

The Forgotten Men: An Examination of Sexual Violence Committed Against Males During Wartime and Conflict

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Although the international development community has created programming to both prevent gender-based violence (GBV) against females in conflict zones and respond to the needs of female victims, it has failed to acknowledge that males too are also victims of GBV in such settings. Male civilians in several conflict zones, including the former Yugoslavia, Sri Lanka and Sierra Leone have been castrated, have had their genitals mutilated and shocked and have been forced to perform sex acts with other soldiers. The international community has done little to bring this phenomenon to light and little effort has been made to provide appropriate services to male victims and ensure that GBV against males does not occur. This paper outlines how confusion and misuse surrounding the definition of GBV excludes the possibility of acknowledging the existence of male victims, outlines conflict zones where there have been documented cases of male victims of gender-based violence, examines what the international community is currently doing to address the needs of male victims, and provides recommendations for program officers and scholars to enact in order to ensure that male victims of GBV are given access to the same services and rights made available to their female counterparts.

Introduction

The international community has only recently begun to pay attention to the issue of gender-based violence (GBV) in the framework of conflict settings. While the men and women currently on the ground implementing GBV programming should be commended for their work, a crucial element is missing in current GBV prevention and victim assistance programming as well as research efforts focusing on GBV. The current literature and programming fail to address the fact that men are not always the perpetrators of GBV in conflict settings, but are also sometimes the victims. According to DelZotto and Jones, as of 2002 “no international organization or NGO has established a research program or policy initiative specifically focused on male victims of sexual violence in wartime.”¹ As this paper will outline, men in conflict settings, especially those who are held in detention, have been raped by other male soldiers and have been forced to endure atrocities such as genital mutilation and application of electric shocks to the scrotum.

This paper seeks to provide an overview of why male victims have thus far not been targeted in GBV intervention programming and research. Additionally, this work will discuss past documentation and occurrences of GBV perpetrated against males in conflict settings and will discuss what current international humanitarian programming exists targeting male victims of GBV. This paper will also recommend actions that humanitarian workers, researchers and the NGO community can take to ensure that the needs of male victims of sexual violence are met.

While the scant literature which is available on male victims of GBV has briefly stated various forms of gender-based violence which men may experience, such as gender selective killings and forced conscription of male soldiers, this paper will only specifically focus on the sexual violence and abuse perpetrated against men in conflict settings. The length of this paper does not allow the exploration of all aspects GBV perpetrated against males and the majority of the literature I encountered discussing male victims specifically focused on victims of sexual violence. Additionally, the specific focus on sexual violence was deemed appropriate, given that the majority of discussion which took place throughout this course was related to sexual violence.

What is gender-based violence? Barriers to inclusion of male victims

While there is no one agreed upon definition of gender-based violence in the literature, perhaps one of the most encompassing definitions, which allows for the inclusion of both male and female victims alike is given by the Reproductive Health for Refugees Consortium (RHRC). Jeanne Ward, in the RHRC sponsored document “If Not Now When: Addressing Gender-based Violence in Refugee, Internally Displaced, and Post-conflict Settings” defines gender-based violence as “any harm that is perpetrated against a person’s will; that has a negative impact on the physical or psychological health, development, and identity of the person; and that is the result of gendered power inequities that exploit distinctions between males and females, among males, and among females.”² The Inter-Agency Standing Committee (IASC), which uses a very similar definition of GBV in its publication “Guidelines for Gender-based Violence Interventions in Humanitarian Settings” states that incidents of GBV may include sexual violence, sexual exploitation, forced prostitution, trafficking and forced marriage.³

However, despite the inclusive nature of the definitions stated above, many organizations and groups working on GBV programming confuse violence carried out specifically against women and gender-based violence as one in the same, perpetuating the myth that gender-based violence is only a problem affecting female victims. The World Health Organization in one of its online fact sheets on GBV states that “gender-based violence, or violence against women (VAW), is a major public health and human rights problem throughout the world.”⁴ Such a definition cajoles readers into thinking that GBV only affects women victims.

While the United Nations, in the 1993 Declaration on the Elimination of Violence Against Women, clearly defined violence against women as an “act of gender-based violence that results in, or is likely to result in, physical, sexual or psychological harm or suffering to women, including threats of such acts, coercion or arbitrary deprivation of liberty, whether occurring in public or in

private life,”⁵ making a clear distinction between GBV and VAW, many NGOs and other organizations misguidedly took this definition to mean that gender-based violence and violence against women are the same thing.

Such organizations have perpetuated this myth throughout the world, leading people to generally think that males are not affected by gender-based violence and subsequently do not need to be addressed in international programming. For example, the International Rescue Committee (IRC), when describing its GBV related work on its main web page states that the UN Declaration “offers a comprehensive and widely accepted definition of what constitutes gender-based violence”⁶ and goes on to produce the UN definition above of violence against women. Gender-based violence and violence against women are indeed related but different phenomena. Violence against women solely affects women and is predominately perpetrated by males while gender-based violence, as defined in the RHRC and IASC definitions above, may either affect male or female victims and be perpetrated against males by males or females, or females by males or females.

Non-governmental organizations and media reporting on the issue of rape and sexual violence occurring during humanitarian situations continue to perpetuate the myth that males cannot be victims. In an analysis of 60 NGO reports analyzing sexual assault during wartime, 58 of the reports frame victims of sexual assaults solely as women and/or girls.⁷ Media reporting about sexual violence also tend to focus on the female victims. An analysis of Croatian press between November 1991 and December 1993 turned up only 6 articles making reference to sexual assault committed against men compared to 60 articles detailing the rape of women.⁸

Aside from just conceptual and definitional confusion surrounding gender-based violence, in many societies national and local law make it impossible for a male victim to bring forward charges of rape, as such codes only specify that women can be rape victims, referring to rape specifically as a violation of a women’s honor and integrity.⁹ For example, according to the UN Assistance Mission in Afghanistan (UNAMA), Articles 426-430 of the Afghan penal code “protect women and children against rape and sexual exploitation” with no specific mention of the protection of males.¹⁰ Similarly, sections of the penal code of nations such as Myanmar and Cuba solely define the perpetrator of rape as male and the victim as female.¹¹

Additionally, for the reasons defined above, health care workers in emergency settings may possess gender stereotypes, conceptualizing males as perpetrators and women as victims, and thus may be unable to identify and recognize male victims who come forward to seek help. As a result of such stereotypes, health workers may not believe a male’s claim of sexual abuses, and may even “dismiss” him from care.¹² There are very rarely any physical signs caused by acute sexual assault

of men, making it difficult for health workers to identify at first glance that such abuses have indeed occurred.¹³ If a male has reason to believe attempts to seek help may be fruitless, he may not come forward, contributing to the phenomenon of under-reporting of GBV committed against males. Additionally, if health workers can not accurately identify cases, most likely they will not be reported to appropriate agencies.

Finally, many societies consider sexual contact between two males indicative of homosexuality, regardless of any elements of coercion or force involved.¹⁴ Due to such taboos regarding homosexuality, male victims of sexual violence, particularly rape, may feel afraid and discouraged to come forward, equating the incident with homosexuality. The victim may feel that he may be further stigmatized and presumed to be homosexual if reporting the incident. Consequently, the world has no true estimate of the number of male victims of GBV, and in part, for this reason, the phenomenon has been kept off the radar.

Such a framework, emphasizing males as perpetrators rather than possible victims on a global basis, has kept the problem of sexual abuse against males in conflict settings out of light. According to Jeanne Ward of RHRC, “GBV programming targeting men and boy survivors is virtually non-existent among conflict-affected populations.”¹⁵ Male victims who indeed are victims of sexual violence in conflict settings, like those outlined in this paper, have few, if any, avenues to approach for assistance. Thus, there is an imperative need for further research to be conducted on this pressing issue.

Characteristics of male sexual violence, torture and rape in conflict settings

According to the IASC Guidelines for Gender-based Violence Interventions in Humanitarian Settings, sexual violence is defined as “any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to traffic a person’s sexuality, using coercion, threats of harm or physical force, by any person regardless of relationship to the victim, in any setting, including but not limited to home and work.”¹⁶ Sexual violence against men does not only take the form of forced anal rape, the form of sexual violence perpetrated against males which most people are familiar with. As will be described in detail in the country case studies throughout this paper, such sexual violence carried out against men in conflict settings may include: forced anal penetration with a penis or other item; forcing the victim to perform fellatio; mutilation in one form or another of the penis and or testicles of a victim through full or partial castration; and infliction of pain and injury to the genitals through the use of blunt objects and/or electric shock apparatus.

The majority of discussion surrounding sexual violence and assault against males during conflict has focused on the occurrence of sexual torture of men in detention settings. Sexual torture, a form of gender-based violence, can be defined as “any act of sexual violence from forced nakedness to rape, which qualifies as torture.”¹⁷ The 1985 Convention on Torture states that a given act is considered torture when it causes physical or mental suffering, is committed for punishment, coercion or to obtain information and is inflicted or instigated by or with the consent of any person acting in an official capacity.¹⁸

According to Oosterhoff, Zwanikken and Ketting “rape and other forms of sexual torture are a means of terrorizing and controlling a population.”¹⁹ Male rape of other males during war is primarily carried out by combatant as an expression of aggression and power.²⁰ Sexual torture and violence of the nature described above of male prisoners during wartime has been used as part of “a process of breaking down political prisoners.”²¹ Additionally, in ethnic conflicts, such as that which occurred in the former Yugoslavia, men’s genitals were beaten in an attempt to destroy their reproductive functioning and ensure that they would not be able to produce ethnic minority children.²²

Sexual violence against men in times of war has been used as a means of emasculating the enemy through defiling his body.²³ In an attempt to impose humiliation on male enemies, soldiers will attempt to turn him into a “female” through sexual cruelty.²⁴ In ancient wars, there was a belief that emasculating an enemy and sexually penetrating him would cause him to lose his manhood and the ability to be a warrior.²⁵

The psychosocial and physical effects which men experience as a result of sexual violence are numerous. Men may suffer from genital infections, physical impotence, swollen testicles, bloody stool and ruptures and abscesses of the rectum. Victims of rape may contract sexually transmitted infections, including HIV.²⁶ On a psychosocial level, male survivors may express deep feelings of shame, guilt, anger, depression and anxiety following their attack.²⁷ Victims may also experience psychosomatic problems including loss of appetite, headache and loss of weight.²⁸ Male victims of sexual violence may additionally suffer from symptoms of post-traumatic stress including difficulty sleeping, night sweats, fear and poor concentration.²⁹

Where has sexual violence against males taken place?

As stated above, the research on the prevalence and occurrence of acts of GBV perpetrated against males is quite sparse. It is likely, given the lack of data, that there are far more incidents of male directed sexual violence and assault occurring in far more conflict settings than are documented

in the literature. Additionally, the cases described below only indicate the incidents which have been given the most attention in the periodicals. My research has shown that in addition to the cases noted below, cases of genital mutilation and torture against males also took place in the conflict settings of El Salvador, Greece and Chile during the 1980s.

The former Yugoslavia: Bosnia and Herzegovina and Croatia

The 1994 Commission on the Report of Experts, mandated by the United Nations Secretary General to gather evidence of grave breaches of the Geneva Conventions and other violations of international humanitarian law committed in the territory of the former Yugoslavia, documents cases of sexual assault against men held primarily in detention camps in Bosnia and Herzegovina.³⁰ According to R. Charli Carpenter, author of “Recognizing Gender-based Violence Against Civilian Men and Boys in Conflict Situations” acts of GBV against men primarily held in detention camps in Bosnia and Herzegovina included castration and incidents of sexual mutilation, such as receiving shocks to the scrotum.³¹ Prisoners were also forced to either have sex with each other or perform sex acts on the guards.³² A 1998 study of 55 civilians who received help from the Bosnian Women and Families Project show that 5.5 percent of the victims were male.³³

It has been estimated that more than 4,000 Croatian men were sexually abused by Serb militants throughout the conflict.³⁴ In analysis of the testimonies of 1648 males in Croatia from 1992 to 1994, the Medical Center for Human Rights (MCHR) states that 78 self reported that they were victims of sexual torture. Among the 55 males who sought help from MCHR during the time period, 24 were subject to genital beatings or shocking of the genitals, 11 reported being raped, 7 reported that they were forced to engage in sex acts and 13 stated that they were fully or partially castrated.³⁵

In an article entitled ‘Characteristics of Sexual Abuse of men During the War in the Republic of Croatia and Bosnia Herzegovina’, almost half of the male victims of sexual assault and abuse from the former Yugoslavia surveyed reported that they were beaten across the genitals with blunt objects such as sticks, rifle butt ends, boots and legs.³⁶

Sierra Leone

The Foundation for African Women Educationalists (FAWE),³⁷ Sierra Leone chapter, states men and boys were raped by male rebels throughout the conflict.³⁸ FAWE reports in the Human Rights Watch document “We’ll Kill You if Your Cry: Sexual Violence in the Sierra Leone Conflict” that throughout the armed conflict they treated 14 boys between the age of 9 and 15 who had been

raped, but suspects that there were more cases, due to underreporting of male rape for the reasons outlined earlier in this paper.³⁹ Unfortunately, HRW was unable to document crimes against men and boys in Sierra Leone, as FAWE did not want HRW to interview the young male victims for fear that the interviews would re-traumatize them.⁴⁰

However, HRW was able to document, albeit not in detail, two cases in which female rebels forced men to have sexual intercourse at gunpoint. One case involved a female rebel forcing a male civilian to have sex with her during the 1999 invasion of Freetown, and the other case involved a RUF training commander and male conscripts in Kono.⁴¹ HRW also reports the rape of a 14-year-old boy by a Bangladeshi UN peacekeeper near a transit camp located outside of Freetown.⁴² The perpetrator allegedly offered the boy twenty-five cents to keep quiet about the incident.⁴³

Sri Lanka

A survey of the records of 184 Sri Lankan Tamil men seeking asylum in London and receiving assistance from the Medical Foundation for the Care of Victims of Torture between January 1997 and December 1998 found that 38 men reported that they had been sexually abused during their detention.⁴⁴ Three of the 38 reported receiving electric shocks to their genitals, 26 reported that their genitals were assaulted and 4 men reported that sticks, usually rubbed with chilies, were pushed through their anuses.⁴⁵ Other men reported that they were forced to perform fellatio on male soldiers.⁴⁶

Many of the Tamil victims of sexual abuse in Sri Lanka indicate that the abuse started with forced nudity associated with sexual threats and mocking, in an attempt to induce humiliation.⁴⁷

What is currently being done to help male victims of sexual violence?

Virtually nothing in the literature on sexual violence and GBV outlines what intervention and assistance programs specifically target male victims of sexual violence. While the new trend in the GBV community has been to involve males in preventing incidents of violence against women, the same organizations have not addressed the specific needs of male victims. An analysis of 4,076 NGOs conducting work on sexual violence and assault during wartime shows that only 3 % of the organizations specifically mention the experience of male victims in their programming or literature, while roughly 25 % of the groups deny male on male sexual violence as a problem.⁴⁸ According to Sivakumaran, “one reason why male/male rape has not attracted any significant attention, especially at the international level, is that there are very few organizations that advocate or lobby on the issue at that level.”⁴⁹

Oosterhoff et. al. on field visits to Croatia found evidence of non-governmental organizations, which while not focusing exclusively on providing aid and assistance to male sexual assault victims, treated male victims of sexual abuse and torture.⁵⁰ Since 1995, the Medical Center for Human Rights (MCHR) a Croatian NGO providing medical and psychosocial care to refugees and internally displaced people, has run an outreach and treatment program for male survivors of sexual torture.⁵¹ The outreach therapy group is led by a former inmate of a detention camp.⁵²

Both the creation of the International Criminal Tribunal for Rwanda (ICTR) as well as the International Criminal Tribunal for Yugoslavia (ICTY) have helped to encourage male victims of sexual violence and rape to come forward and seek restitution by putting forth gender neutral definitions for rape and sexual violence. The creation of both statutes deemed the crime of rape a crime against humanity for the first time. Although the definitions of rape and sexual violence differ in each statute, both statutes protect the rights of male victims and leave room for them to come forward.⁵³ The ICTR statute definition of rape and sexual violence is quite broad, using the pronoun “person” when defining rape and sexual assault, and not defining the act solely to penetration, also allowing victims of mutilation, castration or other sexual torture to seek redress. The ICTY statute, while only focusing on acts of penetration, indicates that rape may involve the penetration of the vagina, anus or mouth, by a vagina, anus or another object, still allowing male rape to fit into the framework.

What should be done in the future to help male victims of sexual based violence?

Based upon an analysis of some of the limited literature available, I have proposed the following specific suggestions for actors involved in GBV programming and prevention work to take into account. Such recommendations are intended to be implemented in order to fill current gaps in programming and research on male victims of gender-based violence:

- *Scholars, think tanks and NGOs need to address the issue of gender-based violence against men in conflict settings and to obtain further baseline data on trends including location, frequency and specific type of sexual violence against males.*

The issue of male victims cannot be mentioned only briefly in passing. Although the World Health Organization, the International Committee of the Red Cross and various other NGOs have acknowledged that sexual violence against boys and men may occur in conflict settings, the references and descriptions provided have been brief and part of much larger scale reports detailing

mostly acts of violence against women (i.e. the title of the ICRC work briefly addressing male violence is entitled “The Impact of Armed Conflict on Women”).⁵⁴

NGOs already conducting large-scale works on female gender-based violence in conflict settings such as Human Rights Watch and RHRC need to collect further data on how, where and at what level men are being sexually abused. It is not acceptable to say, like Jeanne Ward does in her work, that because women are the primary targets of GBV, and little is known about male victims, such victims will not be addressed in scholarly analyses. NGOs currently conducting work on GBV issues in conflict settings need to become familiar with the current literature on male sexual violence that is available and build upon lessons learned from past experiences in conducting research on violence against women to conduct similar studies to determine trends regarding violence against men.

NGOs, local activists and national and local governments should encourage respected GBV scholars already present in their networks to conduct further analysis on the trends of male sexual violence and torture and publish their findings, making them available to the public. The mass publication of such documents will highlight to the public the existence of sexual violence committed against men, and may help reduce the stigma society places on male victims. Perhaps if survivors are able to see and read that male sexual violence and torture in conflict settings is an unfortunately frequent occurrence throughout the world, their shame may begin to dissipate and they may begin to be able to cope with the incident, perhaps being able to eventually report it to authorities.

NGOs should also press local and national media to give further coverage to the issue of male victims in conflict settings, so again the public could be made aware of such incidents. Such awareness which will in turn help to reduce the taboo surrounding male sexual violence. Increased media coverage of the issue will be beneficial in alerting policy makers to the extent of the problem and may serve as a useful tool in encouraging high ranking officials and local community members alike to talk about collective ways to prevent and respond to such violence.

- *NGOs should incorporate programs to meet the needs of male victims in parallel/tandem with already existing programs targeting females.*

While I have emphasized the lack of attention paid to male victims, a simple Internet search on GBV intervention and research programs targeting females in any of the regions mentioned in this paper, will turn out a multitude of results.⁵⁵ According to the WHO in its report “Reproductive Health During Conflict and Displacement” the medical, legal and psychosocial responses to male victims of sexual violence are essentially the same as for female victims.⁵⁶ Thus, a logical step for

NGOs conducting on the work ground would be to incorporate intervention and treatment programs for male victims into already existing programs targeting women and girls in conflict zones.

Although the process may be slow at first, due to difficulties in changing preconceived notions regarding males and GBV, the process needs to be started.

Education regarding sexual identity, sexuality, and male sexual violence can be integrated into existing programs targeting female victims. Where health workers and counselors are specifically trained on how to identify and treat women and girls who come forward with GBV related issues (see next suggestion), an additional module regarding the special circumstances surrounding incidents of male sexual abuse can be included. The goal of such integration will ensure that male and female victims receive *equal* attention and both sexes have services provided; the suggestion does not imply to include only one service in an existing female targeted program simply to say that an organization is addressing the needs of males. After a careful analysis is made regarding the types of education and services needing to be offered to males, such services should be fully integrated and incorporated into existing programming wherever possible, creating comprehensive GBV programming targeting the needs of everyone, rather than just one vulnerable group.

- *NGO programming should begin to training first-line individuals and responders (health workers and investigators) on issues of male sexual assault, violence and torture*

Medical professionals and police investigators are generally the first point of contact a male victim of sexual violence may encounter. According to Carlson, many physicians and refugee workers are unaware that there are forms of male sexual assault other than anal rape, and are not trained to recognize neither the physical nor psychological effects of such violence.⁵⁷ A therapist working at the Center for Psychotrauma at the University of Rijeka in Croatia stated that “she did not believe that men could be raped until she saw a man brought in naked bleeding from the anus.”⁵⁸ Additionally, investigators who are untrained and unfamiliar with male GBV may discourage a victim from telling his story through the use of harsh language and visible disbelief of the victim’s story.⁵⁹

In order to ensure that male victims receive the proper medical and psychosocial care that they need, health workers and front line officials need to receive training on how to identify male victims. Front-line workers need to be aware of the physical and psychosocial symptoms of GBV to look for in vulnerable male population such as former prisoners emerging from conflict. If males in a conflict setting know that such services are available to them, and providers are well educated on

how to provide non-judgmental treatment, again perhaps more victims will come forward to not only get the care that they receive, but to report the incidents and alert the rest of the world to this horrific problem. As stated above, such first line training of officials can be integrated into existing training programs educating health workers and investigators on issues surrounding treatment and prevention of GBV against women.

Conclusion

Through a careful analysis of scholarly literature, it becomes obvious that women are not the only victims of sexual violence and rape in conflict settings. However, the lay person unfamiliar with such literature would not know that this was the case due to the lack of attention paid to male victims of sexual violence by NGOs and research scholars. Sexual violence and rape have indeed been used as weapon of war against males and females alike. Male soldiers and those in positions of authority not only anally rape and sodomize civilians and detainees, but inflict harm upon their genitals through acts of sexual torture such as mutilation, injury and electric shock. In an attempt to show authority and power, and humiliate and emasculate the victim to ensure they will not be able to fight back, perpetrators inflict great physical and psychological harm on male victims. Such incidents have been documented around the world, in conflict zones such as Croatia, Bosnia and Herzegovina, Sierra Leone, Greece, Chile, El Salvador and Sri Lanka; however they are probably occurring in far more places than documented due to the phenomenon of underreporting of male rape and sexual violence.

Until this point, women victims have been the focus of GBV research and intervention programs. This is due in part to the lack of available data regarding male victims of sexual violence, arising from the underreporting of such incidents. The international community, including NGOs working on the ground initiating GBV intervention programming, governments and researchers need to conduct further research to ascertain additional data on the frequency of incidents of sexual violence, torture and rape against males. Once such research is obtained NGOs can use the data to create interventions to address the specific needs of male victims and prevent future violence. Such interventions can be integrated into currently existing programs targeting female victims of GBV.

Gender-based violence is not an all or nothing phenomenon; it is not solely women who are the victims. As work on the ground both to prevent and respond to GBV in conflict zones expands, it is hoped that future GBV programming will address the needs of male victims who up until now have been suffering in silence.

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¹¹ "Legislation of Interpol members on sexual offenses against children", 24 Oct. 2006, Interpol, 23 April 2007 <<http://www.interpol.int/Public/Children/SexualAbuse/NationalLaws/Default.asp>>.

¹² Oosterhoff. Zwanikken and Ketting 68.

¹³ M. Peel, A Mahatani, G. Hinshelwood and D Forrest "The sexual abuse of men in detention in Sri Lanka", *Lancet* 355 (July 2000):2067-2068, Science Direct, Gelman Library, George Washington University, Washington, DC 23 April 2007 <<http://www.sciencedirect.com>>.

¹⁴ Sandesh Sivakumaran, "Male/Male Rape and the Taint of Homosexuality" *Human Rights Quarterly* 27 (2005): 1275, Project MUSE, Johns Hopkins University, Gelman Library, George Washington University, Washington, DC 23 April 2007 <<http://muse.jhu.edu/journals/hrq/>>.

¹⁵ Ward 4.

¹⁶ Inter-Agency Standing Committee 8.

¹⁷ Oosterhoff, Zwanikken and Ketting 69.

¹⁸ Ibid.

¹⁹ Ibid.

²⁰ Hilmi M. Zawati "Impunity or immunity: Wartime male rape and sexual torture as a crime against humanity" *Torture* 17:1 (2007): 33, 23 April 2007 <http://www.irct.org/Admin/Public/DWSDownload.aspx?File=%2FFiles%2FFiler%2FTortureJournal%2F17_1_2007%2Fimpunity_or_immunity.pdf>.

²¹ Eric Steiner Carlson, "The Hidden Prevalence of Male Sexual Assault During War: Observations on Blunt Trauma to the Male Genitals" *British Journal of Criminology* 46 (2006):19 Proquest Research Library, Gelman Library, George Washington University, Washington, DC 23 April 2007 <http://sfx.wrlc.org/gw?sid=sfx:e_collection&issn=0007-0955&pid=serviceType=getFullTxt>.

²² Ibid.

²³ DelZotto and Jones 3.

²⁴ Ibid.

²⁵ Zawati 33-34.

²⁶ Oosterhoff, Zwanikken and Ketting 71.

²⁷ Ibid; DelZotto and Jones 3.

²⁸ Ibid.

²⁹ Ibid.

³⁰ Carpenter 94; *Final Report on the Commission Of Expert: Established Pursuant to Security Council Resolution 780 (1992)*, 23 April 2007 <<http://www.his.com/~twarrick/commxyu1.htm>>.

³¹ Carpenter 94.

³² Ibid.

³³ Oosterhoff, Zwanikken and Ketting 69.

³⁴ Zawati 34.

³⁵ Oosterhoff, Zwanikken and Ketting 73.

³⁶ After much searching I was unable to find this actual article, as it originates from a human rights center based in Zagreb, Croatia. I used the information referenced in the following article: Eric Steiner Carlson, "The Hidden Prevalence of Male Sexual Assault During War: Observations on Blunt Trauma to the Male Genitals" *British Journal of Criminology* 46 (2006):19.

³⁷ Fawe is an NGO with 32 National Chapters with the goal of promoting access to education for girls and ensuring that girls excel in the educational system. www.fawe.org.

³⁸ Human Rights Watch "We'll Kill You If You Cry: Sexual Violence in the Sierra Leone Conflict" (New York: Human Rights Watch, January 2002): 42 23 April 2007 <<http://hrw.org/reports/2003/sierraleone/>>.

³⁹ Ibid.

⁴⁰ Ibid.

⁴¹ Human Rights Watch 49.

⁴² Ibid.

⁴³ Ibid.

⁴⁴ M. Peel, A Mahatani, G. Hinshelwood and D Forrest 2067.

⁴⁵ Ibid.

⁴⁶ Ibid.

⁴⁷ Ibid.

⁴⁸ DelZotto and Jones 8.

⁴⁹ Sivakumaran 1280.

⁵⁰ Oosterhoff, Zwanikken and Ketting 72-74.

⁵¹ Ibid.

⁵² Ibid.

⁵³ Chamber I of the ICTR statute defines rape as “a physical invasion of a sexual nature, committed on a person under circumstances which are coercive” and defines sexual violence as “any act of [a] sexual nature which is committed on a person under circumstances which are coercive.” The ICTY statute defines rape as “a forcible act of the penetration of the vagina, the anus or mouth by the penis, or of the vagina or anus by other object”. Zawati 30-34.

⁵⁴ DelZotto and Jones 7.

⁵⁵ A google web search of the term “GBV prevention Sri Lanka” turned up 905 results. Although I did not analyze each, I presume that only a handful addressed issues relating to male victims. This is a quantitative project which interests me, which I may pursue at a later date.

⁵⁶ DelZotto and Jones 13.

⁵⁷ Carlson “Sexual Assault of Men in War” 129.

⁵⁸ Oosterhoff, Zwanikken and Ketting 74.

⁵⁹ Ibid.