

Service born from sacrifice: Rwanda's commitment to UN peacekeeping

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Beginning with a modest contribution in May 2005 with the deployment of one military observer to the UN Mission in Sudan ([UNMIS](#)), Rwanda is currently the fourth largest contributor to UN peacekeeping operations.

After suffering its own genocide, Rwanda now contributes many personnel to missions that have protection-of-civilian mandates. There are nearly 6,550 Rwandan uniformed personnel currently serving with the UN, the majority of them in hot spots such as South Sudan, the Darfur region of Sudan and the Central African Republic (CAR).

"Peacekeeping is a noble, necessary but dangerous mission. The sacrifice and risk peacekeepers endure is always at the forefront of my thoughts," [Secretary-General António Guterres said](#) last month during the commemoration at UN Headquarters of the [International Day of Reflection on the 1994 Genocide against the Tutsi in Rwanda](#).

"It is particularly commendable that a nation that has endured the worst atrocities should risk its soldiers to ensure those atrocities cannot happen elsewhere," he added.

The UN chief's remarks were particularly poignant coming as they did just days after the killing of a Rwandan peacekeeper and the wounding of eight others during an exchange of fire with armed elements in Bangui, the capital of the Central African Republic (CAR). Overall, 53 Rwandans have lost their lives while serving with UN peacekeeping operations.

Adama Dieng, the [UN Special Adviser on the Prevention of Genocide](#), noted that it is because the tragedy experienced on its soil that Rwanda moved quickly to send troops to places such as CAR and Darfur, where civilians were under threat.

"I can say that Rwanda knows exactly what genocide means," Mr. Dieng told *UN News* in a recent interview. "That is why when I sounded the alarm in Central African Republic, in November 2013, Rwanda moved and sent troops to protect the population there."

For Inspector of Police Maurice Nyierema, a Rwandan peacekeeper serving with the [UN Mission in South Sudan \(UNMISS\)](#), the genocide in his own country has played an important part in his decision to serve as a peacekeeper.

“What happened in Rwanda makes my conviction stronger that we cannot allow something like that to happen ever again, in any place of the world,” he said.

Mr. Myierema was among the 183 Rwandan police officers, including 30 women, who received the UN service medal in South Sudan in February of this year. The officers, based in the capital, Juba, carry out tasks such as city patrols and public order management in the UN Mission’s protection sites for civilians seeking shelter from violence.

A huge amount is at stake. Since conflict broke out in 2013, thousands of civilians in South Sudan have been killed in targeted attacks, women raped, homes and means of livelihoods destroyed. More than 1.5 million South Sudanese are living as refugees in neighbouring countries and more than 300,000 internally displaced persons (IDPs) are living under the protection of the UN Mission in Protection of Civilians (POC) sites across the country.

“People should learn to live together and to love each other, love their country and avoid divisions among themselves,” said Lt. Col. Kabera Simon, a Rwandan peacekeeper who served with UNMISS last year. “They should ignore what makes them different from each other and look at what brings them together and build their homes and nation.”

“This is my message: after war, after conflict, after misunderstanding, there is hope for the future if people are willing.”

[Nigeria: ‘Largest-ever’ outbreak of Lassa fever contained but monitoring still needed, says UN health agency](#)

With the largest-ever outbreak of the deadly Lassa fever in Nigeria having been contained, continued vigilance is vital to deal with any flare-ups, the United Nations health agency warned on Friday.

The [outbreak](#), which started in Ogun province in south-west Nigeria in December 2016, spread across much of the country and into neighbouring Benin, Togo and Burkina Faso.

In all, 423 cases had been confirmed in Nigeria and 106 people, including eight health workers, lost their lives. Over the past six weeks, however, the

number of new cases have dropped and it is no longer considered to be a national health emergency, according to the [World Health Organization](#) (WHO).

“Nigeria is to be congratulated for reaching this important milestone in the fight against Lassa fever,” Ibrahima Socé Fall, Regional Emergencies Director for Africa at the UN agency, said in a [news release](#).

“[But we cannot let our foot off the pedal](#). We must use the lessons learnt to better prepare at-risk countries in our region to conduct rapid detection and response.”

WHO continues to support Nigerian government efforts to respond effectively to the disease and has urged local communities to remain vigilant and report “any rumours” of new cases to the authorities.

“Early diagnosis and treatment can save lives,” said Wondimagegnehu Alemu, the head of WHO programmes in Nigeria.

The UN health agency has also called on health workers to stay on high alert for Lassa fever when handling patients, irrespective of their health status.

“[Lassa fever](#) should always be considered in patients with fever, headache, sore throat and general body weakness, especially when malaria has been ruled out with a rapid diagnostic test (RDT), and when patients are not improving,” advised WHO.

Health workers should adhere to standard precautions, and wear protective equipment like gloves, face masks, face shields and aprons when handling suspected Lassa fever patients, it added.

[Lassa fever is a viral infection](#), primarily transmitted to humans through contact with food or household items contaminated with rodent urine, faeces, or blood.

[DR Congo: UN prepared for ‘all scenarios’ despite low risk of Ebola spreading](#)

The chances of the latest Ebola outbreak in the Democratic Republic of the Congo (DRC) spreading across borders are low, said the United Nations health agency on Friday, although nine neighbouring countries remain on alert.

Peter Salama, who leads the [World Health Organization](#)’s health emergencies programme said that WHO was preparing for all eventualities, speaking at a press conference in Geneva.

To date there have been 32 suspected cases in and around Bikoro in remote Equateur Province – close to the Congo River – two confirmed by laboratory testing. There are 18 probable cases and a dozen classified as “suspicious”, according to WHO.

“We have three healthcare workers infected, and one who is being reported as of yesterday, as having died,” said Deputy Director-General Salama, warning that those who take care of patients are at greater risk of being infected and could pass the virus to others.

Given the significant number of suspected probable and confirmed cases, “we are planning for all scenarios, including the worst-case scenario,” he added.

Two of the neighboring countries – the Central African Republic (CAR) and the Republic of Congo – have “a slightly higher level of risk” because of their river-based links to DRC, Mr. Salama said.

UN agencies on the ground

WHO is working closely with authorities in DRC to scale up operations rapidly and mobilize health partners that have helped in relatively recent Ebola outbreaks in West Africa: Liberia, Guinea and Sierra Leone.

As the affected communities are located in hard-to-reach areas, implementing an effective response will be dependent on ensuring access from the air and securing sufficient funding.

“It is absolutely a dire scene in terms of infrastructure. There are very few paved roads, very little electrification, very poor water and sanitation...the only way we mount a serious response in this outbreak is through an air-bridge,” Mr. Salama said.

“This is going to be tough and it’s going to be costly to stamp out this outbreak,” he stressed.

WHO is in discussions with the [World Food Programme](#) (WFP) to organize airlifted supplies to the affected area, and to clear ground so that planes can land.

The [UN Children’s Fund](#) (UNICEF) has also mobilized doctors, sanitation and hygiene specialists, to help contain the spread of the disease.

WHO now has a team on the ground along with partner Médecins Sans Frontières (MSF), and will involve an additional team of between 20-40 specialists in epidemiology, logistics, contact-tracing, and vaccination programmes, in the coming days.

Having already deployed personal protective equipment on the ground, WHO plans to have a mobile laboratory up and running by this weekend, following approval from the DRC’s Ministry of Health.

The initial focus will be on surveillance and understanding the extent of the outbreak; safe burials; case by case management; and preparing for any public

health measures deemed necessary in terms of vaccination.

Mr. Salama emphasized that the vaccination operation for Ebola is far more complex than that for orally-administered polio vaccine. "This is a highly complex sophisticated operation in one of the most difficult terrains on earth," he said.

\$2 million allocated from emergency fund

Meanwhile, UN Emergency Relief Coordinator Mark Lowcock on Friday approved a \$2 million expenditure to help UN agencies and partners to fight and contain the outbreak.

"We know that coordinated early response will be critical containing this outbreak," he said, after signing off on the spending from the UN's emergency account, known as the Central Emergency Response Fund (CERF).

According to the World Health Organization, this is the DRC's ninth outbreak, since the discovery of the Ebola virus in the country in 1976.

The virus is endemic to DRC, and causes an acute, serious illness which is often fatal if untreated. The virus is transmitted to human through contact with wild animals and can then be passed from person to person. Ebola is fatal in about 50 per cent of cases.

An outbreak in West Africa which began in 2014 left more than 11,000 dead across six countries, and was not declared officially over by WHO until the beginning of 2016.

First symptoms generally include the sudden onset of fever, fatigue, muscle pain, headache and sore throat. This is followed by vomiting, diarrhoea, rash, symptoms of impaired kidney and liver function, and in some cases, both internal and external bleeding.

[For Rohingya refugees, imminent surge in births is traumatic legacy of sexual violence: UN News special report](#)

Now, a surge in births among these women is imminent, according to aid officials working in the vast refugee camps in the Cox's Bazar region. And in possibly thousands of cases, aid workers believe, the pregnancies resulted from rape – a source of silent anguish among the mothers and likely stigma for the newborns.

With the monsoon season fast approaching in Bangladesh, United Nations agencies and their partners are struggling to protect nearly 700,000 Rohingya refugees from disaster and disease. Providing proper medical care in the camps is a severe challenge at best, and one made more difficult by the wrenching legacy of sexual violence.

The displaced population includes an estimated 40,000 pregnant women, UN officials estimate, many of whom are expected to give birth in coming weeks. An unknown but significant share of these pregnancies, aid officials believe, resulted from rapes committed by members of the Myanmar army and allied militants.

“They can just see from the faces of the girls who are pregnant that something terrible happened” – *Andrew Gilmour, Assistant Secretary-General*

Pregnancies resulting from “what we believe could have been a frenzy of sexual violence in August and September last year could come to term very soon”, Andrew Gilmour, the UN Assistant Secretary-General for Human Rights, told UN News. “So, we are expecting a surge of births.”

In March, Mr. Gilmour travelled to Cox’s Bazar on Bangladesh’s south-east coast, where the refugees have settled in camps and makeshift clearings after escaping violence in Myanmar’s Rakhine state.

Pregnant women fear stigma

Fearing stigma, sometimes feeling depressed or shamed, pregnant refugee women are often reluctant to admit that they were raped, according to medical and aid workers in the camp. But these workers, from non-governmental groups, told Mr. Gilmour that “they can just see from the faces of the girls who are pregnant that something terrible happened”, he reported.

“And there is no joy whatsoever,” he said, “and nor is there any talk of a husband, either back home or with them in the camps.”

The Rohingya are a Muslim minority in mainly Buddhist Myanmar, where they have long been subjected to severe discrimination.

While more than 200,000 were already living in neighbouring Bangladesh, hundreds of thousands more fled across the border since last August as violence spiralled in northern Rakhine state.

Rohingya homes were looted, villages razed and civilians killed in what the UN High Commissioner for Human Rights said appeared to be: “[a textbook example of ethnic cleansing](#)”. As in many past and current conflicts, women and girls were priority targets.

Women ‘profoundly traumatized’

The latest [UN report](#) on conflict-related sexual violence, issued in March,

charged that members of the Myanmar Armed Forces, at times acting jointly with local militias, used rape, gang rape, forced public nudity and other sexual attacks as part of a strategy to drive the Rohingya from their homes.

Pramila Patten, Special Representative of the Secretary-General on Sexual Violence in Conflict, flew to Bangladesh in November to meet with refugees. All the Rohingya women and girls that she spoke to, she said, reported either enduring sexual violence or witnessing it.

“The two words that echoed across every account I heard were ‘slaughter’ and ‘rape’.” – *Pramila Patten, UN Special Representative on Sexual Violence in Conflict.*

“I met a number of profoundly traumatized women who related how their daughters were allegedly raped inside their home and left to perish when the houses were torched,” [Ms. Patten told the Security Council](#).

“Some witnesses reported women and girls being tied to either a rock or a tree before multiple soldiers literally raped them to death,” she said. “Many reported having witnessed family members, friends and neighbours being slaughtered in front of them. The two words that echoed across every account I heard were ‘slaughter’ and ‘rape’.”

Ms. Patten had dispatched an expert team ahead of her visit, comprising representatives of a UN inter-agency network that advocates for ending conflict-related sexual violence and supporting survivors.

Her Chief of Staff, Tonderai Chikuhwa, who headed that mission, said it was among the most shocking he has experienced. With a continuing influx of desperate refugees, he recalled, the trauma was “so visceral, so raw, so immediate”.

Sexual violence in conflict, such as rape as a weapon of war, is “the most underreported human rights violation”, Mr. Chikuhwa said in an interview with UN News.

The cycle of sexual violence and stigma is a repeating one in conflicts around the world, and even has intergeneration impacts, he said.

In Bosnia, he noted, Ms. Patten met with survivors of wartime sexual violence that occurred 20 years before. The grown children of those survivors still suffered from the stigma of their origins, leaving some of them to “live on the margins of society”, he said.

In Bangladesh, Mr. Chikuhwa said, there are now fears that women and children in the camps could fall victim to traffickers. That’s one of the major concerns that Ms. Patten is looking into during a follow-up mission to Cox’s Bazar this week, he noted.

Monsoon rains inflict further hardship

Although the monsoon season in Bangladesh does not officially start until June, heavy rains and winds earlier this month had Rohingya children [scuttling to the roofs of their family shelters](#) to keep the plastic sheeting from blowing away.

And while Bangladesh has been praised for its support for the refugees, conditions in Cox's Bazar remain challenging due to the sheer number of people crammed into what is now [the world's largest refugee camp](#).

Mr. Gilmour fears monsoon conditions could inflict further hardship on Rohingya women who have already suffered immensely and who now lack access to adequate medical services as they approach childbirth.

"It will be even harder for them when the rains prevent access because there will be serious flooding, we fear," he said. "There may be landslides, there may be a cholera outbreak, there may be many things that will make it even harder for the girls to get the medical attention they so desperately need," he said.

Women and girls who have been raped also need to see that justice is served.

Though difficult to achieve, it is not impossible, as proven by the [2016 conviction](#) of former Congolese rebel leader Jean-Pierre Bemba for crimes committed by forces under his command in the Central African Republic.

The [UN Special Court for Sierra Leone](#), as well as [UN tribunals](#) for the Former Yugoslavia and Rwanda, have also prosecuted sexual violence cases.

Mr. Gilmour said the Rohingya refugees, themselves, have made accountability a pre-condition for returning to Myanmar.

"Obviously, they don't want to go back if they feel that the soldiers who may have raped them, killed their relatives, burned their houses, are going around with impunity and liable to do something similar again," he said.

"But on top of that, in a more general sense, it is vital that there is accountability," he said, "to send a message to other people who might be tempted to carry out such horrific crimes in the future."

[Children 'are dying' now in DRC's Kasai from malnutrition, warns UNICEF](#)

400,000 children in the Democratic Republic of the Congo (DRC) "are at risk of death" in the Kasais region from food shortages caused by conflict and

displacement, according to a senior UN official who has just returned from the area, expressing shock at what he had witnessed.

The [UN Children's Fund \(UNICEF\)](#) issued the warning on Friday, as it scales up its response to those in need.

Before violence flared in mid-2016 between government forces and tribal militia across the vast region, the people of the Kasais had little experience of conflict, according to UNICEF Spokesperson Christophe Boulierac.

What I saw really shocked me at a personal level...The situation there is absolutely scary, in the sense that people had to flee in the bush (with) family, children – *Christophe Boulierac*

He has just returned from DRC, where he said he was personally affected by the desperate situation he encountered.

“What I saw really shocked me at a personal level...The situation there is absolutely scary, in the sense that people had to flee in the bush (with) family, children”, he said.

“They had to stay a few months because of the violence. They had no proper food, they had no proper water to drink. And now that the violence has decreased they come back.”

Clearly moved, the UNICEF official who has worked in the field in Asia, African and the Caribbean, said: “Often we say that children are at risk of dying; no, that’s not what we are saying in Kasai. We say that children *are* dying; I saw that.”

Some 3.8 million people are in need of humanitarian assistance in the Kasais, including 2.3 million children. At least half of all children under-5 years of age in the region – that’s 770,000 – are suffering from acute malnutrition, including 400,000 who are severely malnourished, according to a [UNICEF report](#) published this week.

UNICEF says that many families driven from their homes have been unable to plant and harvest their crops for three successive seasons. It also warns that thousands of children have been recruited into armed groups and militias and that hundreds of schools and health centres have been looted, burned or destroyed.

To support its programmes for the children of Kasai in 2018, UNICEF has appealed for \$ 88 million, which to date is only 25 per cent funded.