Unseen Millions: The Catastrophe of Internal Displacement in Colombia

Children and Adolescents at Risk

Women’s Commission for Refugee Women and Children

March 2002
Mission Statement

The Women’s Commission for Refugee Women and Children seeks to improve the lives of refugee women, children, and adolescents through a vigorous program of public education and advocacy and by acting as a technical resource. Founded in 1989 under the auspices of the International Rescue Committee, the Women’s Commission is the first organization in the United States dedicated solely to speaking out on behalf of women and children uprooted by armed conflict and human rights abuses.

Acknowledgements

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The Women’s Commission delegation included Joan Friedland, consultant, Pilar Rueda, member of Colectivo Marfa Marfa, Holly Myers, commissioner of the Women’s Commission for Refugee Women and Children, Sandra Krause, director, reproductive health project, Women’s Commission for Refugee Women and Children, Therese McGinn, Columbia University Mailman School of Public Health, Heilbrunn Department of Population and Family Health, Claire Morris, Marie Stopes International and Carmen Valenzuela, Pan America Health Organization.

This report was written by Joan Friedland in collaboration with members of the delegation. Holly Myers, Mary Diaz, executive director, and Diana Quick, director of communications, Women’s Commission, edited the report.

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ACRONYMS
I. EXECUTIVE SUMMARY

Over the past fifteen years, more than two million Colombians have been forcibly displaced from their rural communities as a result of armed conflict in their country. The Colombian armed forces and large, narcotrade-financed guerrilla forces have long been at war. In recent years, narcotrade-financed paramilitary forces, often with the support or acquiescence of Colombian police and military forces, have also waged war in brutal scorched earth campaigns that they claim are necessary to defend the state.

The lives of children and adolescents – about half of the displaced population – have been turned upside down after having been forcibly uprooted from their homes. They suffer and witness violence and are victims of sexual exploitation and rape. These children lose the certainty of a place to live, access to education and are deprived of enough food to eat. Many suffer from malnutrition.

Displaced families struggle for a meager existence in the slums of major cities. More than 400,000 displaced people crowd Bogotá alone. In the slums surrounding the capital, displaced children cannot obtain a primary education. Instead, they must rely on informal “community schools” organized by adults in their precarious communities. In other areas, displaced children lack access to even these informal institutions and are growing up without any schooling at all. Throughout Colombia, young adults languish in displaced persons settlements and despair of finding opportunities that will allow them to escape their marginalized status. Without options, girls turn to prostitution to help their families. Adolescent pregnancy rates for IDP girls are skyrocketing and, because they are displaced, these young women may be turned away from hospitals even when they need lifesaving care.

Jobs for displaced adolescents are virtually non-existent and the worsening state of the Colombian economy makes employment difficult to obtain at all levels of society. Displaced people face additional discrimination and hostility from society at large. Adolescent boys who are unable to go to school lack skills and often choose recruitment into armed groups, gangs, drugs or crime as a route out of utter destitution.

Despite these overwhelming social concerns, the Colombian government focuses on short-term emergency assistance for IDPs, based on the premise that the displaced will soon return to their homes. That focus ignores the calamity facing young people, for whom education and psychosocial assistance are
emergency needs and who need to eat even after short-term emergency assistance ends.

In 1999, the United States signed on to “Plan Colombia,” and committed $1.3 billion to the fight against narcotrafficking. Of this funding, only $30 million has been appropriated for humanitarian relief work to displaced people through the United States Agency for International Development (USAID). The scale of “Plan Colombia” has escalated the war effort in Colombia and has had a predictable ancillary effect amounting to greater dislocation and violence within the country. Forcible displacement shows no sign of slowing; in fact, it has increased dramatically over the past three years. The breakdown of peace talks between the government and guerrilla forces in February 2002 and the government’s move into the demilitarized zone threaten to cause further displacement, potentially on a massive scale.

Domestic and international law guarantees displaced children and adolescents special protection. But in Colombia that protection has been illusory, and hundreds of thousands of displaced Colombian children suffer from extraordinary state neglect.

**KEY FINDINGS AND RECOMMENDATIONS**

The delegation found that the Colombian government has ignored the desperate situation of the hundreds of thousands of children and adolescents displaced by political violence and has abdicated its responsibility to protect them. Children constitute a large part of a mostly invisible movement of people forced by political violence to abandon their rural homes and move to cities. While the Colombian government’s program of assistance to IDPs provides only short-term help, based on the premise that they will soon return to their former homes, the continuing danger from armed groups makes that return impossible. The government must accept its responsibility to meet the real and immediate needs of children and adolescents for security, education, adequate food, health care and job opportunities.

The efforts of international organizations and nongovernmental organizations (NGOs) to identify and meet these needs are limited by the enormity of the problem and in no way lessen the obligation of the Colombian government to take action. The United Nations and NGOs should strengthen their coordination and advocacy on behalf of internally displaced children and adolescents.

The delegation recommends that:

- The Colombian government commit itself to the protection of the human rights of the displaced population and make a priority both emergency and long-term programs that meet the needs of internally displaced children and adolescents. United Nations agencies strengthen advocacy and programming on behalf of internally displaced children and adolescents. This work should emphasize access to health care and education as well as strategies to improve the physical protection of children and youth. Girls are at risk of sexual violence and exploitation, while boys are often targeted to join paramilitary or rebel groups.
- The United Nations, United States government and Colombian government provide vigorous support to NGOs and other civil society organizations working with the internally displaced as monitors, service providers and peace builders. Women’s groups and youth groups can be the cornerstone of a peaceful, productive Colombia, but need moral and financial support.
- The United States enforce its stipulations that Colombia comply with its obligations to protect the human rights of IDP children and adolescents, prosecute human rights violations and sever any connection between security and paramilitary forces.
• The United States also provide substantially increased funding for humanitarian assistance for IDPs. This funding should not be allocated through “Plan Colombia” or any other mechanism that mixes anti-drug or military funding with humanitarian aid.

• Nongovernmental organizations improve coordination of their activities to enhance their overall effectiveness. NGOs should develop income generation projects and training for IDPs, including adolescents and women, that will be sustainable.

II. BACKGROUND

WOMEN’S COMMISSION DELEGATIONS TO COLOMBIA

In 1999, the Women’s Commission for Refugee Women and Children published A Charade of Concern: The Abandonment of Colombia’s Forcibly Displaced. This report was based on the findings of a delegation that visited Colombia at the end of 1998 to assess the conditions facing women, children and adolescents uprooted by war and violence. The report described a “crisis of forced displacement [which] remains largely hidden to international view” and “found evidence of a seriously deprived displaced population which receives alarmingly low levels of humanitarian support and only minimal recognition of their plight from national and international agencies and the government.”

The delegation made a wide range of recommendations, including advocating that the United States, the United Nations and the Colombian government greatly expand humanitarian assistance and support. It also recommended that the Colombian government stem the tide of displacement by controlling the violence and human rights abuses of paramilitary forces and other armed groups and that the needs of women, children and adolescents be made a priority.

Since that report, there has been an alarming increase in political violence and human rights violations in Colombia, with a resulting increase in the number of internally displaced persons (IDPs). In November 2001, the Women’s Commission sent a second delegation to Colombia, this time to assess the conditions facing children and adolescents uprooted by war and violence. The objective of the delegation was to follow up on the 1998 assessment, paying particular attention to children and adolescents, as well as to reproductive health. A separate report with expanded technical detail on reproductive health findings and recommendations will be issued on behalf of the Reproductive Health for Refugees Consortium.

The delegation traveled to Bogotá and surrounding areas and then split into two groups. One group traveled to Quibdó, Chocó – one of Colombia’s poorest areas located at the Panama border – while the second group traveled to Puerto Asis, Putumayo in southern Colombia. Putumayo is a conflict area that has been the site of anti-coca spraying sponsored by “Plan Colombia.” Two delegation members also

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2 Marie Stopes International, Columbia University and the local NGO Profamilia participated in the delegation to focus on a reproductive health assessment. The purpose of the assessment was to identify and advocate internally displaced persons access to a broad range of quality, voluntary comprehensive reproductive health services in Colombia including: family planning, the prevention and management of sexual and gender-based violence, the prevention and management of sexually transmitted infections and HIV, and safe motherhood including emergency obstetric care.

The Reproductive Health for Refugees Consortium is comprised of seven organizations: American Refugee Committee, CARE International, Columbia University, International Rescue Committee, JSI Research and Training Institute, Marie Stopes International and the Women’s Commission for Refugee Women and Children, working to increase refugee and internally displaced persons access to good quality, comprehensive reproductive health care.
traveled to Cartagena and Barranquilla, and primarily focused on assessing reproductive health issues. Delegation members spoke to children, adolescent and adult IDPs, government officials, UN officials and NGO representatives.

RECENT HISTORY AND HUMAN RIGHTS VIOLATIONS

Colombia is in the midst of a human rights crisis. The country has been ravaged by 40 years of armed internal conflict, and more than 40,000 people, mostly civilians, have been killed in the past decade alone. Colombian, regional and international governmental agencies and NGOs have documented the escalating level of political violence, as well as the magnitude and extraordinary rate of current displacement. The history of the conflict was explained in detail in the Women’s Commission’s 1999 report.

For decades, the government has waged war against anti-government guerrilla forces in Colombia. The two principal guerrilla groups are the Fuerzas Armadas Revolucionarias de Colombia (FARC – Revolutionary Armed Forces of Colombia) and the Ejército de Liberación Nacional (ELN – National Liberation Army). During the 1990s, wealthy landowners and drug traffickers promoted the rise of paramilitary groups to protect themselves from the guerrillas. These paramilitary groups now operate through a national association – the Autodefensas Unidas de Colombia (AUC – United Defense Groups of Colombia). The drug trade largely finances the guerrilla groups and the paramilitaries. The United States Department of State has declared the FARC, the ELN and the AUC to be terrorist organizations.

Human Rights Watch has condemned FARC for killing and abducting civilians, hostage-taking, the use of child soldiers, grossly unfair trials, cruel and inhumane treatment of captured combatants, forced displacement of civilians, use of weapons that cause significant and avoidable civilian casualties and attacks on medical workers and facilities.

The AUC has carried out indiscriminate massacres, killed hundreds of civilians in 2001 and often targets peasants suspected of collaborating with leftist guerillas. Both Amnesty International and Human Rights Watch have accused the Colombian military of maintaining ties with paramilitary organizations. Human Rights Watch reported “certain Colombian army brigades and police detachments continue to promote, work with, support, profit from and tolerate paramilitary groups, treating them as a force allied to and compatible with their own.”

Today, massacres carried out by the AUC are on the increase. Human Rights Watch reports that, “[a]ccording to the Colombian National Police, the number of massacres recorded in 2000 increased by over 40 percent over the previous year, most the work of paramilitaries who continue to enjoy, at the very least, the tolerance of the Colombian Armed Forces. In the first six months of [2001], the police reported yet another increase, from 84 massacres registered in the first six months of 2000 to 98 massacres registered in the first six months of 2001, with a total of 568 victims.”

Displacement of civilians appears to be a “deliberate strategy of war, closely linked to the issue of land tenure and control of territory.”\(^9\) Colombian NGOs point out “the government recognizes that the interest on the part of drug traffickers in buying up land leads them to form alliances with paramilitary groups who, in turn, utilize threats, intimidation, selective assassination and massacres in order to force the rightful owners to abandon their property.”\(^10\) They call this process “counter-agrarian reform.”

Who is Responsible for the Displacement and Killings?

<table>
<thead>
<tr>
<th></th>
<th>Paramilitaries</th>
<th>Guerrillas</th>
<th>Security Forces</th>
<th>Unknown</th>
</tr>
</thead>
<tbody>
<tr>
<td>Displacement*</td>
<td>43%</td>
<td>35%</td>
<td>6%</td>
<td>15%</td>
</tr>
<tr>
<td>Political Killings(^{†})</td>
<td>50%</td>
<td>8%</td>
<td>2%</td>
<td>10%</td>
</tr>
<tr>
<td>Civilian Killings(^{‡})</td>
<td>84%</td>
<td>12%</td>
<td>3%</td>
<td></td>
</tr>
</tbody>
</table>

\(^*\) Consultoría para los Derechos Humanos y el Desplazamiento (CODHES – Advisory Office for Human Rights and Displacement).
\(^{†}\) Defensoría del Pueblo (Office of the Public Advocate).
\(^{‡}\) U.N. Special Rapporteur on Violence Against Women Radhika Coomaraswamy.

Civilians, especially peasants, are the principal victims of the escalating conflict. Human rights defenders, journalists, judicial officials, teachers, trade unionists and leaders of Afro-Colombian and indigenous communities have been targeted.\(^14\)

In 1999, the government agreed to a demilitarized zone (despeje) consisting of five southern municipalities. On-again, off-again negotiations with FARC have reached an impasse, and discussions with the ELN were officially suspended in August 2001 and only recently renewed. The government has not conducted talks with the AUC. President Pastrana’s term ends in 2002, and the presidential campaign is under way. At least one presidential candidate has announced he will enter the demilitarized zone with armed forces, and the presidential candidates’ commitment to peace talks is uncertain. Furthermore, since the AUC is not a party to the peace talks, the impact of any future agreement between the government and the FARC remains open to question.

By January 2002, peace talks with the FARC had again broken down, and wider war was threatened when President Pastrana said he would end the zone of despeje. Civilians in the area expressed terror that paramilitary forces, with the collaboration of some military units, would then move in and take reprisals against the civilian population. The government and the FARC reached a last-minute agreement to a timetable for cease-fire talks, and to discussing an end to paramilitarism, guerrilla military actions, and kidnapping for ransom.

\(^9\) Findings and Recommendations of Senior Inter-Agency Network on Internal Displacement, Mission to Colombia (hereafter UN Senior Inter-Agency Network), August 16-24, 2001, led by UN Special Coordinator on Internal Development, pp. 1-2.
\(^{12}\) Cited in Human Rights Watch, Colombia: Bush/Pastrana Meeting, a Q&A on the Human Rights Situation in Colombia, Oct. 6, 2001.
\(^{13}\) UN Wire, Colombia: U.N. Envoy Blames Paramilitaries for Atrocities Against Women, Nov. 8, 2001.
\(^{14}\) Amnesty International Report 2001, Colombia.
In February 2002, shortly before this report went to press, the peace talks between the government of Colombia and the FARC broke down. The government’s move into the demilitarized zone is likely to cause the displacement of thousands of men, women and children. Senator Martha Catalina Daniels was executed by the rebels, and presidential candidate Ingrid Betancourt was kidnapped. This does not augur well for human rights or the treatment of civilians in the demilitarized zone and beyond.

Human rights violations in Colombia to date have been treated with impunity. Two UN special representatives, Hina Jilani, UN Special Representative of the Secretary-General on Human Rights Defenders, and Radhika Coomaraswamy, UN Special Rapporteur on Violence against Women, criticized the Colombian government in late 2001 for its failure to prosecute human rights violations.15 16 Human rights groups reported that paramilitary groups killed 54 human rights defenders in the past five years and that another 14 had disappeared during the same period.

Law 589, enacted in July 2000, makes the forced disappearance of persons, genocide and forced displacements a crime. But the delegation is not aware of any prosecutions under this law. Human rights groups have also reported a recent retrocession in legal protections.18

Colombia acceded to the Convention on the Rights of the Child in 1991, but the UN Committee on the Rights of the Child, in its October 16, 2000 concluding observations, found that violence there has led to “systematic violations of children’s rights.” The Committee severely criticized Colombia’s implementation of the Convention’s provisions.19

The Committee also expressed concern about the direct effects of the armed conflict on children, citing, “the high death toll, large-scale internal displacement of children and their families, the destruction of the educational and health infrastructure and of water collection, purification and distribution systems, of the national economy, of agricultural production and of the communication infrastructure…”20 The interests

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10 In October 2001, Hina Jilani, UN Special Representative of the Secretary-General on Human Rights Defenders, strongly criticized Colombia’s new chief prosecutor, Luis Camilo Osorio, following a 10-day fact finding mission to Colombia. Ms. Jilani questioned the ability of his office’s human rights division to investigate human rights violations with the same independence as the previous administration. Ms. Jilani also expressed concern about the complicity of the security forces – both the police and the military – with paramilitary groups. (UN Wire, Colombia: U.N. Expert Slams New Chief Prosecutor, Nov. 1, 2001.) The chief prosecutor then accused Ms. Jilani of trying to “misinform” the country and demanded an official explanation of her statements from the UN. (UN Wire, Colombia: Chief Prosecutor Criticizes U.N. Envoy, Requests Explanation, Nov. 6, 2001.) Recently, present and former prosecutors in the human rights office have also criticized the office’s retreat on human rights investigations and prosecutions against paramilitaries and the army. (Juan Forero, Change and Fear in Colombia Rights Panel, The New York Times, Nov. 19, 2001).
16 The Jilani visit was immediately followed by a 10-day visit by Radhika Coomaraswamy, UN Special Rapporteur on Violence against Women. Ms. Coomaraswamy’s visit received almost no attention in the Colombian press. She blamed right-wing paramilitary groups for the overwhelming majority of massacres in Colombia and said “violence against women had their sexual exploitation has become commonplace in the country’s four-decade civil war.” (UN Wire, Colombia: U.N. Envoy Blames Paramilitaries for Atrocities Against Women, Nov. 8, 2001.) She joined in Hina Jilani’s condemnation of the failure to prosecute human rights violators, reporting that “prosecutors have not brought up even one case of human rights violations against women.” (Id.) During the Women’s Commission visit, the delegation heard repeated reports that such human rights violations receive little public attention in Colombia.
11 Concluding Observations of the Committee on the Rights of the Child: Colombia. 16/10/2000. CRC/C/15/Add.137.
20 Id., p. 2.
of children are not included in the peace process.\textsuperscript{21} Children are not protected from the threat of armed conflict, including “instances of extrajudicial killing, disappearance and torture committed by the police and paramilitary groups; at the multiple instances of [‘]social cleansing[ ‘] of street children; and at the persistent impunity of the perpetrators of such crimes.”\textsuperscript{22}

\section*{THE EXTENT OF THE DISPLACEMENT}

Colombia has one of the largest internally displaced populations in the world. In 1995, IDPs numbered 600,000. At the time of the Women’s Commission report in 1999, they numbered 1.5 million. NGOs report as many as two million people have been displaced since 1985.\textsuperscript{23} While the bulk of IDPs movement is from rural to urban settings, intra-urban displacement has also occurred in large cities.\textsuperscript{24}

There is no agreement on the exact number of IDPs, and the numbers offered by different groups are conflicting, confusing and misinterpreted from one report to another. One fact is clear – numbers are increasing at an alarming rate and have reached crisis proportions. The Red de Solidaridad Social (RSS – Social Solidarity Network), the government agency responsible for coordinating aid to the displaced, estimates that 128,143 people were displaced in 2000.\textsuperscript{25} CODHES estimates that number to be 317,000.\textsuperscript{26} According to Human Rights Watch, 319,000 people abandoned their homes in 2000, fleeing violence and threats of violence – the highest number in five years.\textsuperscript{27}

The RSS reported that 85,012 people were displaced in the first six months of 2001.\textsuperscript{28} CODHES estimated 91,166 people were displaced during the first four months of 2001, 60 percent more than in that same period in 2000.\textsuperscript{29}

Although the trends reported by the different sources are the same, the differences in numbers are important. The RSS counts only those IDPs who have registered with the agency and designs its programs based on these numbers. In contrast, CODHES attempts to measure the numbers of IDPs regardless of whether they have registered with the RSS. Most official registration takes place among people displaced in groups or as massive events. But according to the UN Theme Group on Displacement, these displacements constitute only 19 percent of the displacement events.\textsuperscript{30} Many IDPs, therefore, clearly remain unregistered.

The delegation was repeatedly told that most of the displacement now occurs “drop by drop,” rather than in massive groups. With the exception of Turbo near the Atlantic coast, reception centers for IDPs do not

\begin{footnotesize}
\textsuperscript{21} Id., p. 3.
\textsuperscript{22} Id., pp. 5-6.
\textsuperscript{24} United Nations Theme Group on Displacement, Situation of Displaced Persons and Challenges for 2001 (hereafter UN Theme Group, Situation and Challenges), January 19, 2001, § 2.
\textsuperscript{25} http://www.red.gov.co/DesplazamientoForzado/Poblaciones_Territ/MagnitudDespl/magnituddespl.html.
\textsuperscript{26} World Food Program, Food Needs Case Study on the Displaced Population of Colombia (hereafter WFP Food Needs Case Study), June 14, 2001, p. 3.
\textsuperscript{27} Human Rights Watch, Colombia: Current Human Rights Conditions, Press Backgrounder for U.S. Secretary of State Colin Powell’s Visit to Colombia, Sept. 10, 2001.
\textsuperscript{28} http://www.red.gov.co/DesplazamientoForzado/Poblaciones_Territ/MagnitudDespl/magnituddespl.html.
\textsuperscript{29} UN Theme Group on Displacement, Estado de Situación del Desplazamiento Agosto 2001 (hereafter UN Theme Group, Estado de Situación), Aug. 2001, pp. 3-4.
\textsuperscript{30} UN Theme Group, Estado de Situación, p. 13. CODHES estimates that 62 percent of the displacements are individual or family and 35 percent are “collective.” www.colombiapolicy.org/codhes.htm
\end{footnotesize}
exist. Thus, the very nature of the displacement occurring in Colombia has a profound impact on the provision of services and aid to IDPs. Individual displacement tends to be invisible and silent, which allows the public to ignore the drastic state of affairs and the State to minimize its responsibilities to IDPs.

The displaced are mainly girls, boys and women; poor; from rural areas; and disproportionately indigenous and Afro-Colombian. The UN Senior Inter-Agency Network on Internal Displacement reports that children and adolescents are half of all IDPs. The International Organization for Migration (IOM) estimates that 17 million of the 40 million inhabitants of Colombia are children, and that approximately 700,000 children have been displaced by violence and conflict. According to the UN Theme Group on Displacement, between January and June 2001, 37,278 minors under age 18 were displaced.

In the large cities, 54 percent of the displaced population is reportedly children, with women and children representing 80 percent of the total displaced population. Women displaced by armed conflict are more than twice as likely to have lived in more than one municipality since 1995 than women displaced for other causes. Their children, therefore, have also moved from place to place.

Bogotá receives more displaced people than any other location in Colombia. A reported 403,668 IDPs have arrived in Bogotá since 1985, some 22,620 in the first half of 2001 alone – they make up 6.7 percent of the city’s 6 million inhabitants and 18.6 percent of the country’s IDP population. The RSS reported that in 2000 11,869 IDPs arrived. The Unidad de Atención Integral a Población Desplazada de la Alcaldía (the Mayor’s Office Unit for Integrated Attention to the Displaced Population) receives 1,700 IDPs per month and half are children and adolescents up to 17 years old.

There are also large concentrations of IDPs in cities other than the capital. According to the World Food Program (WFP), there may be 160,000 IDPs in Bolívar, the capital of which is Cartagena. Nelson Mandela, Cartagena’s largest settlement of IDPs, has 50,000 people.

The displacement territory in Colombia has also expanded. In January 2001, the UN Theme Group on Displacement considered Antioquia, Chocó, Bolívar, Santander and Putumayo the principal areas of reception and expulsion. But between January and June 2001 the Departments of Cauca, Valle del Cauca and Magdalena were added to the list. Large cities (Barranquilla, Bogotá, Cali, Cartagena and Medellín) and intermediate cities (such as Bucaramanga, Sincelejo, Valledupar, Barrancabermeja) have absorbed the greatest impact. Displacement is not only rural to urban phenomenon. It is now also intra-urban, with confrontations between armed militias in marginal barrios creating forced displacement from one section

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32 UN Theme Group, Situation and Challenges, § 2.
33 UN Senior Inter-Agency Network Findings, p. 4.
34 International Organization for Migration, Diagnóstico de Población Desplazada y Comunidades de Recepción en Seis Departamentos de Colombia, Section IX, Educación y Desplazamiento, July 2001.
36 UN Theme Group, Estado de situación, p. 29.
41 UN Theme Group, Estado de situación, p. 12.
of a city to another. There is increased displacement among indigenous and Afro-Colombian populations who – although they make up only 11 percent of the population – are now 38 percent of the displaced.\textsuperscript{42}
THE COLOMBIAN SYSTEM OF HUMANITARIAN ASSISTANCE

The Colombian system of assistance to IDPs provides meager support for the displaced population and fails to provide for the needs of IDP children.

Law 387, enacted by the Colombian legislature in 1997, is the basic legal mechanism governing IDP assistance. This wide-ranging law established measures “for the prevention of forced displacement; [and] the attention, protection, consolidation and socioeconomic stabilization of the internally displaced by violence in the Republic of Colombia.” It pledged to “provide special attention to women and children, preferentially to widows, women heads of household and orphans.”

The law established a right to emergency humanitarian aid for three months, with the possibility of extending the aid for an additional three months under exceptional circumstances. It also states a governmental commitment to aid the displaced in returning to places of origin, with guarantees for their safety and for accompanying programs of socioeconomic consolidation and stabilization. The law created the Sistema Nacional de Atención Integral a la Población Desplazada por la Violencia (National System for Integrated Attention to the Population Displaced by Violence) to be implemented through a National Council and municipal, district and departmental committees.

Although it was required to issue implementing regulations within six months of enactment, the government delayed putting the law into practical effect. Regulations regarding housing, health, education and land were not promulgated until late 2000 and then only after the Constitutional Court ordered the government to do so. It was also not until 2000 that the RSS was given governmental responsibility at the national level for coordinating the nationwide and local response to internal displacement.43

In accordance with the Registro Unico de Población Desplazado (Sole Registry of the Displaced Population), IDPs must register and be certified by the RSS as a prerequisite for government assistance. Despite this requirement, most IDPs do not register. As mentioned previously, most registrations take place in connection with massive displacements, but these constitute only 19 percent of all displacements.44 USAID officials in Bogotá estimated that 40 percent of IDPs are registered with the RSS, and that others do not register out of fear.45 Likewise, members of the Asociación Nacional de Mujeres Campesinas e Indígenas de Colombia (ANMUCIC – National Association of Rural and Indigenous Women) in Quibdó, Chocó estimate that 40 percent of IDPs in Quibdó are registered with the RSS. They stated that IDPs often do not register with the RSS because they are afraid of the consequences or they fear being stigmatized as IDPs.46

The UN Senior Inter-Agency Network on Internal Displacement has criticized the registration process as “complicated and time consuming,” with little information provided to IDPs about the process, discriminatory results, a restrictive one-year registration period, limited access to authorities and lack of trust about how the information will be used.47 Moreover, there are few offices designated to receive the initial declaration in which IDPs explain the reasons for their flight. IDPs may have difficulty expressing themselves because of illiteracy or cultural factors. Government employees who receive the declarations are sometimes inadequately trained or act in a manner that discourages applicants. Some agencies are more receptive than others to applications and applicants often do not have access to information that will

43 Id., pp. 33-34.
44 Id., p. 13. CODHES estimates that 62 percent of the displacements are individual or family and 35 percent are “collective.” [www.colombiapolicy.org/codhes.htm]
46 Interview with ANMUCIC members, Quibdó, Chocó, Nov. 16, 2001.
47 UN Senior Inter-Agency Network Findings, p. 3.
“prove” their claims. The facts surrounding massive displacements are easily verified, but people displaced individually may have a harder time proving their case.

RSS officials advised the delegation that they contact local authorities to verify applicants’ claims. This sort of contact is impermissible in the asylum context. Asylum applicants are promised confidentiality because they and their families could be at risk if their persecutors learn of their claims and whereabouts. The RSS officials seemed to be entirely unaware of these generally accepted protections.

The indigenous population reportedly often does not register. Women (other than heads of household) generally do not register, which then has grave consequences should the husband disappear. There are long waiting lists to register, and the registration certification often does not occur within a 15-day time limit.

Through an agreement with the government of Colombia, the International Committee of the Red Cross (ICRC) provides emergency humanitarian assistance to IDPs, generally in cases of massive displacement. Most emergency assistance to IDPs is standard and does not take into consideration differences in age, gender, region or culture. It is not linked to medium- or long-term assistance, and has been mostly directed to supplying IDPs with food, rather than assisting them with housing, health or education needs. Reproductive health assistance is not included. For minors, psychosocial attention is not included in such assistance, nor is education considered a priority.

Children and adolescents suffer under this system of assistance. Their particular needs, in effect, are systematically ignored. The official emphasis on returning IDPs to places of origin conflicts with the reality of their situation. The assistance program is decentralized to local levels without any guarantee of uniformity. Essentially, the promise of humanitarian assistance is empty.

III. THE EFFECTS OF DISPLACEMENT ON COLOMBIAN CHILDREN

Displacement has a devastating effect on children:

Displacement of minors limits their opportunities for personal development: the traumas associated with the violence that generally precedes displacement, the abrupt change in the management of their space and time, and the dismembering of the nuclear family provide room for an even more hostile new situation…. To this list must be added the effects of segregation and stigmatization on children, which has an impact on the development of their self-esteem.

The September 7, 2001 report of the UN Secretary-General on Children and Armed Conflict condemned the effects of armed conflicts on children: they are uprooted from their homes, and maimed or killed. They are separated from their families, orphaned or abducted, abused and exploited. Girls suffer sexual abuse and enslavement. Entire social networks and infrastructures are destroyed. Children suffer malnutrition, their schools are destroyed and they run the risk of recruitment into armed forces.

48 GAD Report on Forced Displacement, p. 34.
50 UN Theme Group, Estado de Situación, pp. 36-37.
51 Id., pp. 39-40, 52.
52 Id., p. 28.
Despite this emphasis in the Secretary-General’s report, the UN Theme Group on Displacement’s most recent Colombia IDP report devotes only two paragraphs to children and adolescents. Little is known about the displaced women who are mothers to these children. Generally they are rural women with little documentation who have difficulty obtaining land, credit, housing or access to education or health services. If their children are abandoned, or the fathers do not recognize paternity, these children may not be registered or have the right to their father’s name.\textsuperscript{54}

SHELTER

Most of Colombia’s displaced children and adolescents move from rural lives to unfamiliar urban landscapes. One displaced child called Bogotá a “big monster.”\textsuperscript{55} The Archdiocese of Bogotá and CODHES have described Bogotá as two cities. One is a planned and modern city with public spaces, guaranteed transport and public services. The population of that city views the marginal and vulnerable populations as tangential. The other city lives “from the logic of social exclusion, daily subsistence, the informal economy, unemployment, social and cultural rupture, stigmatization, violence and displacement.”\textsuperscript{56}

When families flee, they often leave everything behind. Children express a longing to return to their former lives. They recall living on farms where their basic needs were provided for and their families had a role in the community. Adolescents in Villa España, Quibdó, described how much better off they had been in their villages. They went to school and their families had money for uniforms and other school expenses. In their villages, children studied and helped their mothers with housework and their fathers with agriculture. They were never hungry. In contrast, as IDPs, young people look down on them, treat them badly or ignore them, and it is difficult for them to make friends. Some of these displaced adolescents had fathers or other family members who were taken away or beaten. They had fled their communities because of threats, violence and massacres, most frequently by paramilitaries.\textsuperscript{57}

Often these children move repeatedly as their families try to find secure living places. One family in Bogotá described moving to five different places before they reached the city. In Bogotá they had to move six times. When they first arrived, the family lived in a house with 40 other people and slept on the floor. They made food communally, but often there was not enough for everyone. Landlords refuse to rent to them because they are displaced.\textsuperscript{58}

Many IDPs have settled on the outskirts of Bogotá in Soacha. People in that large community have been displaced on all sides of the political violence, and they bring their cultural and political differences with them. In Barrio el Progreso, Soacha, vehicle access is via a frequently closed dirt road, and the most reliable access is by foot on a dirt path. A narrow bridge crosses a ravine, where children play beside a filthy stream that runs beneath a school. The hills have been sliced away by rain. Utilities are not available because most residents do not have title to their land, and government units squabble over who is responsible for services. Houses use pirated electricity. Some residents have water tanks on their roofs provided by Médicos sin Fronteras (MSF – Doctors without Borders), with a pipe leading to a water barrel inside, but many lack even that resource. Water is available to this community only three half-days per week. Some houses have outhouses, but many households just use a hole in the ground. Sewage water

\textsuperscript{54} UN Theme Group, \textit{Estado de Situación}, pp. 27-28.
\textsuperscript{55} Interview with IDP family at Fundación Dos Mundos, Bogotá, Nov. 14, 2001.
\textsuperscript{56} Senderos, p. 17.
\textsuperscript{57} Group discussion, Villa España, Quibdó, Chocó, Nov. 16, 2001.
\textsuperscript{58} Interview with IDP family at Fundación Dos Mundos, Bogotá, Nov. 14, 2001.
runs alongside the paths down to the ravine. The children suffer from scabies, respiratory ailments and untreated vision problems.

Ciudadela la Paz, Barranquilla was established in December of 2000 and currently houses 167 permanent families and other transient families, who come from at least six other regions of the country. Housing structures there are temporary and most have plastic roofs that cannot withstand the heavy winter rains. The road to the settlement was impassable at the time of the delegation’s visit; the only access until the rains stop is to travel the few kilometers from the paved road by foot. There was no water supply in Ciudadela la Paz until complaints forced the authorities to provide one hose from a water plant nearby. The quantity and access are inadequate, with no sanitation facilities – latrines or waste disposal systems – and no electricity.

La Esperanza, Barranquilla is a more established area that houses both displaced and local poor families. It is estimated that about 80 percent of the residents are displaced people who began arriving about six years ago. The area has permanent houses made of wood or cement and tin roofing, and also has water, sanitation and electricity.

Nelson Mandela settlement is an established area outside Cartagena’s center that houses both IDPs and the local poor. A Colombian family planning agency, Profamilia, estimates 9,500 families live there – 40 percent of whom are displaced. The houses are permanent, made of wood or cement with tin roofs, and water and electricity serves most of the settlement. There is a high proportion of female-headed households. Displaced people began to arrive in Nelson Mandela about five years ago and continue to arrive. When services were first offered to the displaced, it created some conflict with the local urban poor. Many local people started moving into Nelson Mandela, in part to access services. In many discussions, Nelson Mandela was referred to as an area where NGOs had focused their efforts and made progress.

La Villa Hermosa settlement (formerly Bill Clinton) is a newer, physical continuation of Nelson Mandela and it houses the most recent arrivals. But, unlike those in Nelson Mandela, houses there are shoddy, and the streets are rivers of mud in the rainy season. Sanitation facilities are limited, access to water is poor and there is no electricity.

Villa España is located in Quibdó, the capital of Chocó, one of the poorest Colombian departments, with among the lowest literacy levels and worst health indicators in the nation. Quibdó is a small city in the jungle with limited access to the rest of the country. There was no electricity in the entire city during the delegation’s visit and a military and police presence was visible. Villa España was built in 1999 by the Spanish Red Cross to house IDPs who had been living in a small sports coliseum beginning in 1997. The settlement has wooden houses, water, sanitation and electricity, but it does not being to cover all the housing needs of IDPs in Quibdó. It is also a long way out of the city (a round trip cost 20,000 pesos – about $10 US), so access to schools, work opportunities and shops is difficult.

The coliseum itself still provides shelter to IDPs, with some families having lived there since 1997. At one time the coliseum housed over 1,000 families, while now there are between 50 and 60 families, mostly consisting of the elderly and very young children. The families still in residence at the coliseum were those most likely to be unable to organize a different place to live. There is still no sanitation or water at the coliseum. The children there were filthy and suffered from obvious skin rashes. Their clothes were practically rags.

Once again, the national government’s policy based on the idea that IDPs will return to their communities conflicts with the reality that they cannot do so because of continuing lack of security in their home communities. At the same time, local authorities in the areas of reception do not want to provide services.
to IDPs, such as potable water, since it is thought that these services might encourage IDPs to stay. As reported by the World Health Organization (WHO), the result is that “IDPs face deficient sanitary and health conditions.”\(^5^9\) A social worker at Mario Gatian Yanguas Hospital in Soacha told the delegation “the displaced come here and have nothing. There are big belts of misery.”\(^6^0\)

**HUNGER**

IDP children often suffer from malnutrition. A social worker at a first level hospital in Soacha, Mario Gatian Yanguas Hospital, said “We have malnourished children and we give what we can, but we wonder what they will eat five days later.”\(^6^1\) Likewise, a medical worker at the MSF clinic in Soacha reported that the main health problem for children was malnutrition. MSF conducted a study in Soacha and its findings indicated 30 percent of IDP children suffered chronic malnutrition and that two percent were severely malnourished.\(^6^2\)

Recently displaced mothers in Puerto Asís, Putumayo also reported that their children were beginning to suffer from malnutrition. For those who were in school, snacks cost 2,000 pesos ($1) per week, but the children did not always have the money to buy them.\(^6^3\)

A recent IOM study reported that, in six departments studied, 41 percent of the homes with children under 12 reported the children lost weight in the previous six months. Only nine percent of the children in these homes received any nutritional supplement during this period.\(^6^4\)

According to the UN Theme Group on Displacement, the 90-day emergency food assistance package offered by the government is insufficient. The WFP has repeatedly contended that there is a major gap in attention and services offered to displaced families after the first few months of displacement and that their health deteriorates as a consequence. The WFP conducted a study of the humanitarian situation of over 1.4 million IDPs in Colombia. The survey focused on IDPs who fled their homes between four months and four years ago in the northern departments of Sucre and Bolívar and Urabá region (all of which have been affected by increase in violence by armed groups). The survey revealed that IDPs face prolonged periods of hunger between the fourth and 24\(^7\) month of displacement, when aid agencies cut off “established initial emergency kits” to IDPs. Female-headed households consume only 1,755 kcal. a day, which is well below the 2,100 kcal. minimum daily recommended standard used as a planning figure for emergency operations. Most families are forced to cut back to 77 percent of required daily kilocalories, because they have only 30 percent of previous income to buy expensive water, fuel and food, and to pay for rent in the new urban environment.\(^6^5\)

The WFP called for “intensified assistance” in marginal urban areas and especially to female-headed households. The main strategies suggested by WFP (which would require additional resources) are “preschool and school feeding of children and the establishment of communal kitchens.”\(^6^6\)

\(^6^0\) Interview with social workers, Mario Gatian Yanguas Hospital, Soacha, Nov. 15, 2001.
\(^6^1\) Interview at Mario Gatian Yanguas Hospital, Soacha, Nov. 15, 2001.
\(^6^2\) Interview at MSF clinic, Soacha, Nov. 15, 2001.
\(^6^3\) Casa de la Mujer workshop, Puerto Asís, Putumayo, Nov. 17, 2001.
\(^6^4\) Diagnóstico de Población Desplazada y Comunidades de Recepción en Seis Departamentos de Colombia, Section VIII, Condiciones y Servicios de Salud, July 2001.
\(^6^6\) WFP, Colombia: WFP study finds important structural gaps in IDP assistance and serious nutritional deficiencies among the urban poor, from ODM Emergency Situation Report, July 17, 2001.
Some Children Get Food in School

The WFP is implementing protracted relief and recovery operations, including activities such as school food programs, food for work and vocational training. But the WFP has reported that it had only 58 percent of required funding for its two-year food aid support program in Colombia. The Food and Agriculture Organization (FAO) developed a food security program for IDPs, but it has not been funded for two years.

According to the director of the ICBF, the WFP provides emergency food support to specific displaced communities and a school feeding program in seven regions where there are high concentrations of IDPs. The focus of this program is in primary schools. But children must be in school to have access to this program, and the director of the Instituto de Bienestar Familiar (ICBF – Family Welfare Institute) contends that there is very little the ICBF can do to make sure that the children reach or stay in school. He reported that the WFP coordinates this program with the Ministry of Education; in contrast, the Ministry of Education reported that the WFP coordinates this program with the ICBF. This kind of bureaucratic confusion severely impacts the effectiveness of assistance programs for IDPs.

Children and their mothers beg for money for food, often putting themselves in danger. A mother with 12 children, who had camped out in front of the Public Advocate’s Office to protest the lack of government assistance, described how her 12-year-old daughter was nearly raped while begging before she was able to take refuge in a church.

Anguished IDP mothers told the delegation that their children did not have enough to eat, and that they did not know where to find the money to feed them. Recently displaced women in Puerto Asis, Putumayo welcomed the suggestion by a delegation member that they pool their resources and establish communal kitchens.

In a small school in Barrio el Progreso, Soacha run by volunteers, WFP provides only a morning snack consisting of milk and arequipe – a sweet caramel snack. The NGO SOS provides lunch for the children, which is prepared by volunteer mothers. Both organizations recognize that this may be the only food the children eat that day.

Pre-school children can also receive WFP food in community daycare homes. IDP children are supposed to be given priority in these daycare homes and not charged a fee. But some communities, such as Soacha, are not interested in providing spaces for IDP children. And once again, if the children are not enrolled in the program, they do not receive the food. While the ICBF pays for basic services to the community mothers who take care of the children, sometimes other parents in the program are expected to make up the difference for an IDP family’s inability to pay. If these parents will not contribute to the costs of serving an IDP child, then it is the community mother who must bear the cost of the IDP children’s presence.

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67 Id.
69 UN Senior Inter-Agency Network Findings, p. 5.
70 Interview with ICBF director, Bogotá, Nov. 13, 2001.
74 Site visit to Corporación Esperanza y Amor, Nov. 15, 2001.
75 Interview with ICBF director, Bogotá, Nov. 13, 2001.
Decentralization is a major change in national policy, but the ICBF does not have funding to carry out the decentralized program and instead must encourage local governments to contribute to program budgets. The newspaper *El Tiempo* reported that the ICBF in the department of Sucre added 26,399 kilos of food supplement in order to feed displaced children, but that increase would only last three weeks because the number of displaced and malnourished children was so high. The mayor of Sincelejo, in cooperation with various government agencies, announced a milk program in public schools, where there is an especially high number of displaced children. Sometimes, sympathetic people in the area of reception offer voluntary help, even while they plead for the assistance of local and national authorities.

**VIOLENCE AGAINST CHILDREN**

Children and Adolescent Victims

Children and adolescents in Colombia both witness violence and are its victims. They die when they are caught in the crossfire, or because they are suspected of supporting one side or the other in the conflict. They die when armed actors decide to punish their families, or because they have either witnessed or are victims of atrocities. A former mayor of a town in Antioquia described a 12-year-old boy who was decapitated by paramilitaries in front of horrified classmates, after he reported seeing the paramilitaries painting slogans in his town. A mother in Putumayo reported that her 17-year-old daughter was shot to death by the FARC because she went from zone to zone selling cosmetics, and the guerrillas thought she was reporting their activities. Three minors were among 24 villagers massacred by the AUC in October, 2001. United Nations Population Fund (UNFPA) officials told delegation members that three young girls in Barrancabermeja had been murdered because their boyfriends had formed a resistance movement.

Crimes against children are committed with impunity.

My name is “Elena.” I lived in a rural farming community and was a community leader. I had three children, two of whom are now 12 and 14. In December 1999 my daughter, who was then 13 years old, went to another area/department to stay with my sister on holiday. She was in the sixth grade. She was caught in the crossfire between the guerrillas and the paramilitaries in front of my sister’s home. My daughter was shot, but not killed. But then she was raped and killed by army soldiers. I spent nine hours trying to prove that my daughter was not a guerrilla, so that I could see and get my daughter’s body. I tried to report my daughter’s murder, but I was told that I would probably be killed by the time that was done because my own life was at stake. So, I couldn’t denounce the rape and murder of my daughter. To protect my life, I left my home and my other two children so they could continue school. I moved to another small village in the area. In July 2000, the paramilitaries burned our house down. My two children and I moved to Bogotá. My two children have told me they want to commit suicide. They ask, “What is the reason for living?” In Bogotá we moved into a farmhouse belonging to the president of ANMUCIC, and being around cows has lifted my children’s spirits. My children are not in school.

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76 Id.
82 Interview with UNFPA officials, Bogotá, Nov. 15, 2001
83 Interview with “Elena” at ANMUCIC office, Bogotá, Nov. 12, 2001.
Children witness massacres and watch their houses being burned. A boy in Bogotá described seeing people shot, skinned and dismembered by paramilitaries.\(^{84}\) Children are also orphaned when their politically active parents are murdered. A boy in Bogotá described how his parents were murdered because of their work with ANMUCIC.\(^{85}\) NGO workers from Barrancabermeja described how after paramilitaries came to the city, young people were either displaced, cooperated with the paramilitaries or were killed by them.\(^{86}\)

Children who join or are forcibly recruited into one of the armed groups participate in violence. Of the estimated 6,000 child soldiers in Colombia, 18 percent have killed at least once and 60 percent have seen someone killed. 78 percent have seen mutilated cadavers, 25 percent have witnessed kidnappings, 18 percent have witnessed torture, 49 percent have fired against someone and 28 percent have been wounded.\(^{87}\)

One four-year-old boy blamed his parents for not protecting his murdered sister and dreams of growing up, going to work and buying a gun to shoot her killers.\(^{88}\) Children write about their experiences in journals describing the death of relatives, the loss of their homes and their desperate lives in cities. In Soacha, the delegation saw pictures drawn by IDP children that showed scenes of violence and catastrophe. One was a dark picture entitled “cruel world.” Another picture showed a small figure in a boat, his hands held up imploringly with the caption “wait for me.”\(^{89}\)

The fear of violence or desperation often causes young women to become sexually involved with members of armed groups. Women in a Profamilia women’s group in Quibdó spoke of girls as young as 12 having boyfriends in armed groups. The women said the boys have money and the girls are also afraid to refuse dates. They reported the case of a 16-year-old girl killed by her paramilitary boyfriend.\(^{90}\)

According to the UN High Commission for Human Rights:

> More than any other sector of the population, Colombian children have suffered from internal armed conflict. The Office can attest to the large number of juvenile victims, including girls who have been raped by combatants. It notes the large number of kidnappings carried out mainly by insurgent groups, which place children at the center of a cruel trade. Many crimes are committed against minors outside the bounds of the armed conflict. The growing number of complaints about family violence and sexual abuse are also a cause for concern.\(^{91}\)

Children are common victims of kidnappings by armed groups. Fundación País Libre reported that 106 children had been abducted as of May 31, 2000. Five were attributed to paramilitaries, 41 to common crime, 35 to actors unknown, two to the EPL, nine to the ELN and 14 to the FARC.\(^{92}\) According to the Fundación País Libre, from 1996 to June 2001, 45 minors were kidnapped in Bogotá.\(^{93}\)

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\(^{84}\) Interview with IDP family at Fundación Dos Mundos, Bogotá, Nov. 14, 2001.

\(^{85}\) Interview with “Roberto” at ANMUCIC office, Bogotá, Nov. 12, 2001.

\(^{86}\) Meeting with NGOs at Fundación Dos Mundos, Bogotá, Nov. 14, 2001.


\(^{88}\) Interview with “Maria,” at Casa de la Mujer workshop, Puerto Asís, Putumayo, Nov. 17, 2001.

\(^{89}\) Site visit to Corporación Fe y Esperanza, Soacha, Nov. 15, 2001.

\(^{90}\) Meeting with Profamilia group at ASIC center, Quibdó, Chocó, Nov. 16, 2001.


\(^{92}\) Angela Constanza Jerez, Niños: Objetiva de Guerra, El Tiempo, Aug. 20, 2000.

\(^{93}\) La Edad de la Inocencia?, El Tiempo, Sept. 27, 2001.
A report to the UN Special Rapporteur on Violence against Women reports the number of girls who have died as a result of sociopolitical violence has increased substantially. While 15 girls died in a one-year period from October 1999 to October 2000, 13 were killed from October 2000 to March 2001.\(^4\)

In 2000, Colombia agreed to the Convention on the Prohibition of the Use, Stockpiling, Production and Transfer of Anti-Personnel Mines and on their Destruction. But in 2001, UNICEF criticized Colombia as the only country in the Americas – and one of the few in the world – where landmines were currently being planted. So far, more than 100,000 landmines have been planted. UNICEF estimated that more than 150 municipalities in 25 departments in Colombia – 15 percent of its territory – were affected by the presence or suspected presence of antipersonnel mines. Of the 800 victims between 1991 and May 2000, 58 were children. Realistically the actual figure is likely higher.\(^5\) UNICEF estimates that 40 children were victims of landmines in 2001 alone.\(^6\)

**Sexual Violence and Armed Conflict**

Sexual violence against girls and women in Colombia is a tactic of war.\(^7\) As with so much violence in Colombia, sexual violence is invisible and uncounted. Victims and their families are afraid to complain, and the government does not pursue violators. UN Special Rapporteur on Violence against Women Radhika Coomaraswamy recently reported, “I have received testimonies from numerous women who have been raped and many cases involved girls under the age of five.”\(^8\) A recent study by the Colombian NGO Profamilia indicates that nine percent of the women interviewed in poor areas studied had been raped.\(^9\) Women and girls displaced by armed conflict are raped much more frequently by unknown persons than are other women from poor areas, or women in the country as a whole, who are raped by men they know.\(^10\)

Human rights organizations have listed countless instances of rape and other sexual abuse incidents involving children. For example:

> I came from Yurayaco (Cacuétá) because one day a group of paramilitaries came through at 11 in the morning. I was with my children and I was pregnant. They forced me to lie face down in spite of my condition. That’s how I was when one of those guys hurt my six-year-old daughter, penetrating a finger in her genitals. It still hurts her.\(^11\)

Often girls are threatened with death if they report the crime:

> At the end of the year I was going with five other girls to an aunt’s house when we saw a van stopped at one side. Some men got out and forced us to get in. At the exit from the town they took us out and raped us. I felt like I was going to die, that they were tearing me, that I couldn’t breathe with a body on top of me. It went on for hours, like an eternity. They were paramilitaries.\(^12\)

\(^{94}\) Segundo Avance, § 2.1
\(^{96}\) UN Senior Inter-Agency Network Findings, p. 4.
\(^{97}\) UN, Consulta con Mujeres Desplazadas sobre Principios Rectores del Desplazamiento (hereafter UN Consulta con Mujeres Desplazadas), Bogotá, May 16-18, 2001, p. 12
\(^{99}\) Profamilia study, chart 10.11, p. 116.
\(^{100}\) Id.
\(^{101}\) Segundo Avance, § 3.4.
The paramilitaries threatened to kill the girls if they or their families told authorities about what had happened and gave them five days to leave town.

Human rights groups also report that armed groups kidnap girls to force them to cook and clean and then systematically rape them. They also report that, in general, rape by armed groups is an unreported statistic. Frequently, victims are afraid to file reports. In addition, authorities often fail to note the rapes of women who are then murdered.

According to human rights groups, in Puerto Asis the army actually operates from and lives in a girls’ school. Many girls and women live with paramilitaries. For some girls, a sexual relationship with a paramilitary is, at first, an honor. Later, girls are often abandoned. In Putumayo, paramilitaries have approached families to invite their daughters to spend a weekend with them as a condition of “community service.” The consequence of refusal is murder. Women in a UN-sponsored meeting in Puerto Asis reported that a 14-year-old girl was killed in Putumayo several months ago. She was the sister of a guerrilla, but lived with a paramilitary and was suspected of spying.

Former girl combatants report that they were victims of sexual violence by their superiors. One girl reported:

We were building a road and that was when a commander took me on an exploration mission for a campsite. Then we went to look and when we returned was when he began to wear me down. I kept telling him no, because I was afraid of him and I didn’t want to do it. He told me yes and that… that was when he took me by force and raped me. I cried and he covered my mouth and told me that I shouldn’t make him look bad. If I had told the top commander of the force, they would have demoted him. But I didn’t tell anyone, because I was afraid that, if I did, they wouldn’t do anything to him and then he would know I told and then, I got the feeling he would do something even worse to me.

The nature of sexual violence against girls is sometimes not acknowledged by the very people who are supposed to protect them. The director of the ICBF advised the delegation that the agency has not received any reports that girl former-combatants were raped. He described their sexual relationships with their superiors as abuse or exploitation, based on domination and fear, but not rape.

Girls in armed groups have also reported they were subjected to forced contraception so that they could remain sexually active. According to the Defensoría del Pueblo (the Public Advocate’s Office), the great majority of the girls demobilized from guerrilla forces in the region of Suratá, Santander were sexually active. Some of them had IUDs and the girls reported that the guerrillas periodically administered contraceptives. About 70 percent of the girls had sexually transmitted diseases. Former combatant girls have also reported that armed groups subjected them to forced abortions. They suffer deep psychological and emotional trauma from these events, as well as from the violent acts in which they participate.

Girls and women are afraid to report sexual violence against paramilitaries once they are displaced. Women at a meeting in Soacha said an NGO in the rural area they were from provided training about sexual violence. But, they said, women in Soacha are afraid to because “no one can do anything and there is no justice.”

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103 Id., § 3.1.3.2.
105 Statement taken by the Andino Service Committee, Bogotá, July 2001, reported in Segundo Avance at § 3.3.2.
107 Segundo Avance, § 3.3.2.
108 Focus group meeting, Soacha, Nov. 15, 2001.
Domestic Violence

Another consequence caused by displacement is an increase in domestic violence. Women and children are the principal victims. A recent Profamilia study reported children who are displaced by armed conflict are hit more frequently by their parents than those in other poor communities or in the country as a whole.  

A woman in Cartagena told the Women and Armed Conflict Working Group, “We go hungry here; family members fight because there is no money; the children become aggressive, we live in very confined spaces.”  

IDP women in Soacha, who had arrived mostly in the past one to three years, reported a high level of domestic violence. One woman reported that a five-year-old girl told her mother that she wanted to throw herself out the window because of the fighting between her parents. In contrast, a Profamilia participant in Quibdó stated that men have learned more about equality and that there is less violence between couples now.

PSYCHOSOCIAL EFFECTS

Displacement is widely recognized as a major contributing negative factor for the psychosocial development of IDP children and adolescents. In the areas that the delegation visited, government agencies, international organizations, NGOs and IDP groups reported an absence of available treatment.

Instead, IDPs are often treated as pariahs and criminals and are held responsible for their own misfortune. A young woman at Villa España, Quibdó said, “We feel like we are the plague of Egypt.”

Children and adolescents are traumatized by violence and no longer are assured schooling, a house or food. Parents report changes in their children’s behavior and say their children often become aggressive in school or are tearful because they cannot attend school. Many women at a Profamilia women’s group in Quibdó understand family members have mental health problems as a result of violence and stated that there is no available help.

Mothers in Puerto Asis, Putumayo reported that their children were depressed because they could neither go to school nor find work. An absence of school and work encourages idleness and places children in greater danger of being recruited by armed groups. In fact, a family’s fear that their child will be recruited can be the main reason for their decision to flee. When this happens, children often blame themselves for their family’s loss of everything.

Displacement strains and familial relationships. Women, who generally are heads of household after displacement, take on new responsibilities. These new demands and responsibilities often must take precedence over former roles the women may have had in community organizations previously and undermine their political voice. Children must also take over adult responsibilities for siblings when and

109 Profamilia study, chart 10.12, p. 117.
110 Statement of a woman IDP in Cartagena taken during the first workshop about violence against women in the context of armed struggle, conducted by the Working Group, Women and Armed Conflict in September 2001, reported in Segundo Avance at § 3.1.3.2.
111 Meeting with focus group, Soacha, Nov. 15, 2001.
112 Meeting with group of young people, Quibdó, Chocó, Nov. 16, 2001.
113 Meeting with Profamilia group, Quibdó, Chocó, Nov. 16, 2001.
if their mothers find work. Psychologists report that mothers also try to limit children’s activities in order to protect them from recruitment or from turning to prostitution. Conversely, children told the delegation of their fear that their mothers’ outspokenness would bring further disaster to the family.  

In a study conducted by the Corporación Universitaria del Caribe (Cecar) in Sincelejo, displaced children were recorded as exhibiting depression and phobias. They also showed classic signs of denial, anxiety and aggressive behavior. Many suffer nightmares, are obsessed with the idea that they are going to die, have learning problems, are delayed in development and have pronounced depression and suicidal thoughts. They also have dream and appetite disturbances, are paranoid that people are following them and exhibit compulsive behavior.  

**Effects of Displacement on Sexual Behavior**

The most dramatic change in behavior among IDP adolescents is in sexual behavior and pregnancy.  

In every interview, whether in an urban or rural setting, experts and lay people reported that IDP adolescents are pregnant at a younger age. Everywhere the delegation went it heard reports of girls as young as 12 having babies; in some instances adolescent girls have two or three children. A 14-year-old girl with two children in Quibdó said, “Quibdó has been my downfall.”  

Recent studies have validated this anecdotal evidence. The UN Senior Inter-Agency Network reported that 30 percent of all IDP adolescent girls are mothers. And a recent Profamilia study found that adolescent girls displaced by armed conflict have the highest level of pregnancies among girls in poor communities, a rate far higher than the country as a whole.

According to mental health professionals in Bogotá, sex gives adolescents a sense of stability, a way of integrating into their new and unfamiliar urban lives, and a weapon against violence. Adolescents spoke to the delegation with great emotion about the benefits of having children. It gave them someone to love, relieved their loneliness and brought financial and emotional support from their families and friends (though not necessarily their boyfriends). ANMUCIC members in Quibdó reported that pregnancy gave girls (and their families) security if they find a partner who is local.

Sex is also a way of ensuring survival. ANMUCIC members in Quibdó reported there is an increase in prostitution among IDP girls because it represents the only way many girls can make money. Girls fall into prostitution because they want to help their families and have no other way to do so. An NGO worker from Barrancabermeja described how paramilitaries offered 11- and 12-year-old girls money for sex. The girls complied in order to help their families. In desperation, some unemployed parents prostitute their own 12- and 13-year-old daughters. Boys are exploited as well. An official of the Public Advocate’s Office also confirmed the desperation that causes adolescents to turn to prostitution. At the same time, IDPs are frequently stigmatized as being prostitutes. Young IDPs in Quibdó reported that

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120 Meeting with group of women in Quibdó, Chocó, Nov. 16, 2001.
121 UN Senior Inter-Agency Network Findings, p. 4.
122 Profamilia study, chart 5.6, p. 48.
123 Meeting with ANMUCIC, Quibdó, Chocó, Nov. 16, 2001.
townspeople there believe all the prostitutes there are IDPs and use this prejudice as a justification for discriminating against them.

NGOs and IDP groups report that, following displacement, fewer young people see the need to marry. Consensual union is easier, since to be officially married a couple needs documents, which they often do not have. Adolescents form couples starting from 13-14 years of age.

**Mental Health Problems are Widespread; Treatment is Rare**

Ministry of Health officials told the delegation that mental health problems constitute the most significant medical problem for IDPs. This observation startled a psychiatrist accompanying the delegation. Mental health concerns have not been translated into government policy, and he was unaware of a state strategy to deal with the problem.

Psychosocial help is especially important for victims of torture, sexual abuse and inhumane or degrading treatment. According to the UN Senior Inter-Agency Network on Internal Displacement, the psychosocial needs of children are often not considered, and guidelines developed by the RSS with the support of UNICEF, the WHO and Pan American Health Organization (PAHO) have not been implemented due to lack of funding. The Network reported that UNICEF “has provided psychosocial rehabilitation for children affected by violence in a number of departments and is currently implementing activities focusing on integrated childcare in areas most affected by the armed conflict. This entails a holistic psychosocial rehabilitation methodology that includes education, health, communication and community and family mobilization.” These projects are, however, very limited in scope, exist in few departments and affect few children.

Young people in some areas have mobilized to deal with their problems. In Villa España, Quibdó they have formed a youth group called “Nueva Imagen en Unión,” with the objective of creating positive experiences from which to go forward in life. At the same time, mental health professionals working in the field advise that children should not minimize the significance of their experiences, which form an important part of their identity.

**EDUCATION**

One of the most disruptive effects of displacement is that children suddenly lose the chance to attend school. It is a disturbing facet of government policy that education is not part of the short-term humanitarian assistance provided to IDP children, nor is there any mechanism to ensure that these children can actually attend school in their new communities.

School is an essential part of children’s daily lives. In addition to educating them and preparing them for productive lives, it provides *cotelanidad* – a connection to the normal daily lives they once enjoyed. According to officials from the Ministry of Education, IDP children arrive in school beaten down by their displacement, and the routine of going to school helps them psychologically. Mothers described their children’s depression as a result of not being able to go to school. The children wonder what will happen to them, how they will create lives for themselves. For many children, only school saves them from malnutrition, since the limited food programs are only available if they are in school.

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127 UN Estado de Situación, p. 43.
128 Senior Inter-Agency Network Findings, p. 6.
There are not enough schools in the urban areas to absorb the great influx of IDPs who seek refuge there. IDP children live in poor areas and attend the worst schools, which are already overcrowded and lack resources and teachers. Often there is no space available, or expenses are too high, or the family simply needs whatever income the child can earn.

As a matter of law, IDP children have priority admission to schools and are supposed to receive free schooling. But this policy is not implemented at the local level, and IDPs often must pay for uniforms and school materials. According to a Profamilia study, only 23 percent of women who have been certified, or know how to be certified, as IDPs by the RSS understand that they can receive help to educate their children. An official of the Public Advocate’s Office told the delegation that even where there are school places for children, there may be no money for uniforms, and children may have only one-year entry cards. The newspaper *El Tiempo* reported that the Secretary of Educación allocated 10,000 spaces for displaced children in Bogotá, who would not have to pay to attend or wear uniforms. Nonetheless, the representative for IDPs in the District Council complained that fees were nonetheless charged.

Children Face Discrimination in School

Teachers and other children often do not understand the reality of displacement, and displaced children often feel stigmatized and discriminated against in their new schools. The Ministry of Education described racial discrimination against Afro-Colombian children from Chocó who move to largely white Antioquia, or indigenous children moving to non-indigenous municipalities. A boy in Bogotá told the delegation that he was called a “black displaced boy from the coast.” He was humiliated by this and then refused to return to his school. Other children mock IDP children for being from the countryside. Adolescents in Villa España, Quibdó reported that teachers in schools discriminate against them because they do not pay fees.

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130 Senior Inter-Agency Network Findings, p. 6.
131 Profamilia study, chart 3.3., p. 24.
According to the UN Senior Inter-Agency Network, a Save the Children study found that 77 percent of children had to abandon school after displacement. CODHES and the Archdiocese of Bogotá reported that in 1999, 64 percent of the school age displaced population did not attend school. In 2000, 55 percent of this population did not go to school. Fundación País Libre reported that as of 1999, only 23 percent of the displaced children in Bogotá went to school. While the percentages vary somewhat from study to study, the fact that most displaced children lose the opportunity to continue their education is evident.

In general, Colombia does not have sufficient school space for its children, but for IDP children the situation is much worse. At the end of 2000, the IOM carried out a study of the displaced population in Norte de Santander, Santander, Valle del Cauca, Nariño, Caquetá and Putumayo. The study concluded that the level of school attendance of displaced children between seven and 11 years is 74 percent; for adolescents between 12 and 17 years old, the figure drops to 48 percent. These figures are lower than those observed for poor residents (78 percent and 53 percent) and are more than nine percentage points below the average for overall school attendance. In Cali, 70 percent of IDP children go to school compared with 77 percent of the poor. According to the Health Ministry in Cartagena, 44 percent of IDPs between five and 11 and 51 percent of children between 12 and 17 who left school did so because of lack of money.

In the few areas where IDPs are well established and receive substantial assistance from NGOs, they have a better chance of being in school. Among a group of young men and women who were Profamilia project peer educators in Nelson Mandela settlement in Cartagena, almost all are in school.

Often children are dependent on public-spirited volunteers who open schools outside of the formal legal or educative system. These schools may be run with great effort, but lack basic operating resources. In Barrio el Progreso, Soacha the informal school has dirt floors, cardboard walls and water runs through the building when it rains. Desks are almost on top of each other. Some children wore uniforms provided by a religious group. In Ciudadela la Paz, Barranquilla, the community built a wooden structure which is used as a school and a local volunteer comes to teach. The Niños de Paz School in Sincelejo operates without any assistance from the government.

Children from rural areas start school at an older age, so they are often already behind when they move to an urban area. Children in a fifth grade class in Barrio el Progreso, Soacha ranged from 11 to 16 years old.

Education for children is a high priority for IDP parents, but the government provides little guidance or support for them in enrolling their children in school. Recently displaced mothers in Quibdó wondered how to place their children in school. Orphans are left to fend for themselves unless they are lucky enough to find an organization or group that will take them in and navigate the RSS or school bureaucracies for them. A boy in Bogotá whose politically active parents were murdered told the delegation that he and his siblings were able to enter school because ANMUCIC fought for places for them. “We were lost when we got to Bogotá and did not know anything about how to get into school.”

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136 Senior Inter-Agency Network Findings, p. 6.
137 Senderos, pp. 84-85.
139 International Organization for Migration, Diagnóstico de Población Desplazada y Comunidades de Recepción en Seis Departamentos de Colombia, Executive Summary, July 2001.
140 UN Theme Group, Estado de Situación, p. 44.
141 Interview in Quibdó, Chocó, Nov. 16, 2001.
144 Interview at ANMUCIC office, Nov. 12, 2001.
Lack of Funds for IDP Education

The ICRC and the Ministry of Education have a school integration program for 2,221 children called Paz, Acción y Convivencia (PACO). Occasionally, private schools give free admission to IDP children. UN organizations offer limited help. UNESCO offered to seek 24,600 million pesos ($11,000) to finance an education program for 40,000 IDP children, but made it clear that it could not itself offer the money or finance the program because of a budget crisis. Likewise, major corporations have occasionally offered very limited help.

In Bogotá there are schools where a majority of the children are displaced, especially in Ciudad Bolívar, Kennedy and Bosa. Officials from the Ministry of Education recognize that IDP children need special attention. They reported openly that education is treated as a lower priority in IDP programming because it is less visible than the need for food and housing. They described cuts in funding and an absence of financial support at the national level. The Ministry presented a $13 million proposal to the Departamento Nacional de Planeación (DNP – National Department of Planning) as part of “Plan Colombia” USAID funding. But the DNP gave priority to other programs and did not include the education proposal.

Ministry officials also reported that where funding is available from foreign sources, it is insufficient. For example, the European Union provided funding to construct schools in Nelson Mandela settlement in Cartagena, but did not provide money for teachers or books. They also reported that there is little coordination between UN agencies and the Ministry. For example, the WFP operates in schools through the Institute of Family Welfare at the mayoral level and is not coordinated at the national level through the Ministry of Education. Legislation to make these benefits uniform does not exist.

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Escuela Fe y Esperanza (School “Faith and Hope”).

151 Id.
Ministry of Education officials advised the delegation that UNICEF, which has local programs, works with the Catholic Church and the ICRC or the Colombian Red Cross, but does not report to the Ministry. The Ministry presented a proposal to UNICEF of its own model for a project, because it did not feel a UNICEF model was suitable for the Colombian IDP population, but UNICEF rejected the proposal.\textsuperscript{152}

Despite the overall lack of funding and poor or nonexistent coordination between various education programs, the Ministry reported that there have been advances in education availability for IDP children, and more spaces are now available. The agency has developed a plan of accelerated learning for adolescents aged 12 to 15 so that they can do their primary education in a reduced period of 18 months. This project operates in 16 out of 40 departments but only includes about 7,000 adolescents.\textsuperscript{153}

The issue of decentralization was cited as a challenge in implementing education programs for IDPs. Local government units are charged with the responsibility of implementing national policies. However, local governments do not necessarily carry them out, and the municipalities often do not provide sufficient teachers for displaced communities. Much of the Ministry’s work involves encouraging department and local governments to comply with policies.\textsuperscript{154}

The municipalities, in turn, complain that they receive insufficient resources from the department and national education departments.\textsuperscript{155} Even where local governments do comply with national directives they are reluctant to make their admission policies public. According to Ministry officials, Bogotá extends school preference to IDP children registered in school with the RSS, but does not announce that as policy or tell parents how to register.\textsuperscript{156}

It is the nature of individual displacement that teachers are not necessarily reassigned to follow the migrating school population. While schools that receive IDP children are overcrowded, schools in areas emptied by displacement lie vacant. Officials described this phenomenon to the delegation as a “displacement of school capacity.” In a related phenomenon, even where children remain in their home communities, teachers have often been displaced, as they are a group targeted by both guerrillas and paramilitaries. According to the Ministry of Education, 15 teachers in Antioquia were killed in 2001.\textsuperscript{157}

Despite these tremendous difficulties, IDP children still have dreams. Children in the community-run school in Barrio el Progreso, Soacha, spoke of becoming a soccer player, veterinarian or an engineer. As the director of the child welfare group Benposta told the delegation, “despite their terrible experiences, IDP children still have the capacity to look into the future.”\textsuperscript{158}

HEALTH

IDP children and adolescents in Colombia face a crisis in health care. Their access to the decentralized, privatized Colombian health care system has been crippled. In 2000, the Colombian National Institute of Health conducted a comprehensive health diagnostic study of IDPs on the outskirts of Cartagena. The WHO recently reported the study’s striking results:

\begin{itemize}
\item \textsuperscript{152} Id.
\item \textsuperscript{153} Id.
\item \textsuperscript{154} Id.
\item \textsuperscript{155} UN Theme Group Estado de Situación, p. 44.
\item \textsuperscript{156} Meeting with Ministry of Education officials, Bogotá, Nov. 13, 2001.
\item \textsuperscript{157} Id.
\item \textsuperscript{158} Interview at Fundación Dos Mundos, Bogotá, Nov. 14, 2001.
\end{itemize}
• Only seven percent of the children had been healthy in the 15 days prior to the study.
• Of all the ill people, only 29 percent were taken for health consultations.
• In 60 percent of all cases when children were not taken for a medical check-up, lack of money to pay for the consultation was the main reason.
• Of all the medical check-ups carried out among the children, 52.5 percent of the consultations were paid for by the parents; 22 percent of the children were given free medical attention by the health institutions; and only 21.5 percent were covered by the social security system.
• 77.9 percent of the children had no affiliation with any social security system.
• 57 percent of the infant mortality reported between August and November 2000 by the community could have been prevented.
• Among the displaced children under five years of age the vaccination coverage is 20 percent below the national and regional coverage for most vaccines.
• 60 percent of the interviewed population presented a degree of clinical depression or was suspected to have clinical depression.
• The basic environmental health conditions of the displaced population are distressing: e.g., none of the visited households were free of carriers that can transmit diseases; in 95 percent of the households rats were found and likewise in 95 percent of the housing, three or more of such carriers were found.\footnote{Based on http://www.who.int/disasters/repo/7301.doc, July 30, 2001.} IDP children in virtually every place visited by the delegation exhibited obvious health problems. Children in Barrio el Progreso, Soacha presented with skin diseases such as scabies, respiratory problems, eye infections and correctable vision problems. Mothers in Puerto Asis, Putumayo reported their children suffered from diarrhea, fever and respiratory problems. Children suffer skin rashes as a result of aerial anti-coca spraying. The children living in the sports center in Quibdó had bad skin conditions.

**IDPs Lack Access to Health Care**

Displacement causes families to lose access to the social security system. When IDPs leave their homes, their medical records and social security affiliation stay behind in their communities of origin. In an IOM study of six Colombian departments, 80 percent of the homes reported a sickness in the past three months, but only 53 percent received professional attention.\footnote{Diagnóstico de Población Desplazada y Comunidades de Recepción en Seis Departamentos de Colombia, Section VIII, Condiciones y Servicios de Salud.} IDPs often do not know they have a right to health care. Women displaced by armed conflict are less likely to know they have a right to health care than other women in poor areas.\footnote{Profamilia, Colombia, Salud Sexual y Reproductiva en Zonas Marginales, Situación de las Mujeres Desplazadas, Bogotá, 2001 chart 7.5, p.75.}

Local providers recognize that the need for IDP health services is increasing. The Mario Gatian Yanguas Hospital in Soacha reported that it has been providing services to IDPs for two years. In 2001,1,042 families, with an average of five members per family, arrived for services. Currently, the hospital reports that there are about 25 certificates filed per week from the RSS. Even at the present level, the hospital cannot give all the needed services.\footnote{Interview at Hospital Mario Gatian Yanguas de Soacha, Nov. 15, 2001.}

Colombia promises free health care to IDPs but has failed to deliver on the promise. Officially, IDPs have access to all health services that are paid for out of a fund to which all formally employed Colombians contribute.\footnote{There are two insurance systems in operation:} But Ministry of Health officials advised the delegation that they are unable to verify or
ensure that IDPs receive services to which they are entitled. The Ministry’s resources and personnel have been cut and responsibilities for health care have been shifted to the departmental and municipality level. Local governments, likewise, do not have the resources or personnel to provide adequate care.164

In Villa España, Quibdó, young people reported they had to wait in long lines for services and had to arrive at the hospital by 1:00 a.m. in order to have a chance of being seen. They must buy forms and papers in the hospital – up to 5,000 pesos ($2.25) – for lab analysis. They complained that not all hospitals or health centers in the area take IDPs, and that there are never any medicines in stock. Transportation to the hospital is expensive, and emergencies for IDPs are sometimes not treated. They reported the recent story of a young man who required emergency attention and was left to die on the steps of the hospital.165 The administrator of Hospital Ismael Roldan, a small hospital in Quibdó, in turn claimed that IDPs did not understand the hospital’s schedule and the need to book appointments in advance in order to coordinate lab work with physician care. Arrival after a certain time resulted in patients sometimes being turned away. The hospital has not received assistance from NGOs or international organizations. The administrator reported that national funding for IDPs allocated to the Ministry of Health could be used up by Bogotá’s needs alone.166

IDP women in Puerto Asis, Putumayo reported that they do not have the money to pay for specialists. For example, if an IDP woman has breast cancer, public services will not cover the cost. There is an absence of community health workers. If someone has a health problem, she must go to the hospital. The women reported that they had to pay for medicine, even though legally they are not supposed to do so.167

In fact, the national government has instituted a funding system that ensures local facilities will have difficulty treating IDPs. At present, hospitals receive reimbursement only after they have provided services to an IDP patient. Ismael Roldan Hospital administrators in Quibdó reported that up through the year 2000 there existed contracts with specific hospitals to provide services to IDPs, and that 50 percent of the contract was paid up front by the national government. While hospitals and centers can provide services to increase access, they must bill for individual patients only at the end of treatment. This has cause a cash crisis for hospitals that are not properly paid by the government fund for those IDPs that they do serve. Billing forms are complicated and are often sent back to hospitals for minor corrections, thus delaying even further the prospect of eventual reimbursement. Overall, the Ismael Roldan Hospital is owed 730 million pesos ($335,000) by different government insurance schemes. Because of this cash crisis, Roldan Hospital officials reported that are able to help only IDP patients with a letter from the RSS. If a presenting patient lacks this documentation, the hospital can help in only limited circumstances. At the same time, the hospital director also emphasized that all IDPs were treated, especially in an emergency and that no one is turned away from services.168

contributory system: those who are in formal employment have to be insured by a private health company (Empresa Privada de Salud - EPS) to which their employer also makes a contribution (choice of the EPS is up to the employee);

subsidised system:
1) evaluation census places those most in need in subsidised system – SISBEN. These people have a carnet which enables them to receive services from public sector providers.
2) those who are not covered by the SISBEN can be provided services by health providers as “vinculados” – services are charged on a sliding scale according to need. These services are not paid for by any fund or insurance system. The different insurance schemes then subcontract either an Instituto Proveedor de Salud (IPS) or an Empresa Social Estatal (ESE) to provide services.

IDPs in theory have access to all health services which are paid for out of the FOSIGA fund. All formally employed Colombians contribute to FOSIGA. This fund is managed by FISALUD.

165 Group discussion, Villa España, Quibdó, Chocó, Nov. 16, 2001.
166 Interview with Hospital Ismael Roldan administrators, Quibdó, Chocó, Nov. 16, 2001.
168 Interview with Hospital Ismael Roldan administrators, Quibdó, Chocó, Nov. 16, 2001.
IDPs Face Discrimination in Healthcare

The UN Theme Group on Displacement concluded that IDPs are discriminated against in health care.\textsuperscript{169} Many IDPs the delegation met with echoed this conclusion. Young people at Ciudadela la Paz, Barranquilla stated that they are perceived as guerrillas and are sometimes turned away from health services. The Ismael Roldan Hospital director admitted that all providers know which of their patients are IDPs.\textsuperscript{170}

Ministry of Health officials offered various explanations for IDPs’ lack of access to the health system. First, they explained that the situation is part of a “structural problem” caused by inadequate resources.\textsuperscript{171} According to the UN Theme Group on Displacement, health institutions have in fact avoided providing required services and medications by hiding behind billing problems and the general crisis in the health care system.\textsuperscript{172}

Second, health officials reported to the delegation that it is difficult to provide services to IDPs who are displaced on an individual, rather than massive basis.\textsuperscript{173} Since most IDPs are, in fact, displaced on an individual basis, this means most have difficulty gaining access to the system. This evident situation is not officially recognized and therefore has not been translated into effective programs.

Third, health officials repeated the requirement that IDPs must be registered with the RSS in order to receive the health services to which they are entitled. This requirement remains paramount, even as these same health officials recognize that many IDPs do not register because they are afraid of being identified as IDPs.\textsuperscript{174} A group of women in Soacha reported to the delegation that everyone in the group was registered with the subsidized system, rather than as IDPs.\textsuperscript{175} WHO has also reported that the fear of being persecuted prevents many IDPs from obtaining health care because they will have to prove their identity.\textsuperscript{176} The fear appears to be justified. A social worker at the Mario Gatian Yanguas Hospital in Soacha reported that someone came to their office and tried to look at the list of IDPs, and that local militias were trying to rid the community of IDPs.\textsuperscript{177}

The UN Theme Group on Displacement concluded that requirements placed on IDPs as a prerequisite to receiving medical help are restrictive.\textsuperscript{178} IDPs in Quibdó reported that many were registered with the RSS, but that they had to re-register every time they needed to go to the doctor.\textsuperscript{179} If their names do not appear on the register, they must pay for treatment. Even when IDPs have begun the registration process, they may have to pay for services. Social workers at the Mario Gatian Yanguas Hospital in Soacha reported that a very sick man who had completed his initial declaration but did not yet have official certification from the RSS was required to pay for services.\textsuperscript{180}

\begin{itemize}
  \item \textsuperscript{169} UN Theme Group, \textit{Estado de Situación}, pp. 42-43.
  \item \textsuperscript{170} Interview with Hospital Ismael Roldan director, Quibdó, Chocó, Nov. 16, 2001.
  \item \textsuperscript{171} Interview with Ministry of Health officials, Bogotá, Nov. 14, 2001.
  \item \textsuperscript{172} UN Theme Group, \textit{Estado de Situación}, pp. 42-43.
  \item \textsuperscript{173} Interview with Ministry of Health officials, Bogotá, Nov. 14, 2001.
  \item \textsuperscript{174} Id.
  \item \textsuperscript{175} Meeting with focus group, Soacha, Nov. 15, 2001. See footnote 163 for explanation of the health insurance system.
  \item \textsuperscript{176} http://www.who.int/disasters/repo/7301.doc, July 30, 2001.
  \item \textsuperscript{177} Interview with social workers, Hospital Mario Gatian Yanguas de Soacha, Nov. 15, 2001.
  \item \textsuperscript{178} UN Theme Group, \textit{Estado de Situación}, pp. 42-43.
  \item \textsuperscript{179} Meeting with Profamilia group, Villa España, Quibdó, Chocó, Nov. 16, 2001.
  \item \textsuperscript{180} Interview with social workers, Hospital Mario Gatian Yanguas de Soacha, Nov. 15, 2001.
\end{itemize}
According to WHO, “[t]he main issues [in health coverage] are the lack of effective communication among the increasingly numerous and continuously changing humanitarian health workers, the large difference in procedures and lack of a standard approach among agencies, the irregular attention, and the absence of clear local health references, particularly in the most violent zones.” Ministry of Health officials reported that international organizations and NGOs were providing minimal coverage of IDP health needs, and that ministry coordination with these groups is just beginning. They complain that an NGO normally just comes in and installs itself, and even the local mayor may not know of its intentions. Workers at the Mario Gatian Yanguas Hospital in Soacha complained that services for IDPs were not sufficiently integrated, and that the majority of organizations working with IDPs went their own way and did not coordinate their activities with one another or with the hospital.

Sometimes, even the minimal international assistance available is excruciatingly slow. Ministry of Health officials reported that the Pan American Health Organization took three years to prepare several small booklets regarding health attention to IDPs and a card that listed patients’ rights and duties. The small, colorful card, which is dated 2000, apparently has not been distributed, as ANMUCIC leaders in Bogotá reported they have never seen it. Furthermore, the booklets focus on massive displacement events, rather than on more common individual displacement.

Health workers themselves are at risk from the armed groups. WHO has reported “the violence directed at government and national health workers, and more recently at international medical and humanitarian missions, forced the evacuation of this staff and caused the disruption of health services to the local population.” ANMUCIC members in Bogotá reported that people do not want to be health workers because they are targets of violence.

**SEXUAL AND REPRODUCTIVE HEALTH**

The government has abdicated its responsibility to provide sexual and reproductive health care to IDPs. As noted earlier in this report, it is widely known that adolescent IDP girls have alarmingly high pregnancy rates. Moreover, the director of the Cartagena Center noted that IDPs in general have more children as they are from rural areas and have less access to information on family planning.

Government programs do not confront these challenges. Time and again, government-funded health providers reported that they depended on the Colombian organization Profamilia for sexual and reproductive health care. Other NGOs that provide health services also refer patients to Profamilia. Profamilia, a member of the International Planned Parenthood Federation, is a non-profit organization whose objective is to promote the human right to family planning in Colombia and to work in favor of better sexual and reproductive health, offering information and services to the Colombian people. Profamilia is currently carrying out the Sexual and Reproductive Health National Service Project to bring these services to the poorest sectors of Colombian society, especially to IDPs, through a $1.5 million grant in 2001 and $2.5 million a year from 2002 to 2004 from USAID.

But Profamilia, despite the breadth and extraordinary competence of its services, does not reach into all areas of the country. It does not provide special programs for IDPs because doing so in the past created resentment in other poor communities. Nor does it provide the free services to which IDPs are entitled. While virtually all of its services to the displaced are subsidized, as a matter of policy it charges fees for

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183 Interview with social workers, Hospital Mario Gatian Yanguas de Soacha, Nov. 15, 2001.
186 Meeting with director of Cartagena Center, Nov. 7, 2001.
its services such as a family planning consultation, general medicine and female/male sterilization – the most common family planning method in Colombia. While the fees are small, for IDPs without an income, they may be insurmountable.

Profamilia refers emergency obstetrics cases to hospitals. But UNFPA officials reported to the delegation that the situation at hospitals is precarious. Deliveries and miscarriages have taken place at the doors of hospitals, and IDPs face discrimination because they cannot pay. Hospitals refer emergency IDP obstetrics cases to other hospitals when the patients cannot pay and this unavailability of service delays lifesaving care for women. One medical director left his position of direct services provision because of the ethical dilemmas that he faced in not providing assistance to those who needed it.¹⁸⁷

Women and girls displaced by armed conflict are much less likely to receive prenatal care than those from poor areas studied by Profamilia.¹⁸⁸ In Soacha, patients must take a taxi to the hospital. Hospitals are filled to capacity and patients often wait an entire day to obtain services. Patients report that, in order to be seen quickly, they must arrive at the hospital between 2:00 and 5:00 a.m. IDP women in Soacha, who were afraid to be registered as IDPs and were therefore responsible for their own fees, reported that each prenatal visit under the government’s subsidized medical care costs 11,400 pesos ($5.50) and that hospital deliveries cost 50,000 pesos ($23).¹⁸⁹ This is a substantial amount for an IDP with no income.

Two young women in Ciudadela la Paz, Barranquilla told the delegation they had had to visit at least three institutions before they were accepted at one to deliver their babies.¹⁹⁰ In Villa España, Quibdó, young women reported that hospital deliveries have been adequate, but that afterwards young mothers were left with no food to eat. One girl stated that she had to wait to deliver since she was displaced, and she was on her own in the delivery room when the baby was born.¹⁹¹ IDP women in Puerto Asís, Putumayo reported a clear distrust of hospital deliveries because of their experience of women going to the hospital and not receiving services. Some have had to deliver at the door of the hospital because doctors and nurses were sleeping and they have had to scream for help.¹⁹²

Even where IDP women and girls have access to reproductive health care through Profamilia or hospitals, they often cannot afford to pay for medication to which they are entitled. IDP women camped with their children outside the Defensoría del Pueblo in Bogotá, protesting the lack of government help, told the delegation they had developed cystitis because they did not have access to bathrooms. They were able to obtain medical care but could not pay for the medications prescribed for them.¹⁹³

The government fails adolescent girls in other ways. In Soacha, one woman in tears reported that a brother-in-law had raped her 16-year-old sister, who was then a student from the countryside. The sisters went to the authorities but could not afford the $50 lab analysis, so the investigation of the crime ended. The girl is now six months pregnant.¹⁹⁴

NGOs and international agencies often have to use their resources in an effort to pressure the Colombian government to do its job. At a meeting with the delegation in Ciudadela la Paz, adults reported that they look to Profamilia to act as an intermediary in helping help them gain access to the health system.¹⁹⁵

¹⁸⁸ Profamilia study, chart 5.8, p.50.
¹⁸⁹ Meeting with focus group, Soacha, Nov. 15, 2001.
¹⁹⁰ Meeting with focus group, Soacha, Nov. 15, 2001.
¹⁹¹ Meeting with focus group, Soacha, Nov. 15, 2001.
¹⁹² Meeting in Ciudadela la Paz, Barranquilla, Nov. 6, 2001.
¹⁹⁵ Meeting with focus group, Soacha, Nov. 15, 2001.
UNFPA officials in Bogotá reported they have used a small amount of funding from Belgium and from remaining natural disaster funds to improve IDP women’s access to services. Their approach is to make women aware of their rights so they can put pressure on the state system, and they fund state and local NGOs to do awareness training at the local level.  

The need for family planning services for IDPs is critical. IDP adolescents have limited access to family planning information but are eager for information about reproductive health. In the Nelson Mandela settlement in Cartagena, young people said they became Profamilia peer educators in order to learn about sex, to avoid making mistakes themselves and to transmit information to others. None of the adolescents interviewed knew about emergency contraception, which is available from Profamilia.  

Family planning knowledge in general was limited, and that lack of knowledge puts women at risk. In Puerto Asis, Putumayo, women mentioned all of the modern methods of family planning, but they were confused about natural family planning. Illegal abortions are common. The women were familiar with over the counter medications such as the gastritis medication Citotech to induce abortions. They also relied on folkloric methods, saying if a woman was raped or had unprotected sex and did not want to get pregnant she could drink strong coffee or use lemon juice. They had no knowledge of modern methods of emergency contraception. In la Esperanza, Barranquilla, women disapproved of abortions, but knew that many women tried it and many failed. They attributed the recent death of a young girl to an unsafe induced abortion. A Profamilia group in Quibdó, which included women as young as 16, also mentioned various folkloric ways to avoid pregnancy, as well as the widely available Citotech.

**HIV/AIDS and Sexually Transmitted Infections**

An ANMUCIC member in Quibdó described HIV/AIDS as a time bomb waiting to go off. IDP adolescents are sexually active at a young age. They are exposed to sexual violence and exploitation and often turn to prostitution for survival. The UN Theme Group on Displacement has expressed concern about the increase in STIs among IDPs as a result of the close quarters found in IDP settlements or as a result of sexual aggressions suffered by young IDP women, who do not then receive adequate treatment or medical follow-up. Ministry of Health officials reported to the delegation that family planning studies show that adolescents do not think they are at risk in the exercise of their sexuality. At the Cartagena Center, the director reported that HIV and STIs are more common among the urban population, that IDPs are at risk and are not aware of prevention measures.  

Despite these alarming indicators, government policies show little recognition of the risks presented by HIV/AIDS and STIs to IDP adolescents. IDP adolescents reported receiving little in the way of sexual and reproductive health education in schools. According to Profamilia workers in Bogotá, Colombia formerly had wonderful sex education programs in schools; however, reproductive health education has been undermined by the intervention of religious groups since 1993. In their view, national sexual education has failed.
IDP adolescents interviewed by the delegation showed only a basic level of knowledge of HIV/AIDS and STIs and treated the problem simplistically. Even Profamilia project peer educators in Ciudadela la Paz, Barranquilla said, “Just don’t have sex with people with AIDS.” In La Esperanza, Barranquilla, young women stated that nail and hair loss were symptoms of a person sick with AIDS.

Condoms are available if people can pay for them. In Villa España, Quibdó, young people reported that they could buy condoms from Profamilia (100 pesos (5 cents) each) or in pharmacies. In general, young people interviewed displayed little interest in using condoms. Even young men in the Nelson Mandela settlement who are Profamilia project peer educators said they did not like wearing condoms – “You can’t feel the ‘flesh’”; “They are too much trouble”; “There are too many other things to do during sex”; “We don’t know how to use them”; “Asking your partner about condoms means you don’t trust them”; “Wanting to use condoms means you have a disease.” However, these young men also stated that they would consider using condoms with someone they didn’t know well, as a means of preventing HIV transmission.

Little concrete information exists about the number of IDPs with HIV/AIDS, or the particular effects of HIV/AIDS among IDPs, although there is anecdotal evidence of an increase in HIV/AIDS cases. A UNFPA official responsible for IDP projects told the delegation that sexually transmitted infections, including HIV/AIDS, are the most serious health problem, but remain hidden because there are no statistics.

HIV testing is either too expensive for IDPs or unavailable. Profamilia charges fees for HIV testing which limits its accessibility for low-income groups. Profamilia’s laboratory technician explained that Profamilia in Bogotá carries out 25-30 HIV tests a week. Until mid-2001 there was one positive test a month; there is now one positive test per week. The director of the Ismael Roldan Hospital in Quibdó reported that the hospital did not even have the facilities to test for HIV.

Substantial homophobia and prejudice against HIV-positive people exist on all sides in Colombia. UNFPA officials in Bogotá reported that in the demilitarized zone, the FARC tests men and women for HIV, and that recently three women were reportedly killed because they were HIV-positive. They stated that the FARC burns houses of suspected gay men and they also described paramilitary abuses. A 16-year-old mentally disabled boy who was HIV positive went home to live with his family after being institutionalized. Subsequently he was abused terribly by paramilitaries. ANMUCIC members in Bogotá reported that people with AIDS are sometimes identified and “thrown in the river.”

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205 Meeting with group of young people, Ciudadela la Paz, Barranquilla, Nov. 6, 2001.
206 Meeting with group of young women, La Esperanza, Barranquilla, Nov. 6, 2001.
207 Meeting with group of young people, Villa España, Quibdó, Chocó, Nov. 16, 2001.
211 Interview, Quibdó, Chocó, Nov. 16, 2001.
212 Interview with UNFPA officials, Bogotá, Nov. 15, 2001.
WORK

IDP adolescents who are not in school desperately want to work, but little work is available. Young adults face discrimination and insulting treatment as IDPs. An official with the Defensoría del Pueblo reported that IDPs could not find work as displacement itself is treated as a crime. In Villa España, Quibdó, young people reported that people in Quibdó treat them badly and call them dishonest, thieves and troublemakers when they go to look for work. They are openly told that they won’t be hired because they are IDPs and that IDPs are destroying Quibdó. One 18-year-old mother of two children said she had left her job because her employer unfairly accused her of being a thief. Adolescents described their inability to find work as their most pressing problem.

Youth in Ciudadela la Paz, Barranquilla reported that very few in their group are in school and have jobs. Those jobs that are available mainly involved selling or were odd jobs. Among the young women the delegation met with in la Esperanza, Barranquilla, the few who worked were street vendors or held other low-wage jobs. Only in the Nelson Mandela settlement did some of the men, who are also Profamilia educators, report that they work full or part time as bus fare collectors, pizza makers or fruit vendors.

Neither IDP youth nor adults receive government support for productive projects. An ANMUCIC member in Quibdó reported that she wanted to donate land to create a communal farm of IDP women, but that they needed funding to begin productive projects. ANMUCIC members reported that in Chocó and Magdalena Medio, IDPs do not have access to small business loans for groups of five people or more that are available elsewhere. Participants in a discussion group in Villa España, Quibdó sought training for jobs, microcredits and funding for their communities. The issue was intimately connected to the desire to provide the means for education for their children – they wanted work so their children could study.

According to the UN Senior-Agency Network, “[d]isplaced youth also confront serious limitations in accessing the labor market and are drawn to violence, drug abuse and delinquency.” Young women turn to prostitution because they cannot find other work. IDP women are often treated as prostitutes regardless of their intentions. A young woman at the Defensoría reported being solicited for prostitution as she begged at a street corner.

ANMUCIC members in Bogotá have reported that the principal work opportunities for adolescents are the paramilitaries, guerrillas or military. Guerrillas have offered 450,000 pesos ($200) to youth who are recruited, a relatively small amount of money but enough to tempt young people with no other options. An NGO worker from Bucaramanga reported that paramilitaries have likewise offered recruitment fees, but then have required their recruits to raise the money themselves through robbery or other illegal activities.

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214 Likewise, far fewer women displaced by armed conflict work than other women from poor areas or the country as a whole. Profamilia study, chart 4.5, p. 35.
216 Meeting with group of young people, Villa España, Quibdó, Chocó, Nov. 16, 2001.
217 Meeting with group of young people, Ciudadela la Paz, Barranquilla, Nov. 6, 2001.
218 Meeting with group of young women, la Esperanza, Barranquilla, Nov. 6, 2001.
220 Meeting with ANMUCIC, Quibdó, Chocó, Nov. 16, 2001.
221 Meeting with group of young people, Villa España, Quibdó, Chocó, Nov. 16, 2001.
222 Senior Inter-Agency Network Findings, p. 4.
224 Meeting at ANMUCIC, Bogotá, Nov. 12, 2001.
In Villa España, Quibdó, young people reported that neither young people nor adults in Quibdó found work, and they are still waiting for the government to provide them with assistance. They commented that politicians notice them only when they need votes, and that friends in Quibdó or NGO personnel were the only people prepared to help them. Young people said they were not involved in any formal social projects and that there were no programs aimed at helping them to stay out of trouble.  

As a result of the national economic crisis, unemployment, the internal armed conflict and absence of education opportunities, large numbers of Colombian children are forced to work. UNICEF estimates that of the 2.5 million children and youth between the ages of nine and 17 who work in Colombia, 23.4 percent work in the streets. In Cartagena, 21 percent of adolescents work. Of these, 35 percent work for more than 45 hours per week. The most common occupation (50 percent) is street seller. The International Labor Organization reported that 1.5 million children between seven and 17 years old – 18.8 percent of the population of minors – work in Colombia. Forty percent of the minors who leave school engage in domestic labor or very dangerous work.

Everywhere the delegation visited, adolescents expressed their intense desire to be involved in productive projects so that they could earn money for their families. In Soacha, delegation members visited a World Vision workshop that demonstrates the substantial effort and expense required for such projects. In two small projects, 20 IDP women in one project sew blouses and 25 people, mostly men, make leather products. Currently, the women in the sewing group earn an average of 77 cents per day. World Vision rents the building, provides an administrative staff for the business, including accounting and legal aspects, and trains the workers. Additionally, there is a team of volunteers which assists with the program. Such projects are rare. Staff members were not aware of other similar projects in Bogotá.

CHILD SOLDIERS

The Defensoría del Pueblo reported that about 6,000 children are actively involved in armed struggle and estimates that 7-10 percent of the paramilitaries and guerrillas are minors, with some recruits as young as

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226 Meeting with group of young people, Villa España, Quibdó, Chocó, Nov. 16, 2001.
228 UN Theme Group, Estado de Situación, p. 44.
229 Juan Londoño, La Crisis y la Violencia Agravan el Trabajo Infantil en Colombia, El Nuevo Herald, March 4, 2000.
231 Site visit to World Vision project, Soacha, Nov. 15, 2001.
eight.\textsuperscript{232} As many as a third of the children in guerrilla groups are girls. Urban militias (linked to various parties) include about 7,000 children below 18.\textsuperscript{233} International organizations, such as Rädda Barnen (Save the Children Sweden) and Human Rights Watch, report that thousands of children have been involved on all sides of the Colombian conflict. They have been used as “spies, messengers, kidnappers, guards and human shields, as well as in armed conflict.”

Children and adolescents both from the countryside and from economically depressed urban areas are easy targets for guerrilla and paramilitary recruitment. Both boys and girls are vulnerable to recruitment as joining an armed group provides an escape from the harsh reality of displacement. But, of course, this affiliation carries its own risk of death, injury or sexual exploitation.

Most children join armed groups because of poverty, family abuse, sexual abuse, lack of access to school and an absence of job opportunities.\textsuperscript{234} ANMUCIC in Bogotá reported that sometimes families deliver their adolescent boys to guerrillas so that they will not be killed by paramilitary groups.\textsuperscript{235}

On September 6, 2000, Colombia signed the Optional Protocol on the Convention on the Rights of the Child, which raises to 18 the age of participation in hostilities and forced recruitment of children into armed forces. In December 1999, Law 49-99 was adopted banning mandatory and voluntary recruitment of children under 18 from the government armed forces; however, there is no monitoring mechanism to ensure compliance with the law. In December 1999, the Colombian army reported it had discharged the last 980 soldiers in its ranks under 18.\textsuperscript{236}

In June 1999, FARC promised to stop recruiting children below 15 but has not ceased the practice.\textsuperscript{237} Human Rights Watch reported that in January 2000 FARC Commander Manuel Marulanda told reporters that FARC would continue to recruit soldiers 15 and older.\textsuperscript{238}

Demobilized Children are Treated as Criminals

The Colombian Children’s Code does not discuss protocols for children who are demobilized either through capture or through voluntarily giving up arms. Traditionally, judges have sent captured children combatants to institutions for criminal violators. Only a few children have received spaces in specialized centers where they may obtain protection and reeducation.\textsuperscript{239}

The director of the ICBF advised the delegation that a new policy was instituted three years ago requiring that former child soldiers be treated as victims rather than criminals. He reported that services were provided for 700 former child soldiers in the last three years, and that 150 children are now in the program. However, in February 2001, the United Nations High Commissioner for Human Rights (UNHCHR) noted that comprehensive care for children who previously participated in hostilities was unavailable. “Minors who surrender and those who are captured are treated differently; while those who surrender may benefit under State welfare programs, those who are captured face criminal penalties.”\textsuperscript{240}

\textsuperscript{233} Rädda Barnen country summary, Colombia (hereafter Rädda Barnen country summary) [www.rb.se]
\textsuperscript{234} \textit{Segundo Avance}, § 3.3., citing a study carried out by Erika Páez, \textit{Diagnóstico sobre las niñas en grupos armados colombianos}, Terre des Hommes – Bogotá, Germany, 2001.
\textsuperscript{235} Meeting with ANMUCIC, Bogotá, Nov. 12, 2001.
\textsuperscript{236} Human Rights Watch, \textit{World Report 2001: Children’s Rights – Child Soldiers}.
\textsuperscript{237} Rädda Barnen country summary, Colombia.
\textsuperscript{239} Angela Constanza Jerez, \textit{Niños: Objetiva de Guerra}, El Tiempo, Aug. 20, 2000
\textsuperscript{240} UNHCHR, “Organization of Work,” p. 19.
Human Rights Watch has also reported that the army uses captured child guerrillas as spies and informants before turning them over to child welfare authorities.\(^{241}\)

ICBF reported that the current program offers a safe house system with three programs: 1) foster families with one to two children per family; 2) specialized homes for 25-30 children; and 3) three to four children in an apartment under the supervision of an adult. Children are to spend no more than 72 hours in a reception center prior to their placement.\(^{242}\)

In March 2001, the Office of Transition Initiatives’ (OTI) Bureau of Humanitarian Response, USAID announced a $2.5 million two-year program to reintegrate former child combatants. USAID/Colombia Mission provides the funds to the International Office of Migration. According to OTI, “program activities include initiatives to clarify the legal status of the children, developing new treatment and reintegration methods, and assisting a network of Colombian organizations to better respond to a massive release of child ex-combatants.”\(^{243}\) OTI reports that its program works with the ICBF to strengthen and expand its pilot program to support ex-combatant children in four specialized treatment centers. OTI has opened one additional center in the north of the country, with plans for an NGO to administer a second center in the south. These centers will be fully funded by USAID in the first year, jointly funded with the ICBF for a year and then wholly funded by the ICBF.

OTI also reported working closely with ICBF to improve the flow of the children’s cases through the legal system.

While the intent of this program is good, many facts are not yet clear. The number of children served is still quite small. The ICBF director’s claim that children spend no more than 72 hours in a reception center is contradicted by OTI’s report that the time in a reception center is “usually not more than a month.”\(^{244}\) It is unclear whether any rehabilitation is provided for girls who were sexually abused either before they joined an armed group or during their service. The ability of ICBF to fully manage the funding in the future is questionable given the admitted lack of funding for other programs related to IDPs. The Women and Armed Conflict Working Group recently reported that in the absence of specific legislation for these cases, young people continue to be treated as criminals rather than victims. The project needs to incorporate attention differentiated by gender; and legal and legislative support is needed to protect the rights of child ex-combatants and to meet their personal and psychosocial needs. Moreover, the process of reintegration is complex; in general, the rights of boys and girls in Colombia are not effectively protected.\(^{245}\)

IV. THE NATIONAL AND INTERNATIONAL RESPONSE

THE GOVERNMENT OF COLOMBIA

In its 1999 report, the Women’s Commission criticized the Colombian government’s lack of political will in implementing Law 387 (the basic legal mechanism governing IDP assistance), particularly noting the overall situation of minimal accountability and the decentralization of services without adequate

\(^{242}\) Interview with director of the ICBF, Bogotá, Nov. 13, 2001.
\(^{243}\) USAID, OTI Hot Topics: Colombia, August 2001.
\(^{244}\) Id.
\(^{245}\) Segundo Avance, § 3.3.3.
resources or training. Sadly, much of what was reported in 1999 is still true with respect to the treatment of IDP children and adolescents.

There is no question that Colombia faces an enormous task and that the government has made some progress, at least with respect to the “normative framework” for the response to the worsening situation of internal displacement. But there remains a vast chasm between policies and implementation.

On many occasions during the delegation’s visit, government officials explained the government’s inability to provide adequate services to IDPs as a “structural problem.” That is, the government cannot deliver adequate services to IDPs because it cannot deliver adequate services to the population as a whole. This explanation is unacceptable given the gravity of the displacement situation. The magnitude of displacement in Colombia continues to receive little public attention there.

The design of government assistance continues to be based on premises that are not reality based. Clearly, a three-month emergency assistance plan (even if extended an additional three months) is inadequate. And even emergency assistance, if it is to have any meaning for children, must take into account the importance of children attending school and the need for psychosocial attention, and must make better provision for shelter, water, sanitation and health services.

The official government policy is predicated on the premise that IDPs return to their places of origin. There is a sense still from some government officials that providing medium-range or long-term projects would contradict this policy and encourage IDPs to remain in communities where they have found security. But there is indisputable evidence that violence, human rights violations and resulting displacement are increasing. The ongoing lack of security – the very cause of displacement – prevents IDPs from returning to their home communities and policy implementation must reflect this.

Moreover, the Colombian government is not blameless in the displacement itself. Complicity of security forces with paramilitaries who cause much of the displacement is well established. Recent UN reports have concluded that the government has in general failed to prevent displacement, to systematically identify zones of risk and to respond to early warnings of impending attacks.\(^{246}\)

The delegation encountered disagreement among government officials about matters as fundamental as the need for special programs for IDP children and adolescents based on the catastrophic effects of displacement. The ICBF director saw no need for such programs, which he believed would stigmatize children.\(^ {247}\) In contrast, Ministry of Education officials indicated that the special needs of the IDP population called for special programs.\(^ {248}\)

Furthermore, the government continues to deny that problems in IDP programs exist. Nor does it face up to its responsibilities toward IDPs. RSS officials claimed never to have heard of delays or obstacles with registration\(^ {249}\) while in every place the delegation visited, women complained of substantial delays and bureaucratic problems with the process. ANMUCIC reported little assistance in obtaining government funds for a project to buy land where income-producing projects could be carried out.\(^ {250}\) A group of IDPs, mostly women and children, were camped in front of the Defensoría del Pueblo during the delegation’s visit, protesting the lack of attention from the government. According to a Defensoría official, the ICBF asked what the Defensoría was doing for families, as though the ICBF had no responsibility for them. Government agencies recognized the psychological effects of displacement on children and adolescents,

\(^{246}\) UN Theme Group *Estado de Situación*, pp. 38-39; UN Senior Inter-Agency Network Findings, pp. 1, 2.

\(^{247}\) Interview with ICBF director, Bogotá, Nov. 13, 2001.

\(^{248}\) Interview with Ministry of Education officials, Bogotá, Nov. 13, 2001.

\(^{249}\) Interview with RSS officials, Bogotá, Nov. 13, 2001.

\(^{250}\) Meeting with ANMUCIC, Bogotá, Nov. 12, 2001.
and the Ministry of Health spoke of mental health problems as the principal health problem. Yet state programs do not address these issues.

The shift in responsibility for serving IDPs to the departmental and municipal levels has been carried out without sufficient resources. Government officials freely admitted to the delegation that services varied widely from area to area, and that the government had no means to measure, let alone ensure, that the services were provided. Personnel at the national level are scarce and stretched far beyond their capacity to perform their role. At the local level, there was clear evidence of the failure to respond to IDP needs. IDPs in all the areas visited by the delegation reported a lack of information, a lack of responsiveness at the local level, and an absence of services.

**THE UNITED NATIONS**

The UN Senior Inter-Agency Network on Internal Displacement has recognized that the UN’s work with IDPs in Colombia does not meet their needs. “The main focus of the UN’s activities in Colombia is on reinforcing and supporting the national and local capacity to respond to the crisis. There is very limited direct assistance being provided to the displaced as compared to the extent of the needs... Moreover, the internally displaced are spread out over large areas of the country, making access to these populations extremely difficult for the limited number of international and national organizations with presence in the field.”

The Theme Group on Displacement has also acknowledged that the work of UN agencies in urban centers – where most IDPs live – is still very limited.

UN and Colombian national funding for programs is grossly inadequate to address the needs of the burgeoning population of the displaced. The combined budget for all UN programs for IDPs in Colombia is only $15 million. The national budget for IDPs is only $70 million for 2001 and $78 million for 2002.

Four UN agencies – UNHCR, International Office of Migration, the World Food Program and the World Health Organization – have offices in Colombia. UNICEF sends teams there. UNHCHR planned to open offices in Cali and Medellín in 2001. It now reports that the agency will instead begin operations in the two cities in February 2002, although it does not yet have offices.

The UN has taken important steps in assessing the situation of IDPs through the WFP and IOM studies. It has also taken substantial steps to coordinate the work of UN agencies and to identify the needs of IDPs in a systematic way. In 1999, the UN formed the Theme Group on Displacement because the prevention of displacement and the need for holistic attention to Colombian IDPs demanded coordinated action. The UNHCR coordinates the Theme Group, which is composed of nine UN specialized agencies and the IOM. The International Committee of the Red Cross, European Community Humanitarian Office (ECHO) and the RSS participate as observers. Since September 2000, the UN Office for the Coordination of Humanitarian Affairs (OCHA) has supported UNHCR in its work.

In January 2001, the Theme Group issued *The Situation of Displaced Persons and Challenges for 2001*. In August 2001, it issued *Estado de Situación del Desplazamiento*. These reports present a...
comprehensive picture of the accomplishments and gaps in services to IDPs, including children and adolescents.

In addition, the UN Senior Inter-Agency Network on Internal Displacement, led by the UN Special Coordinator on Internal Displacement, carried out a mission to Colombia in August 2001 to assess the needs of IDPs, especially groups with special needs such as women, adolescents and children. The goal was to review operational capacity of UN and other agencies on the ground; identify gaps in humanitarian response; review institutional arrangements between UN agencies, the Red Cross, NGOs and the government of Colombia; and make recommendations. The Network issued a critical report on these issues.  

In May 2001, UNHCR carried out a consultation with displaced women, UN agencies, ICRC, ECHO, Colombian government entities and NGOs regarding the situation of displaced women in Colombia. The final report outlines major violations of the Guiding Principles on Displacement.

As previously mentioned, the UN Special Representative of the Secretary-General on Human Rights Defenders and the Special Rapporteur on Violence against Women recently conducted missions to Colombia and are expected to issue reports concerning their conclusions.

The UN’s work has been critical in identifying the needs of IDPs and the limits of government programs. At the same time, UN agencies are able to directly respond to the needs of Colombian IDPs in only an extremely limited manner.

**THE UNITED STATES GOVERNMENT**

According to the US State Department, “[t]he government of Colombia developed ‘Plan Colombia’ as an integrated strategy to meet the most pressing challenges confronting Colombia today – promoting the peace process, combating the narcotics industry, reviving the Colombian economy and strengthening the democratic pillars of Colombian society.” The US agreed to provide a $1.3 billion package of assistance in fiscal years 2000 and 2001. Only $30 million of this funding was destined for programs to aid IDPs. This, however, was a substantial increase over the $2.5 million previously earmarked for IDP programs. Most of the US funding related to military, police and anti-narcotics efforts. In August 2000, over the objections of many human rights organizations, President Bill Clinton waived human rights conditions attached to the Colombia aid package. The principal focus of “Plan Colombia” has been the southern coca-growing department of Putumayo.

The US Congress has now approved a $625 million counter-narcotics program in the Andes, more than $100 million less than the amount asked for by President George W. Bush. More than $300 million are allocated for Colombia. It is unclear how much money is allocated for Colombian IDP programs. Under the program, Colombia’s military would be required to improve its human rights record in order to receive money. Unlike the 2000 package, waivers of human rights standards are not included. The US State Department would have to certify that the military cooperates with civilian courts and that soldiers linked to paramilitary groups are suspended. The Colombian military will have to cut its ties to

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257 UN Senior Inter-Agency Network Findings.
258 *Informe Final, Consulta Con Mujeres Desplazadas*.
260 Id.
261 Interview with USAID officials, Bogotá, Nov. 15, 2001.
paramilitary groups. Spraying must meet US standards.\textsuperscript{263} The Colombian government now seeks to use anti-drug funding for military purposes, and the Bush administration has indicated its support for this.

The Bush administration has touted the success of the coca-eradication spraying. However, farmers who signed up for the crop replacement program in Putumayo recently complained that guerrilla violence and bureaucratic delays have interfered with promised aid. As a result, many have again begun growing coca. Spraying has resumed, and farmers complain about destruction of their legal crops.\textsuperscript{264}

US aid to IDPs is provided through USAID. Funding is provided to five grantees. Some of the five grantees, in turn, provide subgrants to NGOs.

According to USAID officials in Bogotá, there exist major obstacles to providing assistance to IDPs. Security for USAID funding recipients is a serious concern as armed groups have threatened them. Assistance is complicated as IDPs move from place to place. The problem of IDPs is huge and can be resolved only by a resolution of the armed conflict. Most IDPs cannot return to their places of origin, and land disputes make long-term resettlement difficult.\textsuperscript{265}

USAID officials acknowledged the need for medium- and long-term development programs. The first phase of the USAID program has concentrated on secondary cities. Rural areas continue to present security risks. Bogotá, which is the largest recipient of IDPs, was not included in the first phase.

Colombian NGOs advised the delegation that most Colombian NGOs would not accept USAID funding. They view “Plan Colombia” funding as a foreign investment in war, which intensifies the conflict and increases IDP numbers. In their view, the funding would make them a target of armed actors. They do not consider the funding to be a social investment. Rather, they believe it strengthens those NGOs that work with paramilitaries.\textsuperscript{266} The risks to their security are real; however, it appears that some NGOs may accept “Plan Colombia” funding because they receive it from USAID grantees, rather than directly from USAID. Furthermore, European Union funding is mixed with USAID funding in “Plan Colombia,” so the exact source of the funding may not be clear.

\textbf{NONGOVERNMENTAL ORGANIZATIONS}

Many Colombian NGOs continue to do brave and important work with limited resources and in the face of real danger. But the delegation did not encounter anyone who could give an overall picture of which organization does what and where they do it. In many places, NGOs set up shop without consulting local authorities or other NGOs. The duration of projects, measure of success and financing for many are unknown. Nor is it clear which NGOs actually provide direct services.

The Findings and Recommendations of the UN Senior Inter-Agency Network on Internal Displacement reported serious problems in the coordination of NGO activities. The UN Theme Group on Displacement does not include effective NGO participation. This participation is critical, since UN presence in many areas of the country is so limited. The NGO community does not have a single coordinating group. There is little coordination at the local level between the UN and NGOs and between government agencies, national NGOs, civil society organizations and IDP organizations.\textsuperscript{267}

\textsuperscript{265} Interview with USAID officials, Bogotá, Nov. 15, 2001.
\textsuperscript{266} Meeting with NGOs, Bogotá, Nov. 14, 2001.
\textsuperscript{267} UN Senior Inter-Agency Network Findings, pp. 9-10.
The Grupo de Apoyo de los Desplazados (Support Group for the Displaced – GAD), which was formed in 1994 as an umbrella organization for 13 different national NGOs working on issues of displacement, disbanded in the summer of 2001. In its statement to the public at that time, GAD decried the “catastrophic magnitude” of displacement and Colombia’s human rights crisis. The group criticized the government’s repeated failure to prevent displacement and to help and protect IDPs. No other NGO coordinating group has emerged to replace GAD.

ANMUCIC – Members Risk Lives to Assist IDPs

The situation of Asociación Nacional de Mujeres Campesinas e Indígenas de Colombia (ANMUCIC) clearly reveals the problems facing national NGOs. Since its creation in 1985, ANMUCIC has worked to improve the quality of life for rural women through gaining access to agricultural reform programs and empowering them to increase their participation and leadership in local and national affairs. These activities have been affected drastically by armed conflict. Thirty ANMUCIC members have been murdered since 1995. Many of its leaders and members have been displaced within and outside Colombia, primarily because of threats to them by paramilitaries who believe that their knowledge of rights is dangerous to the status quo. Its membership has decreased to 90,000 from the 100,000 reported at the time of the first Women’s Commission delegation in late 1998. It cannot operate in four departments because of violence. Massacres in Arauca have caused the group to decrease its work there.

ANMUCIC historically has had few resources. Government funding for ANMUCIC was cut under the Pastrana administration. Its funding sources are mixed and informal. Now it must devote its resources almost exclusively to supporting IDP families, e.g., children whose ANMUCIC mothers were murdered, rather than to broader activities. ANMUCIC’s activities with IDPs fall under humanitarian assistance, such as shelter, food and sometimes health. This work is done with informal solidarity and financial support from other women’s groups. This support has enabled ANMUCIC to avoid the bureaucratic obstacles and time limits imposed by the RSS. But ANMUCIC can help only a tiny fraction of all the IDPs who need help.

For several years, ANMUCIC has worked on a project financed by the International Rescue Committee to acquire property in Cundinamarca to construct housing for IDPs. Although financing was approved two years ago, the project has been seriously delayed because of the difficulty in acquiring land. The RSS was of little assistance in this process, instead requiring ANMUCIC to solicit help from the Instituto Nacional de Reforma Agraria (National Institute of Agrarian Reform – INCORA).

ANMUCIC reports that it is losing its autonomy because – in order to survive – it must ask “permission” of armed actors for its activities. Obtaining such “permission” limits what the organization can do, since it must concentrate on self-improvement activities and abandon activities that involve organizing and confronting the government.

ANMUCIC also carries an unfair burden of blame for the situation of IDP families and orphans. “My mother and father were murdered because they were working for ANMUCIC,” said one boy helped by the organization. “My life changed because of what I did and now it is worse,” said a member. Blame unfairly placed on ANMUCIC is heightened by ANMUCIC’s inability to respond to the needs of the IDP population, and deflects attention from the government’s failure to meet its responsibility to prevent displacement and to help IDPs.

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270 Id.
Because of threats against the organization, ANMUCIC has had to move its offices to the INCORA building. The government has offered members cell phones as protection, which, given the nature of violence in Colombia and the inaction of the government, is a completely inadequate form of protection.271

Security is a risk for many NGOs. At a meeting of NGOs in Bogotá, an NGO representative described how her colleague was murdered in Barrancabermeja. Several days before the meeting, the Organización Feminina Popular (OFP) office in Barrancabermeja was completely destroyed, and its contents were ransacked. At that time, the OFP had received no response from the government. Few NGOs operate in areas such as Putumayo because of the danger.272

The delegation met in Bogotá with a range of NGOs which provide significant services in various places in Colombia including Fundación Dos Mundos which provides psychosocial services to children; Benposta; Save the Children; Taller de Vida; Defensa de los Niños Internacional; ASODA; and the International Rescue Committee (IRC). In Puerto Asis, Putumayo, the delegation observed a Casa de la Mujer workshop with recently displaced women.

Because it is home to such a great concentration of IDPs, the Nelson Mandela settlement in Cartagena is the focus of many NGOs. But IDPs there reported that there is poor coordination among the organizations. They were dismissive of the “tourist” agencies (i.e., people who do surveys or other limited tasks and then leave without assisting the community).

Mencoldes – Providing Integrated Assistance to IDPs

Delegation members met in Bogotá with the Mennonite organization Mencoldes, which operates an unusually comprehensive and efficient program there. Mencoldes receives funding from the IRC and the Swiss government and maintains a staff of 11. Mencoldes used to run an albergue, or temporary shelter, in Bogotá but closed it both because of expense and because political and social difficulties associated with trying to relocate the IDPs it was designed to temporarily shelter.

Mencoldes runs the Centro de Atención de Desplazados and works with about 350-400 families a year. The center seeks to provide integrated assistance to its clients over the course of several months. The first step in the process is an interview of the newly arrived IDP with a social worker who takes a history and conducts a complete evaluation of the most urgent necessities, including medical, dental, psychological, clothing, and basic food needs. At a once-a-week orientation session, families are introduced to the exigencies of living in the capital, informed of their rights, and instructed on how to negotiate bureaucratic issues such as registering for the RSS. Most families who participate in this process have arrived in Bogotá within three months prior to enrolling in the Mencoldes program. Once a month, a Profamilia representative holds a session at Mencoldes on reproductive health. At each orientation session, Mencoldes delivers mercados, generally food assistance, to the families. For six months, these families have access to a doctor and a dentist through Mencoldes.

The second phase of Mencoldes’ service to IDPs involves training for skills such as tailoring/dressmaking and hairdressing. This training takes place in conjunction with ongoing sessions related to psychosocial development. Finally, when a client is ready to proceed on his or her own, Mencoldes provides micro-loans that help them to begin their small businesses, including such activities as selling arepas (cornmeal cakes) or flowers.

Mencoldes has also started a program of training women to become seamstresses. After several months of training, the women will graduate with a certificate of skill sufficient to obtain work in the garment factories of Bogotá. It is also beginning a computer literacy/training course along these same lines, with the objective that the student will, upon completion, be able to find work in the field. Each of these programs is small in scale.

The third phase of the Mencoldes program involves promoting the participation of Mencoldes clients in formal IDP organizations. Mencoldes conducts leadership training for these groups and promotes interaction with government agencies.

IV. RECOMMENDATIONS

Well aware that recent events in Colombia may bring an escalation of war and vast numbers of newly internally displaced, the Women’s Commission for Refugee Women and Children makes the following recommendations:

To the Government of Colombia

- The government must make protection of human rights the cornerstone of its programs for the internally displaced population, with special emphasis on the rights of women and children.
- The government must prosecute human rights violations on all sides of the political violence.
- The Colombian security forces must cease their connection to and support for paramilitary groups whose violations of human rights have caused the displacement of tens of thousands.
- The government must take preventive measures to ensure that people are not displaced and to warn them when they are at risk from armed groups. Early warning and prevention work should include women’s and youth organizations.
- The government must develop and finance programs that meet the medium- and long-term needs of the displaced, including those who are displaced on an individual or family basis, as well as those displaced in massive events. It must recognize that most IDPs cannot return to their communities because it is too dangerous to do so. Programs must be suitable for urban or rural settings.
- The displaced population, especially women, children and adolescents, should participate in designing and carrying out programs intended to benefit them.
- Education, psychosocial services, food, health care and housing must be provided to displaced children and adolescents, to meet their emergency as well as longer-term needs. Food programs should not depend on school attendance.
- Health care access for IDPs must be a national priority. Reproductive health care for IDPs should be available through government hospitals, as well as clinics accessible to displaced communities.
- The government must advise the displaced of all benefits to which they are entitled, ensure that government at all levels provides those benefits, and monitor and evaluate the efficacy of programs. It should work through women’s organizations to disseminate this information.
- Registration requirements should be made more flexible, and confidentiality must be protected so that IDPs know that registration does not endanger their lives.
- The government should carry out a public education campaign, making visible the situation of the displaced, including campaigns to prevent gender violence and exploitation.
To the United Nations

- The Theme Group on Displacement should map which programs are available to IDPs throughout the country through the government, NGOs or international organizations in an effort to promote the coordination of these efforts. It should take into account gaps in programming for women, children and adolescents and vigorously advocate for their protection and participation in all humanitarian programming.
- The Theme Group on Displacement should focus on development, implementation and monitoring of creative programs to benefit IDP children and adolescents based on the conclusions and challenges outlined in the August 2001 report Estado de Situación del Desplazamiento. UN agencies should increase advocacy on behalf of children and adolescents and should increase their presence at local levels.
- United Nations agencies should also advocate and develop strategies for the participation of NGOs and civil society, particularly women’s groups and youth groups, in all humanitarian, human rights, peace building and development work.
- UNICEF should develop a strategy to provide education and psychosocial assistance to children and adolescents as an emergency need and work with the government to implement this strategy on a large scale.

To the United States Government

- The US must enforce its requirement that Colombia comply with its obligations to protect the human rights of IDP children and adolescents, prosecute human rights violations and sever any connections between security and paramilitary forces.
- The US should provide substantially increased funding for humanitarian assistance for IDPs. This funding should not be allocated through “Plan Colombia” or any other mechanism that mixes anti-drug or military funding with humanitarian aid. It should target children and adolescents, women and others at-risk due to lack of power and resources.
- The United States should not support an escalation of the violence in Colombia, but instead should support civil society and peace building efforts, including women’s organizations and youth groups which provide humanitarian assistance and human rights promotion and monitoring.

To Nongovernmental Organizations

- NGOs must coordinate their activities to enhance overall effectiveness of their programming.
- Sexual and reproductive health services should be made available without cost.
- NGOs should develop sustainable income generation projects which target women and adolescents as well as men.

To all Governments, Donors and the International Community

- Provide support for the groups that provide direct services to IDP children and adolescents, including fundraising assistance, funding and institution building capacity.
- Demand that the government of Colombia provide a stronger and more meaningful response to internal displacement of children and adolescents.
- Demand that the government of Colombia respect the human rights of its citizens and provide support for a peaceful solution to political violence and armed conflict there.
V. CONCLUSION

In its 1999 report, the Women’s Commission concluded that the plight of Colombia’s displaced constituted a major humanitarian emergency. But three years later, their situation is far worse. Time and again, the recent Women’s Commission delegation was told that human rights violations continue unchecked and unpunished in Colombia, and that the government of Colombia lacks the will to act to protect or help IDPs. While the delegation met with some government officials who were struggling against all odds to provide for IDP children and adolescents, there seemed to be no common understanding among government agencies of IDP needs, the obligation to meet them or the degree to which they did not meet them.

The national government has abdicated its responsibilities by shifting the burden of assistance to IDPs to departmental and municipal governmental levels, without providing resources to support the local governments or any means to monitor or enforce compliance. Too often in Colombia, programs have been instituted only because the Constitutional Court has ordered the government to act. It is clear that three-month emergency assistance is not enough, and that medium- and long-term assistance are essential to provide food, education, health care, housing and productive activities for the hundreds of thousands of forcibly displaced citizens within the country. And for children and adolescents, it is imperative that even emergency assistance provide for their basic needs, including education and psychosocial assistance.

The international community, including the US, has a moral obligation to provide humanitarian assistance to Colombian children and adolescents. But the principal responsibility for assistance to IDPs and for the cessation of the conflict that fuels displacement lies with the Colombian government and people. The only real solution to the plight of IDPs in Colombia is an end to political violence, and only Colombians can make this hope a reality.
ACRONYMS

ANMUCIC  *Asociación Nacional de Mujeres Campesinas e Indígenas de Colombia* – National Association of Rural and Indigenous Women

AUC  *Autodefensas Unidas de Colombia* – United Defense Groups of Colombia

CODHES  *Consultoría para los Derechos Humanos y el Desplazamiento* – Advisory Office for Human Rights and Displacement

DNP  *Departamento Nacional de Planeación* – National Department of Planning

ECHO  European Community Humanitarian Office

ELN  *Ejército de Liberación Nacional* – National Liberation Army

FAO  Food and Agriculture Organization

FARC  *Fuerzas Armadas Revolucionarias de Colombia* – Revolutionary Armed Forces of Colombia

GAD  *Grupo de Apoyo de los Desplazados* - Support Group for the Displaced

ICBF  *Instituto de Bienestar Familiar* – Family Welfare Institute

ICRC  International Committee of the Red Cross

IDP  Internally Displaced Person

INCORA  *Instituto Nacional de Reforma Agraria* - National Institute of Agrarian Reform

IOM  International Organization for Migration

IRC  International Rescue Committee

MSF  *Médicos sin Fronteras* – Doctors without Borders

NGO  Nongovernmental organization

OCHA  UN Office for the Coordination of Humanitarian Affairs

OTI  Office of Transition Initiatives

PACO  Paz, Acción y Convivencia

PAHO  Pan American Health Organization

RSS  *Red de Solidaridad Social* – Social Solidarity Network

UNFPA  United Nations Population Fund

UNHCHR  United Nations High Commissioner for Human Rights

UNICEF  United Nations Children’s Fund

USAID  US Agency for International Development

WFP  World Food Program

WHO  World Health Organization