

OUR WORLD. VIEWS FROM THE FIELD.

DEMOCRATIC REPUBLIC OF THE CONGO

OPINION SURVEY AND IN-DEPTH RESEARCH, 2009



**Our world is in a mess.
It's time to make your move.**

Ipsos



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DEMOCRATIC REPUBLIC OF THE CONGO

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EXECUTIVE SUMMARY

EXECUTIVE SUMMARY

This research was undertaken in eight countries that were experiencing or had experienced armed conflict or other situations of armed violence. These were: Afghanistan; Colombia; Democratic Republic of the Congo (DRC); Georgia; Haiti; Lebanon; Liberia and the Philippines.¹ The aim was to develop a better understanding of people's needs and expectations, to gather views and opinions, and to give a voice to those who had been adversely affected by armed conflict and other situations of armed violence.

This research was commissioned by the International Committee of the Red Cross (ICRC) within the framework of the **Our world. Your move.** campaign. Launched in 2009, the campaign's goal was to draw public attention to the vulnerability and ongoing suffering of people around the world. The intention was to emphasize the importance of humanitarian action and to convince individuals that they had the ability to make a difference and reduce suffering.

2009 was an important year for the International Red Cross and Red Crescent Movement, with three significant anniversaries (the 150th anniversary of the Battle of Solferino, the 90th anniversary of the founding of the International Federation of Red Cross and Red Crescent Societies, and the 60th anniversary of the Geneva Conventions).

In 1999, the ICRC had undertaken a similar survey entitled *People on War*, which served as a basis for comparison and as a means of highlighting trends in opinions 10 years on.

This report encompasses two types of research: an opinion survey and in-depth research.

OPINION SURVEY

The Impact of Armed Conflict

Forms of violence/suffering and their consequences

Few people surveyed in the Democratic Republic of the Congo (DRC) have been unaffected by armed conflict there. Those with direct personal experience make up 61% of the population interviewed, and most others also report suffering a range of serious hardships. In total, three-quarters (76%) have been affected in some way – either personally or owing to the wider consequences of armed conflict. Of these people:

Large numbers have been displaced (58%), lost contact with a close relative (47%), had their property seriously damaged or looted (34% and 30%), or known someone who has fallen victim to sexual violence (28%).

During times of armed conflict, people mainly fear losing a loved one (54%), economic hardship (40%), sexual violence (36%) – and simply 'living with uncertainty' (26%).

Needs and assistance

In periods of armed conflict, people primarily need 'the basics' – food, shelter, protection and medical treatment – but also want 'conflict resolution'. Who should meet these needs?

Aside from people's own parents and families (to whom they turn for help most often), people receive assistance from many groups. One person in three (34%) has received help from either

¹ Respondents in seven of the eight countries were asked about 'armed conflict'. Please note that respondents in Haiti were asked about 'armed violence'.

the Red Cross Society of the Democratic Republic of the Congo (hereafter the DRC Red Cross) or the ICRC – and one in five from the UN.

Whichever group is providing help, they are all seen to understand people's needs very well.

Obstacles to receiving help

If help or support fails to reach people, the reasons most often cited are social status/discrimination (51%), corruption (49%), black markets (42%), inaccessible locations (43%) and simply not knowing that such help exists (37%). Rarely, though, is help turned down because it is not needed.

Reducing suffering

In terms of 'reducing suffering during armed conflict', it is the large international organizations (including the ICRC) and religious leaders that come to mind first for most people.

Other assistance providers that are often mentioned, although seldom first, include government authorities, the media and the military. By contrast, 'community leaders' are rarely mentioned.

The ICRC or DRC Red Cross are mentioned by 61% of the respondents.

The international community

People in the DRC have clear priorities for the international community, which include direct action. Almost half (49%) want peacekeepers, 45% emergency aid, and 36% military intervention.

In parallel with these actions 'on the ground', people see potential for wider 'political' activities such as organizing peace talks (41%) or applying political pressure (40%).

The role of 'people living outside the conflict zones' (i.e. citizens in other countries) includes taking part in activities such as public lobbying and donating money and goods.

Behaviour during Armed Conflict

Acceptable behaviour

In the DRC eight people in 10 (79%) cite some behaviour that is not acceptable during armed conflict. Without any prompting, people say that sexual violence is unacceptable, as is the killing of civilians.

Most (75%) want civilians to be off limits in all circumstances not just 'as much as possible'.

Around nine respondents in 10 are against civilians being deprived of food/water/medicine (94%), civilians being endangered by the planting of landmines (93%), attacks on populated towns/villages (86%), attacks on religious/historic monuments (93%), and hostage-taking (88%).

More people – though still a minority – are willing to accept the targeting of civilians voluntarily helping the enemy by supplying food/shelter, or by transporting ammunition.

Health workers, ambulances and the right to health care

Most people say health workers (77%) and ambulances (73%) are never acceptable targets during armed conflict.

When they are viewed as acceptable targets, it is usually because their role is not clearly identifiable or their neutrality is felt to be compromised.

People tend to believe that enemy combatants or civilians should receive the medical treatment they require and that providing them with assistance does not justify attacking health personnel.

Most people (88%) feel that health workers should give equal treatment to wounded civilians from all sides in a conflict.

Finally, almost all respondents (96%) agree that 'everyone wounded or sick during an armed conflict should have the right to health care'.

The Geneva Conventions

Two-fifths of respondents (41%) have heard of the Geneva Conventions – but views are mixed on how effective they are in limiting civilian suffering in times of war, with 53% of respondents saying they do have a marked impact, and 42% say they do not.

IN-DEPTH RESEARCH

The Impact of Armed Conflict

Respondents speak of a sense of disempowerment in the conflict. They feel they are not respected and protected as civilians.

Surviving on a daily basis is a key concern for respondents.

Respondents feel shock at the outbreak of the recent fighting and its brutality.

Personal experience of armed conflict

The armed conflict affects civilians in a number of ways. These include displacement, loss of friends and close family members, loss of livelihood and income, exposure to sexual violence and psychological and emotional trauma.

Displacement is caused by damage to property during conflict, or residents being forced to flee when weapon bearers attack them and loot their homes.

In some cases, respondents experience recurrent displacement as conflict breaks out in areas they initially flee to.

Displacement has a detrimental affect on family life, young people's education and earning a living.

Friends and family have been lost either because their whereabouts become unknown during the fighting or they have been killed.

When respondents lose their homes, the consequence is often loss of livelihood if their fields were part of the same dwelling. In addition, some respondents are no longer able-bodied because they have been injured by landmines or attacked. They therefore find it difficult to work themselves and have to rely on family members.

The women who have been raped experience severe physical and psychological consequences. According to respondents, they may subsequently be rejected by their husbands and communities. The fear of contracting HIV/AIDS is an ongoing concern for those respondents.

The psychological and emotional trauma experienced by respondents includes shock, fear, anxiety and depression. However, some respondents have a greater sense of empathy for others as a result of their experience.

Civilians' needs

The key physical needs for respondents are security, shelter, food and water. Ultimately, they feel that peace would enable these needs to be met.

Internally displaced respondents most of all want to return home. They are concerned about the lack of adequate food rations in the camps or that they will not receive their rations.

Respondents living in camps need to feel they are taking a hand in shaping their own destiny.

Access to medicine and health care is a frequently expressed need.

For those who have suffered sexual violence, there is a need for psychological support and psycho-social support to enable them to manage their feelings and begin recovery.

Humanitarian assistance

All respondents are grateful for the efforts of the humanitarian organizations working in the DRC.

Assistance is initially sought from parents and family members. Respondents expect community support but often this is not forthcoming.

Respondents give mixed feedback on their perceptions of assistance from humanitarian organizations. The ICRC and DRC Red Cross are particularly appreciated because they are perceived to work to reunite families who had been separated by the conflict and because they provide counselling support for victims of sexual violence.

There is some confusion over the role of humanitarian organizations and, where this occurs, the expectation is that the organizations would provide security in the event of attack and bring peace to the region.

A few respondents do not receive assistance because, they think, they are not in a central location or are not registered.

Desired improvements to assistance take two forms: the first is to clarify the exact role and intention of humanitarian organizations to avoid disappointment amongst the population. The second is to provide larger food rations and assistance that reaches all areas of conflict in the country.

Respondents report individual acts of kindness and humanitarian gestures among the community. Such behaviour is thought to be rooted in the religious traditions of the country and often helps provide civilians with the essentials they needed to survive.

The most frequent gesture is providing shelter to internally displaced families or individuals. Others are sharing food or offering emotional support.

Behaviour during Armed Conflict

Rules of conflict

All respondents believe that civilians must not be targeted in armed conflict. They feel that they should be spared from attack, sexual violence and theft of personal belongings and property.

Some respondents feel that better trained soldiers would prevent the rules of conflict being broken.

Right to health care

Respondents believe that everyone should be entitled to health care – be they civilians or combatants. Because of this, the protection of health-care workers is believed to be essential.

The Geneva Conventions

With the exception of first responders, few are aware of the Geneva Conventions and what their remit is. When the Geneva Conventions are explained, all respondents suggest that efforts ought to be made to ensure that knowledge and awareness of them are increased.

However, on discussing them with participants, there is some scepticism about how effectively they could be enforced.

Conclusions: priority actions

Respondents in the DRC have the following messages they would like to communicate to the rest of the world:

- the international community should use its power to force the local and neighbouring governments to find a peaceful settlement;
- despite the fact that the armed conflict has continued for so long, civilians still need the most basic assistance to help them survive and rebuild their lives.

INTRODUCTION

INTRODUCTION

The Solferinos of today

To raise awareness of the impact of armed conflict or other situations of armed violence on civilians, the ICRC decided to launch a vast research programme. This research focused on some of the most troubled places in the world – the Solferinos of today – which are either experiencing situations of armed conflict or armed violence or suffering their aftermath:

- Afghanistan
- Colombia
- Democratic Republic of the Congo (DRC) (covered in this report)
- Georgia
- Haiti
- Lebanon
- Liberia
- The Philippines

Research

The ICRC commissioned Ipsos, an international research agency, to conduct an opinion survey (statistical, quantitative research) and to design and analyse in-depth (qualitative) research in eight countries.

For the **opinion survey**, a broadly representative sample of the adult general public was interviewed, either in person or by telephone, in each country. Fieldwork was conducted by Ipsos and its international partners. The specific sampling methods and any groups/areas excluded are described in the Appendices. The questionnaire was designed to determine whether the respondents had personal experience of armed conflict/violence and, if so, the specific impact it had on them. Questions also explored respondents' views on what conduct was acceptable for combatants, the effectiveness of various groups and organizations in helping to reduce suffering during armed conflict or armed violence, the actions expected of the international community, awareness of the Geneva Conventions, and the role of health workers during armed conflict or armed violence.

The **in-depth research** was conducted through focus groups and one-to-one in-depth interviews in each country. Ipsos designed, analysed and reported on the findings, with ICRC staff conducting the qualitative fieldwork. The discussion guide was designed to complement the opinion survey and to enable the ICRC to deepen its understanding of the values, motivations, fears and aspirations of those who have been direct victims of armed conflict or armed violence. These included people separated from their families, internally displaced persons, first responders and others directly affected by armed conflict or armed violence.

Further details of the coverage and scope of the research in the DRC are given in the section on 'Research Methodology'. The questionnaire used in the opinion survey (marked-up with overall results) and the discussion guide used in the in-depth research are included in the Appendices.

Background and objectives

The year 2009 had great significance for the ICRC and the entire International Red Cross and Red Crescent Movement ('the Movement'), as two major anniversaries in the history of humanitarian work took place:

- The 150th anniversary of the Battle of Solferino. On 24 June 1859, Henry Dunant, a Swiss businessman, happened to witness the aftermath of one of the most brutal battles of the 19th century – at Solferino, in what is now northern Italy – and the carnage left on the battlefield. The suffering he saw there prompted him to take the first steps towards the creation of the Movement. His book *A Memory of Solferino* led to the founding of the ICRC in 1863. In recognition of his work, Dunant was the joint first recipient of the Nobel Peace Prize, in 1901.
- The 60th anniversary of the Geneva Conventions (12 August 1949). The four Geneva Conventions are the cornerstone of international humanitarian law. They protect, respectively, wounded and sick members of armed forces on the battlefield; wounded, sick and shipwrecked members of armed forces at sea; prisoners of war; and civilians in time of war.

To mark these anniversaries, as well as the 90th anniversary of the founding of the International Federation of Red Cross and Red Crescent Societies, the Movement launched a campaign – **Our world. Your move.** – to remind everyone of their individual responsibility to relieve human suffering.

The campaign was based on the premise that **Our world** faces unprecedented challenges, from armed conflict and mass displacement to climate change and migration; and it contends that **Your move** reminds us of our collective responsibility to make the world a better place. Like Henry Dunant, we can all make a difference, even through the simplest of gestures.

Throughout 2009, the ICRC undertook various activities to mark these historic milestones by highlighting the ongoing plight of people – particularly the most vulnerable – caught up in armed conflict or armed violence around the world.

DRC – research methodology

OPINION SURVEY

A total of 538 people aged 18 or over were interviewed in person (face-to-face) in the month of March 2009.

The survey covered three cities:

- Kinshasa (the capital, and the DRC's largest city – located in the west of the country, bordering the Republic of the Congo (not covered in this research)). Kinshasa had a population of around 9,500,000;
- Lubumbashi (in the far south-east, near the Zambian border), population 1,700,000;
- Goma (on the far eastern border with Rwanda), population approximately 300,000.

Random probability sampling was used to ensure that the final sample would be broadly representative of the those cities' populations (aged 18 years or over) as a whole. In addition, the results have been statistically 'weighted' to correct for any discrepancies between the sample profile and that of the equivalent population.

According to 2009 estimates, the DRC's population was around 69,000,000. It was heavily skewed towards younger people (the median age was just 16 years, life expectancy was 53 years for men and 56 for women – and those aged 14 or below made up 50% of the population). By contrast, those aged 65 and over made up just 3% of the population.

Assuming that the age distribution in three cities covered is similar to that of the national population, our survey of people aged 18 or over was representative of approximately 4,600,000 people.

Because a sample was interviewed – not the whole population – the results are subject to 'sampling tolerances'. These show how accurately a result from the sample reflects the result that would have been obtained from the whole population had it been interviewed.

Please see the Appendices for details on sampling tolerances.

On the charts, a '*' sign refers to a percentage of less than 0.5%, but greater than zero.

IN-DEPTH RESEARCH

The purpose of the research in each country was to understand the deeper values, motivations, fears and aspirations of those who had been direct victims of armed conflict or armed violence. The research was carried out through focus groups and one-to-one in-depth interviews, carried out by ICRC staff. The combination of these qualitative research methods was used to allow both interactive debate and personal narrative to emerge from the conversations.

The sample was organized according to a number of groups who were particularly affected in times of armed conflict or armed violence, namely:

- **Internally displaced persons.** At the time of writing, it was estimated that more than 26 million people around the globe were displaced within their own countries owing to armed conflict, violence and persecution. The internally displaced make up what has been described as the single largest group of vulnerable people in the world. Internal displacement is one of the most serious consequences of armed conflict; people are forced from their homes and suffer extreme hardship.
- **Members of separated families.** War, disasters and migration lead to many thousands of families being separated. The suffering created by such situations is not always visible to others. This global problem is mostly a silent tragedy. Needing to know what happened to a loved one is as great a humanitarian need as food, water or shelter. Too many victims of armed conflict and armed violence around the world remain without news of missing family members.
- **First responders.** A 'first responder' is most often considered as the first health worker to arrive at the scene of an emergency. However, a first responder is much more – it is anyone who provides a helping hand or a shoulder to cry on.

These groups were used to recruit participants in seven of the eight contexts to be able to draw some comparisons on a global level. In Haiti these groups were first responders and victims of violence, including sexual violence.

In addition, a specific group was selected for each country to cover an issue particular to that country. In the DRC, rape and other forms of sexual violence are a widespread threat, therefore a number of the respondents were **victims of rape and other forms of sexual violence**.

It should be noted that:

- All respondents were civilians (i.e. not combatants) and were selected based on the ICRC's on-the-ground knowledge of the areas most affected by the conflict in the eastern DRC.
- Respondents' comments, in their own words, have been included throughout the in-depth research chapters of this report, accompanied by a brief indication of their backgrounds. In order to protect identities, the names used in this report have been changed, but other facts about individuals are real. Respondents' ages are sometimes omitted when they could not be verified, but have generally been provided. These respondents' comments were selected by Ipsos and do not reflect the opinions of the ICRC.
- Respondents were often affected in multiple ways by the armed conflict. As such, for example, someone who was invited to share their experiences of being an internally displaced person may also have commented on their experiences of having been a cluster munitions victim.
- Likewise, the division between first responders and other types of civilian is not always easy to define. First responders included: ordinary civilians thrust into giving humanitarian assistance because of the conflict affecting their town, community or family; health workers; and members of humanitarian organizations, including the ICRC. Comments in this report sometimes reflect this range of experiences by individual respondents.
- Interviews were conducted and group discussions moderated by ICRC staff in the DRC. Although the interviewers were trained in qualitative research, the fact that they were from the ICRC introduced the possibility of bias in what respondents were prepared to share and how they expressed it. However, interviewers were working to an interview guide designed by Ipsos and the analysis was also undertaken by Ipsos.

In the DRC, four group discussions were carried out, lasting between 90 and 120 minutes each, one with each of the following groups:

- **Internally displaced persons.** This group consisted of four women, ranging in age from 33 to 58. They were all living in camps in Kibati, having been displaced between September and October 2008.
- **Members of separated families.** This group consisted of three women and two men, ranging in age from 18 to 59. They had all been separated from children in 2008, before being reunited with them.
- **First responders.** This group consisted of two men and four women, ranging in age from 29 and 47. They were volunteers with a Congolese NGO and involved in humanitarian assistance after the September-November crisis in the North Kivu.
- **Victims of rape and other forms of sexual violence.** This group consisted of four women, ranging in age from 28 to 43. They had all been victims of sexual violence in the North Kivu.

In addition, 10 in-depth qualitative interviews were carried out, lasting 45 minutes to one hour each:

- 2 interviews with internally displaced persons, both male. The men had been displaced several times during the armed conflict and had recently been able to return to their original village;

- 1 interview with a relative of a missing person, a mother separated from her child because of the North Kivu conflict; the whereabouts of her child was still unknown at the time of the research;
- 1 interview with a woman victim of sexual violence;
- 1 interview with a woman who had been wounded by a mine in the South Kivu;
- 1 interview with a woman who had been wounded by gunfire during the 2005 armed conflict and was undergoing medical treatment in hospital at the time of the research;
- 4 interviews with first responders: one psycho-social assistant working in a conflict-affected area; two staff members of a humanitarian organization working with people separated by armed conflict and displaced persons; and one head of a family living in an area affected by displacement and who welcomed displaced persons into his home.

Report structure

An Executive Summary with the key findings is followed by the main body of the report, covering each broad subject area in turn. The results of the opinion survey among the general public are reported on first, followed by the findings of the in-depth research among victims of armed conflict/armed violence.

The Appendices contain the sample profile and full questionnaire used in the opinion survey, marked-up with the overall country results and the discussion guide used in the in-depth research.

Please note that no country comparisons are made in this report. These can be found in the separate Summary Report covering all eight countries.

The Democratic Republic of the Congo (DRC) in context

The DRC (formerly Zaire) gained independence from Belgium in June 1960. General Mobutu, the chief of the army, came to power in a coup in 1965 and remained largely unchallenged throughout the 1970s and 1980s. In 1996, in the aftermath of the Rwandan genocide, Laurent Désiré Kabila, with strong support from Rwanda and Uganda, led a revolt. He entered Kinshasa and declared himself president in 1997. General Mobutu fled to Morocco, where he later died.

In 1998, a new rebel group was formed, again with the backing of Rwanda and Uganda, and a second conflict broke out. Some fellow members of the Southern African Development Community (Zimbabwe, Angola and Namibia) and Chad intervened on the side of the Kabila government. A ceasefire was signed in Lusaka in August 1999 and the United Nations established a peacekeeping force (MONUC) to implement the Lusaka Accord. President Kabila was assassinated in 2001, however. His son, Joseph, took over as head of state. An agreement was reached in 2003 between the belligerents and members of the political opposition on the formation of a transitional national government, formally ending a war that had cost millions of lives either as a direct result of fighting or through disease and malnutrition.

The DRC is a vast country with immense economic resources. Fighting has been spurred by the country's mineral wealth and violence has been continuous in the eastern part of the country.

The prospect of a stable, secure and peaceful DRC was threatened by the limited success of reforms to the armed forces of the DRC and delays in the disarmament, demobilization and reintegration of former fighters. The situation was particularly difficult in the provinces of North and South Kivu.

Joseph Kabila won the 2006 presidential elections. Following this important political step, there was hope for a better future for a country which had seen so many setbacks over the last decade.

Nevertheless, in the eastern part of the country, mainly in North and South Kivu, outbreaks of fighting between numerous armed groups and the DRC armed forces continued. The government called for a conference to resolve the problems in the Kivus, with the participation of most of the armed groups fighting in the region. The conference was held in Goma in early 2008.

However, the humanitarian and security situation continued to deteriorate in North Kivu and to a lesser extent in South Kivu and remained a cause for grave concern. Full-scale hostilities resumed in North Kivu in August 2008 between the DRC armed forces and the *Congrès national de la défense du peuple* (CNDP), with fighting escalating by the end of 2008. A ceasefire was concluded in 2009 and was followed by the signing of a peace agreement between the CNDP and the DRC.

In parallel, the governments of the DRC and Rwanda launched a joint military operation on 22 January 2009 against the *Forces démocratiques de libération du Rwanda* (FDLR) in North Kivu. Despite this month-long operation, clashes pitting the FDLR against the DRC army backed by MONUC increased in frequency following the official withdrawal of Rwandan troops. At the time of writing, clashes were continuing and were seriously affecting the civilian population in districts in the region.

The long and brutal conflict in the DRC has caused massive suffering for civilians, with estimates of millions dead either directly or indirectly as a result of the fighting. There have been frequent reports of weapon bearers killing civilians, destroying property, committing widespread sexual violence, causing hundreds of thousands of people to flee their homes or otherwise breaching humanitarian and human rights law.

The ICRC in the DRC

The ICRC opened a permanent delegation in the DRC (then Zaire) in 1978. At the time of writing, it was focusing on promoting respect for the basic rules of international humanitarian law and human rights law by the authorities in their treatment of civilians and detainees. It saw to it that displaced people and residents adversely affected by armed conflict and other violence had the means to survive and look after themselves and that the wounded and sick were receiving adequate health care. It worked to restore contact between separated family members – where necessary and possible, reuniting children with their families – and supported the development of the DRC Red Cross.

In particular, the ICRC:

- and the DRC Red Cross launched extensive emergency relief operations in conflict-prone areas to assist people living near the fighting or in areas to which displaced people had fled. Although poor security could make it difficult to reach some affected people, the extensive network of DRC Red Cross staff and volunteers throughout the provinces had helped. Providing emergency aid such as food and essential household items, water supply, sanitation facilities and medical care was a priority;
- and the DRC Red Cross provided displaced people, residents and returnees with seed and tools, and undertook water and sanitation projects to help to revive farming activities and boost self-reliance;
- addressed the physical, psychological and social needs of victims of sexual violence in specialized counselling centres throughout the country. Where necessary, patients were referred to local health-care facilities to receive appropriate treatment;

- and the DRC Red Cross registered unaccompanied children, endeavoured to trace children and helped reunite family members separated by the conflict. The children included those formerly associated with the armed forces and armed groups;
- regularly visited places of detention to monitor the condition and treatment of individuals detained in connection with the conflict;
- continued its dialogue with weapon bearers about numerous allegations of serious violations of international humanitarian law and human rights law that it had received.

OPINION SURVEY

OPINION SURVEY

The Impact of Armed Conflict

Personal experience of armed conflict

The scale of suffering in the DRC is immense.

Three-quarters (76%) of respondents have been affected in some way by the armed conflict there – either through direct personal experience (61%) or owing to the wider consequences. This is an experience shared by men and women, young and old.

Most often, this involves displacement, losing contact with close relatives, or serious property damage.

But even more extreme experiences – loss of life, torture, sexual violence and kidnapping – are widely reported.

Three-fifths (61%) of the people of the DRC have had direct experience of armed conflict. This is true of both men and women, and of both young and old.

Over half (58%) of those with personal experience of conflict report that they became internally displaced persons. Almost as many (47%) say they have lost contact with close relatives – and the figure is even higher among those aged 25-34 years.

Older people (aged 45 or over) report vulnerability to displacement, to looting, to theft of food by combatants, and to serious property damage.

Sexual violence (i.e. knowing someone who has suffered this violation) has affected over a quarter of the people interviewed (28%). This figure is very similar among men (29%) and women (27%).

Similarly, a quarter (25%) say a member of their immediate family has been killed.

Even torture and kidnapping are reported by large numbers of people (11% in each case). One person in 12 (8%) has been imprisoned.

In these circumstances, it is perhaps surprising that 'only' 23% feel they have been 'humiliated' – but other kinds of emotional impact are mentioned far more (see 'Feelings as a consequence of armed conflict' below).

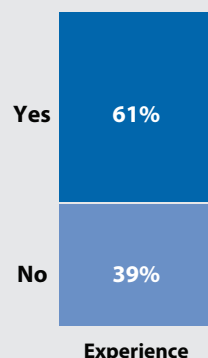
Indeed, psychological issues – fear, anxiety, etc. – are among the 'other' consequences of the conflict that people most often identify without prompting. This is especially true for women.

The state of the economy/lack of work is cited by some as a key problem that has arisen from the conflict – this issue comes to the fore especially when people's fears are examined (see 'People's greatest fears' below).

Although not as widespread as the experiences mentioned, nonetheless around one person in seven among those without personal experience of the conflict (14% – more among older people) has suffered limited access to basic necessities such as water and electricity – and one in 10 (11%) has had access to health care restricted.

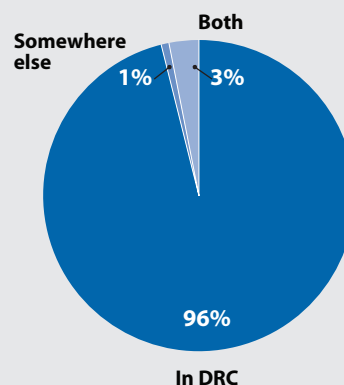
Personal experience of armed conflict

Q1. Have you personally experienced armed conflict, or not?



Base: All respondents (538)

Q2. Was this in the DRC or was it somewhere else?



Base: All experiencing armed conflict (349)

Where total does not sum to 100%, this is due to multiple responses, computer rounding or to the exclusion of "don't know" responses

Personal impact of armed conflict

Q3A. I'm going to ask you about your actual experiences during the armed conflict in the DRC. Please tell me whether any of the following things happened to you personally or did not happen as a consequence of the armed conflict in the DRC. For each one, please indicate whether it happened or did not happen to you.



Base: All who have experienced armed conflict (349)

Where total does not sum to 100%, this is due to multiple responses, computer rounding or to the exclusion of "don't know" responses

When were people most recently affected by the conflict?

For many it was within the past year (20%).

One in five people of the DRC (20%) have been affected by the conflict within the past year. This includes 3% who are 'currently' being affected – the conflict experiences of the others

are spread (without any notable gaps) back to the 1980s. Some 23% say they have not been affected by armed conflict in the DRC more recently than 10 or more years ago.

These results are a reminder that armed conflict in the DRC has been virtually uninterrupted over a long period of time.

Recent experiences

Q5. And when were you personally most recently affected by this armed conflict in the DRC?



Base: All who have experienced/been affected by conflict in any way (410)

Where total does not sum to 100%, this is due to multiple responses, computer rounding or to the exclusion of "don't know" responses

People's greatest fears

In the DRC, 36% say 'sexual violence' is a major fear. This is an exceptionally high figure. Other common concerns include losing a loved one (54%) and economic hardship/losing one's livelihood (40%).

The greatest fear among the people of the DRC – mentioned by over half (54%) – is to lose a loved one. Two in five (40%) are concerned about economic hardship or loss of livelihood. The third most widespread concern overall is the threat of sexual violence which is mentioned by over a third (36%). General 'uncertainty' is an issue for 26%, and loss of property for 23%.

The fear of becoming separated from loved ones – or of actually losing trace of them – is also widespread.

Similarly, the fear of having limited access to basic necessities is a concern for almost a quarter (22%) – though access specifically to health care is less so (10%).

Aside from sexual violence, physical harm is mentioned relatively little:

- injury is feared by 5%;
- not surviving the conflict by 9%.

Fear of sexual violence is higher among women than among men – but certainly not confined to women alone (the respective figures are 43% women, 28% men). This level of fear is the same among all those aged 18-59, only declining among those aged 60 and over.

In other respects men and women share very similar fears, with only slight differences of emphasis. (For example, men have more fear of imprisonment, women of losing contact with loved ones.)

People's greatest fears

Q6. What do you think are the two or three greatest fears people are facing in a situation of armed conflict in the DRC?



Base: All respondents (538)

Where total does not sum to 100%, this is due to multiple responses, computer rounding or to the exclusion of "don't know" responses

Feelings as a consequence of armed conflict

How does first-hand experience of armed conflict change people's state of mind?

It breeds sadness (72%) and anxiety (41%) – but also wisdom (56%), empathy for others (42%) and optimism about the future (42%).

Inevitably, people who have experienced armed conflict have been emotionally harmed:

- 72% are more sad (while 10% are less so);
- 66% are more sensitive;
- 41% are more anxious (19% are less so).

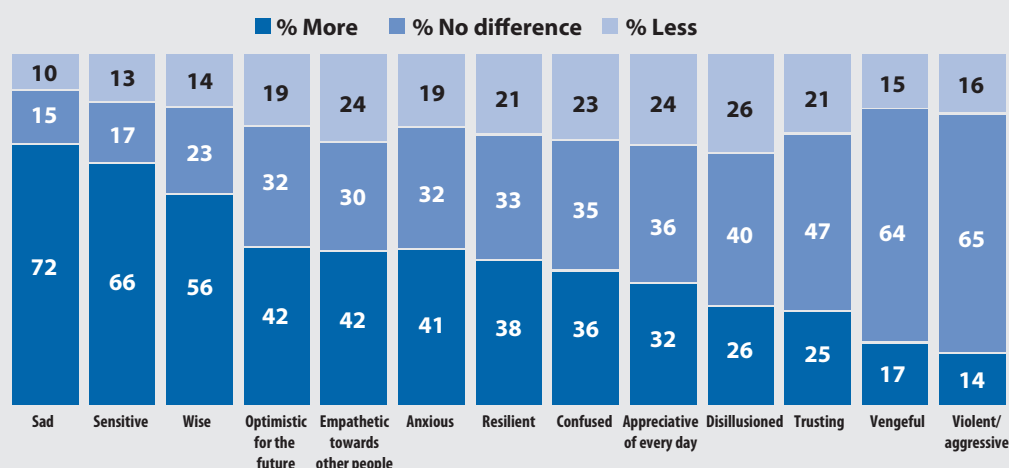
The following results are surprisingly positive:

- 56% are wiser (14% are less so);
- 42% are more empathetic towards other people (24% are less so);
- 42% are more optimistic about the future (19% who are less so).

It is encouraging that relatively few people (17%) claim to be more vengeful, and similarly few (14%) are more violent/aggressive. There are relatively few sub-group differences. Men more often than women claim to be resilient as a result of the conflict – while 18-24-year-olds appear less affected one way or the other in terms of how sad or sensitive they feel.

Feelings as a consequence of armed conflict

Q8. Now I would like to ask you about whether the armed conflict has changed the way you feel. For each description I read out, please say whether the armed conflict has made you feel more this way, less this way, or has it made no real difference. First [...], would you say it has made you more [...], less [...], or has it done neither?



Base: All who have experienced/been affected by conflict in any way (410)

Where total does not sum to 100%, this is due to multiple responses, computer rounding or to the exclusion of "don't know" responses

Civilians' needs in armed conflict

First and foremost, people need 'the basics'. Almost nine in 10 refer to food as the most needed requirement (86%), whilst over half see protection/security as a basic and immediate need (52%).

The most crucial things that the people of the DRC see needed by civilians living in conflict areas are as follows:

- food (86% choose this from a list as one of the most important needs for civilians living in conflict areas);
- protection/security (52%);
- shelter (47%);
- medical treatment/health care (43%).

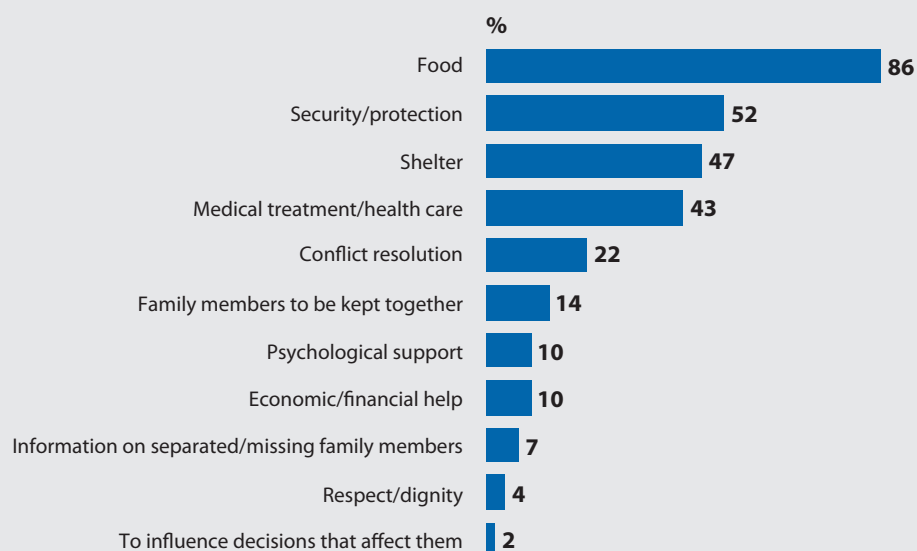
Beyond these immediate needs, people want a resolution to the conflict.

The need for financial help, psychological support, or 'respect and dignity' is a lower priority. Of course, this does not mean that they are not important.

Men and women – and young and old – are in general agreement on these priorities.

Civilians' needs

Q7. What do you think civilians who are living in areas of armed conflict need the most? Please select the three most important to you.



Base: All respondents (538)

Where total does not sum to 100%, this is due to multiple responses, computer rounding or to the exclusion of "don't know" responses

Help and support from entities/institutions

Where do people turn for help or support during armed conflict?

In the DRC, they turn most often to their parents and families (39%).

But the ICRC and the DRC Red Cross provide help to almost as many people (34%).

A wide range of other groups – from the 'local' (people's own communities) and the 'national' (NGOs and government) to the 'international' (the UN) – also provide aid.

Indeed, only the military (7%) is reported to have supplied help to fewer than one in 10 people.

Overall, then, the 'community' of groups that provides help in the DRC is diverse – with each one playing a particular role. The support appears to reach men and women, and young and old, to a fairly consistent degree.

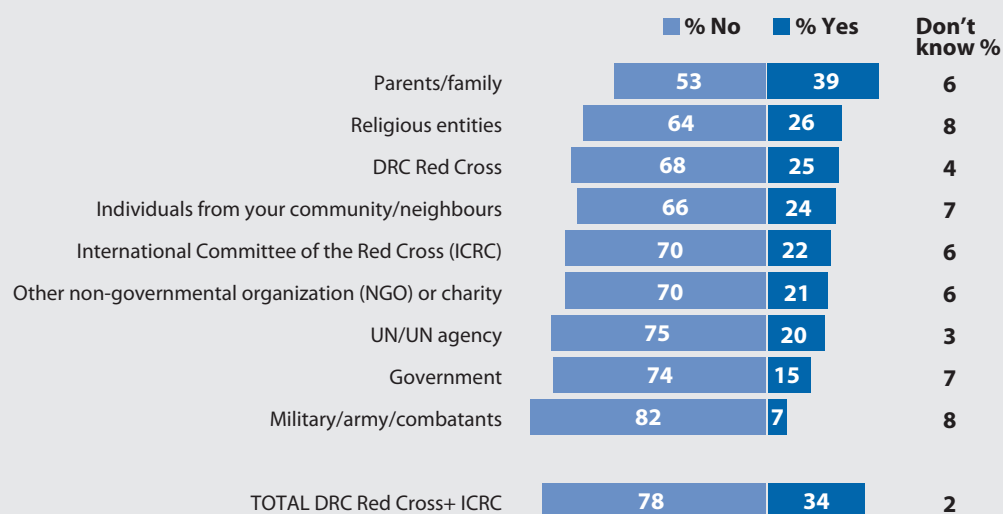
Encouragingly, people in the DRC also feel that all these groups understand their needs very well:

- unsurprisingly, most say that their own parents/families 'completely' understand their needs;
- 83% say that Red Cross organizations (the ICRC and the DRC Red Cross taken together) completely understand their needs; the same is said of religious entities (also 83%), the military (80%), the government and NGOs (77%) and the UN (70%).

Most of the remaining people feel the groups do at least partly understand their needs.

Help and support

Q9. During the time you experienced or were being affected by armed conflict, did you receive help or support from any of the following?

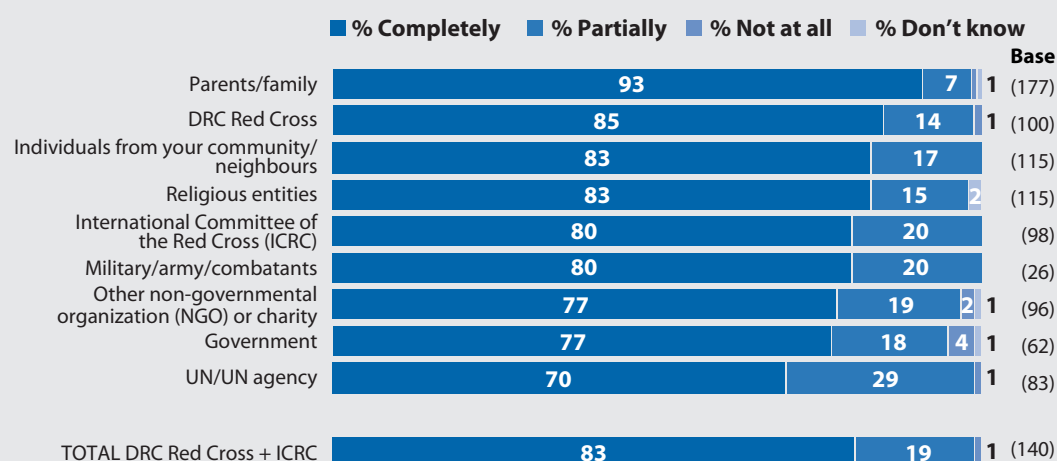


Base: All who have experienced/been affected by conflict in any way (410)

Where total does not sum to 100%, this is due to multiple responses, computer rounding or to the exclusion of "don't know" responses

Help and support

Q10. For each of the types of organizations or people you mentioned receiving help or support from, I would like you to tell me how well you felt they understood your needs. First, the [type of support at Q9]...do you feel your needs were completely understood, partially understood, or not understood at all?



Where total does not sum to 100%, this is due to multiple responses, computer rounding or to the exclusion of "don't know" responses

Barriers to receiving help

Where people do not receive help or support during periods of armed conflict, it is usually due to an inability to get it, caused by internal 'social factors' such as discrimination (51%).

In particular, there is a strong sense that factors such as discrimination/social status (51%), corruption (49%), and the black market (42%) are key barriers. (Men in particular are conscious of the impact of black markets.)

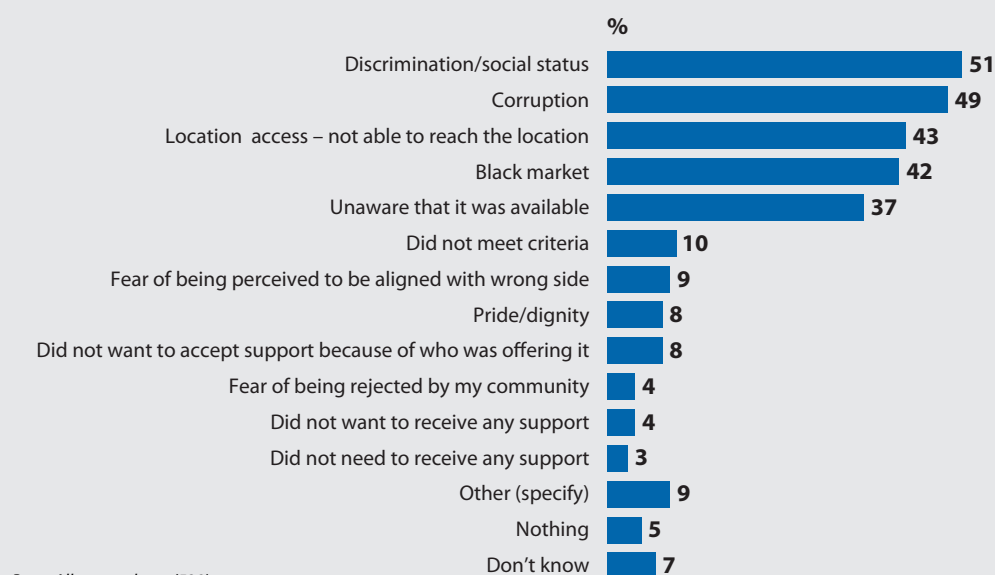
People also cite geographical inaccessibility (43%) and a simple lack of awareness that such help is available (37%) as obstacles.

There is less evidence that people feel obliged to turn down help for fear that it may cause rejection among their community (4%), that it may result in their being aligned with the 'wrong side' (9%), because of who is offering the help (8%), or due to people's own 'pride and dignity' (8%).

Very few people say that help would be turned away simply because it was not needed or not wanted.

Barriers to receiving help

Q11. Which, if any, of the following reasons do you think may have prevented people in DRC receiving or accepting help or support during armed conflict?



Base: All respondents (538)

Where total does not sum to 100%, this is due to multiple responses, computer rounding or to the exclusion of "don't know" responses

Reducing suffering

People often give credit for reducing suffering during armed conflict to international groups rather than to those within their own country. One in five (22%) first mention international humanitarian organizations.

The four groups credited most by the people in the DRC as playing the biggest role in reducing suffering, are predominantly international:

- international humanitarian organizations (22% name them first as playing a key role);
- Red Cross organizations (20% – the ICRC 14% and the DRC Red Cross 6%);
- the UN (19%).

Of the other groups, only religious leaders (19%) are on a par with these major international organizations in their perceived ability to reduce suffering. (Religious leaders are cited more often by women than by men – men ultimately believe that the ICRC and the UN can do more.)

The government rates relatively low here – and virtually nobody believes that ‘community leaders’ are capable of reducing suffering. Even the news media, overseas government organizations and the International Criminal Court are all seen as more effective.

Taking account of all the organizations mentioned by each person, six in 10 (61%) feel the Red Cross organizations (either the ICRC or the DRC Red Cross – 48% and 21% respectively, with some mentioning both) have the potential to reduce suffering. This compares with 50% for the UN, and 46% for international humanitarian organizations.

Reducing suffering

Q20. I'm now going to describe different kinds of groups and organizations. Please tell me which three of these play the biggest role to help reduce suffering during armed conflict.



Base: All respondents (538)

Where total does not sum to 100%, this is due to multiple responses, computer rounding or to the exclusion of "don't know" responses

The role of external actors

People in the DRC have a very clear set of priorities for the international community – most of which involve direct intervention in the country.

Views here are very similar among men and women, and young and old.

Large numbers of people support:

- bringing in peacekeepers (49%);
- delivering emergency aid (45%);
- taking military action to stop the conflict (36%).

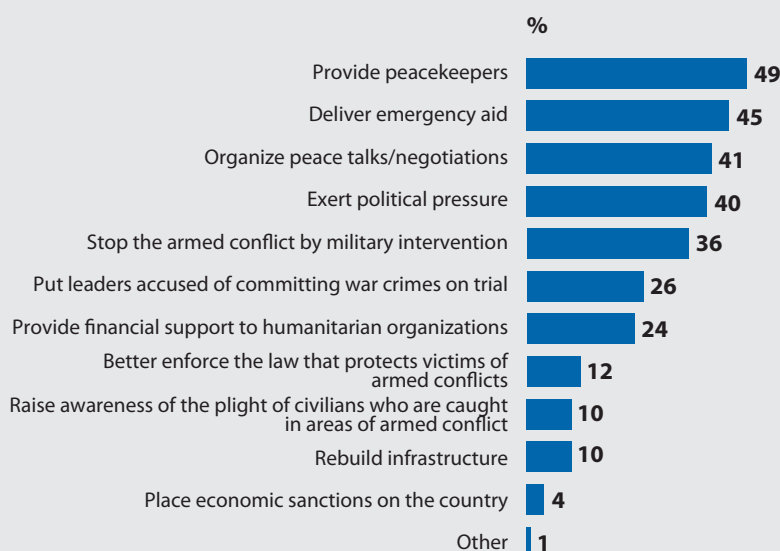
Political pressure is advocated by 40% and peace talks/negotiations by 41%.

Economic sanctions find very little support with just 4% in favour, perhaps reflecting widespread fears for the DRC economy generally and for people's own livelihoods.

Nor do people generally feel that rebuilding infrastructure is the right way for the international community to assist their country.

The role of external actors

Q21. What do you think the international community should do to help civilians who are living in areas of armed conflict?



Base: All respondents (538)

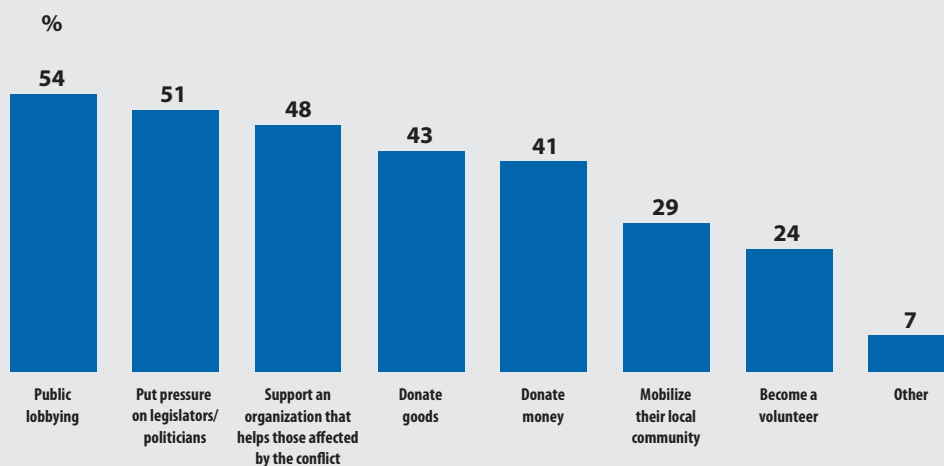
Where total does not sum to 100%, this is due to multiple responses, computer rounding or to the exclusion of "don't know" responses

What should the role of people living outside the conflict zone (i.e. citizens in other countries) be in helping victims of armed conflict?

Nothing is ruled out – but people would especially like to see political pressure applied (either directly on legislators, or through broader 'public lobbying').

Support from the wider world

Q22. What, if anything, do you think people living outside of conflict zones can do that would most help victims of armed conflict in DRC? Please select the three you feel are most important.



Base: All respondents (538)

Where total does not sum to 100%, this is due to multiple responses, computer rounding or to the exclusion of "don't know" responses

Behaviour during Armed Conflict

Limits to behaviour

A large majority of respondents in the DRC (79%) believe that there should be limits to the behaviour of combatants in armed conflict.

When asked a completely open question, where respondents were unprompted and free to say whatever came to mind, most (79%) identify some behaviour which they feel is unacceptable. Sexual violence is mentioned spontaneously by around half of the respondents (43%), the killing of civilians by 27%, the looting of homes by 25%, stealing by 23%, and torture and kidnapping by 1% each.

Only 6% say that ‘there is nothing combatants should not be allowed to do’. The remaining 15% do not know or refused to say.

What do respondents mention as the basis for imposing limits?

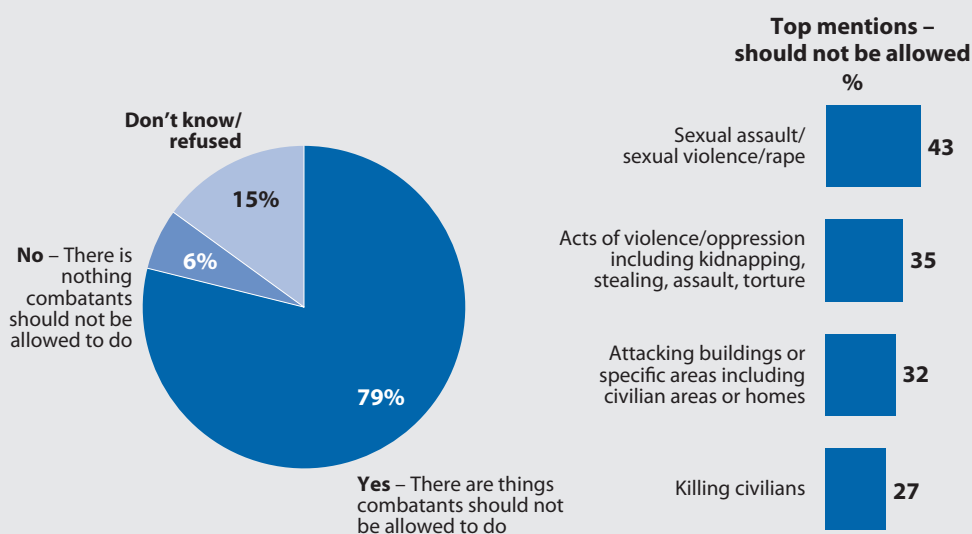
Around three-quarters of the respondents say that limits should be set on the basis of legal considerations (76%) or on human rights grounds (75%).

Religious standards are mentioned by 65% of respondents, personal ethics by 46% (less among those aged 18-24 years) and cultural norms by 45%.

Some people feel that certain kinds of behaviour should not be allowed on the basis of the harm they cause. For example, because certain behaviour produces too much destruction (37%) say this is a suitable yardstick for actions deemed to be unacceptable), or because it produces too much hate and division (39%).

Limits to behaviour

Q12. Is there anything that combatants should not be allowed to do in fighting their enemy?



Base: All respondents (538)

Where total does not sum to 100%, this is due to multiple responses, computer rounding or to the exclusion of “don't know” responses

Threats to civilians

People in the DRC support the principle that civilians should not be targeted during armed conflict in any circumstances. Three-quarters feel that civilians should be completely spared, while nearly all others (24%) feel they should at least be spared as much as possible.

Almost everyone (99%) says that civilians and combatants are not equally acceptable targets. A large majority (75%) say that civilians should be ‘left alone’. A quarter of respondents (24%) take the view that civilians should be avoided ‘as much as possible’. Only 1% say that it is acceptable to attack both civilians and combatants.

It is felt by nearly all that it is unacceptable to:

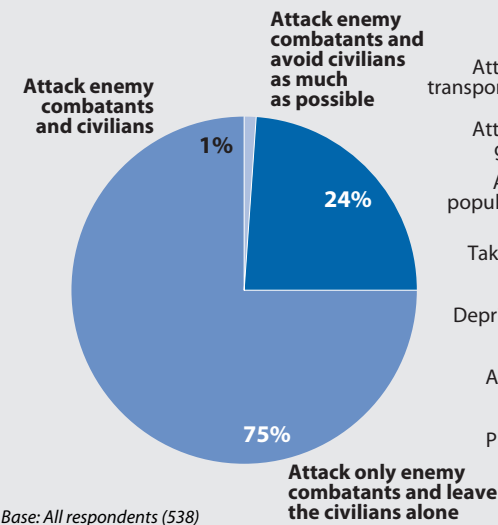
- plant landmines that would harm civilians (93%);
- attack religious and historical monuments (93%);
- deprive civilians of food/medicine/water (94%);
- take civilian hostages (88%);
- attack enemy combatants in towns/villages populated by civilians (86%).

However, the views of respondents change quite dramatically where civilians have voluntarily chosen to help the enemy:

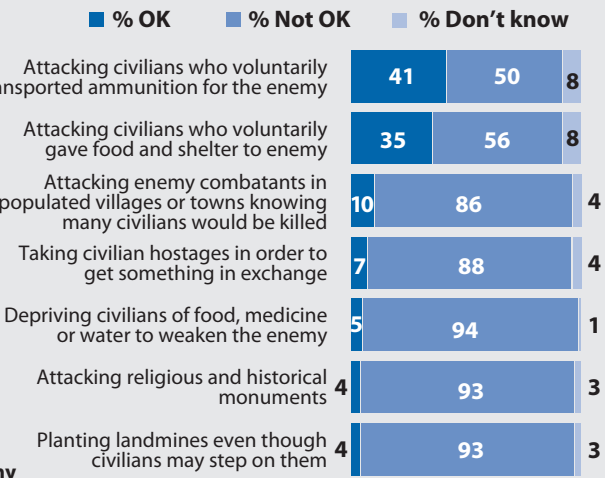
- by giving food or shelter (35% say attacks in this case are ‘OK’, while 56% do not);
- by transporting ammunition (41% say attacks are ‘OK’, while 50% do not).

Threats to civilians

Q14. Now I would like to ask you some general questions about how, in your view, combatants should behave in times of armed conflict. When combatants attack to weaken the enemy, should they:



Q15. Is there anything that combatants should not be allowed to do in fighting their enemy? For each one, please indicate whether is it OK or not OK to do that in fighting their enemy.



Where total does not sum to 100%, this is due to multiple responses, computer rounding or to the exclusion of “don’t know” responses

Health workers and ambulances

Most people say that attacks on health workers and ambulances, like those on civilians, are not acceptable (77% and 73% respectively).

Three-quarters of respondents (77%) say there are no circumstances in which it is acceptable for health workers to be targeted by combatants. Twenty per cent of respondents (29% of those aged 35-44) say that it is acceptable to target them in some circumstances. Views are similar among men and women.

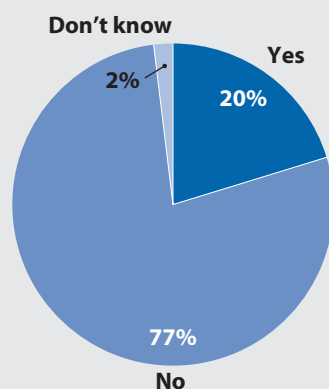
The main circumstances in which some people accept attacks are those in which the health workers are not perceived to be neutral or are not clearly identifiable as health workers.

Three-quarters of respondents (73%) say there are no circumstances in which it is acceptable for ambulances to be targeted by combatants. Twenty-five per cent (30% of those aged 35-44) say that it is acceptable to target them in some circumstances.

Attacks on ambulances are deemed acceptable by some when they are used for hostile activities or when they are not clearly identifiable as ambulances.

Targeting health workers

Q16. In a situation of armed conflict, are there any circumstances in which you think it is acceptable for combatants to target health workers?



Base: All respondents (538)

Where total does not sum to 100%, this is due to multiple responses, computer rounding or to the exclusion of "don't know" responses

Q17. In which, if any, of the following circumstances do you think this is acceptable?

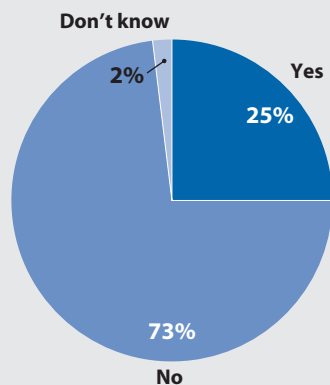
■ % Acceptable ■ % Not acceptable
■ % Don't know



Base: All who think that some circumstances are acceptable to target health workers (126)

Targeting ambulances

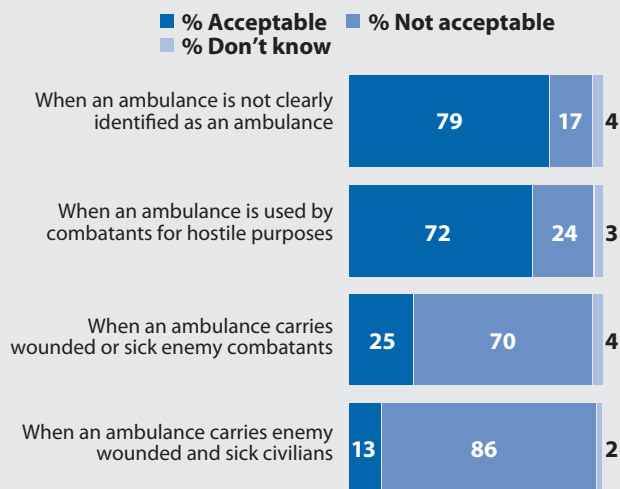
Q18. In a situation of armed conflict, are there any circumstances in which you think it is acceptable for combatants to target ambulances?



Base: All respondents (538)

Where total does not sum to 100%, this is due to multiple responses, computer rounding or to the exclusion of "don't know" responses

Q19. In which, if any, of the following circumstances do you think this is acceptable?



Base: All who think that some circumstances are acceptable to target ambulances (150)

Health workers and services: the right to health care

Nearly all respondents (96%) agree that 'everyone wounded or sick during an armed conflict should have the right to health care' (96%). Most people (83%) agree 'strongly'.

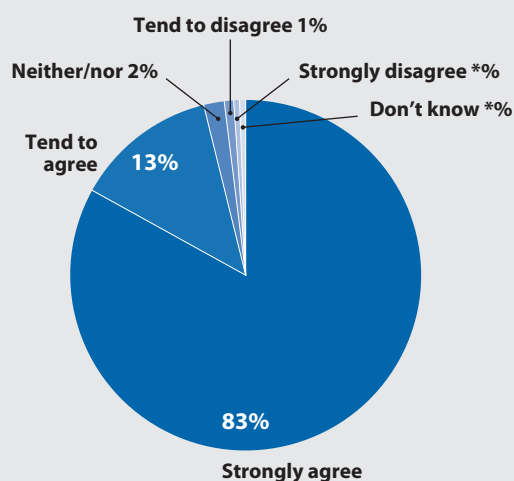
Respondents were asked whether health workers should limit themselves to treating wounded and sick civilians from only 'their' side in a conflict.

Most people (88%) reject this – saying that health workers should treat the sick and wounded from all sides.

Younger people are more likely than older people to say that only the wounded on their own side should be treated.

The right to health care

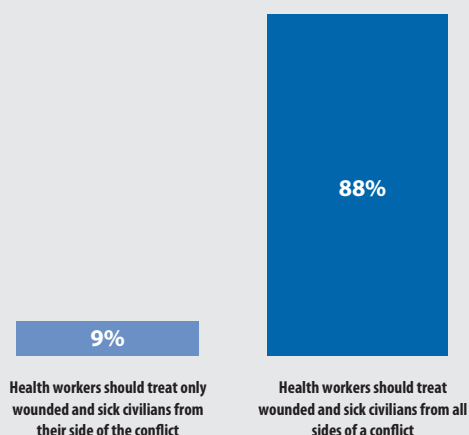
Q25. To what extent do you agree or disagree with the following statement: 'Everyone wounded or sick during an armed conflict should have the right to health care'



Base: All respondents (538)

Where total does not sum to 100%, this is due to multiple responses, computer rounding or to the exclusion of "don't know" responses

Q26. In the context of an armed conflict, what best describes your personal views?



Base: All respondents (538)

The Geneva Conventions

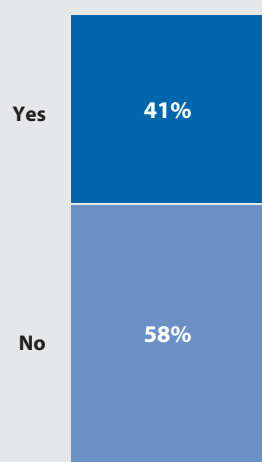
Two of every five respondents (41%) have heard of the Geneva Conventions – but among those who have, there are mixed views on their effectiveness in limiting civilian suffering in wartime.

Awareness of the Geneva Conventions is higher among men than women (54% of men and 29% of women have heard of the Geneva Conventions). The Geneva Conventions are relatively little known among those aged 18-24.

Half (53%) of the people aware of the Geneva Conventions credit them with at least some effectiveness in limiting civilian suffering. Forty-two per cent feel that their impact is minimal at best. Men and women hold similar views. Younger people, especially those aged 18-34, are marginally more positive than older people about the Geneva Conventions' effectiveness.

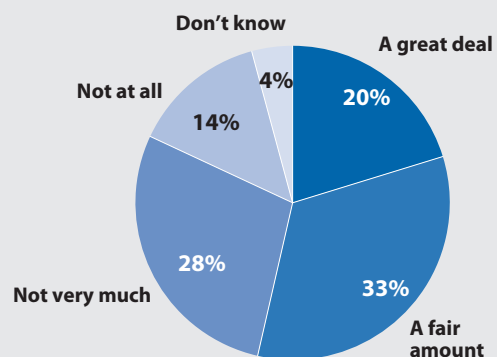
Awareness of the Geneva Conventions

Q23. Have you ever heard of the Geneva Conventions?



Base: All respondents (538)

Q24. To what extent do you think the existence of the Geneva Conventions limits the suffering of civilians in war time?



Base: All who have heard of the Geneva Conventions (230)

Where total does not sum to 100%, this is due to multiple responses, computer rounding or to the exclusion of "don't know" responses

IN-DEPTH RESEARCH

IN-DEPTH RESEARCH

The Impact of Armed Conflict

Respondents speak of a sense of disempowerment in the conflict. They feel they are not respected and protected as civilians.

Surviving on a daily basis is a key concern for respondents.

Respondents feel shock at the outbreak of the recent fighting and its brutality.

Armed conflict in the DRC has cost millions of lives since 1996. The impact of the conflict has included widespread disease and malnutrition across the country. As a result, millions have died either directly or indirectly from the fighting.

Respondents feel the conflict is beyond their control and there is little they can do to influence it. There is a sense of disempowerment. Respondents feel that those who started the conflict have not had the interests of the people at heart and civilians have become the victims, including of sexual violence.

As civilians, we are dying for reasons we do not know. The people responsible for the conflict, their families don't live in the DRC anymore. It is us, the poor people, who still live here and suffer the conflict's crimes. (Zelie, 43, rape victim)

The prolonged period of time the country has been in conflict, combined with the more recent escalation of fighting, has had the effect that respondents think more about how to survive on a day-to-day basis rather than planning their lives in the long term.

I cannot qualify the point properly, but I can say we are living in 'episodes'. Today my situation is good, but it can change tomorrow. (Donna, 45, first responder)

The current outbreak of fighting is felt to be particularly brutal and unpredictable for respondents. There is a sense of disbelief that it had started and a feeling that the levels of violence were unprecedented.

We did not expect the situation to be so dramatic. We were even getting ready for displaced people to return ... Just at that time, the violence started and we could not even take the plan forward. (Marius, 45, first responder)

Personal experience of armed conflict

The armed conflict affects civilians in a number of ways. These include displacement, loss of friends and close family members, loss of livelihood and income, exposure to sexual violence and psychological and emotional trauma.

Displacement is caused by damage to property during conflict, or residents being forced to flee when weapon bearers attack them and loot their homes.

In some cases, respondents experience recurrent displacement as conflict breaks out in areas they initially flee to.

Displacement has a detrimental affect on family life, young people's education and earning a living.

Friends and family have been lost either because their whereabouts become unknown during the fighting or they have been killed.

When respondents lose their homes, the consequence is often loss of livelihood if their fields were part of the same dwelling. In addition, some respondents are no longer able-bodied because they have been injured by landmines or attacked. They therefore find it difficult to work themselves and have to rely on family members.

The women who have been raped experience severe physical and psychological consequences. They may subsequently be rejected by their husbands and communities. The fear of contracting HIV/AIDS is an ongoing concern for those respondents.

The psychological and emotional trauma experienced by respondents includes shock, fear, anxiety and depression. However, some respondents have a greater sense of empathy for others as a result of their experience.

All respondents openly discussed their experiences of armed conflict and the ways in which it has affected them and those around them.

In view of the extent and longevity of the conflict in the DRC, many of the respondents do not fall into one category alone.

Displacement

A widespread experience of respondents as a result of the armed conflict is displacement from their homes. Properties have been seriously damaged in the fighting. Residents who fled have returned to find they cannot live in their properties and do not have the means to repair them.

In addition, weapon bearers looted respondents' homes and stole their belongings, which caused them to flee. Respondents no longer have the means of basic survival. Frequently, they have had to leave the place they subsequently settled in because of further outbreaks of fighting in the area. Many have experienced a pattern of repeated displacement and upheaval.

The most awful fact is that an armed group took all the food. They also took our furniture from our houses. It was terrible. My family was so hungry because they took everything from us. (William, 56, internally displaced person)

Some respondents have found shelter with host families. However, their existence is still difficult. Often the accommodation is extremely overcrowded and therefore there is a lack of privacy. In these circumstances, respondents speak of the difficulty of creating normality within their family unit.

It is very hard to live in such bad conditions. To live with nine children under a tarpaulin or when the children cry because of the monotony of the food. (Marie, 55, internally displaced person)

A further impact of displacement and the subsequent difficult living conditions is that children and young adults can no longer attend school and obtain an education. This is worrying and distressing for parents and young people alike.

Since the armed conflict started, I do not study anymore. I do not follow the courses anymore. The other students evolve, but I don't. (David, 20, internally displaced person)

Loss of friends and relatives

Friends and close family members are reported lost for two reasons: respondents have lost those close to them because they have gone missing in the chaos of the fighting and displacement. The second way in which respondents have lost loved ones is through death.

I live by myself. In the past, my parents were with me. They both died in the war. (Juliette, 18, internally displaced person)

I was at school in the morning. When I got home, nobody was there. (Toussaint, 18, member of separated family)

Of the loved ones who are missing, many of whom are children, respondents often have not known how to locate them, or have tried and failed. In some instances, respondents have learnt the location of a family member but travelling to become reunited is an insurmountable difficulty due to the physical risk.

Loss of livelihood and income

When respondents are displaced they often lose their means of livelihood if they had worked on the land and no longer have access to it owing to the insecurity. They fear violent and/or sexual attack either travelling to their farms or working on them. In these circumstances, their income ceases.

Nowadays we cannot access our fields because of insecurity. (Donna, 45, first responder)

Those who have suffered conflict-related injuries and are left with a disability state that this adversely affects their future prospects of working or obtaining work and they become financially dependent on family members.

There were some water cuts in the area we live. So we were forced to go further to get some water, which is risky. Then we didn't even know that the rivers had underground mines... As a disabled person, it's not easy to be dependent on other people for food... For someone who has his two feet, it's easy to look for food. (Lina, 33, mine victim)

Sexual violence

Sexual violence towards women and, in some cases, men is widespread in the region. Rape victims experience acute psychological trauma and in many cases report that they have lost their desire to live.

Respondents victim of sexual violence speak of having lost their self-esteem. They also have increased levels of fear and anxiety. These emotions have physical consequences including palpitations and headaches.

From the day I was raped, I have palpitations... I was not eating anymore. I have a feeling as if I am living in dust. I became withdrawn due to all of this. (Micheline, 28, rape victim)

In addition, rape victims frequently receive no empathy from people around them and have often been rejected by their own husbands and family members. They are abandoned and ostracized by their local community, which compounds their feelings of trauma and sense of shame.

I was in captivity with my husband, but when we were released, he did not want to live with me anymore... while I was expecting consolation from his side. He always asked me to leave the house. My life depends on my son now. (Agnes, 60, rape victim)

A further concern of victims of sexual violence is the possibility of contracting sexually transmitted diseases or HIV/AIDS. This concern often stays with the respondents, as they feel unable to gain access to reliable testing.

I requested a HIV test... because we never know. Sometimes we think we are in good health, while a disease is developing in our body. (Zelie, 43, rape victim)

Psychological and emotional trauma

Respondents report a number of unpleasant feelings and effects that they are left with and have to manage as a result of their experiences in armed conflict. In particular, shock, fear, extreme anxiety and depression were mentioned.

Frequently, respondents have witnessed or experienced extreme acts of brutality, which has left them shocked and emotionally scarred. They struggle to make sense of why a human being would commit such acts.

During all these wars, I have been affected by the lack of respect for human dignity. I saw people with their throats slit... I would say that goats and other animals have more value than human beings. (Therese, 28, first responder)

Some respondents speak of a sense of lawlessness and ongoing crime. They feel crime can go unpunished while criminals are sheltered by combatants. This contributes to them feeling constantly insecure and fearful for their personal safety.

This issue of exemption from the law was not the case earlier, there used to be justice. And today's situation is a direct result of not lawfully penalizing the people who commit various forms of crimes and violence... this impunity is the reason for a lot of our troubles in our country. (Zelie, 43, rape victim)

My right to live has been denied and fear has invaded our hearts. I am not thinking the same way as I was before. As we are now, I wonder how I am going to be reunited with my children. Anything can happen at any time. (Donna, 45, first responder)

Respondents' fear that nothing is certain, including having shelter, safety, food and water, contributes to strong feelings of anxiety.

Personally, I pray to God to get a place to rest in case of conflict, to be protected from the gun fire, to get something to eat and not to see any corpses or human blood ... Even though I'm staying in a camp right now; during those times when I cannot seem to find anything to eat, I start getting worried, sometimes I cannot see my name on the list (for assistance distribution) and at that time I just wonder why... (Sam, 29, internally displaced person)

Many respondents speak of feeling fatalistic. They believe that there is nothing they could do that would affect the conflict, their environment or their destiny. This gives rise to feelings of sadness and depression.

However, there are also a number of respondents who, having experienced trauma themselves, have developed a stronger sense of empathy with those who are suffering. This makes them more determined to help others and do good by becoming first responders.

Civilians' needs in armed conflict

The key physical needs for respondents are security, shelter, food and water. Ultimately, they feel that peace would enable these needs to be met.

Internally displaced respondents most of all want to return home. They are concerned about the lack of adequate food rations in the camps or that they will not receive their rations.

Respondents living in camps need to feel they are taking a hand in shaping their own destiny.

Access to medicine and health care is a frequently expressed need.

For those who have suffered sexual violence, there is a need for psychological support and psycho-social support to enable them to manage their feelings and begin recovery.

Respondents speak of needing the basic means of survival in armed conflict, which includes security, shelter, food and water. Overall, a peaceful resolution to the conflict is desired.

My first concern is to find a place where I could be safe, and then I think about how I will live and how I will eat. (William, 56, internally displaced person)

Peace is what we want. Then we can forget about [receiving] aid. If the peace is back, we do not need help anymore. (Jeanne, 50, internally displaced person)

Of the internally displaced respondents, returning to their homes is key. Even those who have found shelter in camps are frequently concerned that the food rations are not always adequate to feed their families. They also experience anxiety that they may not be registered and therefore will not receive rations at all.

The difficulties are going from bad to worse. I have nine children but I receive food rations only for five. (Marie, 55, internally displaced person)

Respondents living in camps also speak of a need to feel they are actively involved in improving their situation and their lives.

In the past, I used to sew but now I am not doing anything. In the camp, we try to organize ourselves in an association in order to survive. (Marie, 55, internally displaced person)

Some respondents express the importance of health care, access to medicines and basic medical assistance.

First we need food and medicines as where we have to flee, there are a lot of diseases. (Sarah, 30, member of separated family)

Respondents who are victims of sexual violence stress the importance of psychological support as a way to manage their trauma. They feel the need to talk about their experience and situation in order to gain some guidance and maintain the desire to live.

As I have been given some advice, I manage to overcome some (of my) behavioural problems. I feel somehow calm and today I can say I am in better health. (Micheline, 28, rape victim)

Those respondents who have been able to return to their homes and villages find they need agricultural supplies, such as seeds and tools, to recreate their livelihoods.

Humanitarian assistance

All respondents are grateful for the efforts of the humanitarian organizations working in the DRC.

Assistance is initially sought from parents and family members. Respondents expect community support but often this is not forthcoming.

Respondents give mixed feedback on their perceptions of assistance from humanitarian organizations. The ICRC and the DRC Red Cross are particularly appreciated because they are perceived to work to reunite families who have been separated by the conflict and because they provide counselling support for victims of sexual violence.

There is some confusion over the role of humanitarian organizations and, where this occurs, the expectation is that the organizations would provide security in the event of attack and bring peace to the region.

A few respondents do not receive assistance because, they think, they are not in a central location or are not registered.

Desired improvements to assistance take two forms: the first is to clarify the exact role and intention of humanitarian organizations to avoid disappointment amongst the population. The second is to provide larger food rations and assistance that reaches all areas of conflict in the country.

The importance of assistance

Respondents feel they require assistance in meeting their most basic needs to enable them to survive. Consequently, all report being extremely grateful for the help provided to them by the various organizations working in the DRC during the armed conflict.

The first, and most immediate, assistance is considered to come from parents and family members. This is followed by local community support. However, experience has taught respondents that help from within the community is often not forthcoming and this makes them deeply disappointed.

Love amongst brothers has come down. People need to help or support each other. These days, even children tell their parents not to help their relatives.

(Jeanne, 50, victim of violence)

Humanitarian assistance from organizations

Respondents give mixed feedback on their perceptions of assistance from humanitarian organizations. The majority of respondents have received assistance in one form or another ranging from water and food to medicines and counselling. All respondents are extremely grateful for what they had received, particularly from international organizations.

We know that without the international community, we would be on the street begging like children. (Zelie, 43, rape victim)

The organizations that are recalled to have provided assistance include the ICRC, the DRC Red Cross, Caritas, Solidarité, UNHCR, MONUC, Mercy Corps, CBCA, Rescue, WFP, Oxfam, Médecins Sans Frontières, UNICEF and Save the Children Fund. Some respondents have also received help from the government.

The ICRC is appreciated for the help it provides to locate and reunite people who have been separated from their families as a result of the armed conflict.

This is what I want to share, my children were lost but now they are here with us thanks to the ICRC. (Leopold, 37, member of separated family)

The other type of assistance which is frequently mentioned as being provided by the ICRC, in particular, is psycho-social counselling services to victims of sexual violence. Respondents feel this assistance goes a long way towards helping them rebuild their lives.

The psycho-social assistant came and asked me if we were being helped and I said no. Then she asked me to come with her in order to find out how to live as a real person again. I am living normally thanks to her advice. She is my mother and my father. (Agnes, 60, rape victim)

There is some confusion over the role of humanitarian organizations. The expectation of some respondents is that the organizations would protect them from attack and violence and bring peace to the region. In line with this, therefore, the expectation is that the humanitarian organizations would be continually present, even during an outbreak of fighting. Disappointment is then inevitable, as respondents believe the organizations left the fighting zone too early and returned too late.

Humanitarian organizations are not present at the peak time of an armed conflict situation. Assistance only reached us after calm had returned to the area. Humanitarian people came after the battle...I was really disappointed because NGOs had already evacuated before the situation became really bad. (Harriet, 46, first responder)

A minority of respondents have not received assistance. They perceive this to be either because of the location they are in or because they are not registered. These respondents then feel excluded and negative towards the humanitarian organizations.

Where location is the factor, respondents often live far from the distribution centres. They feel frustrated that these are so centralized and focus on those already staying in the camps for the displaced.

We were in a host family. The humanitarian people are more concerned with the people in the camps than the ones living in other areas. (Therese, 28, first responder)

Where registration is the factor, respondents feel there are inefficiencies in the way the registration system was designed. They feel that those who need assistance often do not receive it.

I am here but did not receive any help. When I ask for help, the people answer me that my name is not on the list. (Juliette, 18, internally displaced person)

Finally, some respondents feel the promise of receiving assistance from humanitarian organizations is being used by certain corrupt individuals to extort money from civilians.

People forget that the humanitarian aid should be dedicated to those who really need some help...Sometimes opportunists come with fake lists and ask the civilians to give them their voter cards plus 100 Congolese francs [\$US 0.10], pretending the aid will come. (Virginie, 24, first responder)

Desired improvements to assistance

Given the effects of war on respondents, it is perhaps not surprising that many state that the humanitarian organizations should endeavour to work with political parties and warring factions to help bring about a peaceful resolution to the situation. While some recognize that this is outside the remit of such organizations, others feel that they have the necessary power and authority to act in this way. Humanitarian organizations are often grouped together in the minds of respondents as being the 'international community'.

The international community must overpower the war. Without peace, help is useless. The international community has to prevent wars and conflicts. (Sam, 29, internally displaced person)

Respondents feel there is a need to clarify the role and intentions of humanitarian organizations so the population is not disappointed by unrealistic expectations.

Today, the humanitarian objectives are not clear. (Marius, 45, first responder)

Respondents request that more substantial food rations be made available, as well as other basic assistance for a larger number of civilians.

Humanitarian gestures

Respondents report individual acts of kindness and humanitarian gestures among the community. Such behaviour is thought to be rooted in the religious traditions of the country and often helped provide civilians with the essentials they needed to survive.

The most frequent gesture is providing shelter to internally displaced families or individuals. Others are sharing food or offering emotional support.

Respondents define humanitarian gestures as helping a person in their time of desperate need. The form the help takes could be material, such as giving food, clothes or shelter. It could also be financial, giving money, or be in the form of social and psychological support, advice and a listening ear.

Often the motivation behind humanitarian gestures for respondents is the influence of respondents' religion and, in particular, the commandment 'love thy neighbour'. They believe it is the right action to take in the eyes of God.

That is because of love, generosity and fear of the Lord that we help others. (Zelie, 43, rape victim)

One of the ways in which respondents make humanitarian gestures is to host displaced families in their homes.

Families arrived at my home. We tried to reorganize the house and all the families settled in. It's the love of my neighbours that led me to do this, especially because I was also feeling that things were not going well for the others. (Ndayi, 37, member of separated family)

Another way in which respondents make a humanitarian gesture is to share their food, especially during a time of crisis when there is not a plentiful supply.

Yes, I helped an old lady by giving her some salt and some peas I had just received. (Juliette, 18, internally displaced person)

Emotional support from the family and community during times of grief is recognized as another form of humanitarian gesture.

When my husband died, I was six months pregnant... a maman from the church came to sleep at my home for a night and consoled me. (Donna, 45, first responder)

Behaviour during Armed Conflict

All respondents believe that civilians must not be targeted in armed conflict. They feel that they should be spared from attack, sexual violence and theft of personal belongings and property.

Some respondents feel that better trained soldiers would prevent the rules of conflict being broken.

Rules of conflict

The overriding sentiment from respondents is that civilians must not be the target in any war. Thus, violence and attacks must not be directed at them. Respondents also call for an end to sexual violence.

The combatants must not conduct a savage war because it scatters families. Within a 'normal' war, when one camp wins, it takes the territory from another camp. Conventional war is between soldiers and the civilian population is not affected. Soldiers cannot rape and steal... (Sam, 29, internally displaced person)

Furthermore, respondents speak of the need to protect civilian property from destruction by combatants, including their homes, fields, cattle and water springs. Respondents also want to see an end to looting of personal belongings by combatants.

They must not steal, they must not rape the women or destroy the population's goods. For example, when they killed our cattle, it was unacceptable. When they act this way, they offend the civilians. (Antoine, 59, internally displaced person)

Some respondents speak of the belief that if the soldiers were better trained and educated, they would behave differently in conflict situations.

A smart, educated and well-trained soldier can be a good soldier and conduct war properly. (William, 56, internally displaced person)

Right to health care and protecting health workers

Respondents believe that everyone should be entitled to health care – be they civilians or combatants. Because of this, the protection of health-care workers is believed to be essential.

Right to health care

All respondents agree that everyone, whether they are civilians or directly involved in the conflict as members of the armed forces, should have the right to access health care as and when they need.

Yes, one should cure civilians and soldiers, as all of them are human beings. (Agnes, 60, rape victim)

Protecting health workers

All respondents view the protection of health-care workers as paramount. Respondents perceive all health-care workers to be neutral and therefore that they should be afforded special protection.

They should be protected because they work for everybody and help us.

(Antoine, 59, internally displaced person)

The majority of respondents associate the red cross emblem with the provision of medical care. They believe that the red cross communicates neutrality and that those bearing the emblem must be protected.

With this emblem, he has to be protected as we can recognize him from far away.

(Virginie, 24, first responder)

Some respondents are aware of, and concerned by, the possibility that DRC Red Cross workers, including first-aiders, could be – and have been – accidentally killed or wounded when attending the sick and injured.

In the past, I used to think Red Cross workers could not be hurt because they are in the field. But the bullets don't choose the targets sometimes.

(Zelie, 43, rape victim)

The Geneva Conventions

With the exception of first responders, few are aware of the Geneva Conventions and what their remit is. When the Geneva Conventions are explained, all respondents suggest that efforts ought to be made to ensure that knowledge and awareness of them are increased.

However, on discussing them with participants, there is some scepticism about how effectively they could be enforced.

Most respondents were not aware of the Geneva Conventions prior to the research. However, they had some sense of rules of armed conflict which they believe are important, such as all wounded combatants having the right to medical assistance and that rape was prohibited.

They must not rape the women. This is an infringement of human dignity. This is not allowed under human rights.

(Toussaint, 18, internally displaced person)

First responders were more aware of the Geneva Conventions prior to the research. Given their line of work, they have a greater level of knowledge about the Conventions and what they cover. At a basic level, they understand them as rules to protect civilian life as well as provide medical assistance to all affected by the war.

I've heard the term 'Geneva Conventions'. But I have heard more about the international humanitarian rights during my psycho-social training by the ICRC.

In my view, these Conventions concern everyone – civilians and soldiers alike.

Everybody has to be aware of these Conventions.

(Harriet, 46, first responder)

When respondents are informed of the Geneva Conventions, they strongly support them and feel that adherence to the laws would help improve the lives of civilians during armed conflict. Respondents want to see clearer communication of the Geneva Conventions, resulting in greater, more widespread awareness.

Strict laws can create some changes if they are well implemented. That way,

impunity can be reduced.

(Therese, 28, first responder)

However, respondents remain sceptical about whether combatants would abide by these rules during armed conflict.

Conclusions: priority actions

Respondents in the DRC have the following messages they would like to communicate to the rest of the world:

- the international community should use its power to force the local and neighbouring governments to find a peaceful settlement;
- despite the fact that the armed conflict has continued for so long, civilians still need the most basic assistance to help them survive and rebuild their lives.

The respondents have two main messages they suggest should be communicated. These are about creating peace and the importance of providing assistance:

- International governments should put pressure on local and neighbouring governments to restore peace. Respondents question why foreign intervention can be lacking during conflicts and believe that such intervention can make a difference for them. Consequently, they urge that, in the future, foreign powers should, in the first instance, help with negotiations to try and bring about a peaceful resolution.

Peace must come back. We don't want war anymore. If our leaders have not yet understood the depth of the suffering of our people, nothing can be done. I faithfully believe that one day peace will return to our province. (Zelie, 43, rape victim)

- Continue providing assistance and support until civilians can rebuild their lives. Respondents are fearful that because the conflict has been raging for so long, the international community will give up on them and stop providing assistance. They are eager to communicate that, even if peace comes to their country, it will be some time before they will be securely on the road to economic and personal security.

And even though we are staying here in the refugee camps a long time, the international community should not be discouraged. They should always be attentive to the cries of less fortunate people. (Micheline, 28, rape victim)

It would be good if the international community could help us to rebuild our houses. Then, because we live from farming, they could give us some seeds or cuttings. (Bonna, 39, member of separated family)

Specific trends for different groups

Internally displaced persons	<ul style="list-style-type: none"> • Respondents view displacement as a common experience for the civilians of the DRC. In large part, it is thought that individuals are forced into displacement to avoid being in areas where hostilities are ongoing and because their properties have been looted. • Displaced persons often share common experiences with the other groups in this research, such as having missing family members or being victims of sexual violence or mine victims. • When they are first displaced, respondents speak of trying to meet their basic physical needs, such as water, food and shelter. Humanitarian organizations are greatly appreciated for providing this assistance. • Once respondents have become displaced they are frequently forced to flee again and again as the conflict moves to the areas they have settled in. This increases their feelings of fear and anxiety. They are unable to settle to work and there is considerable strain on the family unit. • The effects of displacement include the loss of livelihoods and cessation of young people's education. • Often it is displaced people who benefit most from humanitarian gestures, as food and shelter are offered to them by community members living in safe areas. When this is the case, these respondents feel they have missed out on official humanitarian assistance.
Relatives of missing persons	<ul style="list-style-type: none"> • Children are most likely to go missing, often through displacement. • Even in cases where respondents are able to locate their loved ones, reunification is not possible because of the risks involved in travel and lack of financial support. • Within this group, the assistance that respondents receive from the ICRC in particular was greatly appreciated. This assistance ranges from providing basic essentials such as food through to reuniting them with their families.
First responders	<ul style="list-style-type: none"> • First responders are both victims of the armed conflict and the ones providing help. They feel strongly that all people deserve the right to medical attention and are committed to working to ensure this in the future. • They often speak of their humanitarian work as a way to gain some control over their lives and destiny and reduce their feelings of desperation and helplessness at the situation in the DRC. • First responders are also motivated by a desire to restore dignity and offer some kind of protection to civilians. • While they fully support the Geneva Conventions, there is a surprising lack of knowledge of exactly what they consist of. • First responders also demand more from humanitarian organizations and some expect physical protection.
Victims of sexual violence	<ul style="list-style-type: none"> • Sexual violence is the most widespread form of aggression against civilians in the DRC and the victims range in age from young girls to women in their 60s. • The emotional consequences of sexual violence are that women lose their self-esteem and will to live. They become extremely anxious and fearful. • The physical consequences of sexual violence are reported as disability, palpitations and headaches. • Additionally, women who have been raped often face a lack of empathy and are rejected by their husbands, families and communities, leaving them without resources to live. • The psycho-social support provided by the ICRC and the DRC Red Cross (<i>maison d'écoute</i>) is frequently referred to as the most profound life-changing support for these women. • All rape victims live with the fear of having contracted HIV/AIDS and many feel they do not have access to testing facilities.
Mine victims	<ul style="list-style-type: none"> • These respondents are left disabled and most have concerns about being able to work and support themselves and their families. • Some also talk of having been rejected by their communities, as they can be perceived as a burden. This experience erodes their sense of dignity.

APPENDICES

APPENDICES

OPINION SURVEY

Sample profile

DRC (Weighted profile)		
	Number	%
Total	538	100
Gender		
Male	266	49
Female	272	51
Age		
18-24	176	33
25-29	119	22
30-34	86	16
35-39	57	11
40-44	38	7
45-49	25	5
50-55	30	6
65 or over	7	1
Religion		
Christian	498	93
Muslim	17	3
Traditional African	12	2
Other	5	1
None	3	1
Refused	2	*

DRC (Weighted profile)		
	Number	%
City		
Kinshasa	335	62
Lubumbashi	141	26
Goma	62	12
Education		
No formal education	10	2
Primary school – incomplete	23	4
Primary school – complete	11	2
Secondary school – incomplete	150	28
Secondary school – complete	154	29
University – incomplete	90	17
University – complete	80	15
Post secondary college education	20	4

Sampling details

Sampling tolerances vary with the size of the sample and the percentage figure concerned. For example, for a question where 50% of the people in the full sample of 538 give a particular answer, the chances are 95 in 100 that this result would not vary by more than 4 percentage points plus or minus (i.e. between 46% and 54%) from the result that would have been obtained from a census of the entire population (using the same procedures).

Some examples of the tolerances that may apply in this report are given in the table below.

Approximate sampling tolerances applicable to percentages at or near these levels (at the 95% confidence level)			
<i>Unweighted base (538)</i>	10% or 90% ±	30% or 70% ±	50% ±
Size of sample on which survey result is based (unweighted)			
538 (All respondents)	3	4	4
217 (Men affected by armed conflict)	4	6	7
203 (Kinshasa people affected by armed conflict)	4	6	7

Source: Ipsos

Tolerances are also involved in the comparison of results between different elements (sub-groups) of the sample. A difference must be of at least a certain size to be statistically significant. The table below shows the sampling tolerances applicable to comparisons of sub-groups within the research.

Differences required for significance at the 95% confidence level at or near these percentages			
<i>Unweighted base (538)</i>	10% or 90% ±	30% or 70% ±	50% ±
Size of 2009 sub-groups (unweighted)			
217 (Men affected by armed conflict) vs. 193 (Women affected by armed conflict)	6	9	10

Source: Ipsos

Marked-up questionnaire

Questionnaire		
	<ul style="list-style-type: none">● Interviews with 538 people● Aged 18+● Conducted face-to-face, from 12 March to 19 March 2009● Results are weighted● An asterisk (*) indicates a result of less than 1% (but not zero)● A 'n/a' denotes 'not asked'● Base for each question is all (538), unless shown otherwise	
INTRODUCTION		
	Good morning/afternoon/evening. I am from Ipsos, an independent social research agency. We are conducting interviews in this area and would like your help with this. The interview will last around 15 minutes and is about your experiences of and opinions on the armed conflict in the DRC.	
AA) ON CONFLICT IN GENERAL		
ASK ALL ↴	Q1. Have you personally experienced armed conflict, or not?	
		%
	Yes	61
	No	39
	Don't know	0
	Refused	0
ASK IF 'YES' AT Q1 ↴	Q2. Was this in the DRC, or was it somewhere else?	
	Base: All experiencing armed conflict at Q1-349	%
	In the DRC	96
	Somewhere else (specify)	1
	Both	3
	Don't know	0

ASK IF 'YES' AT Q1 ↴	Q3A. I'm going to ask you about your actual experiences during the armed conflict in the DRC. Please tell me whether any of the following things happened to you personally or did not happen as a consequence of the armed conflict in the DRC. For each one, please indicate whether it happened or did not happen to you?				
	Base: All experiencing armed conflict at Q1-349	Happened	Did not happen	Don't know	Refused
		%	%	%	%
	Forced to leave your home and live elsewhere	58	41	1	0
	Imprisoned	8	91	1	*
	Kidnapped or taken as a hostage	11	87	2	0
	Tortured	11	87	2	*
	Been humiliated	23	74	2	1
	Lost contact with a close relative	47	50	2	1
	A member of your immediate family was killed during the armed conflict	25	73	2	0
	Serious damage to your property	34	63	3	*
	Wounded by the fighting	17	79	3	*
	Combatants took food away	26	71	3	*
	Had your home looted	30	66	3	1
	Somebody you knew well was a victim of sexual violence	28	62	7	4
	ROTATE STATEMENTS BELOW HERE SEPARATELY AFTER OTHERS				
	No or very limited access to basic necessities (water, electricity, etc.)	n/a	n/a	n/a	n/a
	No or very limited access to health care	n/a	n/a	n/a	n/a
	Lost all my belongings	n/a	n/a	n/a	n/a
	Lost my means of income (e.g. job, revenue, farm land, etc.)	n/a	n/a	n/a	n/a
	The area where I lived came under enemy control	n/a	n/a	n/a	n/a
ASK IF NOT 'YES' AT Q1 ↴	Q3B. I'm going to ask you about how you yourself have been affected by the armed conflict in the DRC. Please tell me whether any of the following things happened to you personally or did not happen as a consequence of the armed conflict in the DRC. For each one, please indicate whether it happened or did not happen to you?				
	Base: All not experiencing armed conflict at Q1-189	Happened	Did not happen	Don't know	Refused
		%	%	%	%
	Forced to leave your home and live elsewhere	n/a	n/a	n/a	n/a
	Imprisoned	n/a	n/a	n/a	n/a
	Kidnapped or taken as a hostage	n/a	n/a	n/a	n/a
	Tortured	n/a	n/a	n/a	n/a
	Been humiliated	n/a	n/a	n/a	n/a
	Lost contact with a close relative	n/a	n/a	n/a	n/a
	A member of your immediate family was killed during the armed conflict	n/a	n/a	n/a	n/a
	Serious damage to your property	n/a	n/a	n/a	n/a
	Wounded by the fighting	n/a	n/a	n/a	n/a
	Combatants took food away	n/a	n/a	n/a	n/a
	Had your home looted	n/a	n/a	n/a	n/a
	Somebody you knew well was a victim of sexual violence	n/a	n/a	n/a	n/a
	ROTATE STATEMENTS BELOW HERE SEPARATELY AFTER OTHERS				
	No or very limited access to basic necessities (water, electricity, etc.)	14	82	4	0
	No or very limited access to health care	11	87	2	*
	Lost all my belongings	6	90	4	1
	Lost my means of income (e.g. job, revenue, farm land, etc.)	7	89	4	0
	The area where I lived came under enemy control	5	90	4	*

ASK ALL ↴	Q4. And have you been affected by armed conflict in the DRC in any other ways? What ways were those?	
	SINGLE CODE	
		%
	Yes – specify	41
	No	56
	Don't know	2
	Refused	1
	YES – SPECIFY: TOP MENTIONS (> 5% of respondents)	YES
	<i>Base: All who have been affected by armed conflict in any other ways at Q4-223</i>	
		%
	TOTAL MENTIONS – PERSONAL SUFFERING	51
	Worried/anxious/always on my mind	20
	I was psychologically hurt/suffered psychological problems	11
	Sad/upset	7
	Morally affected (unspecified)	6
	TOTAL MENTIONS – DETERIORATION IN THE STANDARD OF LIVING	33
	Fear	22
	TOTAL MENTIONS – PEOPLE ARE KILLED/INJURED	11
	Friends were affected	7
ASK ALL WHO HAVE EXPERIENCED CONFLICT – 'YES' AT Q1 AND 'YES' AT Q2/ CODE 1 (IN THE DRC) OR ANY 'HAPPENED' RESPONSE AT Q3, OR ANY 'YES' RESPONSE AT Q4 ↴	Q5. And when were you personally most recently affected by this armed conflict in the DRC?	
	SINGLE CODE	
	<i>Base: All who have experienced/been affected by conflict in any way, as defined above-410</i>	%
	Now/currently experiencing	3
	Within the last month	1
	More than one month ago, but less than six months	8
	Six months ago to within the last year	8
	1-2 years	22
	3-4 years	16
	5-9 years	19
	10-19 years	19
	20 years +	3
	Don't know	1
	Refused	1

ASK ALL ↴	Q6. What do you think are the two or three greatest fears people are facing in a situation of armed conflict in the DRC?	
	DO NOT READ OUT. INTERVIEWER TO CODE A MAXIMUM OF THREE RESPONSES	
		%
	Inability to earn a living/personal or family economic instability	40
	Losing a loved one	54
	Being separated from loved ones	20
	Losing/destruction of the house/losing of personal belongings	23
	Living with uncertainty	26
	Having to leave their home/becoming displaced/a refugee	14
	Imprisonment	6
	Surviving the conflict	9
	Suffering injury	5
	Sexual violence	36
	Not being able to get an education/going to school	7
	Fear of being rejected by your community	1
	Having to take up arms/fight	1
	Being humiliated	3
	Limited access to basic necessities (water, electricity, etc.)	22
	Limited access to health care (drugs, hospital)	10
	Outcome of the conflict	9
	Other (specify)	9
	Nothing	0
	Don't know	0
	Refused	0
ASK ALL ↴	Q7. What do you think civilians who are living in areas of armed conflict need the most? Please select the three most important to you.	
	ROTATE STATEMENTS. READ THE LIST AND ASK RESPONDENTS TO SELECT ONE ANSWER. REPEAT THE LIST IF NECESSARY. THEN READ THE LIST AGAIN WITHOUT MENTIONING THE FIRST ANSWER AND ASK THE RESPONDENT TO SELECT ANOTHER ANSWER. REPEAT AGAIN.	
		%
	Food	86
	Shelter	47
	Medical treatment/health care	43
	Family members to be kept together	14
	Information on separated/missing family members	7
	Security/protection	52
	Respect/dignity	4
	Psychological support	10
	To influence decisions that affect them	2
	Conflict resolution	22
	Economic/financial help	10
	Other (specify)	2
	Don't know	0
	Refused	0

ASK ALL WHO HAVE EXPERIENCED CONFLICT – ‘YES’ AT Q1 AND YES AT Q2/ CODE 1 (IN THE DRC) OR ANY ‘HAPPENED’ RESPONSE AT Q3, OR ANY ‘YES’ RESPONSE AT Q4. ROTATE ORDER ↴	Q8. Now I would like to ask you about whether the armed conflict has changed the way you feel. For each description I read out, please say whether the armed conflict has made you feel more this way, less this way, or has it made no real difference. First [...], would you say it has made you more [...], less [...], or has it done neither?					
	Base: All who have experienced/been affected by conflict in any way, as defined above-410	More	Less	No real difference	Don't know	Refused
		%	%	%	%	%
	Vengeful	17	15	64	2	2
	Trusting	25	21	47	4	2
	Resilient	38	21	33	5	3
	Anxious	41	19	32	5	3
	Appreciative of every day	32	24	36	6	2
	Confused	36	23	35	4	3
	Sad	72	10	15	1	2
	Sensitive	66	13	17	2	2
	Disillusioned	26	26	40	5	3
	Optimistic for the future	42	19	32	5	2
	Wise	56	14	23	5	3
	Empathetic towards other people	42	24	30	2	2
	Violent/aggressive	14	16	65	2	3
BB) HUMANITARIAN ASSISTANCE/NEEDS						
ASK ALL WHO HAVE EXPERIENCED CONFLICT – ‘YES’ AT Q1 AND ‘YES’ AT Q2/ CODE 1 (IN THE DRC) OR ANY ‘HAPPENED’ RESPONSE AT Q3, OR ‘ANY’ YES RESPONSE AT Q4 ↴	Q9. During the time you experienced or were being affected by armed conflict, did you receive help or support from any of the following?					
	READ OUT.					
	Base: All who have experienced/been affected by conflict in any way, as defined above-410	Yes	No	Don't know	Can't remember	
		%	%	%	%	
	UN/UN agency	20	75	3	2	
	DRC Red Cross	25	68	4	2	
	ICRC (International Committee of the Red Cross)	22	70	6	2	
	Other non-governmental organization (NGO) or charity (local or international)	21	70	6	3	
	Government	15	74	7	3	
	Individuals from your community/neighbours	24	66	7	2	
	Religious entities	26	64	8	3	
	Military/army/combatants	7	82	8	3	
	Parents/family	39	53	6	2	
	Other (specify)	*	88	4	7	
	Combination: DRC Red Cross/ICRC	34	78	2	2	

ASK IF 'YES' AT Q9 ↴	Q10. For each of the types of organizations or people you mentioned receiving help or support from, I would like you to tell me how well you felt they understood your needs. First, the [type of support at Q9]...do you feel your needs were completely understood, partially understood, or not understood at all?					
	SINGLE CODE FOR EACH SOURCE OF SUPPORT MENTIONED AT Q9					
	Base: All who did receive support/help from each organization at Q9	Completely	Partially	Not at all	Don't know	Refused
		%	%	%	%	%
	UN/UN agency (Base = 83*)	70	29	1	0	0
	DRC Red Cross (100)	85	14	1	0	0
	ICRC (International Committee of the Red Cross) (98*)	80	20	0	0	0
	Other non-governmental organization (NGO) or charity (local or international) (96*)	77	19	2	1	0
	Government (62*)	77	18	4	1	0
	Individuals from your community/neighbours (115)	83	17	0	0	0
	Religious entities (115)	83	15	0	2	0
	Military/army/combatants (26**)	80	20	0	0	0
	Parent/family (177)	93	7	*	*	0
	Combination: DRC Red Cross/ICRC (140)	83	19	1	0	0
** Very low base/ *Low base						
ASK ALL ↴	Q11. Which, if any, of the following reasons do you think may have prevented people in the DRC receiving or accepting help or support during armed conflict?					
	READ OUT LIST. ROTATE ORDER. MULTICODE OK					
		YES				
		%				
	Corruption	49				
	Black market	42				
	Discrimination/social status	51				
	Location access – not able to reach the location	43				
	Unaware that it was available	37				
	Fear of being rejected by my community	4				
	Fear of being perceived to be aligned with wrong side	9				
	Pride/dignity	8				
	Did not meet criteria	10				
	Did not want to receive any support	4				
	Did not need to receive any support	3				
	Did not want to accept support because of who was offering it	8				
	Other (specify)	9				
	Nothing	5				
	Don't know	7				
	Refused	*				

CC) WARFARE/COMBATANTS		
ASK ALL ↴	Q12. Is there anything that combatants should not be allowed to do in fighting their enemy?	
	And what else?	
	OPEN-ENDED QUESTION. DO NOT PROMPT – BUT PROBE FULLY.	
	TOP MENTIONS (> 5% of respondents)	YES
		%
	TOTAL MENTIONS – TYPES OF WEAPONS	45
	Sexual assault/sexual violence/rape	43
	TOTAL MENTIONS – TYPES OF VIOLENCE/OPPRESSION	35
	Steal/rob	23
	Killing (unspecified)	10
	Physical assault	6
	TOTAL MENTIONS – KILLING/TARGETING CERTAIN KIND OF PEOPLE	34
	Kill civilians	27
	TOTAL MENTIONS – ATTACK BUILDINGS/DESTROY SPECIFIC AREAS	32
	Loot homes	25
	Destruction (unspecified)	5
		%
	There is nothing they should not be allowed to do	6
	(Any answer indicating that some action/s should be allowed)	79
	Don't know	13
	Refused	2
ASK ALL WHO ANSWER SOMETHING AT QUESTION 12 ↴	Q13. And why do you think that combatants should not be allowed to do this? Is that because it...?	
	READ OUT. ROTATE ORDER. MULTICODE OK	
	<i>Base: All who identify some action/s that combatants should not be allowed to do-421</i>	%
	Is against your religion	65
	Is against your personal code/ethics	46
	Is against the law	76
	Is against your culture	45
	Is against human rights	75
	Produces too much hate and division	39
	Produces too much destruction	37
	Other (specify)	*
	Don't know	0
	Refused	1
ASK ALL ↴	Q14. Now I would like to ask you some general questions about how, in your view, combatants should behave in times of armed conflict. When combatants attack to weaken the enemy, should they:	
	READ OUT. SINGLE CODE ONLY.	
		%
	Attack enemy combatants and civilians	1
	Attack enemy combatants and avoid civilians as much as possible	24
	Attack only enemy combatants and leave the civilians alone	75
	Don't know	*
	Refused	*

ASK ALL ↴	<p>Q15. Is there anything that combatants should not be allowed to do in fighting their enemy? For each one, please indicate whether it is OK or not OK to do that in fighting their enemy.</p> <p>READ OUT. SINGLE CODE EACH STATEMENT</p> <table><tr><td></td><td>OK</td><td>Not OK</td><td>Don't know</td><td>Refused</td></tr><tr><td></td><td>%</td><td>%</td><td>%</td><td>%</td></tr><tr><td>Depriving civilians of food, medicine or water to weaken the enemy</td><td>5</td><td>94</td><td>1</td><td>0</td></tr><tr><td>Attacking religious and historical monuments</td><td>4</td><td>93</td><td>3</td><td>*</td></tr><tr><td>Attacking civilians who voluntarily transported ammunition for the enemy</td><td>41</td><td>50</td><td>8</td><td>1</td></tr><tr><td>Attacking enemy combatants in populated villages or towns knowing many civilians would be killed</td><td>10</td><td>86</td><td>4</td><td>*</td></tr><tr><td>Taking civilian hostages in order to get something in exchange</td><td>7</td><td>88</td><td>4</td><td>1</td></tr><tr><td>Attacking civilians who voluntarily gave food and shelter to enemy</td><td>35</td><td>56</td><td>8</td><td>1</td></tr><tr><td>Planting landmines even though civilians may step on them</td><td>4</td><td>93</td><td>3</td><td>*</td></tr></table>		OK	Not OK	Don't know	Refused		%	%	%	%	Depriving civilians of food, medicine or water to weaken the enemy	5	94	1	0	Attacking religious and historical monuments	4	93	3	*	Attacking civilians who voluntarily transported ammunition for the enemy	41	50	8	1	Attacking enemy combatants in populated villages or towns knowing many civilians would be killed	10	86	4	*	Taking civilian hostages in order to get something in exchange	7	88	4	1	Attacking civilians who voluntarily gave food and shelter to enemy	35	56	8	1	Planting landmines even though civilians may step on them	4	93	3	*
	OK	Not OK	Don't know	Refused																																										
	%	%	%	%																																										
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Planting landmines even though civilians may step on them	4	93	3	*																																										
ASK ALL ↴	<p>Q16. In a situation of armed conflict, are there any circumstances in which you think it is acceptable for combatants to target health workers?</p> <p>SINGLE CODE ONLY</p> <table><tr><td></td><td>%</td></tr><tr><td>Yes</td><td>20</td></tr><tr><td>No</td><td>77</td></tr><tr><td>Don't know</td><td>2</td></tr><tr><td>Refused</td><td>*</td></tr></table>		%	Yes	20	No	77	Don't know	2	Refused	*																																			
	%																																													
Yes	20																																													
No	77																																													
Don't know	2																																													
Refused	*																																													
ASK IF 'YES' AT Q16 ↴	<p>Q17. In which, if any, of the following circumstances do you think this is acceptable?</p> <p>READ OUT EACH STATEMENT. ROTATE ORDER. SINGLE CODE EACH STATEMENT</p> <table><tr><td>Base: All who think it is sometimes acceptable to target health workers-126</td><td>Yes, acceptable</td><td>No, not acceptable</td><td>Don't know</td><td>Refused</td></tr><tr><td></td><td>%</td><td>%</td><td>%</td><td>%</td></tr><tr><td>When health workers are treating the enemy wounded and sick civilians</td><td>11</td><td>88</td><td>*</td><td>0</td></tr><tr><td>When health workers are treating the enemy wounded and sick combatants</td><td>25</td><td>71</td><td>3</td><td>1</td></tr><tr><td>When health workers are not clearly identified as health workers</td><td>64</td><td>33</td><td>2</td><td>1</td></tr><tr><td>When health workers take sides with one party in the conflict</td><td>86</td><td>11</td><td>3</td><td>0</td></tr></table> <p>**Very low base</p>	Base: All who think it is sometimes acceptable to target health workers-126	Yes, acceptable	No, not acceptable	Don't know	Refused		%	%	%	%	When health workers are treating the enemy wounded and sick civilians	11	88	*	0	When health workers are treating the enemy wounded and sick combatants	25	71	3	1	When health workers are not clearly identified as health workers	64	33	2	1	When health workers take sides with one party in the conflict	86	11	3	0															
Base: All who think it is sometimes acceptable to target health workers-126	Yes, acceptable	No, not acceptable	Don't know	Refused																																										
	%	%	%	%																																										
When health workers are treating the enemy wounded and sick civilians	11	88	*	0																																										
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ASK ALL ↴	<p>Q18. In a situation of armed conflict, are there any circumstances in which you think it is acceptable for combatants to target ambulances?</p> <p>SINGLE CODE ONLY</p> <table><tr><td></td><td>%</td></tr><tr><td>Yes</td><td>25</td></tr><tr><td>No</td><td>73</td></tr><tr><td>Don't know</td><td>2</td></tr><tr><td>Refused</td><td>0</td></tr></table>		%	Yes	25	No	73	Don't know	2	Refused	0																																			
	%																																													
Yes	25																																													
No	73																																													
Don't know	2																																													
Refused	0																																													

ASK IF 'YES' AT Q18 ↴	Q19. In which, if any, of the following circumstances do you think this is acceptable?				
	READ OUT EACH STATEMENT. ROTATE ORDER. SINGLE CODE EACH STATEMENT				
	Base: All who think it is sometimes acceptable to target ambulances-150	Yes, acceptable	No, not acceptable	Don't know	Refused
		%	%	%	%
	When an ambulance is used by combatants for hostile purposes	72	24	3	1
	When an ambulance carries wounded or sick enemy combatants	25	70	4	1
DD) HUMANITARIAN GESTURES	When an ambulance carries enemy wounded and sick civilians	13	86	2	0
	When an ambulance is not clearly identified as an ambulance	79	17	4	0
ASK ALL ↴	Q20. I'm now going to describe different kinds of groups and organizations. Please tell me which three of these play the biggest role to help reduce suffering during armed conflict.				
	READ OUT LIST AND ASK RESPONDENT TO SELECT ONE ANSWER. THEN READ LIST AGAIN AND ASK RESPONDENT FOR TWO MORE ANSWERS. REPEAT IF NECESSARY.				
		First mention	Other mentions	TOTAL	
		%	%	%	
	The military and combatants/armed groups	4	7	11	
	Religious leaders	19	18	36	
	International humanitarian organizations	22	25	46	
	Journalists and the news media	2	10	13	
	The United Nations	19	31	50	
	International Committee of the Red Cross (ICRC)	14	33	48	
	DRC Red Cross	6	15	21	
	Government authorities	7	21	28	
	Government organizations from other countries	1	9	9	
	International criminal court	*	7	7	
	Local/international NGOs/charities	4	18	23	
	Community leaders	1	4	4	
	Other (specify)	1	1	2	
	None of these	*	0	*	
	Don't know	0	1	1	
	Refused	0	0	0	
	Combination: DRC Red Cross/ICRC	20	46	61	

ASK ALL ↴	Q21. What do you think the international community should do to help civilians who are living in areas of armed conflict?	
	ROTATE STATEMENTS. READ THE LIST AND ASK RESPONDENT TO SELECT ONE ANSWER. THEN READ THE LIST AGAIN WITHOUT MENTIONING THE FIRST ANSWER AND ASK RESPONDENT TO SELECT ANOTHER ANSWER(S).	
	REPEAT IF NECESSARY. MULTICODE THREE.	
		%
	Stop the armed conflict by military intervention	36
	Exert political pressure	40
	Deliver emergency aid	45
	Provide peacekeepers	49
	Provide financial support to humanitarian organizations	24
	Put leaders accused of committing war crimes on trial	26
	Place economic sanctions on the country	4
	Raise awareness of the plight of civilians who are caught in areas of armed conflict	10
	Rebuild infrastructure	10
	Organize peace talks/negotiations	41
	Better enforce the law that protects victims of armed conflicts	12
	Other (specify)	1
	Nothing	0
	Don't know	0
	Refused	*
ASK ALL ↴	Q22. What, if anything, do you think people living outside of conflict zones can do that would most help victims of armed conflict in the DRC? Please select the three you feel are most important.	
	ROTATE STATEMENTS. READ THE LIST AND ASK RESPONDENT TO SELECT ONE ANSWER. THEN READ THE LIST AGAIN WITHOUT MENTIONING THE FIRST ANSWER AND ASK RESPONDENT TO SELECT ANOTHER ANSWER(S). REPEAT IF NECESSARY. MULTICODE THREE.	
		%
	Put pressure on legislators/politicians	51
	Public lobbying	54
	Become a volunteer	24
	Donate money	41
	Support an organization that helps those affected by the conflict	48
	Mobilize their local community	29
	Donate goods	43
	Other (specify)	7
	Nothing	0
	Don't know	0
	Refused	0
EE) GENEVA CONVENTIONS		
ASK ALL ↴	Q23. Have you ever heard of the Geneva Conventions?	
	SINGLE CODE ONLY	
		%
	Yes	41
	No	58
	Don't know	1
	Refused	0

ASK IF 'YES' AT Q23 ↴	Q24. To what extent do you think the existence of the Geneva Conventions limits the suffering of civilians in war time?	
	SINGLE CODE ONLY.	
	Base: All who have heard of the Geneva Conventions-230	%
	A great deal	20
	A fair amount	33
	Not very much	28
	Not at all	14
	Don't know	4
	Refused	*
FF) MEDICAL MISSION		
ASK ALL ↴	Q25. To what extent do you agree or disagree with the following statement?	
	READ OUT STATEMENT. SINGLE CODE ONLY.	
	Everyone wounded or sick during an armed conflict should have the right to health care	
		%
	Strongly agree	83
	Tend to agree	13
	Neither agree nor disagree	2
	Tend to disagree	1
	Strongly disagree	*
	Don't know	*
	Refused	0
ASK ALL ↴	Q26. In the context of an armed conflict, what best describes your personal views?	
	READ OUT STATEMENTS. ROTATE ORDER. SINGLE CODE ONLY.	
		%
	Health workers should treat only wounded and sick civilians from their side of the conflict	9
	Health workers should treat wounded and sick civilians from all sides of a conflict	88
	Don't know	2
	Refused	1
Demographics		
ASK ALL ↴	Respondent's gender	
		%
	Male	49
	Female	51
ASK ALL ↴	Respondent's age	
		%
	18-24	33
	25-29	22
	30-34	16
	35-39	11
	40-44	7
	45-49	5
	50-64	6
	65 or over	1
ASK ALL ↴	Education level	
		%
	No formal education	2
	Primary school incomplete	4
	Completed primary school	2
	Secondary school incomplete	28
	Completed secondary school	29
	University incomplete	17
	University completed	15
	Post secondary college education	4

ASK ALL ↴	Cities	
		%
	Kinshasa	62
	Lubumbashi	26
	Goma	12
ASK ALL ↴	Religion	
		%
	Christian	93
	Muslim	3
	Traditional African	2
	Other	1
	None	1
	Refused	*

IN-DEPTH RESEARCH

Discussion guide

This guide was used for the group discussions. A very similar guide was used for in-depth interviews.

Introduction	
1. Your own experience of armed conflict/violence (armed violence, urban violence if necessary)	• What experiences have you had of armed conflict/violence?
	– When was it?
	– Where?
	– What happened?
	• How you were/are – personally – affected? Your family/friends?
	• What were/are your feelings and thoughts about this armed conflict/violence?
	– How much did you understand about the armed conflict/violence? Why did it happen the way it did?
	• How do you feel (now) about what happened? How are you affected today, if at all?
	– What, if anything, has changed about you as a result of the armed conflict/violence?
2. On armed conflict/violence in general	• We've talked about armed conflict/violence – can we go further into that. So when we say armed conflict/violence... can you describe to me in detail what you mean by this.
	• Associations: what words come to your mind when I say 'armed conflict/violence'... Which words best describe armed conflict/violence for you?
	• During times of armed conflict/violence what would you say are/were your greatest concerns? (E.g. losing a loved one, your own security, surviving the conflict/violence, etc.)
	• Do your concerns change over time? (E.g. are some concerns immediate and others only occurring later on? Are some concerns short term, and others longer term for the future?) How would you divide these concerns we talked about up into immediate concerns and longer-term ones? Persistent ones and ones which fade or are resolved?
	• So when you/others are confronted with these situations what do you feel are the things you/they need the most help for/with. Why do you say that?
	• If you could, what would you like to communicate to the world?
	– What would you like to tell people about your needs? What is most important?
	– And what would you like to tell people about the way you feel?
	– And to help prioritize these messages in the minds of others, which are the most important issues in terms of your needs? Are there some things you can deal with on your own during these times? And are there some things you just cannot manage on your own without help?
3. On international community/humanitarian support	• During these times – when you have faced these kinds of situations – have you received any support?
	– Have you ever received any support from any international organizations?
	• IF YES – RECEIVED HELP FROM INTERNATIONAL ORGANIZATIONS TO DATE: What kind (s) of help did you receive? How did they help you? Were they able to address any of your key areas of concern in any ways – which ones?
	• IF NO – NOT RECEIVED SUPPORT FROM INTERNATIONAL ORGANIZATIONS TO DATE: Do you have any views on why you may not have received any support from international organizations to date?
	• Who played the biggest role (amongst different kinds of people and organizations) to help reduce your suffering (e.g. religious leaders, UN, local NGOs, Red Cross/Red Crescent, ICRC, other international NGOs, neighbours, etc.)?
	– Why would you say their role (s) were biggest?
	– Who else played biggest roles?
	• What do you think the international community should do to help victims?
	• If there is something that an international humanitarian organization could do better, what would it be?

4. On humanitarian actions/gestures	<ul style="list-style-type: none"> • And what is a ‘humanitarian action’, for you? Can you give me some examples? • Thinking of the armed conflict/violence you witnessed, can you recall any gestures or acts of kindness/humanity that made a difference in yours or others lives? <ul style="list-style-type: none"> – Could you tell me about them? – What difference (s) did this (these) make? – Who was responsible for this (these) act (s)? • Were you, yourself, able to help someone? If so, how? • If you could have done something to help what would it have been? Why? <ul style="list-style-type: none"> – Do you think you could have made a difference in someone else’s life? If so how? – Thinking back, would you have done anything differently? What could others have done differently? • More generally, what, if anything, do you think individuals can do to help other people (civilians) who are living in areas of armed conflict/violence?
5. On warfare/combatants	<ul style="list-style-type: none"> • I would like to ask you what you think the rules of conflict should be, ideally, to control what combatants can do in war: <ul style="list-style-type: none"> – Is there anything that combatants should not be allowed to do in fighting their enemy? What and why? – Is it ever OK for combatants to involve civilians in conflicts? In what circumstances?
6. On Geneva Conventions	<ul style="list-style-type: none"> • Before now, had you ever heard of the Geneva Conventions? • Could you tell me what your understanding is of what the Geneva Conventions are about? • Do you believe the Geneva Conventions do adequately protect persons in war time? Why?
7. On health/medical mission	<ul style="list-style-type: none"> • Do you think that ambulances operating in situation of armed conflict/violence should always be spared? Why? <ul style="list-style-type: none"> – How do you identify an ambulance in a situation of armed conflict/violence? – How do you identify a health/medical worker in a situation of armed conflict/violence? • Do you think everyone wounded or sick during an armed conflict/violence should have the right to health/medical care? Both civilians and combatants? Why? <ul style="list-style-type: none"> – Do you think there is anyone in particular who should not have access to health/medical care? Why? • Do you think that in a situation of armed conflict/violence health/medical workers should be protected in all circumstances? In what way... Why? Why not?
8. Wrapping up	<ul style="list-style-type: none"> • Is there anything else you would like to share with us about your experiences of living in armed conflict/violence? • What would have been useful for you to know in order to alleviate your suffering/improve your situation during armed conflict? Do you think stronger laws would have helped? • What are the main things which helped/would have helped alleviate suffering/improving your situation? • To sum up: what does your experience tell you about the value of humanitarian work in conflict situations? • What are the main messages you would like us to spread in order to try to make this world a safer place for civilians living in situations of armed conflicts/violence?

MISSION

The International Committee of the Red Cross (ICRC) is an impartial, neutral and independent organization whose exclusively humanitarian mission is to protect the lives and dignity of victims of armed conflict and other situations of violence and to provide them with assistance.

The ICRC also endeavours to prevent suffering by promoting and strengthening humanitarian law and universal humanitarian principles.

Established in 1863, the ICRC is at the origin of the Geneva Conventions and the International Red Cross and Red Crescent Movement. It directs and coordinates the international activities conducted by the Movement in armed conflicts and other situations of violence.

ABOUT IPSOS

Ipsos is a leading international research agency, with offices in over 60 countries worldwide and global reach.

Established in 1975, it conducts qualitative and quantitative research with the private, public and voluntary sectors. One of its key areas of specialization is in social and opinion research. This includes extensive work with a wide range of national and international NGOs, charities and aid organizations.

This study was coordinated by Ipsos Switzerland, with fieldwork on the opinion survey in the Democratic Republic of the Congo conducted by the Steadman Group and Ipsos Markinor, both working across Africa.

