



**SOMALI HUMAN RIGHTS  
ASSOCIATION (SOHRA)**



## Call for Input to inform the High Commissioner's report to the Human Rights Council on the impact of casualty recording

### Submission by the Somali Human Rights Association (SOHRA) and Every Casualty Counts

14 February 2023

The Somali Human Rights Association (SOHRA) is an independent, non-governmental organization founded in 2002 and based in Mogadishu, Somalia. SOHRA aims to monitor, investigate, and document the human rights and humanitarian situation in Somalia. SOHRA works closely with international organizations such as UNHCR and OCHA to document civilian casualties (both fatalities and injuries) in the hopes of ending impunity for human rights violations in the country.

For further information please contact [sohramonitor@gmail.com](mailto:sohramonitor@gmail.com).

#### Methods

Since 2002 SOHRA has been documenting human rights violations, including fatalities, in Somalia. We gather information from primary sources including eyewitnesses, victims (where living) and victims' families. We also gather information through hospitals, news media and other secondary sources. This information is compiled in a confidential and secure database.

We record information in a standardised format, including details of the date, type of incident, name of victim, age, ethnicity/tribal affiliation, place of birth and current address, suspected perpetrator, weapons(s) used and actions taken in response to the incident. We also note any details concerning a victim's particular vulnerabilities. A copy of our data form is attached to this submission.

We are not aware of any structured state-led initiative to record casualties comprehensively in Somalia. Police forces record details of human rights violations where these are reported as crimes, but these records are not comprehensive as many fatalities are not reported. Another weakness of the state response to casualties of armed violence is the lack of financial, medical and psychosocial support for victims and their families.

#### Protection

SOHRA shares its casualty data with the UNHCR-led Protection Cluster for Somalia, to help inform protection responses. We have specific monitoring programmes in IDP settlements, funded by the



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Norwegian Refugee Council. We are able to use some of these funds to assist survivors of human rights violations who need medical treatment, which is not free of charge in Somalia.

When SOHRA's casualty data indicates increasing violence in a particular area, or increased risk to particular populations, we conduct public awareness raising and advocacy. SOHRA participates in radio and television talk shows to make communities aware of the dangers so they can take protective action.

### **Advocacy and accountability**

SOHRA regularly publishes analysis of its casualty data, and we make submissions to UN human rights monitoring bodies such as the UPR process and the [Committee Against Torture](#). In this way, our casualty records help ensure the Somali government is held to account for its (in)actions in upholding the right to life.

SOHRA also helps families [seek answers and accountability](#) for the killing of civilians by international forces operating in Somalia, including through drone strikes.

### **Recommendations**

Casualty records can provide important information on patterns of violence, as well as supporting individual demands for accountability and reparation. For these outcomes to be realised, it is essential that adequate resources are allocated to support victims and survivors. Access to medical, psychological and legal support must be prioritised and made available to all who need it.

**CONFIDENTIAL  
INTERVIEW FORM**

CASE REFERENCE NUMBER (For Internal Use Only)

\* - Indicates Mandatory Fields

<b>MONITORING INFORMATION SUBMITTED BY:</b>			
<b>1</b>	REPORT DATE:(dd-mmm-yyyy)* .....	MONITORING ORGANIZATION CODE: (no names please)* .....	MONITOR CODE: (no names please)* .....

<b>SOURCE OF INFORMATION / INFORMANT (PERSON GIVING INFORMATION):</b>					
<b>2</b>	SOURCE'S RELATION TO EVENT: (e.g. victim, witness) (Check all that apply)	<input type="checkbox"/> Victim – Primary	<input type="checkbox"/> Witness- Primary	<input type="checkbox"/> Family Member- Secondary	<input type="checkbox"/> Other Secondary
Explain: .....					
CONSENT OF VICTIM/INFORMANT TO RECORD THIS INCIDENT WAS OBTAINED AND CONFIDENTIALITY EXPLAINED:				<input type="checkbox"/> Yes	<input type="checkbox"/> No

<b>INCIDENT INFORMATION:</b>			
<b>3</b>	START DATE: (dd-mmm-yyyy)* .....	END DATE: (dd-mmm-yyyy) .....	
<b>WHERE DID THE INCIDENT OCCUR?</b>			
REGION*:	DISTRICT:	PLACE NAME:	PLACE TYPE:

<b>INFORMATION ON VICTIM(S) OF VIOLATION/ABUSE:</b>										
#	FULL NAME*	AGE*	SEX* <sup>1</sup>	CIVIL STATUS <sup>2</sup>	OCCUPATION	VIOLATION CODE (Check from the list)				
						1*	2	3	4	5
<b>4</b>	1 .....	.....	--	--	.....	.....	.....	.....	.....	.....
<b>a</b>	2 .....	.....	--	--	.....	.....	.....	.....	.....	.....
	3 .....	.....	--	--	.....	.....	.....	.....	.....	.....
	4 .....	.....	--	--	.....	.....	.....	.....	.....	.....
	5 .....	.....	--	--	.....	.....	.....	.....	.....	.....
<sup>1</sup> - Use the following initials under Sex: [M]ale, [F]emale <sup>2</sup> - Use the following initials under Civil Status: [M]arried, [S]ingle, [D]ivorced, [W]idowed										

TOTAL NUMBER OF VICTIMS: .....	NATIONALITY: .....
<b>OTHER RELEVANT IDENTITY INFORMATION: *</b>	
<b>4</b>	<input type="checkbox"/> Internally Displaced (IDPs) <input type="checkbox"/> Migrant(s) (Non Somali National(s)) <input type="checkbox"/> Migrant (Somali national) LEGAL STATUS: (Check one) <input type="checkbox"/> Refugee(s)/Asylum Seeker(s) <input type="checkbox"/> Member of the community (Somali resident) <input type="checkbox"/> Returnee(s) <input type="checkbox"/> Orphan(s)
<b>b</b>	<input type="checkbox"/> Female Head of Household(s) <input type="checkbox"/> Unaccompanied/Separated Minor(s) <input type="checkbox"/> Minority Clan <input type="checkbox"/> Older Person(s) VULNERABLE GROUPS: (Check all that apply) <input type="checkbox"/> Pregnant/Nursing Woman <input type="checkbox"/> Person(s) with disability <input type="checkbox"/> Street Child(ren) <input type="checkbox"/> Widow <input type="checkbox"/> HIV/AIDS Person(s) <input type="checkbox"/> Ethnic Minority
	OTHERS: (Check all that apply) <input type="checkbox"/> Human Rights Defender(s) <input type="checkbox"/> Humanitarian Worker(s) <input type="checkbox"/> Journalist <input type="checkbox"/> Prisoner/detainees <input type="checkbox"/> Political Activist <input type="checkbox"/> Politician

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<b>TYPE OF HUMAN RIGHTS VIOLATION / ABUSE</b>		
<b>VIOLATIONS</b>		
<b>Description</b>		<b>Code</b>
<b>A</b>	<b>RIGHT TO LIFE</b>	
1	Killing/Manslaughter	<b>A1</b>
2	Execution	<b>A2</b>
<b>B</b>	<b>RIGHT TO LIBERTY AND SECURITY OF PERSON</b>	
1	Illegal Arrest and Detention	<b>B1</b>
2	Kidnapping/Abduction	<b>B2</b>
3	Disappearance	<b>B3</b>
4	Human Trafficking (for the purpose of exploitation such as forced labor, forced prostitution or organ removal)	<b>B4</b>
5	Forced Family Separation	<b>B5</b>
6	Recruitment and use of child soldiers into the Armed Forces or armed groups	<b>B6</b>
7	Excessive use of force (by the authorities or the police)	<b>B7</b>
<b>C</b>	<b>RIGHT TO PHYSICAL AND MENTAL INTEGRITY</b>	
1	Physical assault (attack not resulting in death)	<b>C1</b>
3	Torture	<b>C3</b>
4	Harassment	<b>C4</b>
5	Rape	<b>C5</b>
6	Attempted rape	<b>C6</b>
8	Child Abandonment (Right to care)	<b>C8</b>
9	Domestic Violence	<b>C9</b>
10	Female Genital Cutting (FGC)	<b>C10</b>
11	Forced marriage	<b>C11</b>
12	Sexual Harassment	<b>C12</b>
13	Sexual exploitation and abuse	<b>C13</b>
<b>D</b>	<b>RIGHT TO FREEDOM OF MOVEMENT AND RESIDENCE</b>	
1	Forced Displacement	<b>D1</b>
3	Forced Return	<b>D3</b>
4	Prevented Return	<b>D4</b>
<b>E</b>	<b>LABOR RIGHT</b>	
1	Child Labor	<b>E1</b>
2	Forced Labor	<b>E2</b>
<b>F</b>	<b>RIGHT TO ADEQUATE STANDARD OF LIVING</b>	
1	Exclusion from or lack of access to sanitation	<b>F1</b>
2	Attack On School(s) and Health Facility(ies)	<b>F2</b>
3	Exclusion from or lack of access to medical care/ health facilities	<b>F3</b>
4	Exclusion from or lack of access to education	<b>F4</b>
<b>G</b>	<b>HOUSING LAND AND PROPERTY RIGHT</b>	
1	Demolition of House/Intentional Fire on House/Shelter	<b>G1</b>
6	Eviction (Forced)	<b>G6</b>

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<b>INFORMATION ON ALLEGED PERPETRATOR(S):</b>				
#	FULL NAME*	AGE	SEX <small>1</small>	NATIONALITY
<b>5</b>	1 ..... .....	.....	..	.....
<b>a</b>	2 ..... .....	.....	..	.....
	3 ..... .....	.....	..	.....
	4 ..... .....	.....	..	.....
	5 ..... .....	.....	..	.....
<b>1</b> - Use the following initials under Sex: [M]ale, [F]emale				

<b>THE ALLEGED PERPETRATOR(S) IS/ARE ASSOCIATED WITH:*</b>	
<b>STATE ACTOR (CIVILIAN AND ARMED):</b> <small>(Check one)</small>	<input type="checkbox"/> Municipality/Mayor's Office <input type="checkbox"/> Somaliland Police <input type="checkbox"/> Somali National Police Force(SNP) <input type="checkbox"/> TFG Government <input type="checkbox"/> Governor's Office <input type="checkbox"/> Puntland Police <input type="checkbox"/> Somaliland civilian Authority <input type="checkbox"/> Puntland civilian Authority <input type="checkbox"/> TFG Military <input type="checkbox"/> Somaliland Military <input type="checkbox"/> Puntland Military <input type="checkbox"/> Clan militias associated with the Stat <input type="checkbox"/> Elders Councils/Religious leaders associated with the State
<b>INTERNATIONAL ACTORS:</b> <small>(Check one)</small>	<input type="checkbox"/> Ethiopian Army(ENDF) <input type="checkbox"/> AMISOM <input type="checkbox"/> Unknown
<b>NON-STATE ACTORS:</b> <small>(Check one)</small>	<input type="checkbox"/> Clan-Based Militias <input type="checkbox"/> Ahlul Sunna Wal-Jama'a <input type="checkbox"/> Al Shabab <input type="checkbox"/> Pirates <input type="checkbox"/> Smugglers <input type="checkbox"/> Unknown
<b>UNAFFILIATED PRIVATE PERSON:</b> <small>(Check one)</small>	<input type="checkbox"/> Family member <input type="checkbox"/> Elder <input type="checkbox"/> Religious Leader(s) Organization(s) <input type="checkbox"/> Local Organization <input type="checkbox"/> Landlord(s) <input type="checkbox"/> Employer <input type="checkbox"/> Child <input type="checkbox"/> FGC practitioner <input type="checkbox"/> IDP/Refugee <input type="checkbox"/> Unknown
<b>IDENTITY INFORMATION:</b> (provide as much detail as possible .e.g. any descriptive features such as title, rank, clothing, uniforms, languages etc.) .....	

<b>POSSIBLE REASONS BEHIND THE VIOLATION:</b>	
<b>POSSIBLE REASONS FOR INCIDENT:</b> <small>(Check all that apply )</small>	<input type="checkbox"/> Gender based <input type="checkbox"/> Conflict within the family/community <input type="checkbox"/> Discrimination against Minorities <input type="checkbox"/> Economic <input type="checkbox"/> Dispute over land/water/livestock <input type="checkbox"/> Unsafe environment <input type="checkbox"/> Armed Conflict <input type="checkbox"/> Accident <input type="checkbox"/> Religious/traditional <input type="checkbox"/> Political <input type="checkbox"/> Criminal act

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<b>7</b>	<p><b>SUMMARY - BRIEFLY DESCRIBE WHAT HAPPENED</b> (Include information on circumstances of event not already reported in this form and for clarification.) <b>For example: What did the alleged perpetrator do? What happened to the victim? Did the authorities take any action?</b></p> <div style="border: 1px solid black; height: 250px; margin-top: 5px;"></div>
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<b>ACTIONS TAKEN BY THE VICTIM OR SOURCE OF INFORMATION:</b>		
<b>Did the victim or source of information take any action?</b>	<input type="checkbox"/> Yes (Check i. & ii.)	<input type="checkbox"/> No (Check iii.)
<b>i) If YES, what action was taken?</b> (Check all that apply)		
<b>8 a</b> <input type="checkbox"/> Reported to the Police <input type="checkbox"/> Seek Medical Professional/Visit Medical Facility	<input type="checkbox"/> Report To Elders <input type="checkbox"/> Seek Psychosocial Services	<input type="checkbox"/> Reported to Religious Leader <input type="checkbox"/> Seek Legal Assistance
<b>ii) If YES, the quality of the service was?</b>		
<input type="checkbox"/> Poor <input type="checkbox"/> Good <input type="checkbox"/> Very Good		
<b>iii) If NO, why no actions were taken?</b> (Check all that apply)		
<input type="checkbox"/> Lack of services <input type="checkbox"/> Did not know where to seek help <input type="checkbox"/> Social pressure <input type="checkbox"/> Impunity <input type="checkbox"/> Others, Specify: .....		

<b>ACTIONS TAKEN BY THE MONITOR ORGANISATION:</b>		
<b>Did your organization respond?</b>	<input type="checkbox"/> Yes (Check i.)	<input type="checkbox"/> No
<b>8 b i) If YES, what action was taken?</b> (Check all that apply)		
<input type="checkbox"/> Referred the victims to Medical service <input type="checkbox"/> Informed the Police <input type="checkbox"/> Paid for transportation	<input type="checkbox"/> Referred the victims to Psychosocial aid <input type="checkbox"/> Informed the elders <input type="checkbox"/> Others, Specify: .....	<input type="checkbox"/> Referred the victims for legal Assistance <input type="checkbox"/> Paid for medical check up

<b>SUPPORTING DOCUMENTS:</b>		
<b>How did your organization verify the information:</b> (Check all that apply)		
<b>9</b> <input type="checkbox"/> Signed Statement Of Victim Or Guardian <input type="checkbox"/> Medical statement <input type="checkbox"/> Photos	<input type="checkbox"/> Signed Statement Of The Witness(es) <input type="checkbox"/> Police statement <input type="checkbox"/> Visible physical injury	<input type="checkbox"/> Signed statement of the alleged perpetrator(s) <input type="checkbox"/> Court Records <input type="checkbox"/> Newspaper Clippings <input type="checkbox"/> Referral NGOs/centre <input type="checkbox"/> Other material evidence

Last Updated: March-2011