SPECIAL COURT FOR SIERRA LEONE
OUTREACH AND PUBLIC AFFAIRS OFFICE

PRESS CLIPPINGS

Enclosed are clippings of local and international press on the Special Court and related issues obtained by the Outreach and Public Affairs Office as at:
Monday, 22 October 2012

Press clips are produced Monday through Friday.
Any omission, comment or suggestion, please contact
Martin Royston-Wright
Ext 7217
<table>
<thead>
<tr>
<th>International News</th>
</tr>
</thead>
<tbody>
<tr>
<td>ICC Complains of Lack of Cooperation, Wants More UN Support / <em>Reuters</em></td>
</tr>
<tr>
<td>20 Years After Killings, Nuns Seek Forgiveness, Not Justice / <em>The State Register-Journal</em></td>
</tr>
<tr>
<td>Statement to the General Assembly by Leila Zerrougui…/ <em>UN Office of the SRSG</em>…</td>
</tr>
<tr>
<td>Liberia Slowly Coming to Terms With Civil War's Impact on Mental Health / <em>Human Rights Watch</em></td>
</tr>
</tbody>
</table>
UNITED NATIONS (Reuters) - The International Criminal Court pleaded for stronger support from the U.N. Security Council on Wednesday to ensure states cooperate with its war crimes inquiries, complaining it had faced problems in cases on Darfur and Libya.

International Criminal Court President Judge Sang-Hyun Song said the court's followup to the only two cases referred to it by the Security Council had been problematic and that some countries had refused to cooperate.

"For the ICC to effectively deal with situations referred by the council ... it needs to be able to count on the full and continuing cooperation of all U.N. members, whether they are parties to (the court) or not," Song told the 15-member council.

He said this included cooperating with investigations and gathering evidence, arresting people charged by the court and tracing the assets of suspects.

"In making any future referrals, it would be very helpful if the Security Council could underline this obligation of full cooperation, without which it is very difficult for the ICC to discharge the mandate the council has given it," Song said.

The court, based in The Hague, began its work a decade ago and has the jurisdiction to investigate crimes in countries that have ratified its treaty. It can only pursue cases in non-member states if they are referred to it by the U.N. Security Council.

While Song did not give details on the problems faced by the court on Libya and Darfur, the challenges are widely known.

The court has indicted Sudan's President Omar Hassan al-Bashir for war crimes in Darfur - charges his government says are politically motivated and baseless - but African heads of state voted in 2009 not to cooperate with the court on the case, saying it would hamper efforts to bring peace to Sudan.

ICC member states are obliged to arrest people indicted by the court, but Bashir has been able to travel freely to several African countries, including ICC members Kenya and Chad. Only Malawi stopped him from visiting earlier this year.

U.N. Secretary-General, who also addressed the Security Council, echoed Song's views: "The council, where it has referred a situation to the (ICC) prosecutor, can greatly assist the court by acting to secure the necessary level of cooperation from member states."

In Libya, the authorities have refused to extradite Saif al-Islam Gaddafi to face charges in war crimes committed during the NATO-backed revolt that toppled his father last year. Libya wants to try Saif al-Islam in its own courts, but judicial experts say he is unlikely to get a fair trial.

ICC judges will rule whether Libya is capable of properly trying the man once seen as Gaddafi's heir-apparent or whether it should extradite him to the Hague.

Earlier this year, a lawyer appointed by the ICC to defend Saif al-Islam was detained in Libya for three weeks on spying allegations and said her experience had shown it was impossible for him to get a fair trial in his home country.
20 years after killings, nuns seek forgiveness, not justice

“She was a happy-go-lucky person,” recalls Mudra, 75. “She always had a smile on her face.”

About a mile from the convent, the vehicle driven by Sister Barbara Ann and carrying Sister Joel Kolmer, a security guard and two soldiers from a peacekeeping group was ambushed. All five people were killed.

Days later, armed soldiers surrounded the Gardnersville convent demanding the sisters’ vehicles and money. When the sisters — Kathleen McGuire, Agnes Mueller and Shirley Kolmer, all with ties to Illinois — couldn’t meet the demands, they were gunned down in front of witnesses and their bodies ritualistically mutilated, according to sources from the order.

That fact was backed up a former NPFL general who testified at the Truth and Reconciliation Commission hearings in Monrovia in 2009. The former general, Morris Padmore, said orders to rape and kill the three nuns came from a brigadier general who answered only to NPFL leader Charles Taylor, who later served as Liberian president from 1997 to 2003.

During his trial, Taylor, who was earlier this year convicted on 11 charges and sentenced to 50 years in prison, said the order to rape and kill was “contested” and that the area around the convent was under control by other forces.

Even in light of that news, the focus has been on the bond between the sisters and the Liberian people, “not the individuals responsible,” says Sister Boehmer. “That’s where the reconciliation comes in.”
Statement to the General Assembly by Leila Zerrougui, Special Representative of the Secretary-General for Children and Armed Conflict

M. le Président,
Excellences,
Mesdames et Messieurs,

C’est un privilège pour moi d’être parmi vous aujourd’hui pour vous présenter le rapport de mon prédécesseur, Mme Radhika Coomaraswamy. Et c’est un honneur de m’adresser à la troisième commission pour la première fois en ma capacité de Représentante Spéciale pour les enfants et les conflits armés. J’ai bon espoir que ce jour marquera le début d’une relation fructueuse et collaborative avec l’Assemblée générale et que, ensemble, nous pourrons continuer à renforcer la protection et la prise en charge de ces enfants dont les vies ont été brisées par les conflits.

Mr. Chair,

Before turning to the three themes in the report, allow me to highlight two landmark developments which have set new parameters in the protection of children. I am referring to the verdicts by the International Criminal Court, and Special Court for Sierra Leone, on the cases of Thomas Lubanga and Charles Taylor. These two cases send a powerful deterrent message to military commanders and political leaders responsible for the recruitment and use of children. But perhaps more significantly, these cases set important jurisprudence which national courts could build on.

Mr. Chair,

Allow me to elaborate on three major areas highlighted in the report before you.

The first is the prevention of recruitment and use of children. This is a vast and complex topic. Many factors lead to children’s association with armed forces and groups, including poverty, social exclusion, displacement, the breakdown of State institutions, and socio-cultural factors. But I would like to focus on two areas in which Governments, as well as the United Nations, can make a difference.

The most sustainable way to prevent the child soldier phenomenon is through the enactment and enforcement of the rule of law. This was recognised by the General Assembly during its High Level meeting on the rule of law last month. Outlawing the recruitment and use of children is the starting point for prevention, and is reinforced by awareness-raising on applicable laws, and the enforcement of these laws. These are the critical steps that Governments can take to prevent the recruitment and use of children.

In practice, however, we know that this is easier said than done. In war-torn countries, the rule of law is often a work-in-progress, rather than a fact. In such cases, the United Nations may play an important role in support of the State’s efforts to prevent violations. I have seen this myself in the DRC, where the UN Mission, in partnership with the UN Country Team, protected children from the threat of recruitment, through the creation, implementation and consolidation of a comprehensive package of protection related tools, such as joint planning of military operations, Joint Protection Teams, Community Liaison Assistants and an alert network amongst communities in conflict-prone areas. In these contexts the strengthening of the judiciary and the penitentiary systems are critical to ensure that the law is upheld. Tools that have been useful include the Joint Investigation Teams, the Joint Prosecution Cells and the use of mobile courts to back up national judicial services and hold trials in remote areas.
Successive conflicts have shown with stark clarity the terrible impact that explosive weapons have on children. Weapons with wide area impact, such as air-dropped bombs, missiles (including those fired from drones), mortar shells, mines and improvised explosive devices can kill, maim and injure children when used in populated areas. Because the effect of such weapons cannot be accurately predicted, and because they have a broad blast and fragmentation zone, explosive weapons tend to have an inherently indiscriminate impact, and are therefore deeply problematic.

The effects of explosive weapons go beyond immediate casualties. The threat of their use is an important cause of displacement, and is a significant cause of anxiety and trauma amongst civilians, including children. In addition, the frequent targeting of civilian installations with these weapons mean that in many cases children are impeded from receiving medical treatment or going to school. A recent study, for example, has found that explosive weapons caused more deaths, injuries and damage than any other weapon in attacks on healthcare facilities. I would also note that from a strategic point of view, tactics that result in civilian casualties fuel further animosity and grievances.

For these reasons, I would urge Member States to take measures to reduce the impact of explosive weapons on children, and ensure that military operations uphold the principles of distinction, proportionality, and precaution. Member States could consider reviewing military protocols and procedures with a view to limiting the potential for civilian casualties through use of these weapons. Member States could also consider reviewing the use of new technologies, such as drones, which act as vehicles for explosive weapons.

Allow me to turn to my Office’s collaboration with regional organisations, which will be a key priority for me. Already, as a result of collaborative efforts with my Office, the European Union has developed guidelines on children and armed conflict, applicable to EU staff in the field and in Brussels.

Going forward, I would like to extend the Office’s collaboration with the African Union, and other regional and sub-regional organisations. I have already held preliminary discussions with the AU, and would like to centre our collaboration on capacity-building, guidelines and training for AU peacekeepers on child protection.

My Office’s partnerships are not limited to regional organisations. Working collaboratively with UN peers – including those sitting beside me today – is central to the success of my mandate. Indeed, I know from my field experience that no single UN actor alone can accomplish the difficult task of protecting children. In the Congo, it was clear to all of us working on the rule of law, human rights and protection that there were times when we needed to assist partners, or ask them to cover gaps. I also found that faced with the very real, often life-and-death challenges in the field, collaboration amongst UN actors was a natural response in order to maximise our impact and make a difference. The richness and complementarity of the UN’s mandates enabled us to have a multidimensional approach to child protection.

I know that my predecessor placed great importance on collaboration with key UN and non-UN partners. It will be no different under my tenure. My colleagues beside me and I have already discussed, and agreed, that we must support and empower each other in each of our mandates. Collaboration ranges from technical guidance and training on monitoring and reporting, to joint advocacy campaigns. I will ensure that my Office continues to address the needs of conflict-affected children, so that we address gaps with no overlap together with our partners.
Mr. Chair,

Allow me to conclude with a few words on the way forward. In addition to working with regional organisations, it is my intention to focus on three broad areas.

Firstly, I would like to re-energise the cross-regional support for children and armed conflict, which was the initial motor that created the mandate. For this, I will reach out to member states that have concerns over the implementation of the mandate, to ensure not only that we are fair and balanced, but that we are also seen as fair and balanced. It is also my plan to meet with the regional groups both in New York and Geneva.

Secondly, I believe that we must now focus on consolidating the gains made by the mandate. The legislative bodies have given us a heavy workload. Now, we must focus on implementing the tasks given to us by these bodies as best as possible, especially on monitoring and reporting, dialogue and Action Plan implementation.

Thirdly, I would like to emphasise that accountability will remain central to my Office’s activities. In partnership with member states, I will explore ways of supporting the establishment of national accountability mechanisms to address violations against children, and new approaches to tackle the challenge of persistent perpetrators.

Excellencies, ladies and gentlemen,

The children and armed conflict mandate is only as strong as the support it receives. For this, maintaining consensus on the urgency and importance of action to protect children is critical. Breaking consensus and support for this work will embolden perpetrators, and send the wrong signal to child victims who count on the international community to stand together to protect them. It is my sincere hope that I will receive your support as I undertake this challenging and complex mandate.

Thank you very much.
Liberia slowly coming to terms with civil war's impact on mental health

Liberia's 14-year civil conflict left a legacy of mental illness for many; a new scheme will offer hitherto absent medical support.

Dakemue Kollie, a mental health co-ordinator in Bong County, central Liberia, aims to encourage better attitudes towards mentally ill people.

Dakemue Kollie had to shout over the roar of his motorbike. "I am called the crazy people's friend," he said with a smile. "But I don't blame them. I accept the name and then try to change their minds." Kollie, 33, a mental health co-ordinator in Bong county in central Liberia, rides up to 200km a day along potholed, dusty roads visiting patients in rural areas. The majority are women affected by forms of what he calls anxiety or depression. "There were a lot of war[s] fought here," he said, looking out over the ruins of the anti-terrorist unit base, once home to the elite band of paramilitaries who, under the convicted former president Charles Taylor, committed acts of torture and murder. "Even though I was small I remember everything."

More than 250,000 people were killed during Liberia's 14 years of civil conflict and much of the country's infrastructure was completely destroyed, leaving a republic scarred by decades of violence and carnage. A 2008 study by members of the American Medical Association found 44% of adults displayed symptoms of post-traumatic stress disorder (PTSD).

Dr Benjamin Harris, Liberia's only resident psychiatrist, said: "People tend to endure their suffering rather than seek professional help [because of the] lack of conceptual understanding of what PTSD is all about."

The Carter Centre, an organisation that runs a mental health project in Liberia, states that less than 1% of Liberians have access to appropriate mental health services; in developed countries it is closer to half. In a region still reeling from the effects of the war, mental health is low on a long list of priorities.

Kollie's desire to work in mental health was born of his own experiences during the war years. He was just 15 when his father, a cook at the county's hospital, was killed in a 1994 massacre by Taylor's rebels; he later watched both his sister and mother fall sick and die. "My mother, because of the only daughter she had, got depressed and worried on it until she died also," he said. "So from there I really decided to go into the health field."

Kollie is now one of seven nurses in Bong county trained in mental health by Doctors of the World. As well as treating and counselling patients, his job involves advocacy work to try to change people's views of the illness. "I feel so proud when I see my patients improving," he reflected after visiting 25-year-old Lila, whom he said became "manic" when she was about to get married eight years ago. Three weeks ago, Lila started taking mood-stabilising drugs. She has since told Kollie, for the first time: "Things are getting better." Lila had previously spent endless hours with traditional and spiritual healers fasting and praying, while concoctions of herbs and leaves were pasted on her head. "Sometimes I really used to feel bad," she said. "They would tell me I [was] crazy. Other people used to tell me I [had] the cause."

Mental health in Liberia and other parts of Africa is shrouded in fear and ignorance. People are often ostracised and excluded from the community, with a prevailing belief that the illness may have been caused by witchcraft and could be contagious. Kollie described how he has seen people chained inside
houses where they are beaten "to get rid of the demon". "People even use them as entertainers to come and dance for them," he revealed.

Last week, Human Rights Watch released a report detailing how patients in psychiatric hospitals and spiritual healing centres in Ghana are "chained to trees, frequently in the baking sun, and forced to fast for weeks as part of a healing process".

In 2008, the World Health Organisation launched the mental health gap action programme (pdf) to advocate a much greater focus on mental health for low- and middle-income countries. It estimates most developing countries dedicate less than 2% of the national budget to mental health, and that more than 80% of people in poor countries with serious mental health conditions receive no treatment. In Liberia's budget this year, no money was allocated to mental health policy.

Dr Janice Cooper, who heads the Carter Centre's mental health programme in Liberia, has been working with the government, Doctors of the World and other partners to push the importance of treatment in Liberia. "We need to have places in the country where people can be treated in their community and stabilised, and then go back home," she said.

Cooper says she has seen people from the rural areas "bound and gagged" and placed in car boots to be taken to country's only in-patient mental health clinic, in Monrovia. There are plans to launch "wellness clinics" – dedicated facilities with in- and out-patient care – in each of Liberia's 15 counties. The first one, in Bong county, has opened; a red sticker on the door of a consulting room screams out: "Epilepsy is [a] brain problem and not a curse or a spell", an attempt to dispel another common myth.

The centre has begun an ambitious scheme to train 150 mental health clinicians by the end of 2015; 63 have already started working in the rural areas. Dr Cooper was involved in drafting the country's first mental health bill, currently awaiting approval from the legislature; close to two-thirds of countries in Africa lack appropriate mental health laws. "We are making small strides, but there is a long way to go," Cooper says.