

Narrative Summary

I. Overview

Context

Côte d'Ivoire is currently advancing towards stabilization in the context of the incoming presidential elections in 2015. The UN system supports shifts towards policy and law reform processes aimed at promoting good governance and the rule of law, while also pursuing inclusive development for all Ivoirians in the spirit of the Millennium Development Goals (MDGs), peace-building and peace consolidation processes.

The overall security situation in Côte d'Ivoire has continued to improve during the reporting period, but remains challenging and unpredictable as sporadic armed attacks and violent crimes persist, in particular near the border with Liberia. While the high rate of violent crimes such as homicides, rape and armed robbery continued to be a challenge to security, a significant decrease of incidents involving undisciplined elements of the Forces Républicaines de Côte d'Ivoire (FRCI), ex-combatants and *dozos* (traditional hunters) and a slight decrease of intercommunity conflicts were noted. The Ivorian security forces were deployed throughout the country during the reporting period. However, limited capacity regarding weapons and adequate equipment for public order maintenance has seriously jeopardized their operational efficiency.⁸

The Ministry of Solidarity, Family, Women and Children (MSFFE) reported 310 incidents of sexual violence between January and October 2014 registered across the country.⁹ According to the UN system in Côte d'Ivoire¹⁰, the situation of sexual violence is still marked by individual and gang rapes, and by an increase in the proportion of adolescent survivors reporting abuse. Incidents have been reported in various locations, including schools and family spaces. According to ONUCI, rape is the second violent crime monitored (the first one is robbery)¹¹ and some of them are reported in areas where an observed increase in criminal activities has been observed. Access to multi-sectorial assistance by survivors, including justice, is gradually improving.

Prevention and Response to Conflict Related Sexual Violence

The government of Côte d'Ivoire adopted a National Strategy against GBV (NSGBV) in late July 2013, and started the implementation of a structure led by the MSFFE known as the "GBV National

⁸ Draft 55th report of the UN Secretary General on the situation in Cote d'Ivoire.

⁹ Those data have been presented during the 16th days campaign on gender based violence by the GBV National Coordination, and includes only incidents reported to and consolidated by 21 local GBV hubs (5 in Abidjan, San Pedro, Man, Danané, Zouan Houien, Biankouma, Duékoué, Bangolo, Guiglo, Bouafle, Daloa, Bouaké, Khorogo, Yamoussukro, M'Bahiakro, Sakassou, Beoumi) among the existing 45 hubs. Only data that obtained survivors' informed consent are collected, analysed and shared by GBV hubs. GBV hubs members use GBV Information Management System (GBVIMS) that was first introduced by IRC in 2010 and then rolled out at inter-agency level.

¹⁰ The Gender based Violence Working Group and its sub-group on the quarterly analysis of Conflict-Related Sexual Violence (CRSV)

¹¹ Joint Operations Center ONUCI



Coordination” (GBVNC)¹². The GBVNC is responsible of the coordination of the comprehensive prevention and response to CRSV and other forms of GBV in Côte d’Ivoire. All the mechanisms of the GBVNC are progressively being established.¹³

The budget for the implementation of the NSGBV was approved in August 2014, with an official launch organized by the MSFFE on 5 September 2014, during the UN Action mission to Côte d’Ivoire. Despite the formalization of the GBVNC, the MSFFE requested the government to finance 60% of the GBVNC in late November 2014. The Ministry of Budget and Finance is currently examining the request. As a consequence, the implementation of the GBVNS remains dependent on the support of various partners (including financial support).

At the UN level, the sub-group on CRSV¹⁴ created in late March 2014 by the Senior Policy Group of the Senior Management of the UN System in Côte d’Ivoire within the GBV UN Working Group (GBV WG) has been functional since April 2014. Its major result is the creation of a database for the Monitoring, Analysis and Reporting Arrangements (MARA) on CRSV and other measures, such as assessments, to support the implementation of the MARA.

Documenting Conflict Related Sexual Violence

From January to December 2014, the GBVNC reported 582 incidents of GBV cases registered across the country by GBV hubs. This total incident count is limited, and is due to the lack of systematic sharing of GBV data collected at the GBV hubs. This is also a direct consequence of the impact of the reduction of NGOs that were supporting the GBVIMS (including IRC and ASAPSU) on GBV hubs capacities at local level¹⁵. The GBVNC uses GBVIMS data alongside additional tools on case management to monitor access to justice and to gather other routine GBV data.¹⁶ Among the 6 types of GBV classified by the GBVIMS, 51% of reported cases in 2014 were incidents of sexual violence, 23% were physical assault, 14% were denial of resources, opportunities, or services, 6% were sexual assaults, 5 were psychosocial

¹² The GBVNC is composed by the following structures: (i) the National GBV Committee, that is the decision-making body at Ministry level and meets once a year to approve annual budget and the work plan (ii) the Central Supervisory Committee that is in charge of general coordination, it is composed by 5 ministries, UNFPA and an NGO. It supervises the GBV cell, the Regional GBV committees and the sectorial groups. Members of this structure meet on monthly base and convene quarterly meetings with relevant partners working on GBV response and prevention (iii) the GBV cell assists the CSC with the secretariat and ensures the operationalization of the strategy (iv) the sectorial groups; these are the technical groups in charge of ensuring the quality and coherence of the 5 axis of the strategy (prevention, justice, RSS/DDR, multi-sectorial assistance and data collection). They are chaired and co-chaired by the 5 ministries members of the central Supervisory Committee (v) the regional committee are in charge of the implementation of the GBV strategy at regional level (vi) the GBV hubs have the same role at local level

¹³ The National GBV Committee convened its first meeting in July 2013 under the presidency of the Ministry of Plan and Development, the CSC-GBVNC had started to convene meetings in January 2014, all the 5 sectorial groups meet at least once in 2014, only the regional committees have not been convened yet. At local level, the GBVNC has 43 (forty three) GBV hubs that are operational, but they have various levels of capacities.

¹⁴ This group is coordinated by UNFPA jointly with ONUCI Human Rights Section (ONUCCI-HRS) and is composed of officers of the agencies, funds and programs of the United Nations Country Team (UNCT) and ONUCI

¹⁵ See Strategy 3 of this project for the approach adopted to solve this problem

¹⁶ Those data are extracted from the draft report of the 28 Novembre 2014 and include only incidents reported to and consolidated by 21 local GBV hubs (5 in Abidjan, San Pedro, Man, Danané, Zouan Houien, Biankouma, Duékoué, Bangolo, Guiglo, Bouafle, Daloa, Bouaké, Khorogo, Yamoussoukro, M’Bahiakro, Sakassou, Beoumi) among the 43 for the reporting period of January-October 2014. The government has not released the annual report for 2014. Only data that obtained survivors’ informed consent are collected, analysed and shared by GBV hubs. GBV hubs members use GBV case-management tools introduced by the GBV component of a multi-sector support project “Cote d’Ivoire: Emerging form conflict” funded by the African Development Bank between 2007 and 2012 (<http://www.afdb.org/en/news-and-events/article/cote-divoire-emerging-from-conflict-gender-based-component-of-a-multi-sector-support-project-12145/>)

violence, and 1% were forced marriages.

The MARA database reported 300 incidents of sexual violence in 2014. The data analysis shows the following trends:

- **Type of Sexual Violence:** 70% of reported SV incidents are rape, 20% are gang rapes and the remaining 10% are attempted rapes or other kinds of sexual aggression. **Gang rapes** are frequently committed by groups of youth or by armed gangs during robberies.
- **Survivors:** 100% of reported incidents are female. 64% are girls under 18 years old. 31% of survivors are adolescent girls between 10 and 14. The number of girls under 18 that have reported as survivors of sexual violence has increased by 23% since 2012.
- **Alleged perpetrators:**¹⁷ 66% of alleged perpetrators are known to the survivors, including family (9%) and friends (8%). 34% of alleged perpetrators are not able to be identified by the survivors. Alleged perpetrators included 20 *elements of the Forces Républicaines de Côte d'Ivoire* (FRCI), and 9 ex-combatants.¹⁸
- **Service provision and access to justice:**¹⁹ 96% of rape survivors obtained psychosocial support and 96% of rape survivors received specialized medical care by specialized GBV service providers (56% within the 72 hrs).²⁰ 76% of survivors decided to file a report with the police (by focal points of GBV hubs) against the perpetrator(s); 44% of proceedings resulted in a sentence for the perpetrator (an increase from just 5% in 2012).
- **Geographical trends:** Trends during this reporting period are very similar to the last report. Abidjan reported the greatest number of sexual violence (with very similar figures), immediately followed by Bouaké. Daloa and the triangle of Duékoué/Man/Guiglo, which also reported nearly the same figures. More precisely, Abidjan reported 78 incidents, Bouaké 64, Duékoué/Man/Guiglo 46 and Daloa 42.

Conflict-Related Sexual Violence: Very few rape incidents might be considered related to the post-electoral crisis. There may be a correlation in known “hotspots” between sexual violence incidence and the circulation of small arms and light weapons, the high concentration of former combatants, and weak social cohesion and criminal episodes. 32% of the 34% incidents of rape (96 rapes in total) where the perpetrator was unknown happened during armed robberies or gang violence at night when survivors were on their way home. The occurrence of rape associated with criminal activities is thus the current major security challenge for national security entities engaged in GBV reduction.

¹⁷ Analysis of perpetrators by GBVIMS needs to be strengthened while keeping high protection measures of the data-sharing protocol to prevent reprisal against victims, witnesses and service providers. Considering the recent improvement in the fight against impunity for sexual violence, the GBV National Committee is keen to review this part of the data sharing protocol and add additional statistics on perpetrator profiles.

¹⁸ According to the analysis provided in the contribution of the UN system in Côte d'Ivoire to the annual report of the Secretary General on conflict-related sexual violence, submitted in late December 2013.

¹⁹ Service provision of all sector (medical, psychosocial and legal) is ensured by state structures, sometimes supported by national and international NGOs, only two NGOs among NGOs in GBV hubs (one for legal service, and one that has 5 excellency centre providing the whole package of services) provide direct service.

²⁰ Services are provided by service providers in referral pathways of GBV hubs, principally by governmental structures. There are few direct service provided by national and international NGOs (5 ASAPSU clinics, IRC are present in 6 GBV hubs, ODAFEM in 3, OIS-Afrique in 4 GBV hubs).

II. Summary of Achievements of phase 2 (since the last report submitted in January 2014)

1. Strategy 1: Integrated protection measures to prevent GBV&CRSV in collaboration with ONUCI and humanitarian partners.

a) Prevention and response to CRSV: the National Strategy against GBV and the UN efforts against SV

The UN Action-funded GBV Technical Specialist (GBV TS) provided support to the UNFPA Resident Representative and the Resident Coordinator in advocating with the Ivorian Government to mobilize the partners to implement the NSGBV. The MSFFE decided to organize an official launch, initially scheduled for July 2014. It finally took place on 5 September 2014, during the UN Action mission in Côte d'Ivoire. The GBV Technical Specialist organized the launch, supported by the UNFPA Country Office and members of the UN Action mission, jointly with the GBVNC leadership.

In the lead-up to the launch of the GBVNC, UN Action proposed to increase the visibility of the GBVNS in the media by facilitating a workshop aimed at creating an association of journalists. This activity also responded to a key recommendation of the *5-Year Review of UN Action*, namely that work on *Comprehensive/National Strategies* include built-in advocacy and communication components in order to increase visibility and understanding of the issue. As a consequence, the GBV TS coordinated an initiative, in collaboration with the UN Communication Group (UNCG) (and specifically with UNFPA, UNOCI-Public Information and UNESCO), to create a network of journalists engaged in the fight against GBV, represented by national and local branches of media.

To that end, UNCG **organized a workshop in Abidjan for media representatives working at national level** during the UN Action mission. This was facilitated by UN Action, the Ministry of Solidarity, Family and Children and UNFPA, in order to bring greater public attention to the issue of GBV, including sexual violence. The critical role of the local media as a “watchdog” for implementation of the Strategy and accountability of commitments was discussed, as well as the myths that fuel sexual violence and the discrimination and stigmatization that often haunts survivors. This capacity-building exercise aimed to improve the quality and quantity of media messages around GBV, including sexual violence as a security threat, to raise the public profile of the Strategy and to cultivate local champions willing to add their voice to the *Get Cross – Stop Rape Now campaign*. This workshop took place in the context of Pillar 1 of the GBVNS, which is focused on **prevention through behavioural change**. UN Action advocacy and knowledge products were distributed at the workshop and 26 journalists from national media (radio, television, print and social media) signed up to the informal **Network of Journalists against GBV**, which was launched on this occasion. A second workshop targeting media on the field took place during the United Nations Days in October 2014. 30 additional journalists working with community radio joined the informal network.

Both ONUCI and the UNCT (UNICEF, UNHCR, UNAIDS, UNPOL, ONUCI-HRS, ONUCI-CP, ONUCI-RoL, and UN Women) delivered direct support to the implementation of the NSGBV and the activities of the GBVNC at different levels, according to their mandates, capacities and comparative advantages. The GBV WG ensured the coherence of the UN efforts.

b) Joint efforts to address needs and challenges in implementing UN SCR 1820, 1888, 1960 and 2106

During the reporting period, the GBV TS supported the UN System in Côte d'Ivoire to implement relevant SCRs on CRSV until the recruitment of a Women Protection Advisor (WPA) located at ONUCI-Human Rights Division was achieved. The WPA was in place in late August 2014. As such, September was a period of handover; all the activities on CRSV were conducted jointly.

Since the last report, the GBV TS ensured the coordination of actions of relevant UN and non-UN entities to comprehensively address SV:

- Advised on the response to CRSV by the UN System providing analysis on SV trends, hotspots, prevention measures and on actions for the implementation of ONUCI's Human Rights Due Diligence Policy (HRDDP) and the Protection of Civilians for SV to the POC taskforce and its HRDDP sub-committee and other existing UN coordination mechanisms. This included a joint mission with the O-DSRG/H to support the implementation of the POC Strategy by POC Working Groups in Korhogo, Bouaké and Yamoussoukro and the support to the Human Rights Thematic Group on advocacy, access to justice for victims of physical violence, and reinforcing the ongoing UN Advocacy initiative on the free delivery of medical certificate for sexual assaults survivors.²¹
- Organized an advocacy initiative at country level, in support of the OSRSG-SVC, on the commitments required by UNSC to parties to the conflicts listed on the annex to the Secretary General Report on CRSV as credibly suspected to have committed acts of sexual violence. As a consequence, the UN senior management (DSRG/H and UNFPA) addressed an official request to the FRCI and the Ministry of Defense to take specific measures on CRSV according to UNSC 2106. This resulted in the participation of the staff in the office of the Chief of Defense to the London Summit to end Sexual Violence in Conflict in June 2014, the production of a declaration of commitment and the creation of a Committee of National Experts on CRSV.
- Ensured the overall coordination of the GBV Working Group in co-leadership with ONUCI-HRS.
- Contributed to the conference on security governance and justice organized by the International Federation of Senior Police Officers in Paris during a joint UNFPA-UNDP mission in Paris, where UNFPA had a delegation composed of the Resident Representative, the GBV TS and a Senior Police Officer who become a member of the Committee of National Experts on CRSV

c) Implementing the Early Warning Indicators to Prevent Sexual Violence

In Côte d'Ivoire, the early warning indicators enabled the prevention of SV and FGM/C. Indicators on CRSV were customized to the Ivorian context in 2011, alongside indicators for the detection of FGM/C

²¹ UNFPA GBV Technical Specialist contributes to the work of all UNDAF output sub-groups, she's a member of UNDAF Gender Thematic Group, and of the UN Joint team on HIV/AIDS, of the ONUCI Protection of Civilian Task Force, of the ONUCI Human Rights Due Diligence Policy Sub-Committee, of the MRM task force and she ensures the technical coordination of the GBV WG with ONUCI-HRS co-lead, and is the co-lead role with OHCHR of the UNDAF Human Rights Thematic Group. UNFPA GBV Technical Specialist has been a member of the ONUCI-UNCT Task Force on comparative advantages required by UN SCR 2112 in 2013, and a member of the Drafting Committee for the establishment of the ONUCI-UNCT SSR Task Force and of the Task Force of UNCT programme committee on Peace Building Found for the elaboration of a joint UN project on gender and peacebuilding.



ceremonies. These indicators were used at the GBV hub levels to support the identification of “hotspot” areas for SV risk and to plan appropriate measures to prevent SV. They were also used internally by ONUCI. The indicators were updated in March 2013 and the new version has been widely used within the GBV hubs, by GBVNC members and throughout the duration of this project.

Between April and September 2014, the GBV alert system:

- No FGM/cutting ceremonies were detected between April and October 2014. Having reasonable doubts that the practices have not been abandoned in areas of coverage of GBV interventions, GBV hub reports that the increase in condemnations has led to a change in the organization of these ceremonies that makes them more difficult to detect. Another theory is that ceremonies have been postponed until 2015, as these ceremonies are traditionally more frequent in electoral years.
- Service providers detected two spikes in sexual violence in Divo in April 2014 (25 incidents) and in Buyo/Soubre in August 2014 (12 incidents), which were reported to UNFPA and ONUCI. UNFPA coordinated an assessment in Divo, supported by ONUCI-HRD at local level.

b) Training on GBV and CRSV to Security Forces

During the first quarter of 2014, the GBV TS supported the UN Senior Management to advocate on UN SCR 1820, 1888, 1960 and 2106 as mentioned above.

In March 2014, service providers detected a hotspot of sexual violence in San Pedro. As consequence, ONUCI and UNFPA advocated to the FRCI commanders and other national security entities to ensure reinforced measures for CRSV prevention and prosecution. The GBV TS and the recently-created Committee of National Experts on Conflict Related Sexual Violence organized a CRSV workshop in San Pedro in September 2014. The WPA accompanied the team. Following the workshop, the local military hierarchy and authorities are much more engaged; they now participate regularly in GBV hubs and are more proactive and competent in reacting to GBV issues.

2. Strategy 2: Service delivery to survivors of rape & other forms of sexual violence

The GBV TS has continued to provide support to the Ministry of Health to lead the sectorial group within the GBV National Committee. The main focus of the GBV TS has been on the Advocacy Strategy of the UN GBV WG to provide free medical certificates for SV survivors (rape and FGM/C). As a result, 17 medical doctors operating in the sanitary districts of Bouaké (5), Divo (4), Daloa (4) and Bondoukou (4) committed to deliver medical certificates free of charge reaching, for a total of 22 in 2014.

Finally, the GBV TS worked on capacity building and knowledge transfer on emergency response to GBV within UNFPA’s West and Central Africa country offices, focusing on service delivery and data analysis. During the reporting period, the GBV TS supported in particular UNFPA Burundi/CO, sharing program materials on health response to SV as well as lessons learnt and advice to better inform and support UNFPA programming.



3. Strategy 3: Management of GBV data in the context of MARA

The major achievement of the reporting period is the creation of a database for MARA among UN entities implementing programs on GBV (UNFPA, UNICEF, ONUCI-HRS, ONUCI-UNPOL and UN-Women). The organization of a joint assessment in Divo was another important step in data gathering sharing and analysis among UN entities. Lastly, the period was characterized by the finalization of the transfer of the GBVIMS from UNFPA to the national counterpart and its “transformation” in a larger national information management system.

Since the end of 2013, there has been regular and immediate sharing of information on individual cases of SV among the members of the CRSV Sub-Working group. This information sharing is aimed at ensuring appropriate follow up and a comprehensive response in line with survivors’ needs and decisions. It is gradually identifying ways to increase data sharing while respecting ethical standards. The creation of a unique database supported the testing of information sharing protocols. Unfortunately, as of end of December, none of the participating UN entities save for UNFPA had completed the database due to low capacities. There is an agreement among CRSV Sub-Working Group members to test the database for the compilation of the annual report on CRSV. This will allow the finalization of the system in 2015, under the leadership of the Senior WPA.

In practice, at the level of GBV hubs, the interactions between MARA and GBVIMS are taking place according to referral pathways and/or rules established in the GBV Standard Operating Procedures (SOPs) that abide with high standards of ethics and security. Although these are customary rules, they do not yet have a uniform application. Also, there is a gap in establishing procedures to address incidents in the areas without referral pathways among GBV hub members, or in absence of GBV SOPs.

In reference to the nationalization of a GBV information management system (separate from the GBVIMS), the reporting period has been marked by the adaptation of GBVIMS tools and other GBV-related information tools. This new database will also cover child protection needs and inform the whole GBVNS. In 2014, the government started receiving and analysing the data collected at GBV hubs by state structures. This new methodology, plus the reduction of operation of several NGOs and the limited capacities of GBV hubs resulted in a lack of performance of data collection of the whole GBVNC. The government requested support from UNFPA’s Democratic Republic of Congo Country Office because of their experience in GBV data collection.

III. Provisional Financial Report

Between April and September 2014, **\$US 88,038.52** supported the salary, post-adjustment and benefits (pension, health and insurance) of the GBV Technical Specialist at P4 level and **\$US 272.11** supported the security fees for the GBV Technical Specialist’s house. **\$US 5,502.06** was used to produce advocacy and communication materials. **\$US 712.96** was spent on travel, commodities, equipment and transport to uphold program activities. Finally, indirect costs amount to **\$US 3,599.60**. A detailed financial report will be provided to the MPTF in line with the grant arrangement.

UNFPA HQ further supported this project with **\$US 45,425** in supplementary funds.

Phase 3: Budget phase 3 (1 April – 30 September 2014)
Provisional Financial Overview

Category	Funds allocated for Phase 1 (April 2012 - December 2013) and Phase 2 (January 2014 - March 2014)	Cost extension for Phase 3 (April - September 2014)			
		UNFPA contribution	TOTAL requested	TOTAL COST (phase 3)	Disbursement (as of September 2014)
1. Supplies, commodities, equipment and transport	22,000.00	-	3,789.00	25,789.00	1,603.23
2. Personnel – Salary and Benefits (Fix term appointment at P4 level)	220,473.00	42,454.00	42,454.00	305,381.00	279,893.70
3. Advocacy and communication – including costs of translating and producing materials and holding workshops	20,000.00	-	5,000.00	25,000.00	22,541.57
TOTAL	262,473.00	42,454.00	51,243.00	356,170.00	304,038.50
Indirect Support Costs (7%)	18,373.00	2,971.78	3,587.01	24,931.79	18,265.50
TOTAL	280,846.00	45,425.78	54,830.01	381,101.79	322,304.00