-17/1-T, Judgment (Trial Chamber), December 10, 1998, <http://www.icty.org/x/cases/furundzija/tjug/en/fur-tj981210e.pdf> (accessed August 18, 2017), paras. 172, 270-275.

⁵⁰² UN Economic and Social Council, Report of the Special Rapporteur on Torture, E/CN.4/1986/15, February 1986, http://ap.ohchr.org/documents/E/CHR/report/E-CN_4-1986-15.pdf (accessed August 18, 2017), para. 119.

⁵⁰³ United Nations Human Rights Council, Report of the Special Rapporteur on torture and other cruel, inhumane or degrading treatment or punishment, A/HRC/31/57, January 5, 2016, <http://www.refworld.org/docid/56c435714.html> (accessed August 18, 2017), para. 52.

⁵⁰⁴ In *Prosecutor v. Kunarac et al.*, the ICTY found that “sexual violence necessarily gives rise to pain and suffering, whether physical or mental, and in this way justifies its characterization as torture.” *Prosecutor v. Kunarac et al.*, ICTY, Case No. IT-96-23& IT-96-23/1-A, Appeals Judgment, June 12, 2002, <http://www.icty.org/x/cases/kunarac/acjug/en/kun-ajo20612e.pdf> (accessed August 18, 2017) para. 150. See also, *Prosecutor v. Mucic et al.*, ICTY, Case No. IT-96-21, Trial Judgment, November

Individuals may be held criminally responsible for committing a war crime, but also for facilitating, aiding, or abetting the commission of one, or attempting to commit one.⁵⁰⁵ Moreover, “responsibilities may also fall on persons ordering, planning or instigating the commission of a war crime.”⁵⁰⁶ As per customary humanitarian law on command responsibility, individuals may be held criminally liable for war crimes committed on their orders, or for the failure to prevent crimes that they had reasonable knowledge their subordinates were committing or going to commit.⁵⁰⁷ An individual may also be held responsible for failing to punish subordinates who commit such crimes.⁵⁰⁸

Article 28 of the Rome Statute sets out the principle of “command responsibility,” under which a commander may be held criminally responsible for crimes within his jurisdiction if, among other aspects, the crimes concerned fell within the commander’s effective responsibility and control.⁵⁰⁹

Crimes against Humanity

The commission of certain crimes, including rape, when committed as part of widespread or systematic attack against civilians, may be recognized as crimes against humanity.

16, 1998, <http://www.icty.org/case/mucic/4> (accessed August 18, 2017), paras. 475-494.; *Prosecutor v. Kunarac et al.*, ICTY, Case No. IT-96-23-T& IT-96-23/1-T, Judgment, February 22, 2001, paras. 542-543, <http://www.icty.org/x/cases/kunarac/tjug/en/kun-tjo10222e.pdf> (accessed August 18, 2017); *Prosecutor v. Delalic et al.*, ICTY, Case No. IT-96-21-T, Trial Judgment, November 16, 1998, paras. 495-496, http://www.icty.org/x/cases/mucic/tjug/en/981116_judg_en.pdf (accessed August 18, 2017); *Prosecutor v. Akayesu*, ICTR, Case No. ICTR-96-4-T, Trial Judgment, September 2, 1998, para. 687, <http://unictr.unmict.org/sites/unictr.org/files/case-documents/ict-96-4/trial-judgements/en/980902.pdf> (accessed August 18, 2017).

⁵⁰⁵ ICRC Customary International Humanitarian Law, Rule 151.

⁵⁰⁶ Jean-Marie Henckaerts, Louise Doswald-Beck, *Customary International Humanitarian Law*, (New York: Cambridge University Press, 2005), <https://www.icrc.org/eng/assets/files/other/customary-international-humanitarian-law-i-icrc-eng.pdf>, p. 554 (accessed August 18, 2017).

⁵⁰⁷ ICRC Customary International Humanitarian Law, Rules 152, 153. Under article 28 of the Rome Statute, a superior shall be criminally responsible for war crimes where: (i) the superior either knew, or consciously disregarded information which clearly indicated, that the subordinates were committing or about to commit such crimes; (ii) the crimes concerned activities that were within the effective responsibility and control of the superior; and (iii) the superior failed to take all necessary and reasonable measures within his or her power to prevent or repress their commission or to submit the matter to the competent authorities for investigation and prosecution.

⁵⁰⁸ ICRC Customary International Humanitarian Law, Rule 153. Command Responsibility for Failure to Prevent, Repress or Report War Crimes.

⁵⁰⁹ Rome Statute, art. 28.

“Widespread” refers to the scale of the acts or number of victims.⁵¹⁰ “Systematic” refers to an attack conducted according to “a pattern or methodical plan.”⁵¹¹ The attack must target a sufficient number of people who are predominantly non-combatants.⁵¹² To be convicted of crimes against humanity, an individual must have had knowledge that his or her actions were part of such an attack.⁵¹³

Both rape and sexual slavery may constitute crimes against humanity under the Rome Statute, if the other elements of a crime against humanity set out above are present.⁵¹⁴ The statutes of both the ICTY and ICTR include enslavement as a crime against humanity, and the ICTY deemed sexual slavery to be a crime against humanity.⁵¹⁵

In its 2014 report, the UN Commission of Inquiry on the Central African Republic noted evidence of command responsibility and crimes against humanity for sexual violence committed by armed groups:

Acts of rape were sufficiently frequent and sufficiently connected to the broader attack against the civilian population, such that the superiors within the chain of command for the respective forces implicated in perpetrating rape either knew or should have known of the conduct of their

⁵¹⁰ *Prosecutor v. Akayesu* defined widespread as “massive, frequent, large scale action, carried out collectively with considerable seriousness and directed against a multiplicity of victims,” *Prosecutor v. Akayesu*, ICTR, para. 580; see also *Prosecutor v. Kordic and Cerkez*, ICTY, Case No. IT-95-14/2, Judgment (Trial Chamber III), February 26, 2001, para. 179; *Prosecutor v. Kayishema and Ruzindana*, ICTR, Case No. ICTR-95-1-T, Judgment (Trial Chamber II), May 21, 1999, para. 123.

⁵¹¹ *Prosecutor v. Dusko Tadic*, ICTY, Case No. IT-94-1-T, Judgment (Trial Chamber), May 7, 1997, para. 648. In *Prosecutor v. Kunarac, Kovac and Vukovic*, the Appeals Chamber stated that “patterns of crimes—that is non-accidental repetition of similar criminal conduct on a regular basis—are a common expression of [a] systematic occurrence.” *Prosecutor v. Kunarac, Kovac and Vukovic*, para. 94.

⁵¹² In *Prosecutor v. Naletilic and Martinovic*, the Trial Chamber stated that “the population against whom the attack is directed is considered civilian if it is predominantly civilian.” *Prosecutor v. Naletilic and Martinovic*, ICTY, Case No. IT-98-34-T, Judgment (Trial Chamber I), March 31, 2003, para. 235. *Prosecutor v. Akayesu* makes a distinction between combatants in a civilian population stating, “Where there are certain individuals within the civilian population who do not come within the definition of civilians, this does not deprive the population of its civilian character.” *Prosecutor v. Akayesu*, ICTR, para. 582. In *Prosecutor v. Kunarac, Kovac and Vukovic* the Appeals Chamber stated that “It is sufficient to show that enough individuals were targeted in the course of the attack, or that they were targeted in such a way as to satisfy the Chamber that the attack was in fact directed against a civilian ‘population’, rather than against a limited and randomly selected number of individuals.” *Prosecutor v. Kunarac, Kovac and Vukovic*, para. 90.

⁵¹³ See *Prosecutor v. Kupreskic*, ICTY, Case No. IT-95-16-T, Judgment (Trial Chamber), January 14, 2000, para. 556.

⁵¹⁴ Rome Statute, Article 7(1)(g).

⁵¹⁵ *Prosecutor v. Kunarac et al.* See also, *Mucic et al.*, paras. 475-494; *Prosecutor v. Kunarac et al.*, paras. 542-543; *Prosecutor v. Dalalic et al.*, paras. 495-496; *Prosecutor v. Akayesu*, para. 687.

subordinates. Representatives of the command and control network of the respective groups were either present at the crime scene, receiving reports, or otherwise should have known of the acts of rape committed by their subordinates. This is particularly the case given the public nature of certain rapes, the frequent use of gang rape by multiple perpetrators, and the blatant impunity with which the acts were committed, demonstrating knowledge, condoning, or acceptance at the highest levels of command and coordination of the respective armed groups.⁵¹⁶

The UN mapping of violations of international human rights and humanitarian law in Central African Republic, released in May 2017, also states that, with regards to sexual violence, “leaders of armed groups and high-level officials of national security forces have encouraged such acts, failed to prevent them as commanders or were in some cases directly involved in sexual violence.”⁵¹⁷

International Human Rights Law

Sexual violence violates several core protected international human rights such as the rights to life, security of person, freedom from torture or other ill-treatment, and the highest attainable standard of physical and mental health. Some forms of sexual violence, such as sexual slavery, violate absolute prohibitions on slavery or forced work under international human rights law.⁵¹⁸ The Central African Republic is a party to the International Covenant on Civil and Political Rights (ICCPR), the International Covenant on Economic, Social and Cultural Rights (ICESCR), the Convention against Torture and Other Cruel, Inhuman and Degrading Treatment or Punishment (CAT), and the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW). These treaties affirm the rights articulated above, recognizing that women and girls have the right to live free

⁵¹⁶ International Commission of Inquiry on the Central African Republic, Final Report, para. 489.

⁵¹⁷ MINUSCA et al., “Central African Republic 2003-2015,” p. 208.

⁵¹⁸ International Covenant on Civil and Political Rights (ICCPR), adopted December 16, 1966, G.A. res. 2200A (XXI), 999 U.N.T.S. 171, entered into force March 23, 1976, Arts. 6, 7, 8; International Covenant on Economic, Social and Cultural Rights (ICESCR), adopted December 16, 1966, G.A. Res. 2200A (XXI), 21 U.N. GAOR Supp. (No. 16) at 49, U.N. Doc. A/6316 (1966), 993 U.N.T.S. 3, entered into force January 3, 1976, Art. 12; Universal Declaration of Human Rights (UDHR), adopted December 10, 1948, G.A. Res. 217A(III), U.N. Doc. A/810 at 71 (1948), arts. 3, 4, 5. The Central African Republic acceded to the ICCPR and the ICESCR on May 8, 1981.

from violence.⁵¹⁹ The Central African Republic is also a party to the Convention on the Rights of the Child, which enshrines the same rights to life, health, and freedom from discrimination and protection from violence, torture and other ill-treatment for anyone under the age of 18.⁵²⁰

In the framework of hostilities occurring as part of an armed conflict, international humanitarian law, as the *lex specialis* (specialized law), may take precedence but does not replace international human rights law.

Right to Protection from Sexual Violence and a Remedy for Abuses

International law requires equal treatment of men and women, and forbids discrimination on the basis of sex.⁵²¹ CEDAW obliges states to ensure that women enjoy the same fundamental freedoms and rights as men, including the rights to life and health, and to guarantee their “full development and advancement.”⁵²² This includes efforts to address attitudes and behaviors that may be harmful to women.⁵²³

International bodies have established that gender-based violence, or “violence that is directed against a woman because she is a woman or that affects women disproportionately,” constitutes a form of discrimination.⁵²⁴ The committee responsible for

⁵¹⁹ Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), adopted December 18, 1979, G.A. res. 34/180, 34 U.N. GAOR Supp. (No. 46) at 193, U.N. Doc. A/34/46, entered into force September 3, 1981; Optional Protocol to the Convention on the Elimination of Discrimination against Women, adopted October 6, 1999, G.A. res. 54/4, annex, 54 U.N. GAOR Supp. (No. 49) at 5, U.N. Doc. A/54/49 (Vol. I) (2000), entered into force December 22, 2000; Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (Convention against Torture), adopted December 10, 1984, G.A. res. 39/46, annex, 39 U.N. GAOR Supp. (No. 51) at 197, U.N. Doc. A/39/51 (1984), entered into force June 26, 1987. The Central African Republic acceded to the CAT on October 11, 2016, and to CEDAW on June 21, 1991. The Central African Republic also acceded to the Optional Protocol to CEDAW in 2016.

⁵²⁰ Convention on the Rights of the Child (CRC), adopted November 20, 1989, G.A. Res. 44/25, annex, 44 U.N. GAOR Supp. (No. 49) at 167, U.N. Doc. A/44/49 (1989), entered into force September 2, 1990, Arts. 2, 6, 19, 24, 34.37(a), 38. The Central African Republic ratified the CRC on April 23, 1992.

⁵²¹ ICCPR, Arts. 2.1, 3, 26; UDHR arts. 2, 7; ICESCR Art. 2.2, Art. 3.

⁵²² CEDAW, Arts. 2, 3.

⁵²³ CEDAW, Art. 5.

⁵²⁴ UN Committee on the Elimination of Discrimination against Women (CEDAW Committee), General Recommendation 19, Violence against Women (Eleventh session, 1992), Compilation of General Recommendations and General Comments adopted, http://tbinternet.ohchr.org/Treaties/CEDAW/Shared%20Documents/1_Global/INT_CEDAW_GEC_3731_E.pdf (accessed August 18, 2017), paras. 6, 7.

monitoring and reporting on CEDAW (the CEDAW Committee) has clarified that states' responsibility to eliminate discrimination requires them to take appropriate measures to regulate the actions of non-state actors.⁵²⁵

In its General Recommendation No. 30 on women and conflict, the CEDAW Committee specifies that rights afforded by the Convention—and by complementary international humanitarian, criminal and refugee law—apply during times of conflict.⁵²⁶ The Committee calls on states to prohibit and “prevent, investigate and punish all forms of gender-based violence, in particular sexual violence, perpetrated by State and non-State actors” in conflict.⁵²⁷ States are obliged to protect women and girls from violence, provide access to services for survivors of violence, and hold perpetrators accountable, including in cases of sexual violence against the internally displaced and refugees.⁵²⁸

In the Concluding Observations following its review of the Central African Republic in 2014, the CEDAW Committee reminded the government of its ongoing obligations to eliminate discrimination against women, including violence against women and girls, during the current conflict.⁵²⁹ UN Security Council Resolution 1325 (2000) on women, peace, and security calls on all UN member states and parties to an armed conflict to “take special

⁵²⁵ CEDAW Committee, General Recommendation 19, para. 9; CEDAW Committee, General Recommendation No. 28, on the core obligations of States parties under Article 2 of the Convention on the Elimination of All Forms of Discrimination against Women, U.N. Doc. CEDAW/C/GC/28 (December 16, 2010), paras. 9, 13.

⁵²⁶ CEDAW Committee, General Recommendation No. 30 on women in conflict prevention, conflict and post-conflict situations, October 18, 2013, U.N. Doc. CEDAW/C/GC/30, <http://www.ohchr.org/Documents/HRBodies/CEDAW/GComments/CEDAW.C.CG.30.pdf> (accessed August 17, 2017) paras. 2, 19.

⁵²⁷ CEDAW Committee, General Recommendation No. 30, para. 38(B). The Committee and the Special Rapporteur on violence against women, its causes and consequences have previously established the responsibility of states to regulate non-State actors (due diligence principle). See CEDAW Committee, General Recommendation No. 30, para. 15; CEDAW Committee, General Recommendation No. 28, para. 13; CEDAW Committee, General Recommendation No. 19, Violence against Women (Eleventh session, 1992), http://tbinternet.ohchr.org/Treaties/CEDAW/Shared%20Documents/1_Global/INT_CEDAW_GEC_3731_E.pdf (accessed August 17, 2017), paras. 8-9; Human Rights Council, Report of the Special Rapporteur on violence against women, its causes and consequences, Rashida Manjoo, Twenty-third session, May 14, 2013, http://www.ohchr.org/Documents/HRBodies/HRCouncil/RegularSession/Session23/A_HRC_23_49_English.pdf (accessed August 18, 2017), paras. 11-68.

⁵²⁸ CEDAW Committee, General Recommendation No.30, paras. 38(a), (c), (e), 53, 57(d)-(g);

⁵²⁹ CEDAW Committee, Concluding observations on the combined initial and second to fifth periodic reports of the Central African Republic, U.N. Doc. CEDAW/C/CAF/CO/1-5, July 24, 2014, http://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?symbolno=CEDAW%2fC%2fCAF%2fCO%2f1-5&Lang=en (accessed August 17, 2017), para. 13.

measures to protect women and girls from gender-based violence, particularly rape and other forms of sexual abuse, and all other forms of violence in situations of armed conflict.”⁵³⁰ Resolution 1325 also calls on states to end impunity for and prosecute perpetrators of crimes against humanity and war crimes “including those relating to sexual violence and other violence against women and girls.”⁵³¹ UN Security Council Resolutions 1820 (2008), 1888 (2009), 1889 (2009), 1960 (2010), 2106 (2013), 2122 (2013), and 2242 (2015) issue further calls for “the complete cessation with immediate effect by all parties to armed conflict of all acts of sexual violence” and a commitment by all parties to time-bound measures for combating sexual violence.⁵³²

In addition to protections from sexual violence, international human rights law guarantees the right to a remedy for victims of abuses.⁵³³ Resolution 1325 emphasizes the need for accountability for sexual violence, urging states to prosecute sexual violence and other gender-based crimes, and to exclude such crimes from amnesty provisions.⁵³⁴ In its General Recommendation on access to justice, the CEDAW Committee recognizes that

⁵³⁰ UN Security Council, Resolution 1325 (2000), S/RES/1325(2000), October 31, 2000, [http://www.un.org/en/ga/search/view_doc.asp?symbol=S/RES/1325\(2000\)](http://www.un.org/en/ga/search/view_doc.asp?symbol=S/RES/1325(2000)) (accessed August 17, 2017, para. 10.

⁵³¹ Security Council, Resolution 1325 (2000), para. 11.

⁵³² Security Council, Resolution 1820 (2008), S/RES/1820 (2008), June 19, 2008, [http://www.un.org/en/ga/search/view_doc.asp?symbol=S/RES/1820\(2008\)](http://www.un.org/en/ga/search/view_doc.asp?symbol=S/RES/1820(2008)) (accessed August 17, 2017); Security Council, Resolution 1888 (2009), S/RES/1889 (2009), September 30, 2009, [http://www.un.org/en/ga/search/view_doc.asp?symbol=S/RES/1888\(2009\)](http://www.un.org/en/ga/search/view_doc.asp?symbol=S/RES/1888(2009)) (accessed August 17, 2017); Security Council, Resolution 1960 (2010), S/RES/1960 (2010), December 16, 2010, [http://www.un.org/en/ga/search/view_doc.asp?symbol=S/RES/1960\(2010\)](http://www.un.org/en/ga/search/view_doc.asp?symbol=S/RES/1960(2010)) (accessed August 17, 2017); Security Council, Resolution 2106 (2013), S/RES/2106 (2013), June 24, 2013, [http://www.un.org/en/ga/search/view_doc.asp?symbol=S/RES/2106\(2013\)](http://www.un.org/en/ga/search/view_doc.asp?symbol=S/RES/2106(2013)) (accessed August 17, 2017), para. 10; Security Council, Resolution 2122 (2013), S/RES/2122 (2013), October 18, 2013, [http://www.un.org/en/ga/search/view_doc.asp?symbol=S/RES/2122\(2013\)](http://www.un.org/en/ga/search/view_doc.asp?symbol=S/RES/2122(2013)) (accessed August 17, 2017); Security Council, Resolution 2242 (2015), S/RES/2242 (2015), October 13, 2015, [http://www.un.org/ga/search/view_doc.asp?symbol=S/RES/2242\(2015\)](http://www.un.org/ga/search/view_doc.asp?symbol=S/RES/2242(2015)) (accessed August 17, 2017). Security Council 1960 calls for “parties to armed conflict to make and implement specific and time-bound commitments to combat sexual violence, which should include, inter alia, issuance of clear orders through chains of command prohibiting sexual violence and the prohibition of sexual violence in Codes of Conduct, military field manuals, or equivalent; and further calls upon those parties to make and implement specific commitments on timely investigation of alleged abuses in order to hold perpetrators accountable.” Security Council Resolution 1960 (2010), para. 5.

⁵³³ UDHR, Art. 8; ICCPR, Art. 2.3; CEDAW Art. 2; Protocol Additional to the Geneva Conventions of 12 August 1949, and relating to the Protection of Victims of International Armed Conflict (Protocol I), 8 June 1977, Art. 91, <https://ihl-databases.icrc.org/applic/ihl/ihl.nsf/Article.xsp?action=openDocument&documentId=F461FC196C18A52DC12563CD0051E2AC> (accessed August 18, 2017). With regards to Protocol I to the Geneva Conventions, which applies to international armed conflict, the UN Secretary-General’s Guidance Note on conflict-related sexual violence states that “the obligation reflected therein can now be considered as part of customary international law applicable to non-international armed conflict.” Guidance Note of the Secretary-General: Reparations for Conflict-Related Sexual Violence, June 2014, p.3-4, Footnote 9. See also CEDAW Committee, General Recommendation No. 28, paras. 32, 34, 36; CEDAW Committee, General Recommendation No. 33 on women’s access to justice, U.N. Doc. CEDAW/C/GC/33, August 3, 2015.

⁵³⁴ Security Council, Resolution 1325, para. 11.

women may face additional barriers to redress and calls on states to ensure women’s access to timely, adequate, effective, and proportionate remedies for abuses.⁵³⁵ With regards to sexual violence in conflict, the Committee specifies that states should implement institutional reforms and enact legislation “providing for adequate sanctions, in accordance with international human rights standards.”⁵³⁶ Any decisions determining reparations should be made in close consultation with women’s groups and civil society.⁵³⁷ Moreover, the Committee calls on states not to use alternative justice mechanisms in lieu of investigation and prosecution of sexual violence in conflict.⁵³⁸ As stated in the UN Secretary-General’s Guidance Note on Reparations for Conflict-Related Sexual Violence, “all victims should have access to effective judicial remedies which include adequate, prompt and full reparation for the harm suffered.”⁵³⁹

Right to Health

In addition to international instruments that guarantee the right to the highest attainable standard of health, several human rights bodies have specifically addressed the right to sexual and reproductive health care, including for survivors of sexual violence. The Committee on Economic, Social, and Cultural Rights (CESCR), which monitors implementation of the ICESCR, has stated that “the right to sexual and reproductive health is an integral part of the right to health.”⁵⁴⁰ The CESCR recognizes that conflict-affected women and girls may experience a disproportionate impact on their right to sexual and reproductive health as a result of sexual violence.⁵⁴¹ States’ obligations to offer comprehensive health care—including post-rape care—for survivors of violence are specific and unequivocal:

⁵³⁵ CEDAW Committee, General Recommendation No. 33, paras. 19(a)-(b), (g). See also CEDAW Committee, General Recommendation No. 30, para. 79.

⁵³⁶ CEDAW Committee, General Recommendation No. 33, para. 19(e).

⁵³⁷ *Ibid.*

⁵³⁸ CEDAW Committee, General Recommendation No. 33, para. 19(f).

⁵³⁹ Guidance Note of the Secretary-General: Reparations for Conflict-Related Sexual Violence, June 2014, p. 6.

⁵⁴⁰ UN Committee on Economic, Social, and Cultural Rights (CESCR), General Comment No. 22 (2016) on the right to sexual and reproductive health (article 12 of the International Covenant on Economic, Social and Cultural Rights), U.N. Doc. E/C.12/GC/22, May 2, 2016, http://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?symbolno=E%2fC.12%2fGC%2f22&Lang=en (accessed August 17, 2017), art. 1.

⁵⁴¹ CESCR, General Comment No. 22, para. 30.

States must guarantee physical and mental health care for survivors of sexual and domestic violence in all situations, including access to post-exposure prevention, emergency contraception and safe abortion services.⁵⁴²

In its General Recommendation No. 30 on women and conflict, the CEDAW Committee notes that, as a consequence of disruptions to health care systems and prevalence of sexual violence in conflict, women and girls face higher risks of reproductive health-related illness and injury, such as unplanned pregnancy, pelvic injuries, and sexually transmitted infections including HIV.⁵⁴³ Simultaneously, the Committee states, women and girls face additional barriers to realization of their right to health: “The breakdown or destruction of health services, combined with restrictions on women’s mobility and freedom of movement, further undermines women’s equal access to health care.”⁵⁴⁴ To meet the needs of sexual violence survivors in conflict-affected areas, the Committee calls for states to ensure that sexual and reproductive health care includes emergency contraception, post-exposure prophylaxis and other medication to treat and prevent sexually transmitted infections, safe abortion services, psychosocial care, and care for sexual-violence related injuries.⁵⁴⁵ Displaced and refugee women should also have access to such services.⁵⁴⁶

UN treaty bodies monitoring the ICCPR, ICESCR, CEDAW, CRC, and CAT have raised repeated concerns about the impact of restrictive abortion laws on women’s rights to life, health, and non-discrimination and have called for decriminalization of abortion, particularly in cases of pregnancy resulting from rape.⁵⁴⁷

⁵⁴² Ibid, para. 45.

⁵⁴³ CEDAW Committee, General Recommendation No. 30, para. 50.

⁵⁴⁴ Ibid.

⁵⁴⁵ Ibid., para. 52(c).

⁵⁴⁶ Ibid., para. 57(g).

⁵⁴⁷ See, for example, CESCR, General Comment No. 22 (2016), paras. 28, 34, 40; CEDAW Committee, Concluding observations on the fifth and sixth periodic reports of Burundi, U.N. Doc. CEDAW/C/BDI/CO/5-6, November 25, 2016, http://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?symbolno=CEDAW%2fC%2fBDI%2fCO%2f5-6&Lang=en (accessed August 17, 2017), para. 39(c); CEDAW Committee, Concluding observations on the combined seventh and eighth periodic reports of the United Republic of Tanzania, U.N. Doc. CEDAW/C/TZA/CO/7-8, March 9, 2016, http://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?symbolno=CEDAW%2fC%2fTZA%2fCO%2f7-8&Lang=en (accessed August 17, 2017), para. 35(c); CRC, Concluding observations on the combined third to fifth periodic reports for Kenya, U.N. Doc. CRC/C/KEN/CO/3-5, March 21, 2016, http://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?symbolno=CRC%2fC%2fKEN%2fCO%2f3-5&Lang=en (accessed April 25, 2017), para. 50; Human Rights Committee, Concluding observations on the sixth periodic report of Chile, U.N. Doc. CCPR/C/CHL/CO/6, August 13, 2014, http://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?symbolno=CCPR%2fC%2fCHL%2fCO%2f6&Lang=e

The CESCR's General Comment No. 22 notes that states' obligation to respect, protect, and fulfill the right to sexual and reproductive health prohibits restrictive abortion laws, including requirements that third parties grant access to abortion:

The obligation to respect also requires States to repeal, and refrain from enacting, laws and policies that create barriers in access to sexual and reproductive health services. This includes third-party authorization requirements, such as parental, spousal and judicial authorization requirements for access to sexual and reproductive health services and information, including for abortion and contraception.⁵⁴⁸

The CESCR further states that such restrictions are among a wide range of laws, policies and practices that “undermine autonomy and right to equality and non-discrimination in the full enjoyment of the right to sexual and reproductive health.”⁵⁴⁹ The CEDAW Committee, CRC, CAT, Committee on the Rights of Persons with Disabilities (CRPD), WHO, and UN Special Rapporteur on the right to health have also called on states to repeal third-party authorization requirements, noting that they are discriminatory to women and act as barriers to access for reproductive health services.⁵⁵⁰

n (accessed August 17, 2017), para. 15; Committee against Torture, Consideration of Reports Submitted by States Parties Under Article 19 of the Convention, Concluding Observations, Nicaragua, U.N. Doc. CAT/C/NIC/CO/1, June 10, 2009, http://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?symbolno=CAT/C/NIC/CO/1&Lang=En (accessed September 17, 2017), para. 16.

⁵⁴⁸ CESCR, General Comment No. 22 (2016), para. 41.

⁵⁴⁹ *Ibid.* para. 34.

⁵⁵⁰ See, e.g., CEDAW Committee, Concluding Observations: Indonesia, para. 17, U.N. Doc. CEDAW/C/IDN/CO/5 (2007); Cook Islands, para. 35, U.N. Doc. CEDAW/C/COK/CO/1 (2007); Burkina Faso, para. 38, U.N. Doc. CEDAW/C/BFA/CO/6 (2010); Human Rights Committee, Concluding Observations: Bolivia, para. 9(b), U.N. Doc. CCPR/C/BOL/CO/3 (2013); Committee on the Rights of Persons with Disabilities (CRPD Committee), General Comment No. 1: Article 12: Equal recognition before the law, (11th Sess., 2014), U.N. Doc. CRPD/C/GC/1 (2014); Committee on the Rights of the Child (CRC Committee), Gen. Comment No. 15, *supra* note 4; Committee Against Torture (CAT Committee), Concluding Observations: Bolivia, para. 23, U.N. Doc. CAT/C/BOL/CO/2 (2013); World Health Organization, “Safe abortion: Technical and policy guidance for health systems, Legal and policy considerations,” Department of Reproductive Health and Research, Geneva, 2015, http://apps.who.int/iris/bitstream/10665/173586/1/WHO_RHR_15.04_eng.pdf?ua=1 (accessed August 18, 2017), p. 4; United Nations General Assembly (UNGA), Interim Report of the Special Rapporteur on the right of everyone to the highest attainable standard of physical and mental health, U.N. Doc. A/66/254, August 3, 2011, http://www.un.org/ga/search/view_doc.asp?symbol=A/66/254 (accessed August 18, 2017), para. 24;

While the CESCR recognizes that some states may not have the capacity to immediately ensure full realization of all rights to sexual and reproductive health, states must demonstrate that they are taking necessary steps and using all means to quickly and effectively meet these obligations.⁵⁵¹ Any measures that discriminate against particular groups with regards to accessing sexual and reproductive health care—including restrictive abortion laws—are to be eliminated immediately.⁵⁵² Moreover, women in rural areas should have equal access to health facilities, including for reproductive health services.⁵⁵³

Human rights bodies have also called specifically for the removal of criminal penalties for women who have abortions. The CESCR has said that “legal barriers impeding access by individuals to sexual and reproductive health services, such as the criminalization of women undergoing abortions” violate women’s rights.⁵⁵⁴ In calling for decriminalization of abortion, the Special Rapporteur on the right to health has asked that States “consider, as an interim measure, the formulation of policies and protocols by responsible authorities imposing a moratorium on the application of criminal laws concerning abortion.”⁵⁵⁵

Regional Human Rights Law

Regional human rights law also includes protections from sexual violence. The African Charter on Human and Peoples’ Rights guarantees the rights to life, freedom from torture and other ill-treatment, freedom from discrimination, and health.⁵⁵⁶ The Protocol to the African Charter on Human and Peoples’ Rights on the Rights of Women in Africa (Maputo Protocol), which the Central African Republic has signed but not ratified, details states’ obligations to protect women from sexual violence, including by enacting and enforcing legislation, providing accessible services for survivors, and ensuring punishment of

⁵⁵¹ CESCR, General Comment No. 22, para. 33.

⁵⁵² *Ibid.*, para. 34.

⁵⁵³ CEDAW, Art. 14.2(b).

⁵⁵⁴ CESCR, General Recommendation No. 22 (2016), para. 57.

⁵⁵⁵ United Nations General Assembly (UNGA), Interim Report of the Special Rapporteur on the right of everyone to the highest attainable standard of physical and mental health, U.N. Doc. A/66/254, August 3, 2011, http://www.un.org/ga/search/view_doc.asp?symbol=A/66/254 (accessed August 18, 2017), para. 65(i).

⁵⁵⁶ African Charter on Human and Peoples’ Rights (Banjul Charter), Arts. 2, 4, 5, 16, <http://www.achpr.org/instruments/achpr/#a2> (accessed August 18, 2017). The Central African Republic ratified the Charter on April 26, 1986.

perpetrators.⁵⁵⁷ Moreover, during times of armed conflict, states must work to protect women from “all forms of violence, rape, and other sexual exploitation” and “ensure that such acts are considered war crimes, genocide and/or crimes against humanity and that their perpetrators are brought to justice under a competent criminal jurisdiction.”⁵⁵⁸

Furthermore, the Protocol on the Prevention and Suppression of Sexual Violence against Women and Children of the International Conference on the Great Lakes Region (ICGLR), to which the Central African Republic is bound as a member of the ICGLR, commits states to prevent and punish sexual violence whether in times of conflict or peace.⁵⁵⁹ Under the ICGLR Protocol, member states must ensure access to legal and medical services for sexual violence survivors, and facilitate access to justice by simplifying complaints procedures, using survivor-sensitive methods in the course of prosecutions, and training security sector and judicial personnel in response to sexual violence.⁵⁶⁰

The African Charter on the Rights and Welfare of the Child, which the Central African Republic has signed but not ratified, enshrines the rights to life, non-discrimination, and the highest attainable standard of mental and physical health.⁵⁶¹ The Charter calls on states to “take specific legislative, administrative, social and educational measures to protect the child from all forms of torture, inhuman or degrading treatment,” including

⁵⁵⁷ Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa, adopted by the 2nd Ordinary Session of the Assembly of the Union, Maputo, September 13, 2000, CAB/LEG/66.6, entered into force November 25, 2005 (Maputo Protocol), Art. 4.2.

⁵⁵⁸ Maputo Protocol, Art. 11.3.

⁵⁵⁹ International Conference of the Great Lakes Region (ICGLR), Protocol on the Prevention and Suppression of Sexual Violence against Women and Children, November 30, 2006, Arts. 2, 3, <http://www.peaceau.org/uploads/final-protocol.sexual-violence-en-rev-2.pdf> (accessed August 18, 2017). The Central African Republic is one of eleven ICGLR member states that unanimously signed the Dar-es-Salaam Declaration on Peace, Security, Democracy and Development in the Great Lakes Region in 2004. Member states agree to uphold the Pact on Security, Stability and Development in the Great Lakes Region, which includes 10 binding protocols, including the Protocol on the Prevention and Suppression of Sexual Violence. See Dar-es-Salaam Declaration on Peace, Security, Democracy and Development in the Great Lakes Region, International Conference on Peace, Security, Democracy and Development in the Great Lakes Region, First Summit of Heads of State and Government Dar-es-Salaam, 19-20 November 2004, https://www.icglr.org/images/Dar_Es_Salaam_Declaration_on_Peace_Security_Democracy_and_Development.pdf (accessed August 18, 2017); International Conference on the Great Lakes Region, “Background,” <https://www.icglr.org/index.php/en/background>, “The Pact,” <https://www.icglr.org/index.php/en/the-pact> (accessed August 18, 2017).

⁵⁶⁰ ICGLR, Protocol on the Prevention and Suppression of Violence against Women, Art. 6.

⁵⁶¹ Organization of African Unity (OAU), African Charter on the Rights and Welfare of the Child (ACRWC), OAU Doc. CAB/LEG.24.9/49 (1990), entered into force November 29, 1999, Arts. 3, 5, 14. Central African Republic signed the Charter on February 4, 2003, but has not ratified it.

sexual abuse.⁵⁶² Measures are also to be taken specifically to protect children affected by armed conflict.⁵⁶³

National Law

Under the constitution adopted in late 2015, the government of the Central African Republic must protect all citizens' rights to life, liberty, bodily integrity, and non-discrimination.⁵⁶⁴ In condemning torture and other cruel, inhumane, degrading, or humiliating treatment, the constitution explicitly states that no one shall be subjected to rape.⁵⁶⁵ Moreover, it states that protection of women and children from violence constitutes "an obligation for the state."⁵⁶⁶ All victims of violations of the Constitution are further guaranteed the right to reparations.⁵⁶⁷

The Central African penal code includes rape and indecent assault as criminal offenses, though it does not define "indecent assault."⁵⁶⁸ Penalties for rape range from fines and prison sentences of up to ten years to forced labor. The death penalty may be imposed if the victim has died, been tortured or seriously abused.⁵⁶⁹ Rape of a child incurs the maximum penalty, and sexual violence, attempted sexual violence, or molestation of a child under age 15 is considered rape under the law.⁵⁷⁰ Rape with aggravating circumstances—including against someone who is pregnant or has a mental or physical disability, or committed by multiple perpetrators or under armed threat—can be punished with forced work in perpetuity.⁵⁷¹

⁵⁶² Ibid., Art. 16.1

⁵⁶³ Ibid., Art. 22.

⁵⁶⁴ Constitution of the Central African Republic, 2015, Arts. 1, 3-5, <http://www.assembleenationale-rca.org/wp-content/uploads/2016/04/projet-constitution-RCA-adopte-par-CNT-2015.pdf> (accessed August 18, 2017).

⁵⁶⁵ Ibid., Art. 3.

⁵⁶⁶ Ibid., Art. 6.

⁵⁶⁷ Ibid., Art. 17.

⁵⁶⁸ Code pénal de la République Centrafricaine, 2010, Arts. 85-87. The UN *Handbook for Legislation on Violence against Women* recommends that, to ensure prosecution of sexual violence as a violation of bodily integrity rather than an assault on morality or integrity, states "replace existing offences of rape and 'indecent' assault with a broad offence of sexual assault graded based on harm." United Nations, Department of Economic and Social Affairs, Division for the Advancement of Women, *Handbook for Legislation on Violence against Women* (New York: United Nations Publications, 2010), <http://www.un.org/womenwatch/daw/vaw/handbook/Handbook%20for%20legislation%20on%20violence%20against%20women.pdf> (accessed August 18, 2017), section 3.4.3.1.

⁵⁶⁹ Code pénal de la République Centrafricaine, 2011, art. 87-92.

⁵⁷⁰ Ibid., art. 87.

⁵⁷¹ Ibid., art. 117.

The 2006 Law on Protection of Women from Violence imposes penalties for violence directed against women or girls “that causes or could cause to women a material loss or physical, sexual or psychological suffering.”⁵⁷² As with the criminal code, the law states that rape—as well as attempted rape—shall be punished with forced labor.⁵⁷³ In cases of deliberate hitting or beating, as well as cases of violence committed in public, sentences shall include fines and prison time.⁵⁷⁴ These may increase under aggravating circumstances, including if the victim is pregnant or if the violence causes illness or infirmity.⁵⁷⁵ The law requires all medical facilities, whether public or private, to provide emergency care for all victims of violence.⁵⁷⁶

In 1998, the Prosecutor General issued a memorandum calling for certain crimes to be treated as misdemeanors to minimize delays in processing cases. Among these crimes was rape or attempted rape.⁵⁷⁷ (See Section V. Access to Justice: Barriers to Justice for Sexual Violence.) Although the memorandum encourages “firm application of the law,” including maximum sentencing, authorities working in the judicial sector told Human Rights Watch that the memo resulted in prosecutors treating rape as a misdemeanor rather than a criminal offense, and thus subject to lesser penalties.⁵⁷⁸ In March 2016, the minister of justice issued a new memorandum instructing all judges and court officials to stop this practice for crimes of sexual violence, noting concern over high levels of sexual violence and the need to ensure accountability. “The frequency of these crimes and their commission during the conflict justifies that from now on the full extent of the law shall be applied in order to dissuade potential perpetrators,” he ordered.⁵⁷⁹ Judicial authorities told Human Rights Watch that this order would be implemented

⁵⁷² Loi No. 06.032 du 27 Décembre Portant Protection de la Femme Contre les Violences en République Centrafricaine, 2006, Art. 1

⁵⁷³ *Ibid.*, Art. 22-23.

⁵⁷⁴ *Ibid.*, Arts 24, 29.

⁵⁷⁵ *Ibid.*, Art. 29.

⁵⁷⁶ *Ibid.*, Art. 32.

⁵⁷⁷ Parquet Général, Cour d’Appel de la République Centrafricaine, Lettre Circulaire aux Procureurs de la République près les Tribunaux (1^{ère} et 2^e classe), Présidents des Tribunaux de Grande Instance de 3^e Classe, No. 416/CA/PGCA/98, May 19, 1998, on file with Human Rights Watch.

⁵⁷⁸ *Ibid.*; Human Rights Watch interviews with UN Women justice specialist, Bangui, April 22, 2016, and police official, Bangui, January 21, 2016.

⁵⁷⁹ Ministère de la Justice, Chargé de la Réforme Judiciaire et des Droits de l’Homme, Lettre Circulaire No. 055/MJRJDH/DIRCAB.16, March 8, 2016, on file with Human Rights Watch.

immediately, indicating that sexual violence cases would henceforth be adjudicated in criminal court sessions.⁵⁸⁰

⁵⁸⁰ Human Rights Watch interviews with former prosecutor, Boda, April 29, 2016, UN Women justice expert, Bangui, April 24, 2016, UMIRR official, August 12, 2017

Recommendations

To the Seleka and Anti-Balaka Leadership

- Immediately cease attacks on civilians and issue clear, public orders to your respective forces to stop all sexual violence—including harassment and intimidation—in areas under your control.
- Ensure unhindered access to areas under your control for agencies and nongovernmental organizations providing services to sexual violence survivors and for police, prosecutors, judges, and others from law enforcement and the judicial system.
- Cooperate with all investigations and prosecutions by domestic and international authorities of Seleka and anti-balaka members suspected of having committed human rights abuses.
- Investigate and impose sanctions in cases of sexual violence committed by fighters under your control, including transferring those fighters to national government and MINUSCA authorities for prosecution.

To the Office of the President of the Central African Republic

- In cooperation with UN agencies, the UN mission, and relevant government ministries, urgently support the development and implementation of a national strategy to combat and respond to sexual violence, including conflict-related sexual violence.
- Develop and implement, in collaboration with the United Nations, a strategy for civilian protection, including specific measures to protect women and girls and to mitigate risk of sexual violence.
- In conjunction with the UN mission, expedite the operationalization of the Special Criminal Court and offer the court full political backing to fulfill its mandate, while respecting its independence.
- Ensure women's full and equal participation in the development and negotiation of any peace accords, include gender experts to ensure such agreements fully respect the rights of women and girls, and actively oppose any amnesty in those accords for perpetrators of sexual violence.

To the Parliament

- Ratify the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (commonly known as the Maputo Protocol) and put in place legislation, or strengthen existing legislation, that protects women from sexual violence, provides accessible services for survivors, and ensures punishment of perpetrators.
- Amend the Criminal Code and Law No. 06.005 on Reproductive Health to remove third-party authorization for abortion, including in cases of rape or incest, eliminate punitive measures for women who undergo abortion, and decriminalize abortion.
- Adopt a legal aid law to provide legal assistance to victims of crime lacking resources for legal representation, including survivors of sexual violence.

To the Ministry of Justice

- Train police, gendarmes, prosecutors, and judges in how to respond to, investigate, and prosecute cases of sexual and gender-based violence. Provide ongoing support for the Mixed Unit for Rapid Intervention and Suppression of Sexual Violence against Women and Children (*Unité Mixte d'Intervention Rapide et de Répression des Violences Sexuelles Faites aux Femmes et aux Enfants*, UMIRR) to investigate sexual violence in accordance with international best practice standards. This includes recruiting and hiring female personnel, appointing and training focal points in all provinces, and working towards replication of the Mixed Unit at the provincial level.
- Introduce a vetting mechanism for high-ranking public officials and military leaders to ensure no perpetrator of sexual violence takes office.
- Investigate allegations of Seleka and anti-balaka forces reintegrating into the security forces, including the police, gendarmerie and national army. Immediately suspend any known Seleka or anti-balaka fighter from these forces pending a vetting process to ensure they did not participate in human rights abuses, including sexual and other forms of gender-based violence.
- Propose and support an amendment to the Criminal Code and Law No. 06.005 on Reproductive Health to remove third-party authorization for abortion, including in cases of rape or incest, eliminate punitive measures for women who undergo abortion, and decriminalize abortion. To facilitate access to safe and legal abortion

in the meantime, immediately clarify procedures for accessing legal abortion under existing law, including in cases of rape.

To the Ministry of Health

- Ensure availability and provision of free, essential emergency post-rape medical care at health posts, health centers, and district, regional, and national hospitals. Ensure that such care adheres to the national clinical management of rape protocol, including—with the survivor’s informed consent—emergency contraception, post-exposure prophylaxis for HIV prevention, prevention of and treatment for other sexually transmitted infections, and pregnancy testing and access to or referral for safe abortion.
- Train personnel—including nurses and midwives—at health posts, health centers, and district, regional, and national hospitals on provision of confidential, survivor-centered, comprehensive post-rape medical care. Training should include clarification of law and procedures for accessing abortion in cases of rape, and for informing survivors about abortion services.
- In collaboration with the United Nations and humanitarian organizations, implement referral systems amongst providers of medical, psychosocial, and legal services for sexual violence survivors. Train health personnel on how and why to refer survivors for additional medical, psychosocial, and legal services.
- Ensure access to psychosocial support for sexual violence survivors, as well as for children and others who have witnessed sexual violence or other trauma, at the level of district hospitals and above. At the community level, ensure access to psychosocial services via referral systems where on-site care is not available.
- Provide medical certificates/reports free of charge to all sexual violence survivors at the time of the initial post-rape medical consultation.
- In coordination with the Ministry of Social Affairs/Gender, conduct awareness-raising and behavior change activities to educate community members about how and why survivors can access services in a timely manner and to combat stigma and rejection of survivors.
- Consider screening female patients for sexual and gender-based violence at district-level health facilities and above, following establishment of prerequisites including availability of confidential spaces and training of staff on case response and referral mechanisms.

To the UN Mission in the Central African Republic (MINUSCA)

- Prioritize prevention, monitoring, and timely investigation and reporting of sexual violence in the conflict.
- Assist authorities to identify, arrest, and prosecute perpetrators of crimes of sexual violence committed by armed groups as per the mission's mandate.
- Bolster training and funding to police and other rule of law institutions, including prosecutors, judges, and those deployed to the Special Criminal Court and UMIRR, on investigation and prosecution of sexual and gender-based violence. Prioritize inclusion of female personnel in teams working on such cases.
- Ensure that the Protection of Civilians strategy includes measures to prevent and respond to sexual violence perpetrated by armed groups. Deploy civilian teams, including protection specialists, to areas where civilians are most at risk to build confidence with the local population and authorities.
- In conjunction with the national government, expedite the operationalization of the Special Criminal Court and offer the court robust support to effectively fulfill its mandate. Incorporate witness and victim protection into support for the court and other judicial institutions, especially for sensitive cases such as those involving sexual violence in which witnesses or victims face risk of stigma, threats, or death.
- Train peacekeepers and UN police in response to sexual and gender-based violence, including referral of sexual violence survivors to appropriate services.
- Work to improve relations and communication with local communities by increasing patrols with language assistance and community liaison officers and helping civilians safely bring complaints of abuses to the mission.
- In coordination with the GBV Sub-cluster, participate in data-gathering and information-sharing about sexual violence in accordance with best practice standards.
- In coordination with government agencies and local and international organizations, assist in distribution of food, water, shelter, and other essential resources to help mitigate risks of violence for women and girls.
- Ensure that MINUSCA field base commanders work to identify and mitigate protection risks for women and girls in coordination with local authorities, traditional leaders, and civil society and displaced person representatives, including women's groups and leaders.

To the United Nations Security Council

- Insist on full implementation of Resolution 1325 and subsequent resolutions on women, peace, and security in the Central African Republic, including an end to the perpetration of sexual violence by armed groups, an end to impunity for sexual violence in conflict, provision of comprehensive support services for all survivors, and full and equal participation of women in peace negotiations, transitional justice mechanisms, and disarmament, demobilization, and reintegration processes.
- Impose sanctions on individuals responsible for conflict-related sexual violence, in line with the criteria as amended in Security Council resolution 2339 of January 2017.
- Promote MINUSCA support of the Special Criminal Court and other government efforts to pursue justice, including for crimes of sexual violence, with the aim of prosecuting those responsible for abuses in conflict in line with international fair trial standards.
- Call for and track training of peacekeepers in MINUSCA and other UN missions in civilian protection, including training on sexual and gender-based violence prevention and response, before deployment.
- Urge MINUSCA human rights division to commit to regular reporting of human rights abuses, with particular attention to investigating and publicly releasing findings on sexual and gender-based violence.

To the African Union Commission

- Bolster support for the Special Criminal Court and the rebuilding of national justice mechanisms.
- Work with Central African authorities and others to support provision of medical, psychosocial, socio-economic, and legal services for survivors.

To the African Commission on Human and Peoples' Rights and the African Union Special Envoy on Women, Peace and Security

- Undertake an urgent joint investigative and promotional mission to the Central African Republic to investigate crimes of sexual violence by armed groups, raise awareness of these crimes, and promote protection of women's rights, and report publicly on findings.

- Publicly support provision of services for survivors and call for measures to eliminate stigma against survivors.
- Support the Special Criminal Court and the rebuilding of national justice mechanisms.
- Through the mandates of the country rapporteur for the Central African Republic and the Special Rapporteur on the Rights of Women in Africa, consistently and publicly condemn crimes of sexual violence by armed groups in CAR.
- Urge the Central African government to submit its long-overdue report on the general human rights situation in the country in accordance with Article 62 of the African Charter on Human and Peoples' Rights.
- Urge the Central African government to ratify the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa.

To MINUSCA Human Rights Division, the UN Office of the High Commissioner for Human Rights, the UN Population Fund (UNFPA), and UN Women

- Coordinate and implement referral systems to improve timely access to comprehensive health and psychosocial services for survivors throughout the country.
- With other UN, governmental agencies, and nongovernmental organizations, collect data and regularly report on sexual violence in the conflict. Establish consistent definitions and standards for data collection across agencies and share information in accordance with best practice standards.
- Share evidence and information on perpetrators of conflict related sexual violence with the UN Panel of Experts on the Central African Republic, which holds the mandate to make recommendations for sanctions designations.
- Commit to timely, public reporting on incidence and trends of conflict-related sexual violence across the Central African Republic, including identification of perpetrators when possible.
- Engage with sexual violence survivors, women's groups, local service providers, and community representatives to gather information about sexual violence in the conflict and to develop strategies for strengthening prevention, response, and service provision for survivors.

To Nongovernmental Organizations Providing Services to Survivors of Sexual Violence

- Prioritize provision of timely, free, and confidential post-rape medical, psychosocial, reintegration, and legal services for survivors of sexual violence in both urban and rural areas.
- In coordination with the GBV sub-cluster and UN and government agencies, implement referral systems to improve timely access to comprehensive health and psychosocial services for survivors. Ensure access to funds for associated costs, such as transport fees, so that these do not prohibit access to services.
- Offer psychosocial support for children and others who have witnessed sexual violence or are affected by sexual violence against a family member.

To the UN Special Representative of the Secretary-General on Sexual Violence in Conflict, and the UN Special Rapporteur on Violence Against Women

- Promptly visit the Central African Republic to engage with survivors, civil society, the UN, senior government officials, and representatives of armed groups, and to promote an end to and accountability for sexual violence by armed groups.
- Encourage UN agencies to ensure survivors of sexual violence access to free and timely medical, psychosocial, legal and economic support.
- Encourage MINUSCA to prioritize the prevention, monitoring, and timely investigation and reporting of sexual violence in the conflict, and to fully support the Special Criminal Court.

To the European Union, Governments of France, the Netherlands, the United States, and Other International Donors

- Increase support for essential medical, psychosocial, legal, and reintegration services for survivors of sexual violence, including access to emergency contraception and safe abortion, capacity-building of service providers, facilitation of school re-enrollment, and income-generating activities. Provide support to ensure that transport and other costs do not limit survivors' access to services.

- Provide additional financial and political support to the Special Criminal Court to ensure it can implement its mandate to deliver justice for grave crimes, including crimes of sexual violence, committed during the armed conflict.
- Expand support for efforts to re-establish the national judicial system and training of police, prosecutors, and judges in investigation and prosecution of sexual and gender-based violence.
- Incorporate training on human rights protection as an essential element of support for any future security sector reform programs and create vetting mechanisms to ensure that members of the Seleka, anti-balaka, or national army responsible for serious human rights abuses or war crimes are not reintegrated into the national army or permitted to take up other official government positions.
- Ensure that any future peace agreements exclude amnesty for alleged perpetrators of serious crimes and support fair, credible trials of these crimes in accordance with international standards.

To the Prosecutor of the International Criminal Court

- Continue to consider crimes of sexual violence as part of the investigation into crimes committed since August 2012 in the country.

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“They Said We Are Their Slaves”

Sexual Violence by Armed Groups in the Central African Republic

During nearly five years of conflict, armed groups in the Central African Republic have committed widespread sexual violence and used rape and sexual slavery as a tactic of war. Based on interviews with nearly 300 survivors, *“They Said We Are Their Slaves”* illustrates how two main parties to the conflict, the Seleka and anti-balaka, have used sexual violence to punish women and girls, particularly along sectarian lines.

The report also highlights the barriers that prohibit many survivors from accessing even basic medical and psychosocial care. In a country whose justice system has largely collapsed, survivors have little or no opportunity to seek redress. Most cases documented in this report are not only crimes under Central African law but constitute war crimes and may constitute crimes against humanity. Despite this, not a single member of an armed group is known to have been punished for rape or sexual assault.

The Central African government, the United Nations, and international donors should urgently strengthen protection measures to reduce the risk of sexual violence, and ensure that survivors get timely access to medical, psychosocial, and legal services. And they should support domestic and international justice mechanisms—especially the newly created Special Criminal Court—to investigate and prosecute cases of conflict-related sexual violence that have life-altering consequences for so many of the country’s women and girls.



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“Josephine,” 28, survived rape by armed fighters in the Central African Republic.