

[Conflict-related child deaths hit new high in Afghanistan, UN warns](#)

16 May 2017 – Deeply concerned by the continued increase in conflict-related child deaths in Afghanistan, the UN Assistance Mission in the country ([UNAMA](#)) has urged parties to the conflict to take immediate measures to reduce harm.

“I was [appalled](#) to hear that an unexploded mortar round killed five boys from the same family” on Sunday, said the Secretary-General’s Special Representative for Afghanistan, Tadamichi Yamamoto, in a news release issued yesterday.

“The children were playing outside their home [...] A family destroyed in seconds – this horror is just one of too many incidents documented at the onset of this fighting season,” he added.

The first four months of 2017 witnessed the highest recorded number of child civilian casualties resulting from conflict-related incidents in Afghanistan, including the highest number of children killed, for the same comparable period since the Mission began documenting cases.

Between 1 January and 30 April 2017, UNAMA preliminarily recorded 283 child deaths, a 21 per cent increase compared with the same period in 2016. Children are killed by explosive remnants of war in civilian-populated areas and in ground fighting.

Many of the more than 700 children injured have suffered life-changing injuries, including loss of limbs, as well as significant and lasting trauma such as witnessing the death of siblings, parents, destruction to their homes or displacement.

UNAMA again urged parties to the conflict to prioritize the protection of children and welcomed the commitment of the Government to formally ratify [Protocol V](#) to the 1980 Convention on Conventional Weapons.

The Mission urged all parties to the conflict to commence marking, clearing, removing and destroying explosive remnants of war left behind from fighting in areas under their territorial control.

[1.2M adolescents’ deaths mostly preventable with improved health](#)

services – UN agency

16 May 2017 – The deaths of more than 1.2 million adolescents every year – about 3,000 per day – could have been prevented with good health services, education and social support, the United Nations health agency today reported.

Road traffic injuries, lower respiratory infections, and suicide are the [biggest causes of death](#) among adolescents, according to a report by the UN World Health Organization ([WHO](#)) and partners.

The report, *Global accelerated action for the health of adolescents (AA-HA!): Guidance to support country implementation*, shows that road injuries are the leading cause of adolescent deaths among 10-19 year-olds, killing some 115,000 adolescents each year – the majority older adolescent boys.

Regionally, however, communicable diseases such as HIV/AIDS and respiratory infections are more deadly to adolescents in low- and middle-income countries in Africa than road injuries.

Among girls, the leading cause of death for younger adolescents is pneumonia and other lower respiratory infections resulting from indoor air pollution caused by cooking with dirty fuels, while older adolescent girls are more likely to die from pregnancy complications.

Self-harm and suicide are the third leading cause of adolescent mortality, particularly among older adolescents, and predominantly among girls.



Adolescent girls playing games in India. Photo: UNICEF/Ruhani Kaur

According to the report, more than two-thirds of all adolescent deaths occur in low- and middle-income countries in Africa and South-East Asia.

The UN agency said these deaths could have been largely prevented with improved health systems that serve adolescents. In some cases, adolescents do not know about the services or they simply do not exist – such as for mental health disorders, substance use or poor nutrition.

Adolescents have been entirely absent from national health plans for decades, said Flavia Bustreo, WHO's Assistant Director-General.

Relatively small investments focused on adolescents now will not only result in healthy and empowered adults who thrive and contribute positively to their communities, but it will also result in healthier future generations, yielding enormous returns.

WHO noted that many behaviours that impact health later in life – such as physical inactivity, poor diet, and risky sexual health behaviours –

being in adolescence.

“Improving the way health systems serve adolescents is just one part of improving their health,” said Anthony Costello, Director at WHO’s Maternal, Newborn, Child and Adolescent Health.

Parents, families, and communities are extremely important, as they have the greatest potential to positively influence adolescent behaviour and health.

In addition, growing up in humanitarian and fragile settings, increases health needs among young people. Girls, especially, may be more likely to drop out of school, marry early or engage in transactional sex to survive.

[Spreading violence in Central African Republic sets off ‘loud alarm bells’ – UN human rights chief](#)

16 May 2017 – The United Nations human rights chief today expressed grave alarm over the spread of violence by armed groups against the civilian population in several parts of the Central African Republic in recent months, as well as attacks against UN peacekeepers in the country’s southeast.

“Violence and rising tensions are spreading to areas of the Central African Republic that had previously been spared the kinds of terrifying violence seen in some other parts of the country – this is highly worrying and should set off loud alarm bells,” said UN High Commissioner for Human Rights Zeid Ra’ad Al Hussein in a news release from his Office ([OHCHR](#)).

“The hard-earned relative calm in Bangui and some of the bigger towns in CAR risks being eclipsed by the descent of some rural areas into increasing sectarian violence, with defenceless civilians – as usual – paying the highest price,” he added.

The latest in a series of attacks was an incident this weekend in Bangassou, in which armed men used heavy weapons to attack the base of the UN mission in CAR, known by its French acronym MINUSCA. The armed men also attacked the Muslim neighbourhood of Tokoyo where numerous civilians were killed and others wounded.

Investigations by MINUSCA’s Human Rights Division suggest that between March and May 2017 more than 121 civilians and six peacekeepers were killed, excluding figures in the two latest incidents.

Mr. Zeid also noted the fact that the Special Criminal Court is preparing to start its work is a strong signal by the authorities and the international community that the continued climate of impunity is unacceptable.

Meanwhile, the Security Council issued a statement to the press overnight, strongly condemning the violence by anti-Balaka elements in Bangassou on 13 and 14 May 2017 that targeted MINUSCA's field office, civilian populations from particular communities, as well as humanitarian personnel.

The 15-member body reiterated that attacks against peacekeepers may constitute war crimes and reminded all parties of their obligations under international humanitarian law.

The Council called on the Government to swiftly investigate this attack and bring the perpetrators to justice.

[UN health agency deploying technical experts to site of Ebola outbreak in DR Congo](#)

15 May 2017 – The United Nations health agency is deploying technical experts to the Democratic Republic of the Congo (DRC) amid an outbreak of Ebola virus near its northern border with the Central Africa Republic, the agency's regional director for Africa confirmed.

Matshidiso Moeti visited the capital Kinshasa on Saturday to discuss with national authorities and partners ways to mount a rapid, effective and coherent response in order to stop the ongoing outbreak.

"I encourage to public to work with the health authorities and take the [necessary preventive measures](#) to protect their health," Dr. Moeti said.

He noted that the UN World Health Organization ([WHO](#)) has already mobilized teams, and is also ready to provide the technical expertise and leadership required to mount a coordinated and effective response.

The visit follows notification by the Government of an outbreak in the Likati health zone, in the north. At least three people have died, as of Saturday, and eight additional people are reported to have Ebola.

A Ministry of Health team, supported by the WHO, is scheduled to arrive in the epicenter of the outbreak today.

"The health zone is situated in the remote, isolated and hard-to-reach northern part of the country, with limited transport and communication

networks – factors that all impeded transmission of information about the suspected outbreak,” WHO said in a press release.

In the meantime, WHO is recommending that travel and trade are not restricted with the DRC, based on information currently available.

“The full extent of the 2017 outbreak is still not yet clear. Extensive investigation and risk assessments are being conducted and the findings will be communicated accordingly,” the UN agency said.

The Global Outbreak Alert and Response Network (GOARN) has been activated to provide additional support, if required. In addition, reinforcement of epidemiological surveillance, contact tracing, case management, and community engagement are under way.

This is the eighth outbreak of Ebola virus since it was discovered in the DRC in 1976.

[Sexual violence in conflict](#) [‘legitimate threat’ to peace and security – UN deputy chief](#)

15 May 2017 – Although global understanding of sexual violence in conflict is shifting, there remains the need to tackle the root causes of such violations that lie in fundamental inequality and discrimination against women, Deputy Secretary-General Amina Mohammed told the United Nations Security Council today.

“Sexual violence in conflict is no longer seen as ‘merely a women’s issue’ or as a ‘lesser evil’ in a false hierarchy of human rights violations,” she [said](#) during an open debate on the subject, in which some 70 speakers shared their views.

The debate, on [sexual violence in conflict as a tactic of war and terrorism](#), heard briefings from Adama Dieng, Under-Secretary-General, Acting Special Representative of the Secretary-General on Sexual Violence in Conflict and Special Adviser on the Prevention of Genocide, as well as Mina Jaf, Founder and Executive Director of Women’s Refugee Route.

“Instead, it is rightly viewed as legitimate threat to security and durable peace that requires an operational security and justice response, in addition to ensuring multi-dimensional services for survivors of such crimes,” Ms. Mohammed added.

She said that a robust legislative framework is now in place, including a

series of precise Security Council resolutions with new tools to drive change and progress.

As for accountability at the international and national level, “there is a gradual shift from a reality in which it is cost-free to rape a woman, child or man in conflict, to one where there are consequences for anyone who commits, commands or condones such crimes,” the deputy UN chief said.



Deputy Secretary-General Amina Mohammed addresses the Security Council on the topic, “Women and peace and security: sexual violence in conflict.” At her side is José Luis Cancela, Vice-Minister for Foreign Affairs of Uruguay and President of the Security Council for May. UN Photo/Manuel Elias

However, too many women live with the spectre of violence in their daily lives, in their household and families, she noted.

In word and deed, let us commit to stand in solidarity with survivors and vulnerable communities, and replace horror with hope

Sexual violence is increasingly used as a tactic of terrorism, employed by extremist groups in places like Iraq, Syria, Yemen, Somalia, Nigeria and Mali to advance their military, economic and ideological ends.

It is therefore essential that considerations of the protection and empowerment of women and girls feature in the UN’s architecture for countering terrorism and violent extremism, she stressed.

The mass migration crisis and massive displacement of populations due to protracted conflicts worldwide has also heightened the risk of sexual violence.

“Let us also acknowledge that the response of the United Nations is undermined by unacceptable allegations and incidents of sexual abuse and exploitation by peacekeepers,” she said, highlighting the Organization’s focus on its zero-tolerance policy.

She pointed out that those who commit these heinous crimes often escape justice while their victims are often forced to live with the shame of having been raped, rejected by their families and communities.

Mental health issues such as depression, flashbacks, challenges in re-establishing intimate relationships, and fear are some of the long-term psychological consequences victims experience. Worst still, children born of rape experience discrimination, exclusion and stigma.

“All our words, and laws, and resolutions, will mean absolutely nothing if violations go unpunished in practice, and if we fail in our sacred duty of care to survivors,” she said, adding: “In word and deed, let us commit to

stand in solidarity with survivors and vulnerable communities, and replace horror with hope.”

“This is a litmus test of our commitment and responsibility to protect the most vulnerable populations from the most egregious human rights violations,” Ms. Mohammed told the meeting.