PHR Physicians for
Human Rights

Toolkit Overview

Introduction

Violence against and affecting children and adolescents in conflict settings is a global issue of serious international concern that must be urgently addressed. According to the UN Secretary-General's 2024 report on children and armed conflict, almost 30,705 grave violations were committed against children in armed conflict globally from January to December 2023.[1] The June 2024 report indicated that sexual violence against children in conflict affected areas increased by at least 25 percent compared to the previous year, despite cases of sexual violence being vastly underreported due to "stigmatization, the fear of reprisals, harmful social norms, the absence of, or lack of access to, services, impunity and safety concerns," indicating that the true number of children affected by conflict-related sexual violence is likely much larger.[2]

Many survivors of sexual and gender-based violence in conflict do not seek help of any kind.[3] Those who do often face profound barriers and risks when pursuing accountability including retraumatization from repeatedly recounting their experiences related to these crimes and being obligated to face perpetrators in court, as well as stigmatization and retaliation by family or community for coming forward.[4] Moreover, cases regularly fail due to a lack of evidence. Forensic medical evidence is rarely collected, and both health professionals and law enforcement often miss opportunities to collect complete testimonies and other evidence that can strengthen cases. Vulnerable or marginalized populations, including women and children, can be uniquely impacted by these violations while also facing heightened barriers to seeking accountability for these crimes and facing distinct challenges along the access to justice pathway.[5] Furthermore, there can be a lack of awareness that certain acts, such as forced witnessing, constitute sexual and gender-based violence.

Child and adolescent survivors of conflict-related sexual violence face many unique barriers. For example, child and adolescent survivors, or their parents, guardians or caregivers, may be reluctant or unable to seek care or pursue justice for fear of stigma or retaliation and lack of access to resources.[6] Once a survivor has reported their experience, health professionals may not thoroughly interview child survivors due to a lack of training on managing pediatric cases in ways that are developmentally appropriate, trauma-informed, and respect survivors' rights. Law enforcement professionals may also be reluctant to pursue evidence collection for similar reasons. Even when evidence is collected, other biases – such as the misperception that children often lie – can impact how evidence is received in judicial proceedings. Furthermore, the setting of investigative interviews and judicial proceedings can have a strong impact on child survivors' comfort with sharing their experience. These intersecting barriers and challenges contribute to ongoing hesitance to engage with and pursue cases with child survivors.

These persistent challenges are some of the many that have resulted in an accountability gap for crimes of conflict-related sexual violence committed against children and adolescents. In recent years, much work has been done to identify the challenges that hinder such accountability and to conceptualize trauma-informed, child-centered principles and practices that can provide a pathway to breaking this silence and enhancing pathways for justice and accountability for child survivors.

Importantly, several jurisdictions have adopted successful practices drawing on good practices from both the medical and legal sectors. These examples offer models for how to navigate these challenges and implement evidence-informed principles for engaging with children that further the goals of survivor-centered, trauma-

informed care and accountability.[7] Furthermore, there are international standards and protocols for engaging with child and adolescent survivors that have been recently developed or updated with specific attention to the needs of child survivors and centered in trauma-informed practice.[8] For example, the updated version of the Istanbul Protocol[9] and the Global Code of Conduct for Gathering and Using Information about Systematic and Conflict-Related Sexual Violence (the Murad Code)[10] include specific guidance on how to engage with child and adolescent survivors of sexual violence. Additionally, the International Criminal Court (ICC), Office of the Prosecutor's (OTP) revised policy on children[11] and policy on sexual and gender-based crimes[12], from 2023 featured increased focus on survivor-centered, trauma-informed and evidence-based approaches to interviewing and supporting child and adolescent survivors of sexual violence.

Role of this Toolkit

Against this backdrop, Physicians for Human Rights (PHR) has created this toolkit to bring together in one place a range of existing, evidence-based tools and examples of good practices to support the creation of context-specific, trauma-informed documentation and access to justice pathways for child and adolescent survivors of conflict-related sexual violence. This toolkit is unique as it provides practical tools and resources from a variety of different contexts that can be used at multiple points along the access to justice pathway. This toolkit draws on over a decade of PHR's experience in various conflict, post-conflict, and resource-limited environments and represents good practices drawn from the medical, public health, child development, pediatric, psychological, forensic, legal, judicial, investigative and human rights documentation sectors; and it reflects ideas drawn from hours of dialogue with over 50 global, multisectoral experts aimed at articulate what trauma-informed investigations and accountability processes can look like for child survivors and what practical tools would be needed to get there.

Many of the tools and resources in this toolkit have been developed and piloted by PHR and partners in a variety of implementation contexts. The purpose of sharing these tools within this toolkit is also to encourage others to engage with these evidence-based good practices and to think about how to continue to apply these approaches for new contexts. By continuing to identify how to refine these approaches to be effective in new, resource limited, conflict, and post-conflict settings, and generate solutions to persistent challenges and obstacles in applying these solutions we will arrive at innovative approaches that are evidence-informed and scalable to even further contexts.

Key Concepts that Inform this Toolkit

Rights based approach
A rights-based approach centers human rights principles in processes and practices.[13] It ensures that the dignity and rights of individuals, particularly those who are vulnerable or marginalized, are respected and upheld.[14] In the context of trauma-informed documentation and accountability processes for child survivors, this means embedding the rights of the child – such as the right to protection, participation, and justice – into every aspect of the process.[15] This approach empowers survivors, safeguards their well-being, and ensures their voices are central, while also holding perpetrators accountable and addressing systemic issues that contribute to human rights violations.[16]

Trauma-informed
A trauma-informed approach recognizes the impact of trauma on individuals, and responds by emphasizing safety, empowerment, and sensitivity throughout all interactions and processes.[17] It involves understanding the widespread effects of trauma and integrating this awareness into practices to avoid retraumatization and to support healing.[18] For child survivors, a trauma-informed approach ensures that survivors' emotional and psychological well-being is prioritized as well as ensuring that the needs and experiences of survivors are met with compassion and respect. It involves creating a safe environment, building trust, and providing appropriate support while conducting investigations and seeking justice, recognizing that trauma can significantly affect how individuals experience and engage with these processes and that presentations of trauma can vary by individual and change over time.[19]

Survivor-centered

Survivor-centered refers to an approach that prioritizes the needs, perspectives, and rights of survivors throughout all stages of an investigation and accountability process.[20] It ensures that survivors are at the heart of decision-making and that their experiences, preferences, and well-being guide the process.[21] A survivor-centered approach means creating an environment where children feel safe, heard, and supported, while also ensuring that their involvement is voluntary. This approach empowers survivors, respects their autonomy, and seeks to address their specific needs and concerns, aiming to provide justice and healing in a manner that is sensitive to their unique experiences and vulnerabilities.[22]

Intersectionality

Intersectionality is a framework that explores how multiple identities – such as race, gender, age, disability, socioeconomic status, and others – meet and interact to shape individuals' experiences of oppression and privilege.[23] It recognizes that people are affected by a combination of these identities and that their experiences cannot be understood fully by examining each identity in isolation. In the context of trauma-informed documentation and accountability processes for child survivors, an intersectional approach ensures that the unique and overlapping impacts of various identities on children's experiences are acknowledged and addressed. This perspective helps to tailor support and justice mechanisms in a way that considers the full complexity of each survivor's situation, promoting more equitable and effective outcomes through approaches that are tailored to individual contexts and vulnerabilities.[24]

Developmentally appropriate and evolving capacity

Approaches and practices that are developmentally appropriate and respect evolving capacity are those that are tailored to the cognitive, emotional, and psychological stages of a child's development, while also recognizing that children's abilities and understanding change as they grow and therefore the ways that children are engaged must also necessarily evolve.[25] In the context of trauma-informed documentation and accountability processes this means adapting methods and interactions to match the child's developmental level and capacity for understanding and participating in the process. It involves providing support and information in ways that are age and developmentally appropriate, ensuring that their involvement respects their ability and is based on consent/assent, and fosters their well-being throughout the investigation and justice processes.[26]

Focus and Limitations of this Toolkit

This toolkit and the resources within it were designed to address the specific needs of child survivors of conflict-related sexual violence, because children face particular vulnerabilities to sexual violence given their age, size, dependency on adults, additional vulnerabilities such as displacement that may arise in conflict, and their limited participation and exclusion in decision-making processes.[27] While vulnerability to sexual violence exists due to the external power dynamics of dependence and protection experienced by children, there are other internal, intersectional factors contributing to vulnerability, including age and development. The intersectionality of specific age ranges, cognitive, developmental, and pubertal stages affect not only vulnerability to sexual violence, but also a child's reaction to – and understanding of – abuse, which can impact reporting.

These factors influenced PHR's focus on developing specific tools to enhance the effectiveness of documentation and access to justice approaches for this population, but these tools can also be applied to children who have experienced other human rights violations. While these approaches have primarily been tested with child survivors of sexual violence and within PHR's areas of work and with PHR's partner organizations, we believe this toolkit's trauma-informed principles, suggestions, and guidance can be adapted for use in different contexts and applications.

Citations

1   Special Representative of the Secretary General on Children and Armed Conflict, "Children and Armed Conflict: Report of the Secretary-General."

2   Ibid.

3   Palermo and Peterman, "Undercounting, Overcounting and the Longevity of Flawed Estimates"; Traunmüller, Kijewski, and Freitag, "The Silent Victims of Sexual Violence during War."

4   Kelly et al., "Experiences of Female Survivors of Sexual Violence in Eastern Democratic Republic of the Congo"; Albutt et al., "Stigmatisation and Rejection of Survivors of Sexual Violence in Eastern Democratic Republic of the Congo"; Schippert, Grov, and Bjørnnes, "Uncovering Re-Traumatization Experiences of Torture Survivors in Somatic Health Care"; Lorenz, Kirkner, and Ullman, "A Qualitative Study Of Sexual Assault Survivors' Post-Assault Legal System Experiences."

5   Kadir, Shenoda, and Goldhagen, "Effects of Armed Conflict on Child Health and Development."

6   Nelson et al., "Impact of Sexual Violence on Children in the Eastern Democratic Republic of Congo."

7   Perissi and Naimer, "Achieving Justice for Child Survivors of Conflict-Related Sexual Violence in the Democratic Republic of the Congo"; Sane et al., "Advancing Justice for Children"; Reicherter et al., "Implementation of Trauma-Informed Best Practices for International Criminal Investigations Conducted by the United Nations Investigative Team to Promote Accountability for Crimes Committed by Da'esh/ISIL (UNITAD)."

8   Komar et al., "A Comparison of the International Protocols for the Forensic Assessment of Conflict-Related Sexual Violence Victims"; The Office of the Prosecutor, "Policy on Children"; OHCHR, "Istanbul Protocol"; Murad Code, "Global Code of Conduct for Gathering and Using Information about Systematic and Conflict-Related Sexual Violence."

9   OHCHR, "Istanbul Protocol."

10 Murad Code, "Global Code of Conduct for Gathering and Using Information about Systematic and Conflict-Related Sexual Violence."

11 The Office of the Prosecutor, "Policy on Children."

12 The Office of the Prosecutor, "Policy on Gender-Based Crimes."

13 United Nations Sustainable Development Group, "Universal Values: Human Rights-Based Approach."

14 UNFPA, "The Human Rights-Based Approach."

15 Goldhagen et al., "Thirtieth Anniversary of the UN Convention on the Rights of the Child."

16 United Nations, "Policy on Integrating a Human Rights-Based Approach to United Nations Efforts to Prevent and Respond to Sexual Exploitation and Abuse"; Goldhagen et al., "Thirtieth Anniversary of the UN Convention on the Rights of the Child."

17 "SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach."

18 Treatment (US), "Trauma-Informed Care."

19 Government of the United Kingdom: Office for Health Improvement and Disparities, "Guidance: Working Definition of Trauma-Informed Practice."

20 United Nations, "Victims Rights First: Victim Centered Approach."

21 Inter-Agency Standing Committee, "Inter-Agency Standing Committee Definition & Principles of a Victim/Survivor Centered Approach."

22 UNICEF, "Caring for Survivors: A Principled Approach."

23 Crenshaw, "Demarginalizing the Intersection of Race and Sex: A Black Feminist Critique of Antidiscrimination Doctrine, Feminist Theory and Antiracist Politics."

24 "Intersectionality."

25 Committee on the Rights of the Child, "Statement of the Committee on the Rights of the Child on Article 5 of the Convention on the Rights of the Child."

26 IPPF, "Keys to Youth-Friendly Services: Understanding Evolving Capacity."

27 Mazurana and Carlson, "The Girl Child and Armed Conflict: Recognizing and Addressing Grave Violations of Girls' Human Rights"; Office of the Special Representative of the Secretary-General for Children and Armed Conflict, "Keynote Statement at the Global Summit on Sexual Violence, London."

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