### OUR WORLD. VIEWS FROM THE FIELD.

# DEMOCRATIC REPUBLIC OF THE CONGO

**OPINION SURVEY, 2009** 

This document contains the second set of research results, released to coincide with the 60th anniversary of the Geneva Conventions. Part 1 was released on 23 June 2009.





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# **Executive Summary**

### **Executive Summary**

This research was undertaken in eight countries that are currently experiencing or have experienced armed conflict or other situations of armed violence. 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 have been adversely affected by armed conflict and other situations of armed violence.

The eight country opinion surveys will be complemented by more in-depth research (qualitative survey).

This research has been 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 is to draw public attention to the vulnerability and ongoing suffering of people around the world. The intention is to emphasise the importance of humanitarian action and to convince individuals that they have the ability to make a difference and reduce suffering.

2009 is 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).

### **Behaviour During Armed Conflict**

### **Acceptable Behaviour**

In the Democratic Republic of the Congo (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 treat wounded civilians equally 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.

# 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, a polling firm, to conduct quantitative (statistical) research surveys in all eight countries. A broadly representative sample of the adult general public was interviewed, either in person or by telephone, in each country. The specific sampling methods and any groups/areas excluded are described in the relevant country reports.

The aim of the questions – given in full together with overall results in the appendices – was to determine whether the respondents had personal experience of armed conflict or armed violence and, if so, the specific impact it had on them. Questions also explored respondents' views on what conduct is 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.

Details of the survey carried out in the DRC are given in the next section.

The eight Ipsos national surveys were but one element of a broader research programme undertaken by and for the ICRC, which also involved:

- Statistical research carried out (by Ipsos) on the basis of the results of the eight national surveys. This has yielded powerful insight into the experiences and opinions of civilians in some of the most troubled places in the world. The work was co-ordinated by the Ipsos office in Geneva.
- In-depth (qualitative) research. This has enabled 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. The research was carried out
  through focus groups and one-to-one in-depth interviews moderated by ICRC staff.
  Those covered include people separated from other members of their families,

displaced people, first respondents and others directly affected by armed conflict or armed violence.

In 1999, ICRC carried out broadly similar opinion research as part of its People on War project. The programme covered some of the countries being reported on in 2009 – including the DRC – and several of the 1999 questions have therefore been revisited in order to provide trendlines. These are highlighted in the report where applicable.

### **Background & Objectives**

The year 2009 has 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 will be celebrated:

- The 150th anniversary of the Battle of Solferino (24 June 1859). Exactly 150 years ago, 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 battle field. 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 is based on the premise that **Our world** faces unprecedented challenges, from conflict and mass displacement to climate change and migration; 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 will be undertaking various activities to mark both these historic milestones, by highlighting the ongoing plight of people – particularly those who are most vulnerable – caught up in armed conflict or armed violence around the world.

### **DRC** – Research Methodology

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 DRC's largest city – located in the west of the country, bordering the Republic of the Congo (not covered in this research)). Kinshasa has 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 is around 69,000,000. It is heavily skewed towards younger people (the median age is just 16 years old, life expectancy is 53 years for men and 56 for women – and those aged 14 or below make up 50% of the population). By contrast, those aged 65 and over make 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 is 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.

### • Report Structure

The report has been written to be accessible and relevant.

An Executive Summary with the main findings is followed by the main body of the report, covering each broad subject area in turn. Charts in the report draw on the overall findings from the DRC survey and on a selection of key sub-group comparisons (e.g. between men and women, and different age groups).

The Appendices contain the sample profile and 'marked up' questionnaire (i.e. the full questions, with overall results for the DRC added in).

Please note that no country comparisons are made in this report. (These can be found in a 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 cease-fire 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. Clashes continue and are 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. It promotes respect for the basic rules of international humanitarian law and human rights law by the authorities in their treatment of civilians and detainees. It sees to it that displaced people and residents adversely affected by armed conflict and other violence have the means to survive and look after themselves and that the wounded and sick receive adequate health care. It

works to restore contact between separated family members – where necessary and possible, reuniting children with their families – and supports the development of the DRC Red Cross.

### In particular, the ICRC:

- and the DRC Red Cross have launched extensive emergency relief operations in conflictprone areas to assist people living near the fighting or in areas to which displaced people had fled. Although poor security can make it difficult to reach some affected people, the extensive network of DRC Red Cross staff and volunteers throughout the provinces has helped. Providing emergency aid such as food and essential household items, water supply, sanitation facilities and medical care has been a priority;
- and the DRC Red Cross have provided displaced people, residents and returnees with seed and tools, and have undertaken water and sanitation projects to help to revive farming activities and boost self-reliance;
- has addressed the physical, psychological and social needs of victims of sexual violence in specialized counselling centres throughout the country. Where necessary, patients have been referred to local health-care facilities to receive appropriate treatment;
- and the DRC Red Cross register unaccompanied children, endeavour to trace children and help reunite family members separated by the conflict. The children include those formerly associated with the armed forces and armed groups;
- regularly visits places of detention to monitor the condition and treatment of individuals detained in connection with the conflict;
- continues its dialogue with weapon bearers about numerous allegations of serious violations of international humanitarian law and human rights law that it has received.

# Part 2 – Behaviour During Armed Conflict

### **Part 2-Behaviour During Armed Conflict**

### Limits to Behaviour

A large majority of the people 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%) identified some behaviour which they feel is unacceptable. Sexual violence was 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.

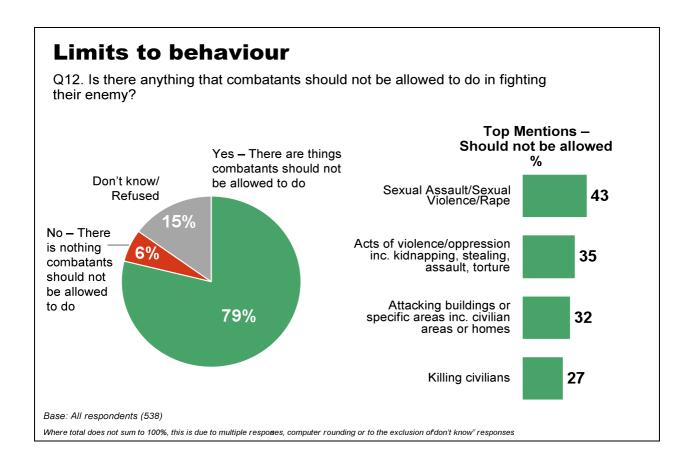
Only 6% say that 'there is nothing that [combatants] should not be allowed to do'. The remaining 15% do not know or refused to say.

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%).



### **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.

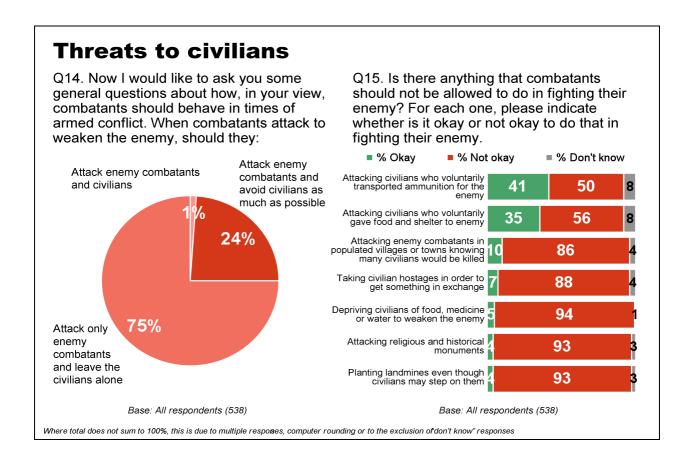
It is felt by nearly all that it is unacceptable to:

- 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).



### **Health Workers and Ambulances**

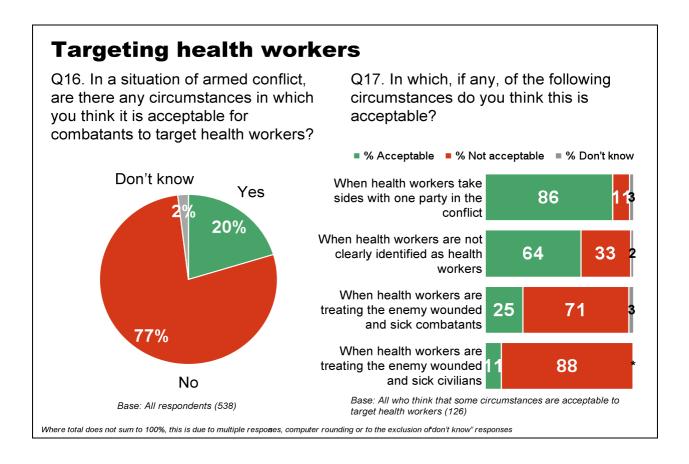
Most people say that attacks on health workers and ambulances, like those on civilians, are not acceptable (77% and 73% respectively).

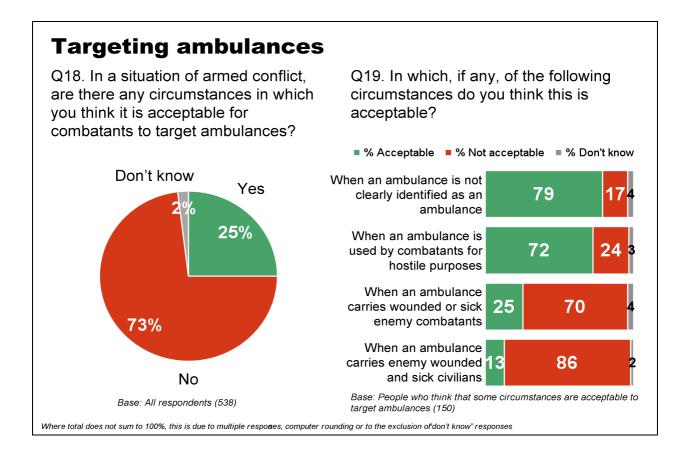
Three quarters of respondents (77%) say there are no circumstances in which it is acceptable for health workers to be targeted by combatants. Twenty per cent of respondents (29% of those aged 35-44) say that it is acceptable to target them in some circumstances. Views are similar among men and women.

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.





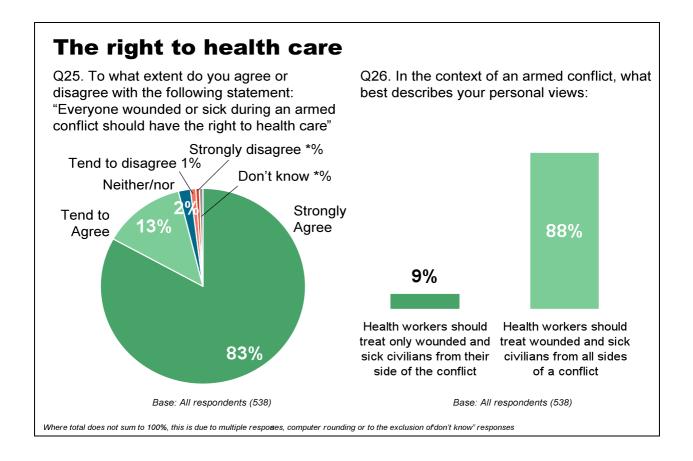
# Health Workers and Services: The Right to Health Care

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.

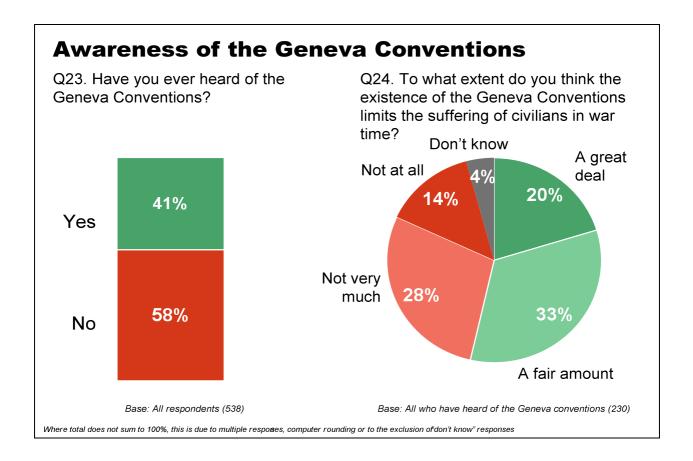


### The Geneva Conventions

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.



This summary represents what respondents think of international humanitarian law (IHL), health care and their views on acceptable behaviour during times of armed conflict. Part 1 of this research study, representing the views of respondents regarding the impact of armed conflict or armed violence on their lives, was released on 23 June 2009.

# **Appendices**

# **Appendices**

# **Sample Profile**

DRC			
(И)	/eighted P	rofile)	
	N	%	
Total	538	100	
Gender			
Male	266	49	
Female	272	51	
Age			
18-24	176	33	
25-29	119	22	
22.24	0.0		
30-34	86	16	
35-39	57	11	
40-44	38	7	
45-49	25	5	
TO-TO	25	J	
50-64	30	6	
65 or over	7	1	
Religion			
Christian	498	93	
Muslim	17	3	
Traditional	12	2	
African	_		
Other	5	1	
None	3	1	
Refused	2	*	

DRC (Weighted Profile)			
	N	%	
Total	538	100	
City			
Kinshasa	335	62	
Lubumbashi	141	26	
Goma	62	12	
Education			
No formal	10	2	
education			
Primary school - incomplete	23	4	
Primary school	11	2	
- complete		_	
Secondary	150	28	
school –			
incomplete			
Secondary school -	154	29	
complete			
University -	90	17	
incomplete			
University -	80	15	
complete			
Post secondary	20	4	
college			
education			

### **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)			
Unweighted base (538)	10% or 90% <u>+</u>	30% or 70% <u>+</u>	50% <u>+</u>
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				
Unweighted base (538) 10% or 90% ± ± 5				
Size of 2009 sub-groups (unweighted)				
217 (Men affected by armed conflict) vs. 193 (Women affected by armed conflict)	6	9	10	
			Source: Ipsos	

### Ipsos / ICRC

# "Our World: Views from Democratic Republic Of Congo"

### **Marked-Up Questionnaire**

- Interviews with 538 people
- Aged 18+
- Conducted face to face, between the 12<sup>th</sup> of March to the 19<sup>th</sup> of 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 would like your help with this. The interview will last around 15 minutes and is about your experiences and opinions on the armed conflict in DRC.

Results for questions Q1 to Q11 representing the views of respondents regarding the impact of armed conflict or armed violence on their lives, were released in Part 1 of this research study, on 23 June 2009.

### **CC) WARFARE / COMBATANTS**

### ASK ALL →

Q12. Is there anything that combatants should <u>not</u> 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

Base: All who identify some action/s that combatants should <u>not</u> be allowed to do - 421	
	%
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)	*
Do not 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 →

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

READ OUT. SINGLE CODE EACH STATEMENT

	Okay	Not Okay	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 <u>voluntarily</u> 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 <u>voluntarily</u> gave food and shelter to enemy	35	56	8	1
Planting landmines even though civilians may step on them	4	93	3	*

### ASK ALL →

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

SINGLE CODE ONLY

	%
Yes	20
No	77
Don't know	2
Refused	*

### ASK IF YES AT Q16 →

# **Q17.** 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 health workers – 126	Yes, Acceptable	No, Not acceptable	Don't Know	Refused
	%	%	%	%
When health workers are treating the enemy wounded and sick <u>civilians</u>	11	88	*	0
When health workers are treating the enemy wounded and sick <u>combatants</u>	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

### ASK ALL →

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

SINGLE CODE ONLY

	%
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
When an ambulance carries enemy wounded and sick <u>civilians</u>	13	86	2	0
When an ambulance is not clearly identified as an ambulance	79	17	4	0

Results for questions Q20 to Q22 representing the views of respondents regarding the impact of armed conflict or armed violence on their lives, were released in Part 1 of this research study, on 23 June 2009.

### **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 care	right to health
	%
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 $\underline{al}$ 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	*

- END OF THE QUESTIONNAIRE -

### **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**

lpsos 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 in the Democratic Republic of the Congo conducted by the Steadman Group and Ipsos Markinor, both working across Africa.

