



**Submission to the report of the Special Rapporteur on violence against women and girls to the 62nd session of the United Nations Human Rights Council on**

# **Violence against mothers**

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**Country: South Sudan**

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## 1. Methodology and contributing organisations

This submission is based on primary data and desk-based research collected by Rights for Peace and its partners. The bulk of this report stems from qualitative insights from interviews with mothers of children born of conflict-related sexual violence (CRSV), including those featured in a short [video](#),<sup>1</sup> and our findings from Focus Group Discussions that led to the *South Sudan Study on the Status of and Opportunities for Reparation for Survivors of Conflict-related Sexual Violence* (2021).<sup>2</sup> Focus Group Discussions, a small pilot study and survivor testimonies were also gathered in South Sudan during 2025.<sup>3</sup> A related submission was made to the Committee on the Rights of the Child in relation to violence against Children born of CRSV in December 2025.<sup>4</sup>

**Rights for Peace** and the **Survivors Network South Sudan (SUNS)** bring complementary expertise in documenting conflict-related abuses, supporting survivors of sexual violence, and analysing the protection risks faced by children and their caregivers in conflict settings. Rights for Peace has experience in conducting specialised research on CRSV and its intergenerational impact, as well as deep technical and contextual knowledge on gender justice, survivor-centred approaches and accountability mechanisms. SUNS, a network of 3188 survivors of CRSV, provides direct insight from survivors and, as frontline defenders, seeks to ensure that their lived realities are represented in policy discussions.<sup>5</sup>

## 2. Introduction

This submission is presented to the Special Rapporteur on violence against women and girls, as an input to the 62nd session of the United Nations Human Rights Council on Violence against mothers. This submission explains the forms and manifestations of violence experienced by women and girls because of their status as mothers, particularly **mothers of children born of CRSV in South Sudan**.

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<sup>1</sup> Rights for Peace, 'South Sudan: Our Invisible Children' (*YouTube*, 11 July 2023) <[www.youtube.com/watch?v=zhcd7ShpyYk](https://www.youtube.com/watch?v=zhcd7ShpyYk)> accessed 1 December 2025.

<sup>2</sup> Rights for Peace at al., 'South Sudan Study on the Status of and Opportunities for Reparation for Survivors of Conflict Related Sexual Violence' (2021) <[www.rightsforpeace.org/reparations-southsudan](https://www.rightsforpeace.org/reparations-southsudan)> accessed 1 December 2025.

<sup>3</sup> Rights for Peace, 'Children born of CRSV are direct victims and survivors in South Sudan' (August 19 2025) <[www.rightsforpeace.org/post/survivors-children-born-of-crsv-are-direct-victims-south-sudan](https://www.rightsforpeace.org/post/survivors-children-born-of-crsv-are-direct-victims-south-sudan)> accessed 1 December 2025.

<sup>4</sup> Rights for Peace, 'Alternative report to the Committee on the Rights of the Child On issues facing children born of conflict-related sexual violence (CRSV) in the context of rights defined under the CRC and OPAC' (1 December 2025), [link](#)

<sup>5</sup> Survivors Network South Sudan (SUNS) web page, <[www.rightsforpeace.org/suns](https://www.rightsforpeace.org/suns)> accessed 1 December 2025. SUNS Facebook page: <https://www.facebook.com/profile.php?id=61573330073865>

Since 2013, just two years after it gained independence, South Sudan has been embroiled in a civil war which has affected countless victims and perpetuated harmful cycles of CRSV. Women and girls have been disproportionately affected by violence. A study commissioned by UNICEF in 2019 found that 65% of women and girls in South Sudan have experienced physical and sexual violence in their lifetime.<sup>6</sup>

In particular, mothers of children born of CRSV face ostracism, discrimination and multiple forms of violence because of the stigma associated with rape. As a result, mothers often face “trauma and depression while struggling to meet basic needs and pay school costs”.<sup>7</sup>

Psychological, economic, physical and social forms of discrimination intersect, all compounding one another to worsen the impact of violence on these mothers.

### **3. Current policies and practices relating to mothers in South Sudan**

In April 2015, South Sudan acceded to the 1979 UN Convention on the Elimination of All Forms of Discrimination against Women (CEDAW). Article 11 of CEDAW provides for protections of mothers, particularly in relation to employment.<sup>8</sup> Article 12 calls on state parties to provide “women with appropriate services in connection with pregnancy ... as well as adequate nutrition during pregnancy and lactation”.<sup>9</sup> However, many measures of CEDAW and other international treaties are not fully implemented in South Sudan “due to lack of political will and inadequate budgetary allocations” for the protection of mothers.<sup>10</sup> In addition, South Sudan has ratified the 1981 African Charter on Human and Peoples’ Rights, but not the 2003 Protocol to the African Charter on Human and Peoples’ Rights on the Rights of Women in Africa (the Maputo Protocol). Therefore, more can be done by the government of South Sudan to protect mothers against violence through the signing of international treaties.

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<sup>6</sup> UN Women, ‘Sexual and Gender-Based Violence (SGBV) in South Sudan’ (2022) (2) <[https://africa.unwomen.org/sites/default/files/2025-01/sectoral\\_brief\\_on\\_sexual\\_and\\_gender-based\\_violence\\_in\\_south\\_sudan\\_0.pdf](https://africa.unwomen.org/sites/default/files/2025-01/sectoral_brief_on_sexual_and_gender-based_violence_in_south_sudan_0.pdf)> accessed 2 February 2026.

<sup>7</sup> Human Rights Council, ‘Report of the Commission on Human Rights in South Sudan’ (21 February 2025) [71] A/HRC/58/27 <<https://docs.un.org/en/A/HRC/58/27>> accessed 30 January 2025.

<sup>8</sup> Article 11, Convention on the Elimination of All Forms of Discrimination Against Women (adopted 18 December 1979, entered into force 3 September 1981) 1249 UNTS 13.

<sup>9</sup> Article 12, Convention on the Elimination of All Forms of Discrimination Against Women (adopted 18 December 1979, entered into force 3 September 1981) 1249 UNTS 13.

<sup>10</sup> Commission on Human Rights in South Sudan, ‘Plundering a Nation: how rampant corruption unleashed a human rights crisis in South Sudan’ (16 September 2025) [242] <[www.ohchr.org/sites/default/files/documents/hrbodies/hrcouncil/cohrsouthsudan/a-hrc-60-crp-5.pdf](https://www.ohchr.org/sites/default/files/documents/hrbodies/hrcouncil/cohrsouthsudan/a-hrc-60-crp-5.pdf)> accessed 28 January 2026.

Domestically, the 2008 Penal Code Act of South Sudan purports to protect mothers against rape. Article 247 provides a definition of rape which excludes marital rape, thereby posing a threat to mothers through domestic sexual violence. In the past five years, there have been efforts to develop an anti-GBV bill in South Sudan, however no legislation has yet emerged. This law is an opportunity to make tangible protections for women, particularly mothers, against violence.

## **4. Manifestations, causes and perpetrators of violence**

### 4.1 What are some of the most prominent forms of violence and extreme discrimination to which women are subjected because of their status as mothers?

South Sudan has the highest maternal mortality ratio (MMR) in the world, with 1223 maternal deaths per 100,000 live births.<sup>11</sup> Mothers in South Sudan face preventable deaths due to a lack of available medical care while they are pregnant or lactating. 27.5% of women of reproductive age in South Sudan who die, die because of maternal causes.<sup>12</sup> Many of these deaths are preventable with adequate access to healthcare and a reduction in stigma. In particular, mothers who have children born of CRSV, or who are single, displaced, stateless or adolescent, face additional challenges in accessing healthcare. They often choose not to access critical ante-natal and birth services due to social discrimination. For example, “one survivor expressed that when she became pregnant, she feared going to the health services due to the risk of being blamed by the community, who would say ‘she looked for it’”.<sup>13</sup>

Women can be targeted as victims of rape and sexual violence due to their status as mothers. Perpetrators intend, and force, family members to witness the rape of “their wives, sister or mother” in order to amplify the effect of sexual violence: beyond an act which violates a woman, to one which is the cause of fraying families and communities.<sup>14</sup>

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<sup>11</sup> World Health Organisation, ‘Trends in maternal mortality 2000 to 2020: estimates by WHO, UNICEF, UNFPA, World Bank Group and UNDESA/Population Division’ (2023) 4  
<<https://iris.who.int/server/api/core/bitstreams/c3957b94-cdd5-47d7-85f8-6202be229f8e/content>> accessed 4 February 2026.

<sup>12</sup> World Health Organisation, ‘Trends in maternal mortality 2000 to 2020: estimates by WHO, UNICEF, UNFPA, World Bank Group and UNDESA/Population Division’ (2023) 35  
<<https://iris.who.int/server/api/core/bitstreams/c3957b94-cdd5-47d7-85f8-6202be229f8e/content>> accessed 4 February 2026.

<sup>13</sup> Rights for Peace, ‘South Sudan Study on the Status of and Opportunities for Reparations for Survivors of Conflict-Related Sexual Violence’ (March 2022) 15.

<sup>14</sup> Human Rights Council, ‘Conflict-related sexual violence against women and girls in South Sudan’ (21 March 2022) [37] A/HRC/49/CRP.4  
<[www.securitycouncilreport.org/atf/cf/%7B65BFCF9B-6D27-4E9C-8CD3-CF6E4FF96FF9%7D/A\\_HRC\\_49\\_CRP\\_4.p](https://www.securitycouncilreport.org/atf/cf/%7B65BFCF9B-6D27-4E9C-8CD3-CF6E4FF96FF9%7D/A_HRC_49_CRP_4.pdf)  
[df](https://www.securitycouncilreport.org/atf/cf/%7B65BFCF9B-6D27-4E9C-8CD3-CF6E4FF96FF9%7D/A_HRC_49_CRP_4.pdf)> accessed 30 January 2025.

Mothers are targeted physically, verbally or through discrimination because they have had a child 'of the enemy'. They are often blamed as the cause of familial or community tensions in relation to CRSV, despite the act being wrongfully committed against them.

*Stigma and victim-blaming are common, with survivors stating that people in the community distance themselves from survivors and think they “did it willingly” and “are responsible for the rape incident”.*<sup>15</sup>

Pregnant and lactating women are also subjected to acts of CRSV. One survivor said that “during all my pregnancy period they continued to rape me until the day of my delivery”.<sup>16</sup> Away from her family, she was forced to marry a captain in the military and raise her child in a “difficult situation” before fleeing to seek refuge in Kakuma Refugee camp, where she was reunited with her relatives, including her mother.<sup>17</sup>

#### 4.2 What is the linkage between violence against mothers and violence against their children, including girls – and vice versa?

In extreme cases, violence against children born of CRSV constitutes a direct form of violence against mothers themselves. Survivors reported incidents in which intimate partners responded to the birth of a child conceived through rape with lethal violence against the infant, acting with complete impunity. Domestic violence against mothers was also implicitly raised in this context. Such acts inflict profound psychological harm on mothers and exemplify the indivisibility of violence against women and violence against children.

One participating survivor described: “A neighbour was raped and had a baby. Her husband, a soldier, returned and took the lactating child and killed the baby. He is a free man walking around in Bentiu.”<sup>18</sup> Another recounted: “There is another man that almost did the same thing, he tried to throw the baby in the latrine, but was arrested and the child survived. The police was called on time. That was before the crisis. He wanted to dump it in a latrine.”<sup>19</sup>

Mothers of children born of CRSV face additional violence and discrimination when their children do too. As survivors of sexual violence, these “mothers often struggle with the dual

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<sup>15</sup> Focus Group Discussion with survivors in South Sudan (2021).

<sup>16</sup> Survivor testimonial, Juba (4 February 2026).

<sup>17</sup> Survivor testimonial, Juba (4 February 2026).

<sup>18</sup> Focus Group Discussion with survivors in Bentiu, South Sudan (2021).

<sup>19</sup> Focus Group Discussion with survivors in Bentiu, South Sudan (2021).

burden of trauma and the stigma projected onto their children”.<sup>20</sup> When children born of CRSV are rejected, often mothers are rejected with them. For example, a survivor living in a refugee camp in Northern Uganda explained to Rights for Peace that most of those left in the camp in Adjumani are women and children. She highlighted that CRSV survivors and their children are often not able to go back to South Sudan because of circumstances like hers:

*“My husband and first children all migrated back to Juba, but I was left in the camp with my child because of this same issue.”<sup>21</sup>*

This “same issue” refers to a mother’s child born of CRSV being rejected by her spouse. When women give birth to a child born of CRSV, they are often either ostracised by their family and community or blamed for what happened, causing violence within the family. Husbands choose to abandon their wives rather than accept these children, leaving mothers in camps, while sometimes taking the children who were born through their marriage away. This has numerous harmful effects on mothers: displacement leads to a risk of re-victimisation, economic destitution and a vulnerability to further violence.

## **5. Groups of women and girls particularly affected**

### **5.1 Which groups of mothers are particularly affected by extreme forms of discrimination and violence, and what are the principal challenges and forms of violence they face?**

In South Sudan, mothers of children born of CRSV are affected by multiple extreme forms of discrimination and violence. The intersection of deep physical violation and psychological trauma associated with CRSV, combined with long-term stigma and discrimination against mothers who have children born of CRSV, means that “survivors are living in fear” of further violence against them as mothers.<sup>22</sup>

#### **Physical discrimination and violence**

Mothers of children born of CRSV report suffering domestic violence from their spouses when they find out that they are pregnant or have given birth to a child which is not theirs.<sup>23</sup> In our

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<sup>20</sup> Laetizia Pietrini, ‘Children born of CRSV are direct victims and survivors in South Sudan’ (19 August 2025) <[www.rightsforpeace.org/post/survivors-children-born-of-crsv-are-direct-victims-south-sudan](https://www.rightsforpeace.org/post/survivors-children-born-of-crsv-are-direct-victims-south-sudan)> accessed 2 February 2026.

<sup>21</sup> Survivor testimonial, Juba (18 July 2025).

<sup>22</sup> National Survivors Network South Sudan, ‘Statement’ (14 June 2022).

<sup>23</sup> Focus Group Discussion with survivors in South Sudan (2021).

study, one survivor said that her husband “treated me like a dog as he no longer cares for me”.<sup>24</sup> Physical violence afflicts these mothers specifically because they are mothers of children born of CRSV.

One participant recounted that after her sister was raped and became pregnant, her father said that if she gave birth to the child, he would kill it. This forced the mother to flee to Kenana in White Nile State and take the child to the Red Cross to be raised. The family viewed the child born of rape as a “child of the enemy” and therefore the mother faced physical displacement and threats of violence against herself and her child.<sup>25</sup> This physical violence all faces the mother because she is blamed by her family and community for the birth of her child born of CRSV.

### **Psychological discrimination and violence**

Mothers of children born of CRSV often struggle psychologically because their husbands and families “do not accept the children and subject them to highly damaging discrimination and stigmatisation”.<sup>26</sup> At the same time as they are dealing with this discrimination, they are confronted with the mental trauma of rape and being blamed. There is a generalised lack of support for mothers dealing with this stigma. In particular, their child often asks “Who is my father?” Mothers report that these questions, as the child grows up, are a cause of psychological distress, along with bullying from community members as the story may become known. “School registration and parent meetings further force public disclosure of rape.”<sup>27</sup> This causes mothers to face psychological discrimination both from within – their own child – and in the community. It can cause mothers to blame themselves for the stigma and exclusion from family protection, social conventions and services that they and their child face, compounding mental anguish and feelings of guilt.

The “profound stigma and discrimination” which mothers of children born of CRSV face “deeply affects their sense of self-worth and forces many into conditions of heightened precarity”.<sup>28</sup> Constantly confronted with reminders of being sexually violated, mothers of children born of CRSV have mentioned thinking of or attempting suicide, simultaneously with infanticide, in response to the challenges they and their child face:

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<sup>24</sup> Focus Group Discussion with survivors in South Sudan (2021).

<sup>25</sup> Focus Group Discussion with survivors in Wedweil Refugee Settlement, Bhar-el-Ghazal, South Sudan (20 November 2025).

<sup>26</sup> Rights for Peace, ‘South Sudan Study on the Status of and Opportunities for Reparations for Survivors of Conflict-Related Sexual Violence’ (March 2022) 15.

<sup>27</sup> Workshop with Survivors in Juba (18 July 2025).

<sup>28</sup> Human Rights Council, ‘Report of the Commission on Human Rights in South Sudan’ (21 February 2025) [62] A/HRC/58/27 <<https://docs.un.org/en/A/HRC/58/27>> accessed 30 January 2025.

*“At that time, I planned to bring my son and burn my house with my son and me together inside.”<sup>29</sup>*

## **Social discrimination and violence**

Mothers of children born of CRSV face extensive social discrimination, particularly in relation to healthcare and education. Mothers have reported “judgmental treatment from health workers aware of their **history**”: referring to the CRSV committed against them.<sup>30</sup> One survivor explained that:

*“They discriminate even at the health centre. When you are taking that child for treatment, they will ask where is the father of that child? They will tell the mother, you get out of here, you are a prostitute. If you want to get a birth certificate, they will ask for the father. They may not give you a birth certificate.”<sup>31</sup>*

In this way, “health services stigmatise mothers and are not holistic”.<sup>32</sup> Mothers, and their children, are deprived of access to key basic healthcare services due to discrimination against their status as mothers of children born of CRSV.

Beyond this, survivors of CRSV who are mothers face irrevocable social exclusion and ostracism. They are accused of being in the wrong, and causing difficult circumstances, by their communities. Being rejected and abandoned by their family due to the birth of a child born of rape has forced some mothers to “leave their residences to stay in other areas where they are not known, because of shame and stigma of what happened to them”.<sup>33</sup> This can not only cause physical violence to the mother, who is no longer protected by her family and community and instead becomes displaced and vulnerable, but also compounds existing economic and psychological hardship for the mother who is left alone without support.

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<sup>29</sup> Survivor testimonial, Juba (18 July 2025).

<sup>30</sup> Workshop with Survivors in Juba (18 July 2025).

<sup>31</sup> Survivor interview, Juba (30 November 2025).

<sup>32</sup> SUNS, ‘Statement on the Rights of Children born of CRSV, including in the Transitional Justice Process’ (20 July 2025).

<sup>33</sup> The Commission on Human Rights in South Sudan, ‘State of Impunity: the persistence of violence and human rights violations in South Sudan’ (3 April 2023) [268] A/HRC/52/CRP.3 <[www.ohchr.org/sites/default/files/documents/hrbodies/hrcouncil/sessions-regular/session52/A\\_HRC\\_52\\_CRP.3.pdf](http://www.ohchr.org/sites/default/files/documents/hrbodies/hrcouncil/sessions-regular/session52/A_HRC_52_CRP.3.pdf)> accessed 30 January 2025.



## Economic discrimination and violence

Survivor-mothers struggle with a lack of economic independence and freedom. They face economic violence within intimate relationships, including coercive control over resources and fear of retaliation if financial support is received. Women described avoiding cash-based assistance due to the risk that husbands or male relatives would appropriate the funds, reinforcing dependency and exposure to further abuse.

As a result of being abandoned because of their status as mothers of children born of CRSV, they often face difficulty paying school fees. Mothers mentioned that they “suffered famine”,<sup>34</sup> and struggled to fulfil basic needs due to a lack of income. Often abandoned and isolated due to social stigma excluding them from their families, they may have no means of generating an income or paying school fees. The coordinator of SUNS explained that childcare responsibilities reduce mothers’ ability to get a job, even if they are educated to degree or diploma level.<sup>35</sup> Additionally, it forces mothers to perform survival-related tasks such as collecting water or firewood without protection, increasing mothers’ risk of re-experiencing CRSV. For example, a mother of four children was raped by a number of armed military men while walking on a six-hour round trip to collect firewood with three female friends.<sup>36</sup>

In addition, young unmarried mothers fear marriage, because while new husbands can bring economic stability, they will often reject a child born of CRSV.<sup>37</sup> This leaves mothers in a difficult position: face economic hardship with their child, denying it key rights such as education, or be financially stable but face potential additional stigma, intimate partner abuse or violence or family inflicted abuse or violence as a result of what is seen as “damaged” status.

## 6. Targeted policies

### 6.1 How do social-protection systems (e.g. cash transfers, family benefits, pensions) include or exclude mothers?

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<sup>34</sup> Rights for Peace, ‘South Sudan Study on the Status of and Opportunities for Reparations for Survivors of Conflict-Related Sexual Violence’ (March 2022) 17.

<sup>35</sup> SUNS Coordinator testimonial (February 2026)

<sup>36</sup> Human Rights Council, ‘Conflict-related sexual violence against women and girls in South Sudan’ (21 March 2022) [47] A/HRC/49/CRP.4

<[www.securitycouncilreport.org/atf/cf/%7B65BF9B-6D27-4E9C-8CD3-CF6E4FF96FF9%7D/A\\_HRC\\_49\\_CRP\\_4.pdf](https://www.securitycouncilreport.org/atf/cf/%7B65BF9B-6D27-4E9C-8CD3-CF6E4FF96FF9%7D/A_HRC_49_CRP_4.pdf)> accessed 30 January 2025.

<sup>37</sup> Workshop with Survivors in Juba (18 July 2025).

In South Sudan, the form for notification of births, designed by the Ministry of Health, requires the name of the father, as well as his State, County, Payam and Boma, to be entered on the form. This excludes mothers born of children of CRSV because they are often unaware of who their child's father was. Requiring mothers to have to write down the identity of the man who raped her not only causes psychological trauma but also excludes her child's birth from being registered, which only serves to perpetuate discrimination against the mother and her child. Out of ten mothers who responded to a SUNS survey, only half of the children born of CRSV had had their births officially registered.<sup>38</sup> This leads to subsequent administrative challenges for both the mother and child, such as difficulties in registering "their legal names, or their rights to citizenship, inheritance, and other entitlements".<sup>39</sup>

## 7. Conclusion

Mothers of children born of CRSV in South Sudan face extreme and sustained patterns of discrimination and violence due to their status as mothers, intersecting with the fact that they are survivors of rape. Current policies in South Sudan are insufficient to protect mothers against these practices; instead, tradition and community stigma reinforces the challenges which these mothers face. These mothers should be provided with psychosocial support and access to mental and physical healthcare services in order to both work through the trauma of their rape and be supported in motherhood. Since they are often ostracised or abandoned by their families and communities, additional economic support should be provided in order to ensure that they don't face further physical violence while completing tasks related to their survival outside the home. It is important that long-term work is done to ensure that communities learn to not blame these women for the rape which they have suffered, but instead support and protect them in their motherhood.

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<sup>38</sup> SUNS members have 1000 children born of CRSV reported amongst their members in just 6 locations to date.

<sup>39</sup> The Commission on Human Rights in South Sudan, 'State of Impunity: the persistence of violence and human rights violations in South Sudan' (3 April 2023) [246] A/HRC/52/CRP.3  
<[www.ohchr.org/sites/default/files/documents/hrbodies/hrcouncil/sessions-regular/session52/A\\_HRC\\_52\\_CRP.3.pdf](http://www.ohchr.org/sites/default/files/documents/hrbodies/hrcouncil/sessions-regular/session52/A_HRC_52_CRP.3.pdf)>  
accessed 30 January 2025.