ICRC SPECIAL APPEAL 2024

ADDRESSING SEXUAL VIOLENCE
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ADDRESSING SEXUAL VIOLENCE
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FOREWORD

After more than a decade of the ICRC’s Special Appeal, it is important we take stock of our efforts to support victims and survivors of sexual violence during armed conflict and other violence.

Over this period, the ICRC has facilitated lifesaving support, including medical and mental health services, to tens of thousands of survivors of sexual violence in more than 35 countries across the globe. This work is at the heart of our role, ensuring humanitarian protection and assistance for people affected by armed conflict and violence, through our mandate rooted in international humanitarian law.

The message of victims and survivors to the ICRC is clear: reduce stigma and make holistic care more accessible. As described by one of the thousands of victims and survivors the ICRC supported in Ethiopia in 2023, stigma is so debilitating precisely because “People totally forget who [you were] before... It hurts when people identify you by what has been done to you and not by who you are as a person.” The fear of this pain often causes many to delay seeking help for months, if not years.

To better address these barriers, we have ensured the principle of survivor centeredness is actively put into practice by engaging victims and survivors in the design of stigma reduction messages rooted in their lived experiences. The ICRC and our International Red Cross and Red Crescent Movement partners have delivered these messages to thousands of community members and encouraged help-seeking behaviours. In these same areas, data has shown that access to health care by victims and survivors has significantly increased as a result.

We owe this kind of continuous commitment to all victims and survivors including men, boys, and members of LGBTIQ+ communities, who are so often overlooked in humanitarian efforts to prevent and respond to sexual violence. As we have witnessed time and time again, even if the risks they face may look different, men, boys and LGBTIQ+ persons of all gender identities are clearly vulnerable to sexual violence. In some contexts where the ICRC operates, including places of detention, such groups may even be over-represented yet remain under-supported.

The experiences derived from our direct engagement with victims and survivors and our unique access to those in the hardest to reach areas must be translated into sector-wide learning outcomes and survivor-centred policy action. As our Prevention of Sexual Violence Programme enters its second year, preliminary results already demonstrate how locally informed behavioural change models can enhance respect for IHL – including by amplifying the prohibition on sexual violence and strengthening the protection of victims and survivors.

In the coming year, the ICRC will continue building on its operational research to shape policy issues that impact victims’ and survivors’ everyday lives, ranging from the prevention of sexual violence, mandatory reporting, and the inclusion of men and boys.

We sincerely thank all our partners for so generously sharing their expertise and resources. We look forward to further enhancing the quality of our survivor-centred response, while working in close collaboration towards our shared goal of preventing sexual violence altogether.

Robert Mardini
ICRC Director-General
THE SPECIAL APPEAL 2024: AN OVERVIEW

Despite the legal prohibitions against it, sexual violence remains prevalent during armed conflict and other situations of violence, with harmful and long-lasting effects on the people who endure it and on their communities.

The ICRC’s approach to addressing sexual violence is rooted in international humanitarian law (IHL). It is survivor-centred and multidisciplinary, aimed at preventing sexual violence, mitigating people’s exposure to risk, and responding to the multifaceted needs of the people affected. As an impartial organization, the ICRC supports victims/survivors of sexual violence based on humanitarian need. It ensures that its activities are tailored to the specific requirements and unique capacities of the people and communities it is seeking to help, and it consults and works with them to implement effective prevention, mitigation and response measures. The ICRC’s actions are guided by its Strategy on Addressing Sexual Violence 2018–2024.

The Special Appeal 2024 confirms the ICRC’s continued commitment to addressing sexual violence during armed conflict and other situations of violence and in detention. It outlines the key areas of the ICRC’s actions, the objectives and activities planned by teams at headquarters and in selected delegations in 2024, and the corresponding budgetary requirements.

HEADQUARTERS

At headquarters level, the ICRC’s priorities will be to:

- reinforce a long-term strategic vision for addressing sexual violence, through the development of a new institutional strategic framework;
- strengthen the operational capacities of the ICRC, particularly at delegation level, to prevent sexual violence, reduce risks and respond to needs;
- continue building an enabling law and policy environment for the prevention of and response to sexual violence, notably by influencing decision makers and by engaging in dialogue with weapon bearers (primary prevention), promoting community-based protection (secondary prevention) and preventing further impact (tertiary prevention); and
- promote collaboration within the International Red Cross and Red Crescent Movement (hereafter the Movement).

OPERATIONS

ICRC delegations tailor their activities to address sexual violence to the specific conditions, needs, capacities and distinct characteristics of the people or organizations they are seeking to help or engage with. The Special Appeal 2024 features the objectives and plans of 14 delegations working in key contexts. In many of them, specialist staff members – based in the delegation or in a regional delegation – support the holistic implementation of activities to address sexual violence and their integration into the delegation’s operations, while also building staff and institutional capacities across all departments and units. The ICRC also has a team at headquarters providing support to delegations.
The activities planned by the 14 delegations provide concrete examples of the main areas of the ICRC’s action to address sexual violence, namely:

- supporting the provision of health care, including mental-health and psychosocial support, and other essential services to victims/survivors;
- engaging with communities to mitigate their risk of exposure to sexual violence, and strengthening the integration of risk reduction into the ICRC’s protection services; and
- engaging with weapon bearers on the necessity of preventing sexual violence, notably by promoting IHL provisions and other norms prohibiting sexual violence.

**Featured ICRC delegations:** the Central African Republic; Chad; Colombia; the Democratic Republic of the Congo; Ethiopia; Iraq; Mali; Mexico City (regional); Nigeria; Pakistan; the Philippines; South Sudan; Sudan; and Suva (regional), for activities in Papua New Guinea.

**Specialist staff members**

The boundaries, names and designations used in this document do not imply official endorsement or express a political opinion on the part of the ICRC, and are without prejudice to claims of sovereignty over the territories mentioned.

**THE SPECIAL APPEAL 2024: BREAKDOWN**

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<td><strong>Total Budget</strong></td>
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KEY AREAS OF THE ICRC’S ACTION

The ICRC’s holistic approach to addressing sexual violence focuses on prevention, risk mitigation and survivor-centered response, as part of its humanitarian work to protect the lives and dignity of people affected by armed conflict and other situations of violence. The ICRC also works to create an effective enabling environment by: influencing and encouraging behavioural change among key decision makers at the international and national levels; supporting authorities to strengthen the implementation of domestic legal frameworks; mitigating people’s exposure to risks of sexual violence; and working with communities to reduce stigma and reinforce positive coping mechanisms.

Through its partnership with other components of the Movement, as well as with other national and international actors, the ICRC also aims to strengthen the quality of services available to victims/survivors, to better address the long-lasting and multilayered consequences of sexual violence. When necessary, the ICRC directly provides these services, filling critical gaps in existing referral pathways. Where there are no referral pathways, the ICRC works with local service providers and other actors to establish safe and ethical referral systems that are aligned with the core principles of the survivor-centred approach, namely respect, confidentiality, safety and non-discrimination. In parallel, the ICRC works directly with victims/survivors and their communities to reduce both visible and invisible barriers to accessing these life-saving services, enabling individuals to seek help in an environment where they do not have to fear further violence, social stigmatization or ostracization.

The following sections outline the key areas of the ICRC’s work to address sexual violence, and provide an overview of the range of activities it may undertake based on careful analyses and assessment and in direct consultation with the communities affected. For more information on the considerations the ICRC takes when designing and implementing its activities, see Annex II: The ICRC’s approach and strategy on page 49.
Placing victims/survivors at the centre

In every context where the ICRC addresses sexual violence, it carries out a careful assessment of key risks, vulnerabilities and threats to understand how to best support victims/survivors of sexual violence. The ICRC’s analysis is informed by the lived experiences of victims/survivors, as well as first-hand information provided by local authorities, service providers and other community members. Using this information, the ICRC can identify the causal drivers of sexual violence, as well as the specific gender, age and disability factors that may exacerbate certain individuals’ or communities’ risks to various forms of sexual violence. While the unique vulnerabilities of women and girls to sexual violence in armed conflict and other violence are always carefully considered, the ICRC is also acutely aware of the invisibility of other vulnerable categories of the civilian population. Owing to an increased social stigma linked to harmful gender norms, men, boys, and people who identify as lesbian, gay, bisexual, transgender, intersex, queer/questioning and/or other non-cisgender and non-straight identities (LGBTIQ+) may be less represented in prevalence and incidence statistics even as they face heightened risks under certain conditions or settings, such as during displacement or in places of detention. The ICRC pays specific attention to the needs of children who – when unaccompanied, separated from their family, or formerly associated with weapon bearers – are uniquely exposed to sexual violence and require tailored responses.

RESPONSE

Access to Health Services

The ICRC provides medical services to victims/survivors of sexual violence, either directly or through qualified and trusted partners. It strives to provide these services in a safe, timely and confidential manner that is aligned with international and national guidelines and sectoral standards. Such care may involve clinical management of rape, which includes post-exposure prophylaxis for human immunodeficiency virus (HIV), management of injuries and sexually transmitted infections (STI), immunization, and referral to mental–health and psychosocial services.

Specific examples of its activities include:

- providing material, technical and/or other types of support to primary–health–care facilities, counselling centres, hospitals, and emergency medical services, including ambulance providers;

- training local health staff, National Society volunteers and/or community health workers, such as traditional birth attendants, to identify cases of sexual violence and provide the appropriate services or referrals, when necessary;

- ensuring follow–up after providing services or referring people to other organizations (e.g. those providing higher–level health care, legal assistance, economic support) and/or to other ICRC services (e.g. livelihood or income support, protection, family–links services), with the informed consent of the victims/survivors;

- holistic management of sexual violence;
organizing community information sessions to raise awareness of available services and promote help seeking behaviours, while working to reduce stigmatization of victims/survivors of sexual violence; and

• urging authorities and other humanitarian organizations to ensure the sustainability, quality and safety of the services they are providing and the protection of medical services.

Access to Mental-Health and Psychosocial Support

The ICRC also works to make mental-health and psychosocial support available to victims/survivors of sexual violence, to support their recovery. Based on a careful analysis of specific cases and of prevailing socio-cultural norms, the ICRC may provide support at the individual, group, or community level, with due regard for the right to privacy and confidentiality of the people it is seeking to help. These activities are carried out in alignment with the International Red Cross and Red Crescent Movement’s Mental Health and Psychosocial Support Framework.

Specific examples of the ICRC’s activities include:

• Improving access to specialized mental-health care: Victims/survivors are referred to specialized mental-health care, including psychiatric services.

• Strengthening psychological support: Psychologists and counsellors from the local health ministry, the National Society, and/or local associations are given support to provide individual and/or group psychological support.

• Focused psychosocial support: The ICRC trains and supervises lay counsellors to carry out standardized activities individually or in groups (e.g. psychoeducation and problem solving with persons affected by violence, including sexual violence) and, where necessary, providing information and guidance on how to refer individuals to psychological support.

• Basic psychosocial support: The ICRC helps local actors strengthen their capacities to carry out information sessions in communities to address social stigma and raise awareness on the importance of seeking care and how to access available services.

Access to Other Essential Services

The ICRC strives to provide or facilitate access to essential services other than health care, to provide a holistic response to the needs of victims/survivors and to address communities’ protection-related concerns.

Specific examples of the ICRC’s activities include:

• Support for rebuilding or sustaining some degree of economic security: Victims/survivors of sexual violence, including former detainees, may be provided with emergency relief assistance (e.g. food, essential household items or cash) and support for resuming livelihood activities or diversifying sources of income to strengthen coping mechanisms that will support their recovery.

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1. For more information on the ICRC’s mental-health and psychosocial support activities, see the Mental health and psychosocial support leaflet.

2. See The International Red Cross and Red Crescent Movement’s Mental Health and Psychosocial Support Framework.
Cash and voucher assistance: The ICRC uses multipurpose cash and voucher assistance to address the unique needs of victims/survivors of sexual violence and those at risk of abuse. It favours this type of assistance because it is inclusive, participatory and discreet, and therefore fully aligned with the survivor-centred approach. Cash and vouchers may be used as a means for: preventing the risk of further sexual violence, reducing the risk of harmful coping mechanisms including survival sex; and enabling victims/survivors to meet their essential needs (e.g. food, shelter, clothes, etc.) while also facilitating their recovery (e.g. supporting their ability to start or expand income generating activities).

Support to local actors: The ICRC may also support local organizations, authorities or other institutions that provide livelihood support, vocational training and other services that are accessible to victims/survivors.

Transport and facilitating access to services: With a view to helping enhance the protection of individuals and at-risk groups, the ICRC may facilitate access to transport services or, under certain conditions, support the relocation of victims/survivors who might be unable to receive the medical attention or other services they require and/or may be at risk of further harm. Where the ICRC is unable to directly provide one of the services requested by victims/survivors (e.g. legal representation), it may facilitate a referral to another qualified organization with the informed consent of the victim/survivor.

RISK REDUCTION

Community Outreach and Engagement

The ICRC works in partnership with communities affected by armed conflict and other violence to mitigate specific risks linked to sexual violence. Based on feedback from communities, the ICRC aims to reduce vulnerabilities and minimize reliance on potentially harmful coping strategies while strengthening resilience by shoring up existing capacities in the communities.

Specific examples of the ICRC’s activities include:

- working with communities to develop a nuanced understanding of the causal drivers of sexual violence – including who or what is driving these threats and why – and to identify the diversity factors that contribute to the vulnerabilities of certain community members and, when possible, reduce them;

- identifying existing community-based protection measures, understanding the effects of these measures and reinforcing these existing capacities; and

- addressing social stigmatization of victims/survivors of sexual violence through various means (e.g. discussions with community leaders and authority figures, other community members and religious leaders, or public-communication campaigns) to reduce the risk of rejection, ostracization and isolation.
Mainstreaming Risk Reduction in ICRC Protection Services

The ICRC is pursuing efforts to ensure that the identification and reduction of risks of sexual violence are carried out as part of its various protection services. Notably, the ICRC considers these risks when implementing activities to protect family links, strengthen forensic services and monitor the treatment and living conditions of people deprived of their liberty.

Specific examples of the ICRC’s activities include:

- Protection of family links: The ICRC trains its own staff, as well National Society staff and volunteers, on how to react to disclosures and refer cases of sexual violence that are identified in the course of their work. The ICRC also strives to proactively identify any risk of sexual violence when assessing the conditions of unaccompanied and/or separated children before they are placed in temporary care arrangements and/or reunited with family members.

- Forensic services: When supporting national medicolegal authorities, the ICRC may assist in the revision of national medicolegal frameworks to ensure alignment with recognized standards for the examination of victims/survivors. It may also provide capacity-building support to forensic authorities, and carry out repairs on forensic facilities to facilitate quality, confidential and dignified forensic examinations for victims/survivors seeking to access justice.

- People deprived of their liberty: As part of its efforts to ensure the protection and dignity of people deprived of their liberty, the ICRC works to proactively identify systemic, structural and procedural risks of sexual violence in places of detention. It pays careful attention to how overcrowding, internal procedures, staff supervision, living set-up (e.g. separation of men and women, and children and adults), and access to essential services such as food, water, hygiene items and prison health services, may be contributing to the overall risks of sexual violence. The ICRC draws the attention of the pertinent authorities to these risks and gives them recommendations on how to address these, and technical support to address systemic concerns. It also conducts training sessions for prison staff, including prison health-care workers, on early identification of risks. Where necessary, the ICRC raises – during its bilateral and confidential dialogue with the authorities – cases of sexual violence that it has documented during its visits, to ensure that the victims/survivors have access to the necessary health services and protective measures.

**PREVENTION**

The ICRC works to promote understanding of and respect for IHL provisions, other internationally recognized law and standards that prohibit sexual violence in armed conflict and other situations of violence. Through bilateral and confidential dialogue, it regularly reminds all weapon bearers – whether state or non-state – that international law unequivocally prohibits sexual violence in all circumstances. It also urges parties to conflicts to fulfil their duty to protect people from sexual violence. Furthermore, it reminds all weapon bearers that, where sexual violence has occurred, they are obligated by IHL to facilitate victims/survivors’ access to health care with the shortest possible delay while also providing adequate redress and sanctions against the perpetrators.
Specific examples of the ICRC’s activities include:

- **Confidential and bilateral dialogue:** Through oral and written representations, the ICRC directly discusses documented instances, trends and patterns of sexual violence during armed conflict and other violence with the relevant duty bearers. It reiterates the legal prohibition of sexual violence and the protection due to those affected while also highlighting the humanitarian consequences of sexual violence on victims/survivors, their families and communities.

- **Strengthening preventive action:** In parallel, the ICRC strives to identify how social norms can influence behaviour that either normalizes or prevents sexual violence during armed conflict and other violence. Based on this, it develops specific action points, including awareness and training sessions for weapon bearers and/or the provision of technical and other support for updating their internal codes of conduct and standard operating procedures.

- **Reinforcing domestic legal prohibitions:** The ICRC helps duty bearers to integrate IHL prohibitions into relevant domestic legal and regulatory frameworks, doctrine, training and guidance for weapon bearers and policies for law enforcement operations. It provides them various forms of support to this end. For example, it conducts briefings on these topics and reviews domestic legislation and military and police operational documentation and procedures to assess whether and how these documents cover the necessity of preventing and addressing sexual violence. It also undertakes studies and, based on its findings, makes tools available for the use of its own staff and others (see also Annex I: Legal framework on page 47).

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**Strengthening front-line prevention of sexual violence**

Since 2022, the ICRC has made significant strides in enhancing its work to prevent sexual violence through its multi-year and multi-country Prevention of Sexual Violence Programme. Based on the outcomes of the ICRC’s *The Roots of Restraint in War* study, the programme aims to address the underlying attitudes and practices that contribute to sexual violence through behavioural change models aimed at influencing both weapon bearers and communities. Under the initiative, selected pilot delegations are given additional technical support to engage with weapon bearers on the topic of sexual violence, mainly aimed at raising the weapon bearers’ awareness of their role in preventing sexual violence and to influence their attitudes and practices to prevent it. In parallel, some of the delegations are also working with communities to better understand their attitudes and perceptions of sexual violence risks. As part of this, victims/survivors of sexual violence are consulted and the ICRC incorporates their views, needs and priorities when crafting or adapting the prevention messages relayed to different audiences. All this helps reinforce the survivor-centred approach by directly addressing social stigma, which is one of the key barriers, according to victims/survivors, that impedes them from seeking help.

The programme builds on existing ICRC prevention and protection activities and the organization’s result-based measurement approaches and capacities. The ICRC strives to capitalize on the lessons learnt from this front-line prevention work to develop evidence-based methodologies, activities and tools that will be made available to all delegations and Movement partners. For example, it has shared recommendations with states, donors and health and humanitarian workers on ways to ensure safe and unimpeded access to care for victims/survivors of sexual violence; these recommendations were based on a study on mandatory reporting of sexual violence and its implications on assistance-seeking behaviours, the safety of health-care workers and the provision of quality care. It also engages with civil society actors and with the media, including journalists, on the issue of stigmatization, on the survivor-centred approach to addressing sexual violence, and on ethical reporting on sexual violence.

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3. See *The Roots of Restraint in War*
4. See *Forced to report: Mandatory reporting of sexual violence in armed conflict*
1. Central African Republic. Members of the armed forces in the Central African Republic attend an ICRC training session on the basic provisions of IHL, including those related to the prohibition of sexual violence.

2. Ethiopia. Police officers attend a training, organized by the ICRC and the Ethiopian Police University, on international standards and police practices on the protection of people against sexual and gender-based violence.
5. Sexual and gender-based violence: Joint action on prevention and response
The ICRC will continue to update the database on customary IHL with national practice related to the prohibition and criminalization of sexual violence, and work towards publishing the updated ICRC Commentary on the Fourth Geneva Convention on the protection of civilians in armed conflict, including updated interpretations of the prevention of rape and other forms of sexual violence.

The ICRC will continue to implement its multi-year and multi-country initiative to reduce the risk of sexual violence and prevent its occurrence (see Strengthening front–line prevention of sexual violence on page 15). The initiative will be carried out in several delegations in 2024, including Colombia, the Democratic Republic of the Congo, Ethiopia and South Sudan. It will entail organizing capacity-building sessions, developing testing, monitoring, evaluation and learning tool kits, and adapting practical guidance documents for engaging with weapon bearers on the issue of preventing sexual violence.

The ICRC’s input in all these interactions and initiatives will be based on its operational experience and research, and on issues identified in partnership with the people and communities affected. It will pursue diplomacy around the findings of its past studies and reports on different aspects of the issue of sexual violence – including those carried out with Movement partners – and of the gendered impacts of armed conflict. Notably, it will organize, with its Movement partners, a sector–wide workshop on the humanitarian consequences of policies and practices that require health and other service providers to report cases of sexual violence to law enforcement authorities, or what are also known as mandatory reporting requirements.

To reach a broader audience, the ICRC will undertake public–communication campaigns – on social media and other platforms – in line with the International Day for the Elimination of Conflict–Related Sexual Violence (19 June) and the 16 Days of Action Against Gender–Based Violence in November and December. Voices and experiences from communities affected by conflict and other violence, including those of victims/survivors, will be amplified in posts on ICRC blogs and in relevant forums.

**Promoting collaboration within the Movement**

In line with its commitments outlined in Resolution 3, the ICRC will continue to cooperate with the International Federation and with National Societies – both those working in their own contexts and internationally – to address sexual violence during armed conflict and other violence. It will jointly organize training sessions, community outreach activities and coordination meetings with its Movement partners and increasingly seek to engage with them to influence key decision makers on shared policy objectives. Notably, it will continue to work on operational research and policy globally with the Norwegian Red Cross.

ICRC delegations will also continue to implement joint initiatives to address sexual and gender–based violence, for example, through formal partnerships with National Societies in the Democratic Republic of the Congo, Ethiopia, Iraq and South Sudan (see specific plans in the

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6. See, for example, the following publications: Male perceptions of sexual violence in South Sudan and the Central African Republic; Sexual and gender–based violence against men, boys and—including LGBTIQ+—people in humanitarian settings; Forced to report: Mandatory reporting of sexual violence in armed conflict; and Gendered impacts of armed conflicts and implications for the application of IHL.
Addressing sexual violence in 2024: Selected operations section on page 20). The ICRC will continue to follow up on the implementation of Resolution 3 and pledges related to it, and work with Movement partners on organizing side events or developing pledging opportunities at the 2024 International Conference.

Beyond the Movement, the ICRC will seek to expand coordination and pursue partnerships with other humanitarian actors, and most importantly, community-based actors, including survivor-led initiatives.
ADDRESSING SEXUAL VIOLENCE IN 2024: 
SELECTED OPERATIONS

Globally for 2024, the ICRC has sharpened its areas of focus, streamlined its operations and redefined its engagement with its partners, so that it can sustain its ability to respond to both emergencies and protracted crises, for the year and in the years to come. This came about in light of the increasing costs of delivering aid, coupled with the global decline in humanitarian funding, which have compelled the ICRC to adjust its response to armed conflict and other violence and to optimize its resources accordingly. These adjustments have affected some of the ICRC’s activities to address sexual violence, notably in areas where the ICRC has put greater emphasis on addressing needs that are more closely linked to the consequences of armed conflict, assisting people who are not receiving aid from other organizations, or where its involvement brings the most added value. Nevertheless, the ICRC continues to demonstrate a strong commitment to addressing the consequences of sexual violence and helping prevent its occurrence. This includes the activities featured in this document, which are planned by the ICRC delegations in the Central African Republic, Chad, Colombia, the Democratic Republic of the Congo, Ethiopia, Iraq, Mali, Nigeria, Pakistan, Papua New Guinea (covered by the Suva regional delegation), the Philippines, South Sudan, and Sudan and selected countries covered by the Mexico City regional delegation.

The ICRC’s activities in these contexts are guided by the organization’s approach and strategy for addressing sexual violence (see Annex II: The ICRC’s approach and strategy on page 49), and are adapted to the specific situation and the needs, characteristics and capacities of the people affected. A common thread is that the situations in these contexts often pose both heightened risks of exposure to sexual violence and obstacles to seeking and receiving critical services, owing to such factors as service interruption or social discrimination and stigmatization. This is why, in each of the delegations featured in this section, the ICRC is taking steps to develop its context-specific understanding of the problem of sexual violence, specifically in relation to patterns of abuse and violence, the prevailing legal and normative frameworks, and the existing services and providers. This enables the ICRC to assess the most appropriate entry points and approaches for its responses, and to develop its engagement with the authorities, weapon bearers, local and international organizations and other groups with a stake in the issue. Constantly building its own knowledge and understanding of the issue also allows the ICRC to adapt its response to developments in a given situation and to ensure the added value of its activities. Acknowledging the importance of having staff members who are sensitive to the issue of sexual violence and the needs of victims/survivors, the ICRC is reinforcing capacity-building efforts within its delegations. It is also actively working on strengthening its partnerships with National Societies and other local organizations.
Ethiopia. The ICRC donated medical and other supplies to health facilities, where displaced people, victims/survivors of sexual violence and others can access basic health services.
CENTRAL AFRICAN REPUBLIC

The Central African Republic (hereafter CAR) remains a site of protracted armed conflicts and other situations of violence, with the south–eastern and northern parts of the country witnessing regular attacks and clashes on top of the already affected central–eastern and north–western areas. People in the CAR struggle to cope with the combined consequences of armed conflict and other violence, high rates of crime and the presence of armed elements. Abuses against civilians, including sexual violence, have been reported; many communities live in a climate of fear of experiencing abuse.

ICRC ACTION

The ICRC delegation in the CAR will continue to seek to address and prevent sexual violence as part of its overall response to the needs of people affected by conflict and other violence in the country. Its efforts will include initiatives to reinforce staff members’ capacities and improve internal coordination mechanisms, and be guided by a country–specific strategy.

Supporting access to health care and other services

Helping ensure that victims/survivors of sexual violence have access to essential services will remain a priority for the ICRC. Victims/survivors of sexual violence will be able to obtain specialized care at ICRC–supported primary–health–care centres and at the ICRC–supported hospital in Kaga Bandoro. Where the ICRC does not implement health and other related activities, it will work on ensuring that a referral system is in place; it will also coordinate with other humanitarian actors in order to provide those in need with adequate services. The ICRC will seek to broaden awareness in communities of the plight of victims/survivors of sexual violence and the services available to them.

Households headed by victims/survivors of sexual violence will be given cash assistance for covering their basic expenses, and/or cash grants and training for starting income–earning activities.

Contributing to risk reduction and the prevention of sexual violence

The ICRC, working with the Central African Red Cross Society, will help communities to develop or strengthen existing community–based strategies to reduce their exposure to risks, including sexual violence. Moreover, when designing and implementing its activities (e.g. the provision of income support, installation of water points and similar projects), the ICRC will consider risks related to sexual violence and the impact of the activity on the risks identified. In rural areas, for examples, these improvements will enable people to fetch water without venturing far from their homes, thus also limiting their exposure to risks to their safety, such as sexual violence.

The ICRC will document and analyse allegations of sexual violence, among other abuses, and urge authorities and weapon bearers to develop measures to prevent misconduct. It will discuss alleged violations during its confidential, bilateral dialogue and other interactions with security and military forces. It will include modules on the prevention of sexual violence in dissemination
sessions and other events for the authorities and weapon bearers. The ICRC will also pay attention to the issue of sexual violence when carrying out activities for people deprived of their liberty.

The ICRC will pursue public-communication initiatives and organize dissemination sessions and other events to share key messages aimed at, among others, raising awareness of the situation of victims/survivors of sexual violence and the challenges they face. These activities will be complemented with efforts to intensify dialogue with the authorities and weapon bearers on their obligations under IHL and other applicable law, including provisions prohibiting sexual violence.

**Plan of action**

- through oral and/or written representations, remind the authorities and weapon bearers of their obligations under IHL and other applicable law; conduct training and/or information sessions for armed forces, internal security forces and other weapon bearers on IHL and other pertinent norms

- during briefings and dissemination sessions, draw attention to such issues as the plight of IDPs and victims of violence, including victims/survivors of sexual violence

- provide unconditional cash grants to cover immediate needs that may put a person at risk if unaddressed; include victims/survivors of sexual violence among the recipients of cash grants aimed at helping households meet daily expenses, start income-earning activities or enroll in vocational training

- give health facilities various forms of support – such as financial assistance, infrastructural improvements and medical supplies – for ensuring the provision of quality health care to victims/survivors of sexual violence; refer patients needing specialized or advanced care to an ICRC-supported hospital or other suitable facilities

- conduct information sessions in communities on the plight of victims/survivors of sexual violence, and the importance of referring them for prompt, appropriate care

**CHAD**

The security situation in Chad remains precarious, especially in the border areas of the Lac province. Attacks on civilians and their property, restrictions on movement, and sexual violence have all allegedly taken place.

Meanwhile, some 500,000 refugees who have recently fled the fighting in Sudan are living in eastern Chad; many of them are women and children. They have few or no belongings and lack the means to meet basic needs. Thousands of them require urgent medical attention, as they are severely wounded or have been subjected to abuse, including sexual violence.
ICRC ACTION

The ICRC will seek to raise awareness, among weapon bearers, of the necessity of preventing sexual violence. It will document the concerns of violence-affected people, including IDPs, and relay its findings to the parties concerned and urge them to uphold these people’s rights, including protection from sexual violence and other abuses.

In addition to its efforts to address the needs of people affected by conflict and other violence in Chad, the ICRC will also mount a multidisciplinary response to the needs and concerns of people who have fled the latest armed conflict in Sudan and settled in eastern Chad. It will strive to help refugees who have suffered sexual violence and other abuses to receive the health care and other services that they require, including hospital-level care. In particular, it will work with health authorities to make psychosocial assistance and life-saving care available to refugees and others in need of such care.

More broadly, the ICRC will seek to strengthen its engagement with IDPs, refugees and other violence-affected people to more fully understand their needs and the risks to their safety, including sexual violence or negative coping mechanisms. It will carry out dissemination sessions within communities to raise their awareness of ways to avoid these risks.

Whenever possible, the ICRC will refer victims/survivors of sexual violence to its economic-security activities or to pertinent external service providers.

Plan of action

- document allegations of abuse and submit oral and written representations confidentially to the pertinent parties; remind authorities, weapon bearers and others to prevent sexual and other violence against civilians
- inform the Chadian authorities of the protection-related concerns of Sudanese refugees who have fled Sudan for Chad; relay these concerns to the ICRC delegation in Sudan
- provide direct support to particularly vulnerable victims/survivors of sexual violence, including refugees who are not living in camps, to help them cover basic expenses and access medical care, or refer them to other organizations for assistance
- together with ICRC-trained professionals, provide mental-health and psychosocial support to people from Sudan, including those who may have suffered from sexual violence

COLOMBIA

Armed conflicts – between government forces and non-state armed groups, and among these groups – and other situations of violence continue to grow in intensity and complexity throughout Colombia. Abuses against civilians, including sexual violence, and other difficulties persist for people in areas affected by armed conflict and armed violence.
ICRC ACTION

The ICRC will sustain its efforts to address sexual violence as part of its multidisciplinary activities in Colombia. It will continue to leverage its partnership and coordination with the Colombian Red Cross, state agencies and other community-based organizations and partners to ensure that its prevention, mitigation and response efforts are holistic and coherent with other related initiatives. The ICRC will document and analyse instances of sexual violence to identify patterns of occurrence, ways to engage effectively with weapon bearers and promote IHL implementation, and activities that could reduce the vulnerabilities of at-risk communities and strengthen the authorities’ capacity to prevent and respond to sexual violence. Its activities will benefit from the support of a specialist staff member.

Supporting access to referral pathways and prevention and mitigation measures

The ICRC will use survivor-centred and community-based protection approaches to identify risks related to sexual violence and help mitigate and reduce people’s exposure to abuse. It will work jointly with the Colombian Red Cross, under the framework of their operational agreement, to strengthen the ability of communities and the authorities to reduce risks related to sexual violence. The ICRC will also organize dissemination sessions and workshops to inform victims/survivors of sexual violence, as well as their communities, about the services available to them, to help ensure that they can receive the support they require. It will strive to strengthen capacities of municipal authorities, and of community-based organizations and other institutions, to provide victims/survivors with information and assistance and in making referrals to state agencies for compensation or benefits. Notably, it will help community-based organizations carry out information sessions about the issue of sexual violence and the services available to those affected or at risk. The ICRC will continuously map, assess and strengthen internal and external referral pathways to the different services (e.g. health care, economic support, legal assistance) that victims/survivors of sexual violence may need.

Where there are gaps in the response of the state and other actors, the ICRC will assist victims/survivors of sexual violence directly. It will seek to strengthen health-care services, including mental-health, psychosocial and psychological support, and strive to make these available to victims/survivors. Notably, it will organize training sessions for staff at hospitals, clinics and counselling centres that provide psychosocial support and referrals. It will also continue to support victims/survivors who may not be eligible for governmental support or who may struggle to access these benefits – for example, it may provide them with livelihood support and/or financial assistance to cover their basic expenses.

Promoting compliance with IHL and preventing sexual violence

Through training and other activities with weapon bearers and government agencies, the ICRC will emphasize the necessity of preventing sexual violence, addressing its consequences, and ensuring access to essential services for victims/survivors. It will help authorities to strengthen their knowledge of IHL and improve its implementation in the domestic legal framework, helping them identify gaps as necessary. It will continue to provide technical support to the armed forces
for the integration of IHL and other relevant normative prohibitions on sexual violence into their doctrine, operational protocols, and training mechanisms, as part of broader prevention efforts.

As part of its global Prevention of Sexual Violence Programme, the ICRC will also strive to develop key messages – tailored specifically to the local context – on the prevention of sexual violence and share these with weapon bearers; it will then undertake efforts to measure the impact of such initiatives on risk reduction.

**Plan of action**

- give the pertinent authorities advice on drafting or implementing policies for protecting and assisting victims/survivors of sexual violence and on making improvements to state services and state referral pathways, with a view to ensuring that essential services are available to victims/survivors

- through dialogue, promote respect for IHL provisions and other norms regarding sexual violence among all weapon bearers; discuss and support the integration of provisions pertinent to IHL in the doctrine and training of the military and police

- as part of a multi-year and evidence-based initiative focused on influencing behaviour and practices, engage with weapon bearers to help them better understand the consequences of sexual violence and how to prevent its recurrence

- through training sessions, and other capacity-building efforts, help community-based organizations to raise awareness of sexual violence, implement risk mitigation measures, and strengthen community networks that provide victims/survivors in remote areas with information and access to the essential services that they require

- organize community-based protection workshops to assess vulnerabilities and identify and mitigate related risks of sexual violence

- provide victims/survivors with cash grants that they can use to cover emergency needs, buy supplies for small businesses and/or enroll in vocational training, or engage them in cash-for-work initiatives

- through a community-based response and at health facilities, provide mental-health and psychosocial support for victims/survivors of sexual violence – directly, or through local partners trained or supported by the ICRC

**DEMOCRATIC REPUBLIC OF THE CONGO**

The military and security forces of the Democratic Republic of the Congo (hereafter DRC), and in some cases, troops from other countries, are engaged in several conflicts against non-state armed groups in eastern DRC. The most affected areas are North Kivu – where there was a resurgence in hostilities in late 2023 – and Ituri, and to a lesser extent, in South Kivu. Civilians in these areas face great risks of being killed or subjected to sexual violence and other abuses,
with women and children particularly at risk. An increase in displacements because of the conflict has notably exacerbated risks of sexual violence on IDPs. Victims/survivors of sexual or other violence are often traumatized, and face social stigmatization, rejection by their families or communities, and other difficulties.

**ICRC ACTION**

The ICRC will continue to implement a transversal, survivor-centred approach to addressing conflict-related sexual violence and its consequences. Its multidisciplinary approach will ensure that the needs of victims/survivors are addressed in a holistic manner; its prevention work will focus on reducing the occurrence of abuse and minimizing people’s exposure to risk. The ICRC will pay specific attention to women and girls and to children associated with armed groups and unaccompanied children who may have been exposed to sexual violence. It will also continue to pay attention to the issue of sexual violence when carrying out activities for people deprived of their liberty.

The Red Cross Society of the Democratic Republic of the Congo, which plays a pivotal role in assisting conflict-affected people, will continue to be a key partner for the ICRC.

A team of specialist staff members will provide technical support for and oversee the implementation of the delegation’s addressing sexual violence strategy, as well as help ensure its coherence with the ICRC’s institutional approach and its other activities in the DRC. The delegation will continue to conduct training sessions for staff members on different aspects of addressing sexual violence and pursue efforts to improve internal coordination and referral mechanisms.

**Supporting the provision of health services**

Victims/survivors of sexual violence, among other violence-affected people, will have access to free services at primary-health-care centres and community centres that the ICRC will provide with material, technical and capacity-building assistance. Victims/survivors will also be able to obtain mental-health and psychosocial support at ICRC-supported counselling centres and health facilities. People needing more specialized care will be referred to hospitals or other appropriate facilities. Training sessions on addressing sexual violence will be organized for health workers at ICRC-supported hospitals. Moreover, the ICRC will continue to reinforce referral mechanisms between these different facilities.

Victims/survivors of sexual violence will continue to be included in ICRC livelihood-support projects, as the organization endeavours to avoid stand-alone projects or approaches that focus specifically on victims/survivors of sexual violence, to avoid further stigmatization. They will be given emergency cash assistance to help prevent them from resorting to harmful coping mechanisms and to help advance their socio-economic integration. If needed, they will be referred to other organizations for other forms of assistance.
**Contributing to risk reduction**

The ICRC will continue to engage closely with communities in the eastern DRC to learn more about the risks that they face and design its activities according to their needs, with a view to supporting resilience mechanisms and implementing prevention strategies designed by victims/survivors of sexual violence themselves. It will work with the National Society, to ensure that community members, health workers and others are alerted to the plight of victims/survivors of sexual violence and aware of the need to address the social stigma and multiple challenges that they face. It will draw their attention to the necessity of timely referrals and provide them the tools to make such referrals to the ICRC and/or other health-care providers and organizations. These topics will also be covered during media campaigns and other public-information initiatives, including some activities that will be carried out with the National Society.

**Promoting the prevention of sexual violence and compliance with IHL**

The ICRC will continue to raise the issue of sexual violence in its dialogue with authorities and weapon bearers. It will document allegations of abuse and urge the pertinent parties to prevent these and to take action against the perpetrators. Prevention of sexual violence will be covered during IHL training sessions and forms of interaction with the authorities and weapon bearers. The ICRC will continue to give guidance and other support for integrating IHL and international human rights law – especially provisions governing the conduct of hostilities – and/or other applicable norms in weapon bearers’ decision-making, training and operations.

**Plan of action**

- through oral and/or written representations, remind the authorities and weapon bearers of their obligations under IHL and other applicable law; seek to include the topic of preventing sexual violence in information sessions for weapon bearers on IHL and other pertinent norms

- through information sessions and other activities, make community members, health workers and others aware of the vulnerabilities faced by victims/survivors of sexual violence; organize communication campaigns to raise awareness of key messages related to sexual violence, such as the necessity of referring victims/survivors within 72 hours and preventing stigmatization

- provide separated, unaccompanied, and demobilized children who had been reunited with their relatives with ad hoc assistance – including referrals for mental–health and other support, if there are victims/survivors of sexual violence among them – and make follow–up visits to check on their welfare

- give unconditional cash grants to cover immediate needs that may put a person at risk if unaddressed, and give grants for starting income–generating activities to facilitate the socio–economic integration of victims/survivors of sexual violence

- provide training, funds, supplies and/or equipment regularly to primary–health–care centres in the eastern DRC, to help ensure that victims/survivors of sexual violence can obtain appropriate treatment within 72 hours
• organize staff training or extend other forms of assistance to counselling centres, primary-health-care centres, selected hospitals and physical rehabilitation centres that offer mental-health and psychosocial support

• facilitate the referral of patients to the appropriate services by providing financial and logistical support for their transport and training community members and health workers to refer victims/survivors of sexual violence, and other emotionally traumatized people, to ICRC-supported counselling centres and other facilities

• provide the DRC Red Cross with various forms of assistance (e.g. supplies, training) to strengthen its capacity to mitigate the consequences of sexual violence, such as stigmatization

ETHIOPIA

In northern Ethiopia, hostilities between the Ethiopian National Defense Force and its allies, and Tigrayan forces, have died down since November 2022, when the parties to the conflict agreed to a permanent cessation of hostilities. The consequences of the past conflict, nevertheless, remain staggering. Meanwhile, in western and southern Oromia, fighting between the military and the Oromo Liberation Army remains intense; armed conflict has also broken out in Amhara. The risk of sexual violence and other abuses linked to ongoing hostilities is significant. Furthermore, victims/survivors of sexual violence may face challenges accessing medical care and are often subjected to social stigmatization, which exacerbates their difficulties.

ICRC ACTION

The ICRC will implement a multidisciplinary, survivor-centred approach to addressing conflict-related sexual violence and its consequences in Ethiopia. Its efforts will be guided by a delegation-level strategy that aims to: ensure that victims/survivors of sexual violence have access to all necessary services; strengthen the resilience of survivors to the consequences of sexual violence, including secondary victimization owing to social stigma; and ensure compliance of domestic law and policies with international law and standards.

A sexual violence specialist staff member will coordinate these activities, provide technical expertise and conduct capacity-building efforts for ICRC staff members, the Ethiopian Red Cross Society’s staff and volunteers, and other local partners. The ICRC will maintain its partnership with the Ethiopian Red Cross Society in addressing sexual violence. It will seek to coordinate its activities with other organizations tackling sexual violence, including by participating in forums to discuss the needs of victims/survivors.
Urging protection for violence-affected people and helping mitigate risks

Through various means, the ICRC will draw attention to the necessity of preventing sexual violence. Notably, it will bring up the issue in bilateral and confidential dialogue with weapon bearers, the authorities and members of civil society, and systematically include it in training sessions conducted with and for them.

The ICRC will seek to reach a fuller understanding of the issue of sexual violence by looking at trends and patterns of violence, the consequences on people and communities, the needs of victims/survivors of sexual violence, and existing response capacities. Together with the Ethiopian Red Cross Society and the Danish Red Cross, the ICRC will engage with community members to identify solutions that reinforce their positive coping mechanisms, and support efforts to mitigate risks to their safety. It will also raise awareness among community members of the necessity of addressing or ending the social stigmatization of victims/survivors of sexual violence and of facilitating their access to suitable assistance. Volunteers of the Ethiopian Red Cross Society will be trained to collect baseline data on attitudes, within communities, towards sexual violence, which will be used to measure the impact of subsequent awareness efforts.

The ICRC will consider the risk of sexual violence when designing and implementing its activities. For example, when installing water pumps to improve water supply in rural areas, the ICRC will consider safety risks and ensure that the location of water pumps does not expose community members to danger. The ICRC will also pay attention to the issue of sexual violence when conducting its activities for people deprived of their liberty, notably by conducting assessments and pursuing dialogue with the pertinent authorities.

Supporting life-saving services and facilitating access to them

A central aspect of the ICRC’s efforts will be to ensure that victims/survivors of sexual violence receive the right information and are safely referred to service providers where they can obtain various forms of support, according to their individual needs and wishes. This will involve ensuring that referral pathways are established in all areas where the ICRC works, helping victims/survivors to access pertinent services by providing them with cash to cover transportation, and enabling existing service providers to sustain or reinforce their capacities. In particular, the ICRC will facilitate referrals to one-stop centres that provide comprehensive support to victims/survivors of sexual violence, including clinical management of rape, and to other health-care providers, such as fistula clinics. It will support the operation of these centres and of existing safe houses for victims/survivors in Amhara, Tigray and Oromia, as well as other regions.

As part of its broader initiatives to enable primary–health-care centres and hospitals to provide good–quality health care, the ICRC will train health staff in providing specialized services, including clinical management of rape according to sectoral standards, and give them medicine and other supplies (e.g. “dignity kits” containing hygiene essentials, clothing, torches and other items to help women maintain basic hygiene in a safe and dignified manner). The ICRC will also support the provision of care for victims/survivors suffering longer–term consequences, through referrals and the donation of medicines and other supplies to specialized fistula clinics. Victims/survivors of sexual violence will also be included in ICRC initiatives aimed at enabling violence–affected people to meet their needs in a more sustainable manner.
Plan of action

- document allegations of conflict-related sexual violence, and analyse patterns and trends as the basis for confidential dialogue with the relevant authorities and weapons bearers

- explain the necessity of preventing and addressing sexual violence, among other issues, during training sessions, meetings and other events with and for weapon bearers and national and local authorities

- within the framework of a multi-year and evidence-based initiative focused on influencing behaviour and practices:
  - conduct workshops for influential members of the community (e.g. religious and community leaders, community-based health workers, social workers, and National Society volunteers), with a view to helping communities develop or reinforce positive coping mechanisms
  - hold information sessions for community members, to raise awareness about sexual violence and help address the stigmatization of victims/survivors
  - give the Ethiopian Red Cross Society training, technical and material support, so that it can conduct community information sessions on sexual violence and collect baseline information on attitudes, within communities, towards sexual violence, in order to measure the impact of subsequent awareness initiatives

- provide individual support for victims/survivors of sexual violence, including referrals to medical services, coverage of their treatment and/or transportation costs, and other forms of assistance (e.g. family-links services, essential household items, cash for multiple uses)

- in areas affected by conflict and other situations of violence, provide materials and capacity-building support to facilities that treat or assist victims/survivors of sexual violence; specifically:
  - donate medical and other essential supplies, and post-exposure prophylaxis kits for victims/survivors of sexual violence, and provide staff training to primary-health-care facilities
  - provide capacity-building support, medicine, “dignity kits” and other supplies to around 25 one-stop centres – 20 regularly supported and 5 supported on an ad hoc basis – and hospitals, including those with fistula clinics; make repairs at these facilities, as necessary
  - organize training sessions, on mental-health and psychosocial support, for health workers
  - support safe houses by providing them with ad hoc material or financial assistance

- include a session on sexual violence in training courses for National Society staff and volunteers
IRAQ

Iraq continues to contend with the consequences of past conflicts and other situations of violence. Unlawful conduct, including sexual violence, have been reported in relation to past hostilities.

**ICRC ACTION**

The ICRC delegation in Iraq will pursue activities according to its 2022–2025 strategy for addressing sexual violence, which identifies three priorities: enhancing staff awareness and knowledge; integrating prevention and risk reduction measures into the delegation’s broader activities; and enhancing external partnerships and support, particularly with other Movement components.

**Promoting prevention and risk reduction**

The ICRC’s delegation in Iraq will increasingly focus on promoting the prevention of sexual violence and mitigation of people’s exposure to risk while helping local institutions strengthen their capacities to reinforce their survivor-centered responses.

As a priority, the ICRC will develop and share contextually relevant messages about the prevention of sexual violence, with a view to enhancing the protection of specific groups of people who have become increasingly vulnerable to various protection risks, including sexual violence, as a result of successive past armed conflicts. The ICRC will also strive to integrate risk reduction measures into its livelihood-support activities for women-headed households, including families of the missing and displaced households, whose members may be at risk of sexual violence.

In parallel, the ICRC will strive to reinforce its support for key local institutions that provide critical services to victims/survivors and strengthen its partnership with the Iraqi Red Crescent Society and other components of the Movement to improve access to mental-health and psychosocial care.

**Plan of action**

- develop and promote the use of referral pathways in areas most affected by past conflict, such as Mosul, in coordination with Movement partners, local authorities and other service providers who are also addressing sexual and gender-based violence

- help local institutions that provide care for victims/survivors – such as medicolegal experts, emergency first responders and medical staff at health facilities – to strengthen their capacities

- organize training for local partners, including Movement staff and volunteers, who are providing mental-health and psychosocial support for people affected by past violence and conflict

- develop and disseminate messages – tailored to the local context and culture – on the role of duty bearers to prevent and reduce the risks of sexual violence in conflict-affected communities
MALI

Hostilities in relation to several armed conflicts between the Malian military and armed groups continue to take place. Unlawful conduct, such as sexual violence linked to the conflict, have been reported, although the full extent of abuse remains difficult to assess.

ICRC ACTION

Through its privileged and unique access in the country, and its dialogue with all parties to the conflict, the ICRC will strive to emphasize – in its interactions with the authorities and other weapon bearers – the necessity of protecting civilians and preventing or ending abuses, including sexual violence, as called for under IHL, international human rights law and/or other applicable norms. The ICRC will also seek to engage more closely with violence-affected communities, to gain a fuller understanding of their many different needs and the risks to their safety, and consequently work with them in addressing their needs and developing measures for their safety.

The ICRC will also continue to help make specialized health care and psychosocial support available to victims/survivors of sexual violence. It will ensure that victims/survivors of sexual violence have access to free health and mental–health care. It will provide financial assistance, technical support and training to selected staff members in the health facilities – health centres, hospitals and physical rehabilitation centres – that it supports in northern and central Mali and in facilities run by the Mali Red Cross, to ensure that the services they provide are of good quality and free of charge. In places of detention, the ICRC will monitor risks and document any allegations of sexual violence and raise these with the authorities through bilateral representations. It will also ensure that any victim/survivor receives appropriate health–care and psychosocial support.

To support the effective implementation of these activities and the further development of its efforts to address sexual violence, the delegation in Mali will pursue efforts to deepen its understanding of the issue of sexual violence, strengthen internal coordination mechanisms for addressing the issue, and organize awareness and training sessions for staff members.

Plan of action

• ensure that victims/survivors of sexual violence have access to health and mental–health and psychosocial care; more specifically:
  - provide mental–health care to victims/survivors of sexual violence – either directly or through ICRC–trained counsellors – at ICRC–supported health structures and National Society–run facilities
  - broaden awareness – among first responders, health workers and other community members – of the psychological and psychosocial effects of violence, and the appropriate means of addressing them
- donate equipment and supplies, including post-exposure prophylactic kits; refer patients for higher-level or specialized care, including to ICRC-supported hospitals

- provide ad hoc assistance to people with specific needs, such as victims of violence, including victims/survivors of sexual violence; refer them to ICRC-supported or other services, as appropriate

- document alleged violations of IHL or other applicable norms in the conduct of hostilities; raise these allegations – through bilateral oral and written representations – with the parties concerned, reminding them of their obligations and providing recommendations for corrective and preventive action

- document any alleged cases of sexual violence in places of detention and raise these through bilateral representations with the detaining authorities

MEXICO CITY (REGIONAL)

Covering: Belize, Costa Rica, El Salvador, Guatemala, Honduras, Mexico, Panama

In areas affected by violence across the region, people continue to be at risk of being displaced, wounded or killed. Others are harassed, abducted and subjected to sexual violence, although many cases may be underreported. Violence-affected people struggle to meet their basic needs and obtain essential services because of the security situation and movement restrictions.

ICRC ACTION

The ICRC will focus its efforts to address sexual violence on initiatives aimed at helping migrants, returnees, IDPs and residents in violence-affected communities in El Salvador, Honduras, Panama and Mexico. Within this framework and through a survivor-centred approach, it will seek to ensure that victims/survivors have access to safe referral pathways that will enable them to access good-quality services; it will also engage in dialogue with the authorities on preventing sexual violence and responding, in an integrated manner, to the needs of victims/survivors. It will carry out all this in close partnership with the pertinent National Societies and other members of civil society.

As a priority, the ICRC will work with the health authorities, National Societies and others to improve and promote the use of referral systems for victims/survivors of sexual violence, with a view to connecting the latter to providers of emergency and essential services. It will also work on persuading the authorities, weapon bearers and pertinent institutions, particularly in Honduras, Mexico and Panama, to strengthen protection and access to services for victims/survivors of sexual violence. As part of this, it will seek to improve the authorities’ understanding of the plight of victims/survivors of sexual violence, especially regarding the risks and challenges that they face. The ICRC will also integrate the issue of sexual violence into strategic round tables and meetings with the pertinent authorities, focusing on health, forensics and migration, and legal frameworks.
To make mental–health and psychosocial support and appropriate medical care available to victims/survivors of sexual violence, the ICRC will help community-based workers, health–care providers and other professionals to develop their ability to provide care to those who need it and learn how to make referrals.

**Plan of action**

- in Honduras, Mexico and Panama, document the concerns of migrants, including sexual violence, and bring them up with the pertinent authorities through oral and written representations, whenever applicable; include the topic of preventing and addressing sexual violence in workshops planned for the armed and security forces
- provide the health authorities and other pertinent actors in El Salvador, Honduras and Mexico with technical and other support for restoring health services and medical referrals in communities affected by violence, with a focus on the accessibility of care for victims/survivors of sexual violence
- train health–care workers and other key service providers in Honduras and Mexico to provide mental–health and psychosocial support for victims of violence, including victims/survivors of sexual violence; work with the authorities and others to develop systems for referring those with specific needs to appropriate service providers
- include modules on managing cases of sexual violence and referring victims/survivors of sexual violence in the first–aid and pre–hospital training sessions organized for health staff and emergency responders
- work with the National Societies to develop means of referring victims/survivors of sexual violence to providers of the necessary comprehensive services and support them in making use of newly identified referral pathways to identify appropriate service providers for victims/survivors of sexual violence
- share information – with the authorities, the National Societies and other members of civil society – about referral pathways to services required by victims/survivors of sexual violence

**NIGERIA**

Hostilities in relation to the ongoing armed conflict in north–eastern Nigeria as well as violence in other parts of the country continue to have dire consequences for people in the country, with millions of people displaced and confronted with safety risks and limited access to basic services. Sexual violence is reportedly widespread, along with various other abuses.

**ICRC ACTION**

The ICRC will strive to address sexual violence in a holistic, survivor–centred and multidisciplinary manner, focusing on addressing the needs of people in the north–east. It will facilitate access to health care for victims/survivors, support communities in developing risk–mitigation strategies
and coping mechanisms, and seek to prevent instances of sexual violence from occurring by engaging with weapons bearers. These efforts will be backed by regular analyses of trends and consequences of sexual violence, and the needs of the people affected, who will be consulted throughout the process. Ongoing efforts to establish and improve internal coordination and external referral pathways, to ensure that victims/survivors of sexual violence receive holistic care, will continue. Specialist staff members will coordinate the activities, provide technical expertise, conduct capacity-building initiatives for staff members and develop tailored guidance documents and tools.

The ICRC will prioritize carrying out its response in coordination with the Nigerian Red Cross Society and, where possible, other actors working on the issue. It will continue to help the National Society strengthen its capacity in different aspects of addressing sexual violence, notably by organizing training sessions for volunteers who are involved in family-links, health, water and hygiene-promotion and economic-security activities.

Supporting the provision of health care

The ICRC will help primary-health-care facilities and hospitals in north-eastern Nigeria provide good-quality services, including sexual and reproductive health care, specialized care for victims/survivors of sexual violence, mental-health and psychosocial support and referrals to further care. It will continue to train staff at primary-health-care-centres in the clinical management of rape and basic psychological support, as well as cover the treatment and/or transportation costs of patients. The ICRC will also establish and support referral systems, to enable victims/survivors of sexual violence to access timely and quality services; it will continue to work with Nigerian Red Cross Society staff and volunteers in this regard.

While integrating local cultural and religious sensitivities in its approach, the ICRC will continue to engage men from communities in the north-east in information and engagement sessions on sexual and reproductive health, as an entry point to discussing the prevention of sexual violence and facilitating access to care for women and girls.

Strengthening protection for violence-affected people

The ICRC will strengthen its engagement with communities to ensure that its programmes address their diverse needs, bolster their capacities, and incorporate their views and suggestions. It will work with them to develop multidisciplinary responses, including for children, taking into account the varying capacities and needs of different groups of people within a community. It will work to broaden people’s awareness of the services available to them and how they can be obtained, collect their feedback on these services and communicate useful information. Victims/survivors of sexual violence will be given cash to cover their immediate needs and to mitigate their exposure to further risks of abuse; they will also be included in livelihood-support activities to, among others, enable them to start or expand small businesses.

The ICRC will continue its dialogue with parties to conflict and other violence on the concerns of the people affected, with a view to addressing these concerns and preventing abuse. It will remind authorities and weapon bearers of their obligations under IHL, international human rights law
and other applicable norms. It will emphasize the necessity of preventing and responding to sexual violence during training sessions and other events for weapon bearers. Messages regarding conflict-related sexual violence – especially on the importance of addressing stigmatization and of accessing care within 72 hours – will be included in the ICRC’s public-communication activities in Borno.

The ICRC will pay attention to the issue of sexual violence as it carries out activities for people deprived of their liberty.

**Plan of action**

- document alleged violations of IHL or other applicable norms and make written and/or oral representations to the parties concerned, reminding them of their obligations under applicable law; draw attention to these matters while training weapon bearers on IHL and other areas

- engage the pertinent authorities and weapon bearers in dialogue on the issue of sexual violence and their obligation to prevent and respond to it

- meet with victims/survivors of sexual violence, among other people with specific needs, to discuss their needs and the support they require; develop projects with them to address these needs

- work with the National Society to strengthen referral mechanisms for victims/survivors of sexual violence and help the National Society to strengthen its capacity to address the needs of individual victims/survivors and to carry out awareness-raising sessions for communities

- include victims/survivors of sexual violence, and those at risk of abuse, in ICRC income-support initiatives (e.g. the provision of cash grants, materials, and/or training) to enable them to cover basic needs, help reduce their risk of exposure to sexual violence, or to allow them to start or resume their livelihoods

- support existing health services by:
  - providing primary-health-care centres with medical supplies and equipment, staff assistance and capacity-building support
  - helping refer victims/survivors of sexual violence to secondary-level facilities
  - conducting information sessions on reproductive-health care for men in communities and women at health centres
  - providing mental-health and psychosocial support to victims/survivors of sexual violence by making referrals and building the capacity of local providers, health workers, National Society personnel and community volunteers through training sessions and regular supervision, and covering the transport cost of victims/survivors who are accessing psychosocial support regularly

- include messages in public communication about the importance of accessing medical care within 72 hours and of tackling the stigmatization of victims/survivors
PAKISTAN

In Pakistan, health care and other services are less readily available to people affected by violence, including victims/survivors of sexual violence, because of the general security situation and the restrictions on people’s movement. This lack of health services, including first aid and pre-hospital care, is particularly the case in violence-affected areas in Balochistan, Khyber Pakhtunkhwa (KP) and along the line of control.

ICRC ACTION

The ICRC will continue to develop its efforts to address sexual violence, maintaining its focus on supporting the provision of health services for the management of sexual violence in line with national and international standards. In particular, it will help the health authorities ensure the availability of health-care professionals capable of providing such services and of the essential medicines required for addressing the needs of victims/survivors of sexual violence. Patients in need of more advanced care will be given referrals and/or helped in other ways. All of this will be carried out as part of broader ICRC efforts to support the provision of health services in violence-affected areas.

The ICRC will also strive to discuss the issue of sexual violence during meetings and activities for members of civil society – especially Islamic scholars and journalists – and other actors of influence. It will seek to enhance its engagement with the authorities, armed and security forces, and members of civil society, in order to broaden acceptance and support for its work and promote a dignified response to sexual and gender-based violence. It will also remain in contact with members of the media, to urge them to cover issues of humanitarian concern and to promote ethical reporting on sexual and gender-based violence.

Plan of action

- provide primary-health-care facilities in violence-affected areas with support for providing good-quality care, including: medical supplies, equipment, staff training and/or other support regularly to selected centres; support for facilitating the referral of patients needing advanced care; financial, material and/or technical support for ambulance services

- seek to strengthen collaboration with authorities, judiciary members, Islamic scholars and law enforcement officials to promote a dignified and responsible response to sexual and gender-based violence; in particular:
  - engage with Islamic scholars – through training sessions and round-table events – in discussions on the issue of sexual violence in armed conflict, especially in relation to the corresponding points in Islamic law and IHL
  - incorporate the topic of sexual violence in IHL training sessions planned for law enforcement officers, policymakers and lawyers
create awareness among the general public of the issue of sexual violence and other key areas of humanitarian concern through media outreach activities; organize training sessions for journalists on ethical reporting on sexual and gender-based violence and provide them with resources and guidelines to ensure responsible reporting on this topic

PHILIPPINES

Clashes continue to take place between government forces and armed groups, as well as among these armed groups. The people affected by these situations face different risks, including exposure to sexual violence. Services for victims/survivors of sexual violence, as well as referral mechanisms to access these services, are not always readily accessible.

ICRC ACTION

The ICRC delegation in the Philippines will continue, through a multidisciplinary approach, to enable victims/survivors of sexual violence to access the services they require, including those necessary to address their protection and safety needs. The ICRC will focus on helping victims/survivors of sexual violence in conflict-affected areas, especially in Mindanao, obtain clinical treatment and counselling. It will do so by supporting referral hospitals and Women and Child Protection Units, some of which are located at hospitals, that provide such services.

The ICRC will also seek to better understand the laws on sexual violence, including those related to incidence reporting and referrals, and promote referral pathways in the country, so that victims/survivors of sexual violence can access adequate support, proper medical care and other services. Messages about the necessity of preventing sexual violence and on addressing its consequences will be included in public-communication campaigns and brought up during training sessions and other interactions with detaining authorities, weapon bearers and other influential actors. For example, the ICRC will discuss with the law enforcement authorities the adverse consequences of requiring health facilities to report cases of sexual violence to the police before treating the victims/survivors.

Plan of action

- document and follow up, with the parties concerned, allegations of IHL violations and other unlawful actions during the conduct of hostilities or law enforcement operations; remind them of their obligations under IHL and other applicable law and work with them on better incorporating IHL in their domestic legislation – for example, as part of their national action plan on women, peace and security; draw attention to these matters during training sessions for weapon bearers

- finalize a summary of domestic laws on sexual violence, incidence reporting and referrals, and check these against the country’s international obligations based on, among others, the treaties that it has signed or acceded to
• sustain efforts to refine national and local referral pathways to various forms of assistance for victims of violence, including victims/survivors of sexual violence
• refer victims of violence, including victims/survivors of sexual violence, for financial, legal and administrative assistance and other support
• support hospitals, including women and child protection units within them, in Mindanao by providing them with post-rape kits and other medical items and/or by making infrastructural improvements to facilitate the continuity of care for victims/survivors of sexual violence
• when implementing activities to improve the water supply, shelter and hygiene conditions of people affected by conflict, incorporate, as necessary, measures to reduce people’s exposure to sexual violence – for example, by installing solar lights and water and sanitation facilities closer to households
• organize briefing sessions – on the clinical management of rape and respect for medical ethics – for staff at ICRC-supported Women and Child Protection Units
• to improve awareness – among community members and the authorities – of the necessity of preventing sexual violence and importance of immediate medical attention for victims/survivors of sexual violence, organize information sessions on these topics during capacity-building activities (e.g. first-aid training sessions and Health Care in Danger workshops)
• assess capacities at forensic facilities that also document cases of sexual violence and stand ready to provide them with capacity-building and material support; organize a training session, on examining cases of sexual abuse, for their staff members

SOUTH SUDAN

The protracted conflicts and other situations of violence in many parts of the country cause injuries and deaths, destroy property and displace people. Sexual and gender-based violence is widespread, and women and girls in South Sudan are among those who suffer the highest levels of physical and sexual violence in the world. Sexual violence and other unlawful conduct by weapon bearers have been widely documented. The volatile security conditions also pose risks to people, especially women and girls, when they travel long distances to access basic services, such as collecting water far from their homes. Incidents of sexual violence are also oftentimes driven by existing socio-cultural attitudes and practices and by socio-economic challenges.

Victims/survivors of sexual violence, particularly those in hard-to-reach areas, have little to no access to appropriate health care and other services for dealing with the consequences of the abuse that they had suffered. Moreover, few incidents are reported owing to social stigma and discrimination against victims/survivors of sexual violence. Local capacities to respond to needs are also further affected by the influx of returnees and refugees from Sudan, including victims/survivors of sexual violence.
ICRC ACTION

The ICRC will continue to implement a multidisciplinary approach to addressing the issue of sexual violence related to conflict and other situations of violence and in places of detention. The implementation of this approach will be overseen by a team of sexual violence specialist staff members. The ICRC will continue to deepen its understanding of conflict-related sexual violence, map the availability of services for victims of sexual violence, improve referral pathways, and increase the awareness of community members about the need for and the availability of these services. Training sessions will be organized for delegation staff members, to help them build their capacities to address sexual violence.

The ICRC will continue to strengthen its partnership with the South Sudan Red Cross on addressing sexual and gender-based violence; this will include providing capacity-building and technical support for National Society staff and volunteers to carry out outreach activities to raise awareness about sexual and gender-based violence in conflict-affected communities and tackle stigma against victims/survivors. The ICRC will also ensure that its efforts complement those by local organizations and other actors.

Supporting access to health care and other services

As the ICRC shifts from supporting health-care-centres on a regular basis, it will strive to strengthen referral pathways and other channels through which victims/survivors of sexual violence can obtain appropriate health care; this will include ensuring the availability of care in the areas hosting returnees and refugees from Sudan. It will also continue to enable victims/survivors of sexual violence to access mental-health and psychosocial support. Staff at an ICRC-supported hospital will continue to receive support to provide treatment and counselling services to victims/survivors of sexual violence.

The ICRC will facilitate internal and external referrals for victims/survivors of sexual violence to address their various needs. It will make sure that they are aware of the services available to them and how they can access these. It will work with the authorities and the health sectors, and with non-governmental organizations, aid organizations and other civil-society groups, to ensure that victims of violence have access to the assistance they require, including mental-health and psychosocial support. As necessary, it will provide financial assistance to victims/survivors of sexual violence, to help them meet their immediate needs, including covering their transportation expenses to access the services they require.

The ICRC will also continue to urge the authorities to address the needs of victims/survivors of sexual violence without exposing them to stigmatization or other further harm.

Contributing to risk mitigation and prevention

In line with its community-based protection approach, the ICRC will deepen its engagement with violence-affected communities to understand their safety concerns and coping mechanisms more fully, and to help them develop community-based activities to reduce threats to their safety. It will work jointly with the National Society, in line with the partnership framework agreement
described above. Moreover, the ICRC will integrate gender-based consideration and risk-reduction measures into its water and livelihood-support projects to build or improve community infrastructure, with a view to minimizing the eventual users’ exposure to sexual violence.

With a view to preventing the occurrence and/or recurrence of sexual violence and other abuses, the ICRC will document allegations of such incidents and remind the authorities and weapon bearers on all sides to meet their obligations under IHL, international human rights law and other applicable norms on the prevention of sexual violence. It will also pay attention to the issue of sexual violence when carrying out activities for people deprived of their liberty.

The ICRC will continue to discuss with the relevant authorities the adverse consequences of requiring victims/survivors of sexual violence to report to the police before accessing life-saving health-care services. Furthermore, a working group in South Sudan’s Ministry of Gender, Child and Social Welfare will be supported to implement the recommendations of an ICRC study on male perceptions of sexual violence; the study was carried out in South Sudan and the Central African Republic in 2020 and published in 2022.

The ICRC will seek to broaden public awareness and influence public opinion and behaviour in several important areas, including the unlawfulness of sexual violence, and victim-blaming. It will do so through public-information campaigns – such as radio dramas and outreach activities in the communities – aimed at reaching as many people as possible.

**Plan of action**

- document sexual violence cases, and undertake oral and/or written representations to remind authorities and weapon bearers to fulfil their obligations under IHL and other applicable law; organize briefings, training sessions and workshops, for members of armed groups and other weapon bearers, including the police, on IHL and international human rights law, and engage them in dialogue on preventing and responding to sexual violence

- convene round tables with officials from government ministries (e.g. those covering gender, child and social welfare, health, justice and interior) on the protection needs of victims/survivors of sexual violence; provide technical support to the government’s technical working group

- inform victims/survivors of sexual violence of their rights and the services available to them and refer them to ICRC programmes or other organizations for assistance, as needed

- together with the National Society, conduct community-based awareness to help reduce people’s exposure to sexual violence, raise awareness of available services and address the stigmatization of victims/survivors, as a part of the ICRC’s global Prevention of Sexual Violence Programme

- provide mental-health and psychosocial support to victims/survivors of sexual violence; continue training local service providers in providing such support
• give the Akobo County Hospital medicines, supplies and equipment, funds and other support to help it expand its capacities in gynaecology and treatment for victims/survivors of sexual violence

• provide financial support to victims/survivors of sexual violence for their immediate and longer-term needs, either by giving them emergency cash or by giving them cash grants and business skills training so that they can undertake income-generating activities and better re-integrate into their community

• launch communication campaigns and produce print and multimedia materials and social-media content on issues related to sexual violence prevention and response, with a view to raising awareness among community members and the local authorities

**SUDAN**

The humanitarian situation in Sudan has dramatically deteriorated because of the armed conflict that began in April 2023 between the Sudanese Armed Forces and the Rapid Support Forces. The ongoing violence has endangered people’s lives, resulted in thousands of deaths, displaced millions of people – adding to those displaced by past conflict – and exacerbated severe shortages of vital resources, which adds to people’s difficulties in obtaining basic needs and services. Abuses, including sexual violence, have also been widely reported.

**ICRC ACTION**

The ICRC in Sudan will strive to contribute to the prevention of sexual violence and help address its consequences. It will document IHL violations by the parties to the conflict and the safety concerns of violence-affected people, including victims/survivors of sexual violence, and seek to discuss them with the pertinent parties, urging them to address these and/or prevent their recurrence. Messages on the necessity of preventing sexual violence will also be included in IHL training sessions that will be organized by the ICRC for parties to the conflict, as part of its efforts to help these parties strengthen their grasp of IHL and humanitarian principles. The ICRC will also pay attention to the issue of sexual violence when carrying out activities for people deprived of their liberty.

To help victims/survivors of sexual violence access the services they require, the ICRC will provide them with financial support (e.g. multi-purpose cash assistance) and coordinate with other organizations and service providers to establish referral pathways and make use of these to refer victims/survivors of sexual violence to the appropriate services. It will also stand ready to help some health facilities to become more capable of treating victims/survivors of sexual violence and other violence-affected people.
Plan of action

- document allegations of IHL violations and the protection concerns of victims/survivors of sexual violence, and convey them confidentially to the parties concerned; discuss the basic provisions of IHL and other related matters with them, particularly in connection with the prevention of sexual violence

- remind weapon bearers of their obligations under IHL, particularly in relation to preventing sexual violence and addressing its consequences, through specific sessions during IHL training courses and workshops

- help victims/survivors of sexual violence cover their immediate and longer-term needs, by providing them with either emergency cash assistance or with cash grants that they can use to undertake income-generating activities

- refer victims/survivors of sexual violence to providers of psychosocial, legal and administrative aid, among other types of services and support

- give hospitals wound-dressing kits and other medical supplies for treating patients – including victims/survivors of sexual violence – during emergencies

**SUVA (REGIONAL)**

Covering: Australia, Cook Islands, Fiji, Kiribati, Marshall Islands, Federated States of Micronesia, Nauru, New Zealand, Niue, Palau, Papua New Guinea, Samoa, Solomon Islands, Tonga, Tuvalu, Vanuatu and the territories of the Pacific

In Papua New Guinea, communal violence and crime continue to cause casualties and displacement, damage or destroy property and disrupt basic services. In the Highlands, women, children and the elderly are among the victims of communal fighting. Sexual violence is widespread and allegedly takes place during clashes.

**ICRC ACTION**

As part of its response to the humanitarian consequences of communal tensions in Papua New Guinea, the ICRC will work to prevent the occurrence of sexual violence and, where possible, enable victims/survivors to access the services they require, either by supporting them or by making use of referral pathways to direct them to other service providers.

As a priority, the ICRC will draw the attention of the parties concerned to the humanitarian consequences of communal violence. When such abuses occur in the framework of law-and-order operations, the ICRC will monitor and document relevant allegations and relay these to those with command responsibility, with a view to ending or preventing such misconduct.

It will remind the parties involved in fighting to abide by basic principles of humanity, especially those in relation to sexual violence and other abuses. It will also endeavour to promote respect for international law enforcement standards, and for international human rights law and other pertinent norms. It will help the military, police and security to integrate these standards and
norms into their training and operations. The ICRC will also cover the necessity of preventing sexual violence during training sessions and workshops that it will organize for members of security and police forces.

The ICRC will continue to interact closely with people affected by communal violence in Papua New Guinea, to understand their safety-related needs more fully and respond accordingly. It will stand ready to assist victims/survivors of sexual violence to address their immediate needs, by giving them material and/or financial assistance or by referring them to other service providers. It will carry out this work in coordination with the Papua New Guinea Red Cross, local family-support centres and other actors. The ICRC will also continue to remind local authorities to address the needs of victims of violence, including victims/survivors of sexual violence, and will support their efforts in this regard.

**Plan of action**

**Papua New Guinea**

- urge the authorities and government forces to protect civilians from violence; cultivate dialogue with them on measures to ensure that civilians are protected during law enforcement operations and that violence-affected communities have access to essential services; draw their attention to documented allegations of unlawful conduct by security forces and discuss these allegations with them

- impress upon parties to communal violence – including local leaders and fighters – the necessity of respecting basic principles of humanity and practising restraint during incidents of fighting

- work with leaders and members of communities to help them identify ways to mitigate and cope with the threat of communal violence and sexual violence

- provide victims/survivors of sexual violence with cash and vouchers for buying basic necessities and/or obtaining essential services; facilitate referrals for them, such as by covering their transport cost to access health facilities
## FINANCE

### SPECIAL APPEAL 2024: BUDGET

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### SELECTED DELEGATIONS

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**TOTAL** 36,906

These budgets are also included in the funding requirements presented in the ICRC’s *Appeals 2024*, launched in December 2023.

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7. The figures in this document are rounded off and may vary slightly from the amounts presented in other documents.
8. For activities in Papua New Guinea
ANNEX I: LEGAL FRAMEWORK

The ICRC defines sexual violence as any act of a sexual nature committed against any person by force, threat of force or coercion, in line with the definition under international law. It includes, but is not limited to: rape, sexual slavery, enforced prostitution, forced pregnancy and enforced sterilization. Coercion can be caused by circumstances such as fear of violence, duress, detention, psychological oppression or abuse of power. The force, threat of force or coercion can also be directed against a third person. Sexual violence therefore comprises acts of a sexual nature committed by taking advantage of a coercive environment. It furthermore includes acts of a sexual nature that a person is forced to engage in, against another person, owing to the factors and circumstances outlined above. For sexual violence, as defined above, to fall within the scope of application of IHL, it must take place in the context of, and be associated with, an armed conflict.

LEGAL BASIS, ADDITIONAL STANDARDS AND OTHER GUIDANCE

Acts of sexual violence are prohibited, both explicitly and implicitly, under IHL in both international and non-international armed conflicts. Rape and other forms of sexual violence are also prohibited under customary law, in both international and non-international armed conflict, as highlighted in Rule 93 of the ICRC study on customary IHL. Furthermore, rape and other forms of sexual violence in armed conflict amount to serious violations of IHL and thereby constitute war crimes. Sexual violence may also constitute a crime against humanity or an act of genocide. At all times, acts of sexual violence are prohibited by international human rights law and by many bodies of religious or traditional law. Although there are considerable variations and nuances in domestic legislation, rape and other forms of sexual violence are considered as offences in most states.

To end impunity, it is important that states can investigate and prosecute serious violations of IHL – including sexual violence – under domestic law. Sexual violence is also prohibited by

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9. For more information, see the ICRC Strategy on Addressing Sexual Violence 2018–2024.
10. For example, Article 27 of the Fourth Geneva Convention specifies that, in international armed conflicts, women should be protected against “any attacks on their honour, in particular against rape, enforced prostitution, or any form of indecent assault”. Article 76(1) of Additional Protocol I explicitly provides that “women shall be the object of special respect and shall be protected in particular against rape, forced prostitution and any other form of indecent assault”. Children are also specifically protected against “any form of indecent assault” in Article 77(1) of Additional Protocol I. Furthermore, Article 75(2)(b) of Additional Protocol I – providing fundamental guarantees – prohibits “outrages upon personal dignity, in particular humiliating and degrading treatment, enforced prostitution and any form of indecent assault”. In non-international armed conflicts, Article 4(2)(e) of Additional Protocol II explicitly prohibits “outrages upon personal dignity, in particular humiliating and degrading treatment, rape, enforced prostitution and any form of indecent assault” against any person who is not, or no longer, participating in hostilities.
11. The ICRC study on customary IHL published in 2005 identified 161 key rules of customary IHL and presented the state practice on which they are based, as well as related international practice. Rule 93 refers to Rape and Other forms of Sexual Violence. Since its publication, the collection of state and international practices underlying the study (Volume II) has been regularly updated and is freely accessible in an online database (see practice relating to Rule 93 in the ICRC IHL database on customary IHL).
12. The Rome Statute of the International Criminal Court (ICC) explicitly includes sexual violence in the list of war crimes: Article 8 (2) (b) (xxii) and 8 (2) (e) (vi), ICC Statute regarding rape and other serious forms of sexual violence as war crimes in international and non-international armed conflicts.
other bodies of international law, including international human rights law and international criminal law, and states have corresponding obligations regarding the prevention of and response to sexual violence in their legislation. A more detailed exploration of the applicable laws and corresponding obligations is outlined in the ICRC-developed document, *Domestic Implementation of International Law Prohibiting Sexual Violence: A Checklist for States and the International Red Cross and Red Crescent Movement*.

Sexual violence remains utilized as a tactical or strategic means of overwhelming and weakening the adversary, whether directly or indirectly, including by targeting the civilian population. It is rarely an isolated issue but is rather part of a pattern of violence linked to other violations of IHL, such as torture, unlawful killing, child recruitment or destruction of property. In conflict and post-conflict settings, the erosion of state apparatuses, disruption of livelihood patterns, increase in poverty, proliferation of small arms and light weapons, and displacement, among other factors, can exacerbate existing trends of sexual and gender-based violence – such as intimate partner violence, marital rape and child or forced marriage – among civilians. Crisis factors may also deepen risks of transactional or survival sex, trafficking for the purposes of sexual exploitation, and sexual exploitation and abuse.

While distinctions can be made between some forms of sexual and gender-based violence during armed conflict and other situations of violence, many forms tend to be interconnected and share root causes and detrimental consequences for victims/survivors, regardless of the categorization of the conflict or the applicable legal framework.
On the assumption that sexual violence occurs in all the contexts in which the ICRC works and that sexual violence and other forms of gender-based violence are exacerbated by conflict and other crises, the organization acts proactively to respond to it. Through this “reversed burden of proof”, ICRC staff members aim to analyse trends and data on the patterns and prevalence of sexual violence, particularly as crises emerge. ICRC delegations are encouraged and given technical support to: (1) at a minimum, identify a referral pathway for any victim/survivor of sexual violence to survivor-centred services (health, mental-health and psychosocial support, livelihood support, and protection, as well as legal aid, where possible) whether offered by the ICRC or others, and to train staff members on the basics of responding sensitively to disclosures of sexual violence; (2) integrate a response to the issue into their existing activities; or (3) consider developing activities to address specific concerns related to sexual violence, according to the engagement criteria set out in the ICRC’s strategy on sexual violence (see below).

The overall approach is guided by several values. It is, foremost, evidence-based: the ICRC develops activities based on context-specific analyses of the issues, causes and consequences, the associated risks, links to other violations of international law, identification of the people most at risk, mapping and discussing the coping strategies developed by victims/survivors and at-risk communities, gaps in the assistance received by victims/survivors, and the ICRC’s specific
expertise and capabilities, which comprise its added value. Access and acceptance of the ICRC and of neutral, impartial and independent humanitarian action in a given context, as well as a delegation’s capacity to act, are also considered. The ICRC strives to apply best practices and lessons learnt to improve its own activities and influence those of others. It also undertakes research on operational issues and on policies and practices that may have negative implications for victims/survivors, to complement and inform its operational response.

The ICRC recognizes the complexity of preventing sexual violence and the multiple needs of victims/survivors and at-risk communities. It, therefore, ensures that it implements holistic and multidisciplinary responses that tackle both prevention and response. To do this, the ICRC draws on the expertise of staff members from different specialized units and services, at headquarters and in the field, who coordinate their activities and work together to ensure a clear pathway from one service to another. Where needed, the ICRC may engage with partners within and outside the Movement, following careful analysis of their complementary roles or capacities.

Furthermore, the ICRC recognizes that populations affected by armed conflict and other situations of violence are diverse and thus takes measures to ensure that its activities are inclusive. It strives to apply an intersectional analysis, considering the varying needs and capacities of victims/survivors – which are shaped by the interplay of gender norms and power dynamics in society as well as individual factors such as age, sexual orientation, ethnicity, religion, disability and race, which intersect and overlap to influence a person’s position, power and vulnerabilities within society. This helps ensure that the ICRC’s response is always tailored to the people, communities and contexts in question – whether in terms of the services it provides, the accessibility of such services, or its support for people’s coping mechanisms, among other things. To this end, the ICRC endeavours to engage at-risk groups and communities in all stages of its response, recognizing that communities affected are experts on their own situation, first responders and agents of change. Ongoing initiatives to reinforce inclusive programming at the ICRC can contribute to a more detailed understanding of the nature and extent of sexual and gender-based violence and enable the ICRC to improve its prevention and response approaches, ensuring that these address the distinct experiences and needs of diverse groups of people in relation to sexual and gender-based violence. These initiatives include, among others, developing the ICRC’s methodology, reference materials and capacities in micro-level social context analysis and its ability to disaggregate data by sex, age and disability.

The ICRC’s use of a survivor-centred approach to addressing sexual and gender-based violence is fully aligned with the “do no harm” principle and with evidence-based humanitarian standards. It ensures that its response respects and protects people’s well-being, safety and dignity and that it does not cause undue or additional adverse consequences through its programmes or presence in a given context. For example, it strives to avoid exposing victims/survivors to additional sexual and gender-based violence risks around activity sites for economic security and water and habitat projects. Moreover, by integrating its response to sexual violence into its broader response for victims of violence and other IHL violations, the ICRC reduces the risk of exposing people to additional trauma, labelling and stigmatization in its mental-health and psychosocial support activities.
SCOPE OF THE ICRC’S WORK

To support delegations in determining the specific added value of the ICRC and its activities in a given context, the ICRC has four operational considerations for engagement on addressing sexual violence. Even without fulfilling any part of the criteria outlined below, the ICRC aims to, at a minimum, address sexual violence by ensuring that a referral system for victims/survivors is in place, and striving to cover the issue in its activities to prevent IHL violations and other abuses, including sexual violence.

These four operational considerations for engagement outside places of detention are:

- the strength of the connection between the act(s) of sexual violence and the armed conflict or other situation of violence;
- the prevalence and humanitarian impact of sexual violence;
- the ICRC’s added value, in terms of its expertise, presence and acceptance by parties to a conflict compared with those of other actors; and/or
- the delegation’s own capacity to respond to the needs identified.

Within detention settings, the ICRC seeks to address sexual violence as systematically as it would any other type of violence or abuse, regardless of the connection with armed conflict or other situations of violence and regardless of the status and category of detainees.

The ICRC recognizes that sexual violence, according to its definition, and different forms of gender-based violence tend to be interconnected with similar root causes and consequences. It adapts its approach and the scope of its action according to the evolution of its working environment and its overall response to humanitarian needs in a given context. While it may focus on addressing sexual violence related to conflict, the ICRC may also implement activities responding to gender-based violence or offer services to all victims/survivors of sexual violence. It may also seek to protect and address the needs of a specific group.
COMMENTS

This Special Appeal aims to attract contributions from new funding sources or budget lines, including those of the ICRC’s main donors, that do not usually or do not yet finance the ICRC’s activities on the basis of its yearly appeals.

The budget presented covers: activities to be exclusively funded and implemented through the ICRC; activities that address sexual violence specifically or as part of broader programmes, and are carried out under various ICRC programmes, benefiting the people affected or directed at actors of influence; and the means needed to work jointly or in coordination with Movement partners.

Contributions for 2024 can be made towards this Special Appeal, and contributions without further earmarking are encouraged.

Funds will be subject to standard ICRC operational reporting, financial control and auditing procedures. There will be a yearly Special Report, a separate auditor’s report directly related to the current Special Appeal, and information related to the topic in other standard reports.

- Narrative reporting will be accessible through the following:
  - the ICRC Midterm Report: the status of ICRC operations in selected contexts at mid-year;
  - the ICRC Annual Report: a comprehensive report on ICRC headquarters and field operations, covering the entire year;
  - the ICRC Special Report, which outlines the implementation and outcomes of plans presented in this Special Appeal (published once a year, following the Annual Report); and
  - other reports published on the ICRC Extranet for Donors14 and articles on the ICRC website.

- Financial reporting will be available in the following:
  - the ICRC Annual Report: the yearly consolidated financial statement, the independent auditor’s report and financial tables; and
  - the Special Auditor’s Report on the Special Appeal (once a year).

For further information, please contact:

**International Committee of the Red Cross**
Resource Mobilization Division
19 Avenue de la Paix,
1202 Geneva,
Switzerland
resourcemobilization@icrc.org

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14. See the [ICRC Extranet for Donors](#).