

ICRC SPECIAL APPEAL 2022

ADDRESSING SEXUAL VIOLENCE



ICRC



ICRC

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ICRC SPECIAL APPEAL 2022

**ADDRESSING SEXUAL
VIOLENCE**

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FOREWORD

Survivors of sexual violence are often conspicuous by their invisibility, their wounds remaining largely hidden and unspoken. In many of the hospitals I have visited in different conflict-affected contexts in recent years, health-care workers told me that reported cases of sexual violence were “worryingly low.” Fear of stigma or reprisal means that many cases are simply never reported, and the full extent of this massive problem remains unclear.

Yet it is precisely these kinds of hidden scars that can be the most debilitating, causing long-term physical and mental suffering.

Prevention is obviously preferable to cure. International humanitarian law (IHL) clearly prohibits sexual violence, and the ICRC spares no effort to engage with parties to conflict on their responsibilities, in a range of ways. In 2021, we strengthened our calls for domestic legal frameworks to reflect IHL. In 2022, we will be launching a five-year multi-country initiative aimed at further strengthening our prevention efforts, including through community-based resilience building and working with weapon bearers to change attitudes and practices.

At the same time, major concerted efforts are required to help the countless victims and survivors – whoever and wherever they are – whose specific needs must remain firmly at the centre of any response. They include women, men, children and LGBTQI+ survivors, in communities and in detention.

For our part, the ICRC has a holistic approach that cuts across a range of disciplines, including primary health care and clinical management of sexual violence; mental health and psychosocial support; protection programming; promoting safe and socially inclusive livelihoods; and adapting water, sanitation and habitat programmes to ensure risks of exposure to harm are reduced.

In an ideal world – one where sexual violence is stamped out – we would see the demand for such services decrease. Sadly, the opposite is true. In recent years, our mental health and psychosocial support programmes have steadily increased. The use of cash and voucher assistance, offering safety and anonymity to victims of sexual violence, has expanded. And we have placed increasing numbers of experts in sexual and gender-based violence in our operations around the world, to support and strengthen our multidisciplinary efforts.

This eighth annual Special Appeal on Addressing Sexual Violence will be critical in enabling us to further expand these efforts, working together with affected people and communities, and with authorities.

Ultimately, the scourge of sexual violence in conflict will continue until parties to armed conflict comply with its clear prohibition under IHL and provide adequate support services for survivors. This requires political will – deeds to accompany words.

At the same time, humanitarian actors like the ICRC also have a crucial role to play in preventing and alleviating this suffering.

We invite you to support our work to this end. It is thanks to the generosity of our donors and partners – whose wealth of resources and expertise goes far beyond financial support alone – that we can pursue our life-saving work to protect and assist those facing the horrors of sexual violence.

Robert Mardini
Director-General, ICRC

THE SPECIAL APPEAL 2022: OVERVIEW

Despite legal prohibitions, sexual violence remains prevalent during armed conflict and other situations of violence. It has multiple harmful effects on the people who endure it and on their communities.

The ICRC's approach to addressing sexual violence stems from international humanitarian law (IHL). It is holistic and multidisciplinary, aimed at preventing sexual violence from occurring, mitigating people's exposure to risk, and responding to the multifaceted needs of those 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 works with them to implement effective responses.

The ICRC's actions are guided by its [Strategy on Addressing Sexual Violence 2018–2022](#), which will be extended to 2024.

The Special Appeal 2022 confirms the ICRC's commitment to addressing sexual violence during armed conflict and other violence and in detention. It outlines the objectives and activities planned by teams at headquarters and in selected delegations, and the corresponding budgetary requirements.

HEADQUARTERS

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

- strengthen efforts to prevent sexual violence, notably through a multi-country initiative focused on promoting community-based protection and dialogue with weapon bearers;
- reinforce staff capacity to address sexual violence through an institutional training course, new technical guidance and tools, and direct support for delegations;
- raise awareness of the necessity of addressing sexual violence through IHL promotion and humanitarian diplomacy at the national, regional and international levels; and
- take stock of the progress made in implementing the addressing sexual violence strategy and identify lessons learnt to inform future actions.

OPERATIONS

ICRC delegations tailor their activities to address sexual violence to the specific conditions, needs, capacities and distinct characteristics of the people or other organizations they are seeking to help or engage with. The Special Appeal 2022 features the objectives and plans of 18 delegations working in key contexts. In many of them, technical advisers 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 units and departments. The ICRC also has experts assigned in regional delegations and a team at headquarters providing support to delegations.

The activities planned by the 18 delegations featured in this appeal provide concrete examples of the main areas of the ICRC's action to address sexual violence, namely:



Supporting the provision of appropriate health care, including mental health and psychosocial support



Providing livelihood support and other essential services to people who have experienced or are at risk of sexual violence



Addressing people's protection needs and engaging with communities to mitigate their risk of exposure to sexual violence



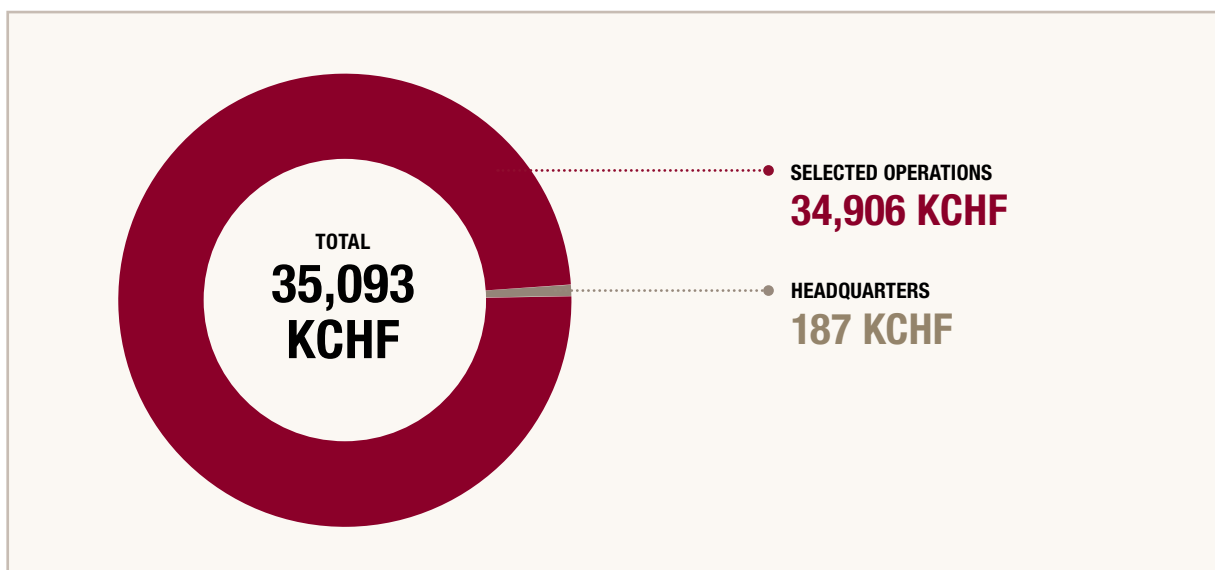
Addressing the issue of sexual violence in detention



Promoting IHL provisions and other norms prohibiting sexual violence



THE SPECIAL APPEAL 2022: BREAKDOWN



South Sudan.
Free medical and
psychological
support is available
at ICRC-backed
health facilities. The
ICRC trains nurses,
midwives and clinical
officers to raise
awareness of the
consequences of rape.



ICRC

KEY AREAS OF THE ICRC'S ACTION

The ICRC combines programmes, modes of action¹ and activities to address sexual violence, with a view to eliminating it and building communities' resilience in the face of it. Given the destructive and wide-ranging consequences that sexual violence has on individuals, the ICRC implements a survivor-centred response to meet the multiple needs of victims/survivors of sexual violence in a holistic and coordinated manner. The ICRC also works to create a conducive environment – at the community, local, national and international levels – for preventing sexual violence. It seeks to change patterns of behaviour and decision-making; to persuade and help the authorities to improve legal frameworks; to mitigate people's exposure to risks of sexual violence; and to help communities develop or reinforce their coping mechanisms, also by using a gender-sensitive understanding of the issue.

The ICRC, as appropriate, works with others to protect the rights of victims/survivors and ensure that they are aware of the services available to them and have access to these. It aims to be part of referral pathways to critical services that meet the diverse needs of victims/survivors or establishes such pathways where they don't exist. It contributes to strengthening existing pathways and service providers and periodically reviews their services to ensure continued alignment with the ICRC's mission and principles. It often partners with other components of the International Red Cross and Red Crescent Movement (hereafter the Movement), local agencies, authorities and, where applicable, the local inter-agency gender-based violence area of responsibility (GBV AOR).

Consistent with the "do no harm" principle, the ICRC implements its activities to address sexual violence as part of its broader efforts to assist and protect people affected by armed conflict and other situations of violence, and those in detention settings, to avoid labelling and the social stigmatization of victims/survivors.

The following sections describe the key areas of the ICRC's efforts to address sexual violence, and the range of activities it may undertake based on its careful and nuanced assessments of situations and humanitarian needs. For more information on the considerations the ICRC take when designing and implementing its activities, see *Annex II: The ICRC's approach and strategy* on page 38.

1. The ICRC distinguishes between five modes of action – persuasion, mobilization, support, substitution and denunciation – which it may employ, often simultaneously or consecutively, depending on the situation, the problems encountered and the objectives it seeks to achieve.

Focusing on victims/survivors and their needs

As an impartial organization, the ICRC supports victims/survivors of sexual violence based on humanitarian needs. It considers all information shared by or collected from multiple sources, including the victims/survivors themselves and local institutions and service providers working with them or their communities. It also looks at the available capacities; the possible causes or drivers of sexual violence; and vulnerability factors and the extent to which those vulnerabilities are likely to be exploited. The latter is crucial for identifying groups with a higher risk of exposure to sexual violence and may include such identity factors as: sex; age; psychological, intellectual, sensory and physical impairments; sexual orientation, gender identity and gender expression (SOGIE); and status (e.g. displaced people, detainees, migrants). The ICRC may focus on addressing the needs of groups who, according to statistics, are targeted more frequently, such as women and girls; it also responds to the needs of men, boys and lesbian, gay, bisexual, transgender and intersex people. The ICRC may also carry out specific and tailored activities for certain groups, including unaccompanied children, minors separated from family members, and children formerly associated with weapon bearers.

ACCESS TO HEALTH-CARE SERVICES

The ICRC provides medical services, either directly or through qualified and trusted partners, to victims/survivors of sexual violence. It strives to provide such care – which may include the clinical management of rape, the provision of post-exposure prophylaxis for human immunodeficiency virus (HIV), the management of injuries and sexually transmitted infections, immunization, and wound care – in a safe, timely and confidential manner and in conformity with international and national guidelines and sectoral standards².

More specifically, the ICRC's activities in this regard include:

- providing material assistance (e.g. post-exposure prophylaxis kits, also known as post-rape kit), and technical and other types of support to primary-health-care facilities, counselling centres, hospitals and transport systems
- training local health staff, National Society volunteers and/or community members – for example, traditional birth attendants – in identifying cases, needs and providing these services or making referrals
- ensuring follow-up after providing services or referring 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
- advocating procedures to ensure that victims/survivors have access to clinical management of rape services
- organizing community information sessions to raise awareness of available services, encourage referrals and improve assistance-seeking behaviours
- urging the authorities to ensure the sustainability of service provision and the safety of the premises in which the services are provided

The ICRC also works to make mental-health and psychosocial support available to victims/survivors of sexual violence, to help ease their distress, which may also be compounded by distress from other sources.³ Based on a careful analysis of specific cases and of prevailing sociocultural norms, the ICRC may provide support at the individual, group or community level, with due regard for people's right to privacy and confidentiality. Its response may include one or more of the following activities:

- individual consultations or group counselling sessions
- outreach activities and information sessions in communities to address social stigma and raise awareness of available services and the importance of seeking care in a timely manner
- training and coaching health staff and key community actors in basic psychological care or psychosocial support – including provision among their peers – and in making referrals for higher-level care

2. In particular, the ICRC seeks to provide services that are aligned with World Health Organization guidelines, as set out in this document: [Clinical management of rape and intimate partner violence survivors: Developing protocols for use in humanitarian settings](#).

3. For more information on the ICRC's mental-health and psychosocial support activities, see the [Mental health and psychosocial support leaflet](#).

ACCESS TO OTHER ESSENTIAL SERVICES

The ICRC strives to provide or facilitate access to essential services other than health care, to help address the basic needs and protection-related concerns of victims/survivors of sexual violence, as well as communities at risk.

In terms of economic support, victims/survivors of sexual violence, including those who had been detained and released, may be provided with relief assistance (e.g. food, essential household items, or cash) or support to help them resume livelihood activities or diversify their sources of income and develop pathways to self-sufficiency. They may also benefit from the ICRC's support for local organizations, authorities or other institutions that provide economic support and other services. For example, they may take part in community-run agricultural cooperatives, which could help them to earn a living and become more integrated within their communities.

The ICRC also carries out activities to enhance the protection of individuals and at-risk groups. It may help in relocating people to safer areas, under certain circumstances – for example, when certain people are particularly at risk, or when victims/survivors are unable to receive the medical attention or other services they require. For services that it is unable to directly provide (e.g. legal support, specialized medical care, shelter or other types of assistance), the ICRC considers and facilitates referrals, with the informed consent of the victims/survivors, to other organizations or engages with them and other stakeholders to fill gaps in services, with a view to ensuring that victims/survivors can obtain support tailored to their specific needs.

RISK REDUCTION

The ICRC works and partners with at-risk communities and groups to reduce their risk of exposure to sexual violence, either by reducing their vulnerabilities, risk of exposure and reliance on potentially harmful coping strategies, or by reinforcing their capacities and constructive coping strategies.

To strengthen resilience and support local solutions, the ICRC adopts a community-based protection approach. It works with communities to:

- better understand the barriers to their access to services, the factors contributing to stigma and discrimination, and the community's perceptions of the risks of sexual violence they face, including who or what poses as threats;
- identify the measures they already use to protect themselves, and to reinforce their existing capacities;
- help them establish or develop means of engaging with authorities and/or weapon bearers, when relevant and appropriate, and with existing service providers, in cases where they face difficulties in accessing services; and
- support them in collectively planning and launching self-protection initiatives.

Based on its engagement with communities, the ICRC may also provide assistance or undertake activities to reduce people's exposure to risk and offer options for mitigating harmful coping strategies.

The ICRC strives to map and mitigate risks adequately and takes these into account when planning its own activities. This is also in line with the "do no harm" principle. It considers the risk of exposure to sexual violence when assessing environmental, physical and other factors that may have security or protection implications on conflict/violence-affected people in a given area. Using the findings of its assessments, the ICRC works with communities to come up with tailored solutions. This may entail, for example, ensuring the safety of shelters in camps and other informal settlements, installing or repairing water points closer to communities to reduce exposure to risks when fetching water amid volatile security conditions, putting up adequate lighting, and ensuring the safety and privacy of sanitation facilities – efforts that mostly fall under the ICRC's water and habitat initiatives.

Expanding the use of cash and vouchers

The ICRC uses cash and voucher assistance to address the different needs of victims/survivors of sexual violence and their communities. The use of cash or vouchers gives people agency in addressing their needs and is fully aligned with the survivor-centred approach. It is inclusive, multidisciplinary and participatory, as well as discreet. Cash and vouchers may be used as a means for: preventing or mitigating the risk of sexual violence, including the risk of adopting negative coping mechanisms; and responding to the needs of victims/survivors. The ICRC uses this mode of support to enable people to protect themselves from abuse, avail themselves of life-saving health care and other essential services, prevent recourse to negative coping mechanisms and reduce their exposure to risks. It is also used to help victims/survivors meet their needs (like food and shelter, as well as access to health care) and enable them to start or expand income-generating activities.

In terms of providing economic support, the ICRC ensures that its efforts are holistic and discreet, thereby preventing the risk of stigmatization, re-victimization or other discrimination, and ensuring that the factors that may render people vulnerable to sexual violence are screened and covered effectively. Concretely, this may mean, for example, distributing relief items that could directly mitigate risks (e.g. solar lamps that can be used at night, additional jerrycans that allow people to collect more water at a given time and reduce the number of times they have to go out to fetch water). Income- and livelihood-support activities may also help reduce the exposure of victims/survivors to further abuse, including forms of sexual exploitation, that are usually exacerbated during armed conflicts or other situations of violence. The provision of cash or vouchers, notably, gives victims/survivors a means to cover basic household expenses or to invest in alternative livelihood activities that are safe and reduce their exposure to risk.

The ICRC also builds awareness, within communities, of the plight of victims/survivors, and the services they may need and where to access these. Information sessions may specifically tackle discrimination against victims/survivors of sexual violence and seek to facilitate their reintegration into their communities. Depending on the context, the ICRC may conduct discussions on these topics with community leaders, birth attendants, religious officials or other figures of authority within communities, or carry out broader public communication campaigns.

Addressing sexual violence through protection activities

In addition to reminding parties to conflict of the necessity of protecting people from sexual violence and engaging with communities to reinforce their protection and beneficial coping mechanisms, the ICRC takes the issue of sexual violence into account when delivering other protection services. In relation to restoring family links, the ICRC ensures that its staff members are trained to make the appropriate referrals in case a victim/survivor of sexual violence is identified in the course of their work. It also strives to assess the situation of children reunited with families, or those in temporary care, for risks of sexual violence. In the field of humanitarian forensics, the ICRC's work includes efforts to ensure that victims/survivors of sexual violence have access to professional forensic services. The ICRC may support the analysis and revision of national medico-legal frameworks to ensure alignment with recognized standards for the examination of victims/survivors; provide capacity-building support to forensic authorities; and carry out repairs on forensic facilities to facilitate proper, confidential and dignified examinations.

The ICRC's standard procedures for visiting detainees are designed to help mitigate the risk of sexual violence and other abuses. The ICRC pays attention to the multilayered vulnerabilities and needs of detainees, including those related to sexual violence. It works to address risks through interventions with the pertinent authorities regarding the treatment of detainees and other structural concerns, such as: the management of detention facilities; overcrowding; detainees' privacy, safety and access to food and essential items (such as for personal hygiene), services and facilities; and the needs of detainees who are particularly at risk. Furthermore, the ICRC may help ensure that victims/survivors of sexual violence receive appropriate assistance through persuasion of, or support for, the authorities and the provision of services (e.g. health care) to the detainees affected.

PREVENTION

The ICRC reminds parties to armed conflict – whether state military and security forces or non-state armed groups – that sexual violence is prohibited under IHL. It urges them to fulfil their obligations to protect people from violence and to ensure victim/survivors' unimpeded access to health care and other essential services. It also strives to discuss specific instances of violence – shared through oral and written representations – as well as the patterns in which they take place and the humanitarian consequences for victims/survivors, their families and communities. It discusses with them the legal and other disciplinary measures that need to be taken to sanction perpetrators and prevent violations from occurring in the first place, and emphasizes the importance of facilitating access to services for victims/survivors.

The ICRC works to promote understanding of and respect for the IHL provisions, as well as other internationally recognized law and standards and local customs, that prohibit sexual violence in armed conflict and other situations of violence. As part of this work, it helps the authorities and weapon bearers to incorporate these provisions into domestic legal and regulatory frameworks, doctrine, training and guidance for weapon bearers, and policies for law enforcement operations. It conducts briefings on these topics and reviews domestic legislation and military and police operational documentation and procedures to assess whether and how the need to prevent and address sexual violence is covered. It undertakes studies and, based on its findings, makes tools available for the use of its own staff and others (see also *Legal framework* on p. 37).

The ICRC also undertakes efforts to understand how social and cultural norms can prevent and/or normalize sexual violence. These efforts may be aimed at follow-up actions to respond to needs, mitigate risks and/or prevent further violations. Meanwhile, in settings where there is an increased risk of sexual violence linked to armed conflict (for example, in situations of escalating conflict, in remote or isolated areas, villages near the scenes of clashes, or closed environments like places of detention and camps for displaced people), the presence of the ICRC may contribute to prevention and response activities.

Leveraging and supporting the work of its delegations, the ICRC conducts workshops, research, assessments, public campaigns and events to shape debates and facilitate in-depth discussions about sexual violence at national, regional and global levels. It contributes to building knowledge about the issue through publications and other means. It uses online tools and other materials to provide information and guidance to the pertinent parties in tackling sensitive issues related to sexual violence and provides governments with assistance to enact and implement the pertinent laws. For example, it has shared recommendations to 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.⁴

⁴ This [study](#) was carried out jointly by the British Red Cross and the ICRC.

ADDRESSING SEXUAL VIOLENCE IN 2022: HEADQUARTERS

Units and services across different ICRC departments will continue to work together to ensure that the ICRC is able to effectively address sexual violence in a multidisciplinary manner, according to the ICRC's Strategy on Addressing Sexual Violence 2018–2022, which will be extended to 2024. An ongoing exercise to assess the progress made in implementing the strategy since 2018, at the institutional level and in selected delegations, will be finalized in 2022. The Addressing Sexual Violence Unit will continue to spearhead these efforts in coordination with a working group comprising specialists from different disciplines and teams across the organization.

ENSURING THAT THE ICRC'S EFFORTS ARE HOLISTIC AND EFFECTIVE

Enabling delegations to come up with context-specific multidisciplinary strategies to address sexual violence and to develop tools to implement them will remain a priority. Briefing sessions will be organized for staff at delegations and at headquarters, to further familiarize them with the institutional strategy for addressing sexual violence and give them technical advice for implementing it. Several delegations will benefit from the direct guidance of specialists – sexual violence operations managers and regional advisers – who are tasked to ensure that the issue of sexual violence is considered in the delegations' operations, help strengthen the coordination of these activities, and oversee internal capacity-building initiatives. A new tool, designed to help delegations assess their capacity to address sexual violence in a multidisciplinary manner and the extent to which addressing sexual violence had been integrated into their broader initiatives, will be piloted in two delegations.

Shoring up staff members' capacity to address sexual violence

Technical support on specific aspects of the response to sexual violence will be made available in various forms, including the deployment of advisers, provision of oral and written guidance and peer-to-peer support. New technical tools – on data collection and assessment, managing prevention-related initiatives and dealing with child victims/survivors of sexual violence – will be developed and promoted for the use of staff members, along with guidance documents developed in past years. Webinars will be organized to discuss these topics and to highlight good practices and approaches developed by delegations.

A modular four-day training course, which was developed in 2020 and finalized in 2021, will continue to be rolled in delegations. Guidance for trainers will also be developed, to equip more people to conduct training sessions for delegation staff.

Sexual violence will continue to be covered in internal training sessions for specific disciplines and in integration courses for new staff members. Staff members will also continue to have ICRC-sponsored access to an external seminar, conducted three times a year, on sexual violence in conflict settings and emergencies. This seminar was jointly developed in 2014 by the ICRC and the Geneva Centre of Humanitarian Studies, and a portion of its participant slots are reserved for ICRC staff.

To leverage the expertise, knowledge and best practices developed at headquarters and at delegations, the ICRC will strive to make information sharing across the organization more efficient. The online community of practice, which was revamped in 2021, will serve as a one-stop platform for the exchange of resources, ideas, expertise and experience. Meetings of the working group of specialists will continue to be arranged, to foster coordination and the exchange of information.

The ICRC will continue to reinforce efforts to strengthen programme management and accountability, including the monitoring and reporting of sexual violence-related activities within institutional planning tools and databases. The minimum accountability requirements, an internal document to guide the institutional planning process, will be revised with updated indicators, including those developed as a result of the review of the strategy.

Strengthening prevention outcomes

The ICRC will implement a multi-year, multi-country initiative to improve methodologies for and monitoring of activities to prevent sexual violence, using a global Theory of Change to identify the best approaches for the prevention of sexual violence through engagement with communities and engagement with weapon bearers. Under this initiative, the delegations involved will receive tailored support from technical specialists to: engage with weapon bearers, influence their attitudes and practices and help them better understand the consequences of sexual violence and how to prevent it; and help communities mitigate risks and strengthen their resilience to the threats and consequences of sexual violence. It will build on existing ICRC initiatives – such as community-based protection and dialogue with weapon bearers – and seek to improve their impact, as well as overall results-based measurement capacities.

The ICRC will apply the recommendations of its research projects, share case studies and practices with a project reference group, and build on existing research recommendations, including those from [The Roots of Restraint in War](#) report and a study, initiated in 2021, on the perceptions of young men about sexual violence. It will finalize the latter in 2022 and pursue efforts at headquarters and delegation levels to promote its findings.⁵

BUILDING AN ENVIRONMENT CONDUCTIVE TO PREVENTING SEXUAL VIOLENCE AND ADDRESSING ITS CONSEQUENCES

The ICRC will contribute to and influence discussions on the issue of sexual violence in armed conflict, other situations of violence and in detention, during selected international and regional conferences, debates and other events. It will focus on increasing understanding of and respect for IHL provisions and other relevant law and standards related to sexual violence, especially at the national legal and policy level. In multilateral fora, it will engage with governments and intergovernmental bodies on ways to improve compliance with IHL's prohibition of sexual violence, and to provide them with legal and technical support through its network of legal advisers. The ICRC's input in all these interactions will be based on its operational experience and research, and on issues identified in partnership with affected communities regarding access to protection and assistance services that are aligned with international standards. For example, the ICRC will pursue diplomacy around the findings of its study on the mandatory reporting of sexual violence incidents, and other past or ongoing research projects. This will include supporting delegations in advocating policy changes that address barriers to accessing services.

The ICRC will also continue to update the database on customary IHL with national and international practices related to the prohibition and criminalization of sexual violence, and work towards publishing the updated ICRC Commentary on the Fourth Geneva Convention regarding the protection of civilians in armed conflict, including updated interpretations of the prevention of rape and other forms of sexual violence. It will also step up the rollout of a checklist for the domestic implementation of IHL prohibiting sexual violence⁶, working with a law firm's pro bono services to develop compatibility studies in at least four national jurisdictions.

Following up on discussions during the 33rd International Conference of the Red Cross and Red Crescent, the ICRC will also urge states to implement their pledges on the prevention of and response to sexual and gender-based violence.

The ICRC will continue to address the prevention of sexual violence in its dialogue and other interactions with weapon bearers. Delegations will be supported in developing influencing strategies, based as well on findings of past and ongoing research initiatives. They will also continue to have access to resource materials and tools, including digital ones, on such topics as engaging with weapon bearers and other actors of influence. The ICRC will organize briefings and training sessions, and promote the use of the legal factsheets, checklists, training kits and other tools it has produced.

To reach a broader audience, the ICRC will undertake more public communication campaigns on online and social media platforms, with a view to: building empathy for victims/survivors of sexual violence; demonstrating how sexual violence can affect women, men, boys, girls and all persons from all backgrounds; and highlighting their different needs. Voices and experiences from conflict- and violence-affected communities will be amplified in posts on ICRC blogs and in relevant fora. These campaigns will be rolled out mid-year and during the 16 Days of Activism against Gender-based Violence (25 November to 10 December). To mark the International Day for the Elimination of Sexual Violence in Conflict (19 June), the ICRC will organize an exhibit at the International Red Cross and Red Crescent Museum in Geneva, Switzerland.

REINFORCING PARTNERSHIPS WITH OTHERS

The ICRC will do its part to ensure that the activities of Movement components working on the issue of sexual violence are implemented in a coordinated manner. It will regularly engage with National Red Cross and Red Crescent Societies (hereafter National Societies) – those working in their own countries and those working internationally – and the International Federation of Red Cross and Red Crescent Societies, by attending and/or co-hosting meetings, regional forums and conferences – notably the Sexual and Gender-Based Violence in the Movement Working Group – and by taking part in periodic exchanges of information, as well as Movement-led projects to this end. It will continue to follow up on the implementation of Resolution 3 of the 32nd International Conference of the Red Cross and Red Crescent.

5. This study was completed in February 2022 and is now available: [Male perceptions of sexual violence in South Sudan and the Central African Republic](#).

6. [Domestic Implementation of International Law Prohibiting Sexual Violence: A Checklist for States and the International Red Cross and Red Crescent Movement](#)

ICRC delegations will be encouraged to work in partnership with National Societies, focusing on complementary roles in implementing a multidisciplinary response and developing a long-term vision for addressing sexual violence. Other forms of engagement with National Societies will include developing referral pathways and identifying joint activities at the community level, on such matters as addressing stigma and facilitating the social inclusion of victims/survivors, with a view to building an environment conducive to the recovery of victims/survivors (see examples in the *Addressing sexual violence in 2022: Selected operations* section on p. 18). Selected delegations will receive tailored support for strengthening their relationships with the National Societies in their given contexts.

The ICRC will also consider the needs and expertise of its Movement partners when developing guidance tools and training sessions. It will include National Society staff in its training sessions, research and other initiatives, with a view to reinforcing the overall capacities of National Societies and fostering conditions for sustainable humanitarian impact.

Beyond the Movement, the ICRC will seek to deepen and expand coordination with other humanitarian actors. It will pursue partnerships in research, innovation, and behavioural change approaches for prevention. It will continue to actively engage in various coordination forums such as the Protection Cluster Gender-Based Violence Area of Responsibility (AoR), at both global and local levels, to solidify the ICRC's networks and coordination with other actors.

Ethiopia. The ICRC delivered dignity kits – containing personal hygiene items, underwear, solar-power flashlights and other supplies – to a centre in Ethiopia.



ADDRESSING SEXUAL VIOLENCE IN 2022: SELECTED OPERATIONS

While activities and commitments to addressing sexual violence are carried out across the organization, the activities in several priority contexts exemplify the ICRC's commitment to addressing the consequences of sexual violence and helping prevent its occurrence. These are featured in this document and include the activities planned by the ICRC in Bangladesh, the Bolivarian Republic of Venezuela (covered by the Caracas regional delegation), the Central African Republic, Colombia, the Democratic Republic of the Congo, Ethiopia, Iraq, Mali, Papua New Guinea (covered by the Suva regional delegation), the Philippines, Nigeria, Somalia, South Sudan, Sudan, the Syrian Arab Republic (hereafter Syria), and selected countries covered by the Kuala Lumpur, Mexico City and Panama City regional delegations. Technical support will be provided by the Nairobi regional delegation to some of the delegations covered in this appeal and others in the region.

The ICRC's activities in these contexts are guided by the organization's approach and strategy for addressing sexual violence (see *Annex II* on p. 38), but tailored 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. 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 service providers. This enables the ICRC to assess the most appropriate entry points and approach 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 internal capacity-building efforts at delegation-level. It is also actively working on strengthening its partnership with National Societies and other local organizations.

BANGLADESH

The ICRC delegation in Bangladesh will focus on addressing the needs of victims/survivors of sexual violence in two camps for displaced people from Myanmar and host communities in Cox's Bazar. People in these areas contend with dire living conditions because basic goods and essential services are scarce. These circumstances make people, including women and children, particularly vulnerable to different forms of sexual violence. The COVID-19 pandemic and the restrictive measures imposed to contain it have exacerbated the risks they face.

The ICRC will prioritize community-based activities to address sexual violence – which will be overseen by a sexual violence operations manager, supported by a field officer – to ensure that they are implemented in a multidisciplinary and coordinated manner. The ICRC will also address sexual violence in places of detention by analysing the situation, initiating discussions with the prison authorities, and exploring possible responses. It will reinforce internal capacity-building initiatives and help the Bangladesh Red Crescent Society to strengthen its own capacities.

Supporting access to health services

The ICRC will help make mental-health and psychosocial support, among other health services, available to victims/survivors of sexual violence. It will raise awareness about the mental-health and other consequences of sexual violence and share information about the available services and how to access these. It will ensure that health staff are aware of the specific needs of victims/survivors of sexual violence and of the referral pathways for ICRC services and those provided by other organizations. Similar training will be offered to volunteers carrying out family-links activities.

The ICRC will also seek to address the health needs of victims/survivors of sexual violence in places of detention.

Addressing protection-related concerns and helping mitigate risks

Still focusing on community-level efforts, the ICRC will strive to share messages about risk-mitigation, the prevention of sexual violence, and the various needs of victims/survivors. It will pay attention to incidents of sexual violence as part of its broader efforts to document the protection-related concerns of displaced people and the communities hosting them in Cox's Bazar. In parallel, it will draw the attention of authorities and security forces to the need to protect people from sexual violence. It will occasionally conduct public-communication activities – with the Bangladesh Red Crescent Society, whenever possible – to broaden awareness of the Movement's activities and the need to prevent sexual violence and mitigate risks.

The ICRC will consider people's risk of exposure to sexual violence when designing and implementing water and sanitation projects for communities in Cox's Bazar and in the Chittagong Hill Tracts. It will include the subject during its discussions with forensic professionals and institutions in Bangladesh.

Plan of action

- consider the issue of sexual violence when monitoring and documenting protection-related concerns; make confidential and bilateral representations to the authorities, military and security forces, and other relevant authorities
- include the prevention of and response to sexual violence in workshops on international law enforcement standards for police, military, border guards and other relevant authorities
- help people and communities at risk develop measures for self-protection against sexual violence
- refer victims/survivors of sexual violence to external service providers offering specialized care and/or for inclusion in ICRC initiatives, such as economic-security activities, as necessary
- support the capacity building of primary-health and mental-health and psychosocial support staff by giving them proper guidance in treating and referring patients, including victims/survivors of sexual violence
- train community-based workers in conducting awareness-raising sessions about sexual violence
- support the provision of care at the Cox's Bazar hospital's emergency department; more specifically:
 - support confidential disclosures and referrals to the one-stop crisis centre, a government body supporting victims/survivors of violence
 - integrate topics about specialized care for victims/survivors of sexual violence, among other subjects, into training or refresher sessions for health staff
- include sessions on reacting to disclosure of sexual violence and referring victims/survivors in the training courses for Bangladesh Red Crescent Society staff and volunteers

CARACAS (REGIONAL)

COVERING: Antigua and Barbuda, Bahamas, Barbados, Belize, Dominica, Grenada, Guyana, Jamaica, Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines, Suriname, Trinidad and Tobago and Bolivarian Republic of Venezuela

The ICRC will strive to respond to sexual violence as part of its health programme in the Bolivarian Republic of Venezuela (hereafter Venezuela), through which it provides comprehensive support for health facilities delivering preventive, primary-health and emergency care in Caracas, Bolivar State, border areas with Colombia, and other violence-affected areas where few organizations have a presence. It will also seek to develop its efforts to respond to people's protection-related concerns and to mitigate their exposure to the risks of sexual violence. This work will benefit from the support of an adviser based in the ICRC regional delegation in Panama City, Panama.

Supporting access to health services

The ICRC will help ensure that victims/survivors of violence, including sexual violence, have access to mental-health and psychosocial support and other care. This will entail supporting primary-health-care-centres in several areas in Venezuela, strengthening referral systems, and training health workers, community members and others in the provision of mental-health and psychosocial support.

Strengthening communities' coping mechanisms

The ICRC will help communities devise ways to prevent sexual violence and to understand more fully the needs and concerns of victims/survivors of sexual violence, among other groups of people, and the services available to them; it will seek to develop a referral mechanism to link the people affected with appropriate service providers. The ICRC will also pay attention to the issue of sexual violence when carrying out activities for people deprived of their freedom.

With a view to preventing sexual violence, the ICRC will include key messages on sexual violence in training sessions, on the use of force, for the Venezuelan authorities, including security forces and armed forces. In its discussions with forensic authorities, the ICRC will touch upon the documentation of injuries, including those stemming from sexual violence.

Plan of action

- document protection-related concerns and alleged abuses, including in relation to sexual violence, during law enforcement operations; urge the authorities to prevent or halt misconduct and address the topic as part of training sessions on the use of force
- mobilize and support other organization and local groups to raise awareness of ways to prevent sexual violence and of community-based protection strategies for people affected by armed violence in Venezuela
- refer victims/survivors of sexual violence to specialized care, including mental-health and psychosocial support, and other services
- at primary-health-care centres in violence-prone areas:
 - distribute essential supplies and equipment
 - help health staff to improve referral pathways to secondary-level facilities and other service providers
- train health staff and community members to provide mental-health and psychosocial support

CENTRAL AFRICAN REPUBLIC

Protracted armed conflict and other situations of violence continue in the Central African Republic (hereafter CAR). Abuses against civilians have been reported, and sexual violence is said to be widespread. The recent waves of conflict that began during the December 2020 presidential elections and continued in 2021 have resulted in a significant increase in the number of victims of sexual violence, according to figures shared by various organizations working on the issue. Many more cases are likely unreported owing to the stigma associated with the issue, security conditions, and fear of reprisal, which also prevent victims/survivors from accessing quality services.

The ICRC delegation in the CAR will 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. A sexual violence operations manager, supported by a field officer, will oversee these efforts and make sure that they are implemented in a multidisciplinary and coherent manner according to the delegation's country-specific strategy. The delegation will also work on reinforcing its staff members' capacities in addressing sexual violence.

Supporting access to health care and other services

Ensuring that victims/survivors of sexual violence have access to medical treatment and psychosocial support will remain a priority for the ICRC. It will enable staff at ICRC-supported health-care facilities in the sub-prefectures of Nana Grebizi and Nana Mambéré to provide specialized care, including clinical management of rape and mental-health and psychosocial support to victims/survivors of sexual violence. It will also seek to broaden awareness in communities of the plight of victims/survivors and the services available to them.

Where the ICRC does not implement health-related activities, it will work on ensuring that a referral system is in place and coordinate with other humanitarian actors in order to provide those in need with adequate services.

Households headed by victims/survivors of sexual violence – among other particularly vulnerable households – will also 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

Under the partnership agreement they signed in 2021, the ICRC and 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. The ICRC will also carry out projects in rural areas to improve existing water-supply infrastructure in ways that will enable people to fetch water without venturing far from their homes and potentially being exposed to risks to their safety. When designing and implementing assistance activities (e.g. the provision of income support, repair of water and other facilities), the ICRC will seek to consider risks related to sexual violence and the impact of the activity on the risks identified.

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. The ICRC will also document allegations of abuse, including sexual violence, and urge authorities and weapon bearers to develop measures to prevent misconduct. Security forces and military forces, including multinational forces, will be urged to integrate relevant provisions of IHL and other applicable law into their doctrine, training and operations. The ICRC will brief these personnel on IHL and international law enforcement standards, key concepts relating to sexual violence, including its roots and consequences, and their responsibilities in its prevention and response.

The ICRC will also pay attention to the issue of sexual violence when carrying out activities for people deprived of their freedom.

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 for the authorities and weapon bearers, draw attention to the plight of victims/survivors of sexual violence
- provide ICRC-supported health facilities with financial support, medical supplies, infrastructural improvements and staff training for ensuring the provision of quality health care to victims/survivors of sexual violence
- at nine ICRC-supported counseling centres, provide mental-health and psychosocial support for victims/survivors of sexual violence, either directly or through ICRC-trained health workers
- train community members and community-based health relays in identifying and referring people in need of psychosocial support
- enable victims/survivors to reach medical facilities in a timely manner by covering their transport fees, as needed
- provide unconditional cash grants to cover immediate needs that may put a person at risk if unaddressed; give grants and/or training for starting income-generating activities, to facilitate the socio-economic integration of victims/survivors
- extend capacity-building support to the gender unit of the Central African Red Cross so that it can broaden awareness of the issue among communities, improve medical referrals, and help reduce stigmatization and rejection of victims/survivors

COLOMBIA

The ICRC will sustain its efforts to address sexual violence within its protection and assistance activities in Colombia. It will continue to leverage its partnership and coordination with the Colombian Red Cross Society, state agencies and other local organizations and partners to make sure that its response is holistic and coherent with other related initiatives. The activities in Colombia will benefit from the support of an adviser based in the ICRC's regional delegation in Panama City, Panama.

Supporting access to health care and other essential services

Consistent with the survivor-centred approach, the ICRC in Colombia will ensure that victims/survivors of sexual violence are aware of the services available to them and can receive the ones that they need. As part of this, the ICRC will persuade the authorities to provide victims/survivors of sexual violence with the assistance that they are eligible for, under existing laws and mechanisms.

The ICRC will also directly support the provision of health care and other services to victims/survivors of sexual violence. It will train health staff – at hospitals, health facilities and counselling centres – in providing psychosocial support and in making referrals for cases disclosed to them.

The ICRC will continuously map and assess existing referral pathways for the different services – health, economic support, legal assistance, among others – that victims/survivors of sexual violence may need. It will aim to identify the best ways to make use, reinforce and/or be part of these pathways. It will promote information about them among communities, so that they can be known to people in need of assistance. The ICRC will also be ready to give assistance, including cash, directly to victims/survivors of sexual violence, to help them cover basic expenses such as transportation costs when obtaining health, social and other services. ICRC income support will be extended to victims/survivors of sexual violence.

Promoting compliance with IHL and the protection of people

During meetings with the authorities and weapon bearers, the ICRC will emphasize the necessity of preventing sexual violence and addressing its consequences, among other key issues. It will help the authorities to strengthen their grasp of IHL and other norms, in order to advance domestic implementation of IHL provisions protecting victims of violence. It will seek to further their understanding of legal frameworks that address the needs of victims/survivors of sexual violence, as well as emphasize the necessity of complying with these frameworks. The ICRC will continue to back the efforts of Colombian military and police forces to integrate IHL and pertinent provisions of human rights law, respectively, into their doctrine and training – so that issues of humanitarian concern, including the prevention of sexual violence, can be addressed properly.

In line with its community-based protection approach, the ICRC will deepen its engagement with violence-affected communities to understand their humanitarian needs more fully – including the risks they face – and to help them strengthen their mechanisms for self-protection and their resilience to the effects of armed conflict and other violence. It will also support community-based organizations, so that they can build community networks to help victims/survivors in remote rural areas and inform them of the referral systems and services available to them.

Plan of action

- through dialogue, promote respect for IHL among all weapon bearers; discuss, with military and police forces, IHL and other norms applicable to the protection of people during the conduct of hostilities and law enforcement operations
- persuade the pertinent authorities and institutions at national and local levels to implement policies for protecting and assisting victims/survivors of sexual violence and ensuring their access to the services they require
- based on meetings and other forms of engagement with communities, identify community-based organizations that can help victims/survivors of sexual violence in remote rural areas and give them capacity-building support, notably in the form of training and dissemination sessions
- provide technical and other support to the state's victim assistance unit, local authorities, and others, to help them strengthen their ability to assist people affected by conflict or other violence
- at health facilities and counselling centres, provide – directly or through ICRC-trained health workers – mental-health care and psychosocial support to victims/survivors of sexual violence

- inform people about the state services available to them; cover treatment costs, arrange medical evacuation, or facilitate referrals to health facilities for victims of violence
- provide medical supplies, personal protective equipment, staff training and technical support – particularly for the emergency care and treatment of victims/survivors of sexual violence – to ICRC-supported hospitals
- repair communal and essential facilities, including health and counselling centres serving victims/survivors of sexual violence
- give cash grants to victims/survivors of sexual violence, so that they can meet their basic and other needs, and/or provide them with income support: cash for buying supplies for their small businesses, vocational training for breadwinners, and/or salary support for some employers who hire them

CONGO, DEMOCRATIC REPUBLIC OF THE

COVERING: Congo-Brazzaville and the Democratic Republic of the Congo

Civilians bear the brunt of the violence in the eastern part of the Democratic Republic of the Congo (hereafter DRC). They are subjected to sexual violence and other unlawful conduct, which often leads to emotional trauma and other immediate and longer-term consequences. The stigmatization of victims/survivors of sexual violence, including community or family rejection, is prevalent and often causes further suffering for the people affected.

The ICRC will prioritize responding to the issue of sexual violence perpetrated by weapon bearers but will remain ready to address the needs of all victims/survivors of sexual violence. It will approach the issue in a holistic manner: ensuring that victims/survivors have access to the assistance they require, helping communities minimize their exposure to risks, and seeking to prevent abuses from occurring. It will pay specific attention to children associated with armed groups and unaccompanied children who may have been exposed to sexual violence. The Red Cross of the Democratic Republic of the Congo, which plays a pivotal role in assisting conflict-affected people, will be a key partner for the ICRC.

A sexual violence operations manager, supported by two field officers, will oversee the implementation of the delegation's response and 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 how to identify victims/survivors and refer them appropriately. Specific sessions for those involved in detention-related activities will be carried out to help the delegation identify, better understand and develop approaches for addressing sexual violence in detention settings. More broadly, the ICRC will also continue to pay attention to the issue of sexual violence when carrying out activities for people deprived of their freedom.

The delegation will also take stock of the activities it has undertaken over the last decade to address sexual violence, with a view to using the findings to improve its activities.

Supporting access to health care and other essential services

The ICRC will support primary-health-care centres in violence-affected areas so that people can avail themselves of free services, including clinical management of the physical consequences of sexual violence. It will provide these centres with material and technical support and train their staff to make referrals for further care. It will help victims/survivors of sexual violence, among other groups of people with violence-related mental trauma, to obtain mental-health and psychosocial support at the health facilities or counselling centres that it supports. People needing more specialized care will be referred to hospitals or other appropriate facilities, for which the ICRC will also extend technical and other support. Training sessions on addressing sexual violence will also be organized for health workers at ICRC-supported hospitals.

The ICRC will help set up referral mechanisms between the facilities that it supports: between primary-health-care centres and hospitals, and between health facilities and providers of mental-health and psychosocial support.

The ICRC will raise awareness of the psychological and other consequences of sexual violence and the services available to survivors/victims; sessions on these topics will be arranged for health staff, volunteers and members of communities covered by these facilities, so that more people would feel encouraged to seek assistance and know where and how help can be found.

Victims/survivors of sexual violence will also continue to be integrated into ICRC livelihood-support projects. The ICRC will endeavour to avoid stand-alone projects or approaches focusing specifically on victims/survivors of sexual violence, to avoid further stigmatization. Victims/survivors of sexual violence will be given emergency cash assistance to help mitigate 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 take advantage of its presence in the eastern DRC to engage more closely with communities and see to their protection-related needs. It will use such means as recreational activities and meetings with communities to learn about the risks to their safety and explore mitigation measures with them. In the course of its community engagement, the ICRC will endeavour to raise awareness of the following topics: risks of exposure to sexual violence and strategies to mitigate these; social stigmatization and other challenges faced by victims/survivors; and the help available to them. Information campaigns on these topics will be carried out in the Ituri and South Kivu provinces. Communities will also be encouraged to ease the social inclusion of victims/survivors of sexual violence and refer them for suitable care.

As appropriate, the ICRC may design its water and habitat projects – aimed at providing people access to water – in ways that help mitigate safety risks, for instance, by reducing the need to go to unsafe areas to fetch water or pursue livelihood activities.

The ICRC, alongside with the DRC Red Cross, will also seek to strengthen its capacities in preventing sexual exploitation and abuse. It will work with the National Society in considering the issue of sexual violence in their family-links activities and systematically incorporate sessions on addressing sexual violence in training sessions for volunteers involved in these activities. These sessions will focus on assessing protection-related needs, including the identification and referral of victims of sexual violence, especially among unaccompanied or separated children and those formerly associated with armed forces.

Promoting compliance with IHL and other applicable law

The issue of sexual violence will be brought up in dialogue with authorities at all levels and weapon bearers, as part of efforts to remind them of the protection afforded to conflict-affected people by IHL and international human rights law. The ICRC will urge them to put an end to abuses against civilians, including sexual violence, and to take measures to prevent their recurrence, such as the establishment of codes of conduct. It will continue to give guidance and other support for integrating IHL and international human rights law – especially provisions governing the conduct of hostilities and law enforcement operations – 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 laws; conduct information sessions for weapon bearers on IHL and other pertinent norms
- organize workshops and dissemination sessions on IHL or human rights law for the military, police and other weapon bearers
- conduct information sessions and other activities aimed at making community members, health workers and others aware of the situation of survivors/victims of sexual violence, the services available to them and how these can be accessed
- provide unconditional cash to cover immediate needs (e.g. emergency housing) that may put the 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 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, as well as psychosocial support
- provide material and financial support regularly for hospitals and organize training in psychosocial care and treatment of victims/survivors of sexual violence
- facilitate the referral of victims/survivors to the appropriate services, by giving funding and technical support to health facilities, so that they can improve their referral systems and ensure that patients can promptly obtain specialized care if needed
- provide training and financial, infrastructural, material and/or technical support to the DRC Red Cross; specifically:
 - include sessions on addressing sexual violence in training sessions for volunteers involved in delivering family-links services
 - help it strengthen its capacities to mitigate the consequences of sexual violence, such as stigmatization

ETHIOPIA

Humanitarian consequences continue to grow for people in areas affected by ongoing fighting in different parts of Ethiopia. Sexual violence, and looting and destruction of health facilities, are of particular concern.

The ICRC will continue to implement a transversal, survivor-centred approach to addressing conflict-related sexual violence and its consequences in Ethiopia, in line with its institutional approach, strategy and key areas of action. A central aspect of its 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 receive medical care, mental health and psychosocial support, legal counseling, economic assistance and other support according to their individual needs and wishes. The ICRC will also raise awareness about sexual violence, establish and strengthen referral pathways, and help existing service providers sustain or reinforce their capacities. It will seek to address the medium- and longer-term effects of sexual violence through community-based engagements and initiatives. The ICRC will focus its efforts in areas heavily affected by violence; all of this will be guided by a delegation-level strategy.

A sexual violence operations manager will coordinate these efforts and provide technical expertise, alongside two field officers and a midwife who trains health staff. Efforts will be pursued to reinforce the capacity of ICRC staff members, the Ethiopian Red Cross Society's staff and volunteers, and other local partners.

Urging protection for violence-affected people and contributing to risk mitigation

The necessity of preventing sexual violence will be addressed through various means; it will be brought up, for example, in discussions with weapon bearers and the authorities, and included in training sessions for them.

The ICRC will seek to reach a fuller understanding of the issue of sexual violence by looking at trends, patterns, the consequences on people and communities, and the needs of victims/survivors of sexual violence, including in detention settings. It will conduct assessments and engage with communities, for example, to better understand the causes of sexual violence, the risks people face, long-term consequences, including social stigma, as well as response capacities. It will then work with community members to identify solutions that reinforce their positive coping mechanisms.

The ICRC will consider the risk of sexual violence when designing and implementing its assistance activities – for example, it will ensure that people can safely access its services and take measures to mitigate the risks identified. It will also assess risks and safety measures in sites hosting displaced people and address these through, among other means, advocacy with the relevant authorities. When implementing initiatives to ensure communities' access to clean water and other essentials, the ICRC will seek to mitigate the risk of sexual violence; for example, when installing latrines, the ICRC will ensure that they are well lit and can be locked for privacy.

Supporting life-saving services

The ICRC will enable primary-health-care centres to offer good-quality services, free of charge, to violence-affected people, including victims/survivors of sexual violence. It will train health staff in providing specialized services, including the clinical management of rape according to sectoral standards and give them medicines and other supplies (e.g. dignity kits containing hygiene essentials, clothing, torches and other items to support women's dignity and safety). It will help improve the availability of psychosocial support.

The ICRC will facilitate referrals from primary-health-care facilities to One-Stop Centres, which provide comprehensive support to victims/survivors of sexual violence, and support the operation of these centres. The ICRC will also support existing safe houses, mainly in Amhara and Tigray.

Victims/survivors of sexual violence will be given various forms of support, including medical referrals, emergency assistance, and family-links services for those who have been separated from their relatives. The ICRC will also work to develop and implement activities to help violence-affected people can meet their needs in a more sustainable manner; victims/survivors of sexual violence will be considered for inclusion in these initiatives.

The ICRC will pay attention to the issue of sexual violence when carrying out activities for people deprived of their freedom.

Plan of action

- document allegations of abuse, and analyse patterns and trends
- raise the importance of preventing sexual violence, among other issues, during training sessions and other events – on IHL, international human rights law or other applicable norms – for weapon bearers and local authorities, including the Ethiopian Human Rights Commission

- provide material and/or capacity-building support to facilities that treat or assist victims/survivors of sexual violence and develop referral pathways involving these facilities; specifically:
 - donate medical and other essential supplies, post-exposure prophylaxis kits for victims/survivors of sexual violence, to up to 34 primary-health-care facilities
 - provide capacity-building support, medicine and other supplies (e.g. dignity kits) to up to 15 One-Stop Centres; make repairs at these facilities, as necessary
 - organize training sessions, in mental-health and psychosocial support, for health workers from selected primary- and secondary-health-care facilities in Amhara, Oromia and Tigray, including One-Stop Centres
 - support safe houses in Amhara and Tigray by providing them with food and other supplies (e.g. dignity kits) and financial assistance for covering rent; make infrastructural upgrades, as necessary
- provide individual support for victims/survivors of sexual violence, including medical referrals, family-links services (e.g. reunification), essential household items and cash; include victims/survivors in economic-support activities aimed at longer-term resilience-building
- give the Ethiopian Red Cross Society training, and technical and other support for responding to protection-related concerns, including those related to sexual violence; work with it to:
 - develop an outreach package and training session on sexual violence, to equip its staff and volunteers to raise awareness of the issue and make referrals safely
 - include a session on sexual violence in first-aid training courses for staff and volunteers
- conduct a legal assessment on the inclusion of prohibition of sexual violence in domestic legislation
- participate in coordination forums and meet with other organizations tackling sexual violence to discuss the needs of victims/survivors

IRAQ

As the ICRC delegation in Iraq develops its efforts to address sexual violence, it will focus on deepening its understanding of the issue and considering it within the framework of its broader activities, especially those aimed at prevention and protection. It will undertake efforts to shore up the capacities of staff members, across different units and teams, to address sexual violence. For example, it will organize workshops and training sessions for them. It will also work on improving coordination between the different teams and with other actors, including working with them to establish safe referral pathways. These efforts will be supported by an adviser who will also provide support to the ICRC delegation in Syria.

Backing the provision of psychosocial care

Helping address mental-health and psychosocial needs will also remain a priority for the ICRC delegation in Iraq. Specifically, the ICRC will help make mental and psychosocial support available at the different health facilities it supports throughout the country. It will do so by training community, health, social and other local workers and assigning its own staff who are specialized in this field. The ICRC's activities in this regard will be geared towards all victims of violence, to avoid exposing victims/survivors of sexual violence to stigmatization and further harm.

Promoting protection for civilians

The ICRC will include, indirectly or directly, the issue of sexual violence and the importance of addressing the specific needs of the people affected in its dialogue with the authorities, weapon bearers and religious and community leaders. At the same time, it will intensify its effort to engage with communities – for instance, its community contact centre – to better understand their situation and the risks that they may be exposed to, including sexual violence. Based on this engagement, it will help communities to devise effective means of protecting themselves against risks of exploitation and other abuse.

The ICRC will also pay attention to the issue of sexual violence when carrying out activities for people deprived of their freedom, particularly by integrating the issue in its analysis of the situation in places of detention.

Plan of action

- document the protection-related concerns of civilians and alleged violations of IHL and/or other applicable norms during the conduct of hostilities and law enforcement operations; make oral and written representations to the parties concerned
- where possible, discuss the necessity of preventing sexual violence during meetings, training sessions and workshops for the authorities and weapon bearers
- where possible, organize workshops and other community-based activities with conflict-affected people, to help them identify threats to their safety, discuss their coping mechanisms, and enable them to devise more effective means of self-protection
- provide – directly or by training local partners – mental-health and psychosocial support for victims/survivors of sexual violence and other people who may require such services
- where possible, provide cash assistance to victims/survivors of sexual violence or people at risk so that they can access the goods and services they need or establish income-generating activities

KUALA LUMPUR (REGIONAL)

COVERING: Brunei Darussalam, Japan, Malaysia, Singapore

The ICRC's regional delegation in Kuala Lumpur, Malaysia, works with governments and National Societies in the covered South East Asian countries to promote IHL and humanitarian principles and gain support for the Movement's activities. It will seek to include the issue of sexual violence in its interactions and activities with some of them. This work will be supported by a regional adviser based in the ICRC regional delegation in Bangkok, Thailand.

In Malaysia, the ICRC will carry out studies to check the compatibility between domestic legal frameworks and international standards and norms applicable to sexual and gender-based violence, using the recently developed ICRC checklist for the domestic implementation of the prohibition of sexual violence. It will work with the Malaysian Red Crescent Society and help it implement a pledge it made, at the 32nd International Conference of the Red Cross and Red Crescent, on addressing sexual and gender-based violence. The ICRC will also seek to integrate the issue of sexual and gender-based violence into its engagement and other activities with influential actors. With the National Society, for example, it will organize pertinent events with authorities and members of academic circles. The ICRC will also pay attention to the issue of sexual violence when carrying out activities for people deprived of their freedom in Malaysia.

MALI

The ICRC will strive to emphasize, in its interactions with the authorities and weapon bearers, the necessity of protecting civilians and preventing or ending abuses against them – 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 and work with them in addressing their needs and developing measures for their safety.

Furthermore, the ICRC will help make specialized care and psychosocial support available to victims/survivors of sexual violence. It will support health facilities in northern and central Mali and offer capacity-building assistance to the staff of these facilities, as well as those in facilities run by the Mali Red Cross, to ensure that the services they provide are of good quality.

Plan of action

- provide material, technical and other forms of support to primary-health-care facilities in northern and central Mali, enabling them to deliver good-quality preventive and curative care, including services for victims/survivors of sexual violence; for instance:
 - donate equipment and supplies, including post-exposure prophylactic kits, and make upgrades to their facilities
 - train and supervise health-care personnel
 - refer patients for higher-level or specialized care
- help address the mental-health needs of up to 1,500 people affected by violence – including sexual violence – or other crises, either directly or through ICRC-trained counsellors, at ICRC-supported health structures and National Society-run facilities

- 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
- work with members of violence-affected communities to address their needs and develop appropriate self-protection measures
- provide ad hoc material assistance for victims of violence; refer them to ICRC-supported providers of psychosocial support
- organize dissemination sessions on IHL and other applicable norms for Malian forces and Mali-based international forces personnel and members of armed groups

MEXICO CITY (REGIONAL)

COVERING: Belize, Costa Rica, El Salvador, Guatemala, Honduras, Mexico, Nicaragua

The ICRC's efforts to address sexual violence will be focused on migrants, returnees, IDPs and residents in violence-affected communities throughout the region, particularly in El Salvador, Guatemala, Honduras and Mexico. They will be implemented within broader initiatives to ensure that these groups of people have access to the services they require – including health care, mental and psychosocial support, and protection – and are able to cope with the effects of violence.

The ICRC will refer the victims/survivors of sexual violence that it will identify among migrants and returnees to providers of health care and mental-health and psychosocial support. In selected areas along the migration route, the ICRC will help the authorities, and shelters and other civil-society organizations, strengthen their capacities to address migrants' health needs or refer them for appropriate care.

For IDPs and residents in violence-affected communities, the ICRC will work with the health authorities and other stakeholders to improve referral systems, with a view to broadening access to health care for violence-affected residents, including victims/survivors of sexual violence. As a matter of priority, it will mobilize national and municipal authorities to ensure protection for health services and safe access to them. It will continue to bolster local services providing mental-health and psychosocial support.

Plan of action

- together with the pertinent National Societies or other institutions, whenever possible, conduct meetings and workshops for the authorities and others on protecting health services and facilitating access to them, including for victims/survivors of sexual violence
- provide training or technical support to health-care providers and National Society volunteers in providing comprehensive services, including protection and mental-health and psychosocial support, for victims of violence

NIGERIA

The protracted armed conflict in the states of Adamawa, Borno and Yobe in north-eastern Nigeria remains intense. Sexual violence and other unlawful conduct have been widely reported, and attacks against health personnel, aid workers and medical facilities are prevalent. The fighting has displaced millions of people, causing them to flee to other parts of the country or abroad. Although some of them have returned to their communities, many still remain in protracted displacement. Many IDPs are in urban centres or staying in host communities, where resources are dwindling and service providers are overwhelmed.

The ICRC will strive to address sexual violence in a holistic and multidisciplinary manner, according to its 2021–2023 country-specific strategy for Nigeria. 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 pursuing dialogue with those involved in armed conflict and other violence. All of this will be carried out within the framework of the ICRC's activities to protect and assist people affected by conflict and other violence in Nigeria. It will be overseen by a sexual violence operations manager, who will also be responsible for coordinating the activities and organizing capacity-building initiatives for staff members.

Bolstering the provision of health care

Together with the health authorities, the ICRC will support primary-health-care facilities in their provision of good-quality services, including sexual and reproductive health care, specialized treatment for victims/survivors of sexual violence and referrals to further care. In Adamawa and Borno, the ICRC will work with communities and support health facilities to help people cope with the traumatizing effects of the abuses they suffered and/or of the conflict in general. The ICRC will also establish and/or 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 volunteers in this regard. It will engage men from communities across the country in information sessions on sexual and reproductive health, as an entry point to discussing the issue of sexual violence.

Urging respect for IHL and engaging with communities

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, taking into account the varying capacities and needs of different groups of people within a community. It will use its community contact centre and other means 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 may be given cash to cover their basic needs, enable them to start or expand small businesses and/or help mitigate their exposure to further risks of abuse.

The ICRC will seek to cultivate dialogue with all parties to conflict and other violence. 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 sexual violence, a topic that it will also seek to cover during training sessions and other events for weapon bearers, to reinforce the application of lessons from these discussions in their operations. Messages regarding conflict-related sexual violence will also be included in the ICRC's public-communication activities.

The ICRC will pay attention to the issue of sexual violence as it carries out activities for people deprived of their freedom in Nigeria, and when delivering family-links services, especially for children separated from or reunited with their families. It will train volunteers involved in family-links activities to facilitate referrals for victims/survivors of sexual violence whom they may encounter in the course of their work.

Plan of action

- document allegations of abuse and make written and/or oral representations to the parties concerned; discuss with them their obligations under IHL and other applicable law; draw attention to these matters during training sessions for weapon bearers
- organize discussions with community members to understand their needs and develop projects with them to address these needs; in addition:
 - disseminate public messages, via radio, on preventing sexual violence
 - strengthen mechanisms to refer victims/survivors of sexual violence to suitable service providers
- use social media, radio, text messages and printed materials to communicate useful information such as risk-reduction measures and ways to access services available to them
- give victims/survivors of sexual violence cash grants, materials, and/or training to cover basic needs, starting or resuming their livelihoods and bolstering their incomes
- support the existing health services of the health ministry by:
 - providing medical supplies, equipment, hygiene items and staff training and incentives
 - making infrastructural repairs at primary-health-care facilities
 - providing support for the referral of patients to secondary or specialized care, and covering the costs of treatment and meals for inpatients
- facilitate training for health workers, community volunteers and others in providing mental-health and psychosocial support for victims of violence living in their communities and those seeking help at health facilities
- conduct information sessions for communities on the mental-health needs of conflict-affected people, and the availability of support services, so that they can seek help or refer others
- provide training and other support to National Society volunteers for conducting campaigns and other awareness-raising initiatives aimed at reducing the risk of sexual violence and responding to its consequences

PANAMA CITY (REGIONAL)

COVERING: Antigua and Barbuda, Bahamas, Barbados, Cuba, Dominica, Dominican Republic, Grenada, Guyana, Haiti, Jamaica, Panama, Saint Kitts and Nevis, Saint Lucia, Saint Vincent and the Grenadines, Suriname

The ICRC will help tackle humanitarian issues, including sexual violence, arising from armed violence and migration in selected countries covered by the regional delegation. In particular, it will seek to raise these issues during its interactions with authorities and National Societies, as well as with relevant multilateral and international organizations – such as the Caribbean Community (CARICOM) secretariat, the CARICOM Implementing Agency for Crime and Security and the Organization of American States – based in the region.

A sexual violence adviser, based in Panama City, will also support the activities of neighbouring ICRC delegations – including Caracas regional, Colombia and Mexico City regional – to address sexual violence.

Plan of action

- in Panama and the CARICOM states covered by the regional delegation, discuss migration-related issues, including sexual violence, with the authorities, the National Societies and others
- seek to discuss sexual violence and other pressing humanitarian issues with the authorities and other actors of influence in the region
- engage in dialogue on IHL and humanitarian issues of common concern with representatives of the CARICOM secretariat and other multilateral and international organizations, government officials, police and armed forces and members of civil society; participate in or facilitate local or regional events on these matters

PHILIPPINES

The ICRC will continue to help address the physical, medical, psychological, legal, economic and social consequences of sexual violence, as part of its wider efforts to address the protection-related concerns of conflict-affected people in the Philippines, especially in Mindanao island. Its activities will be supported by a regional adviser based in the ICRC regional delegation in Bangkok, Thailand.

Helping ensure access to medical care and other essential services

As a priority, the ICRC will support the capacity of key hospitals in Mindanao to provide suitable and timely medical care, in line with international and sectoral guidance, to victims/survivors of sexual violence. The ICRC will also seek to address the mental-health and psychosocial needs of victims/survivors of sexual violence, as well as other people experiencing distress owing to conflict and other situations of violence. It will offer training and other forms of support to mental-health professionals, health workers, community leaders and others. It will also renovate referral hospitals, specifically to provide consultation rooms for victims/survivors of sexual violence. All this is aimed at ensuring that victims/survivors of sexual violence can obtain clinical treatment, including post-rape kits and counselling, from ICRC-supported hospitals.

The ICRC will provide victims of violence with information on the services available to them and refer those most vulnerable for financial assistance, health care and other services. Victims/survivors of sexual violence, in particular, will be referred to the ICRC-supported hospitals mentioned above.

In parallel, the ICRC will continue to include messages on sexual violence and the importance of preventing it in its dissemination sessions for weapon bearers. It will also pay attention to the issue when carrying out activities for people deprived of their freedom.

The ICRC will encourage violence-affected communities to devise community-based measures to mitigate the risks to their safety and help them strengthen their resilience to the effects of violence. Furthermore, it will consider concerns related to sexual violence when implementing activities to improve access to water and other essential services, with a view to helping prevent instances of such abuse.

Plan of action

- remind all parties to armed conflict or other violence of their responsibilities under IHL and other applicable norms; document and follow up, with the parties concerned, alleged IHL violations and other misconduct
- conduct workshops for conflict-affected people on community-based means of self-protection; inform them about the services available to them and other useful information

- refer victims of violence, including sexual violence, for financial, legal and administrative assistance, and psychosocial support
- make a one-off distribution of food or vouchers for food, medicine or other household needs to victims/survivors of sexual violence and other groups of people with specific vulnerabilities
- supply up to 12 hospitals with post-rape kits, and help set up consultation rooms at three of these hospitals for victims/survivors of sexual violence
- train health workers and others in psychological self-care and in mental-health and psychosocial support for violence-affected people, including victims/survivors of sexual violence

SOMALIA

In Somalia, the ICRC's response to sexual violence will focus on ensuring the availability of medical treatment for victims/survivors of sexual violence, which will be complemented with efforts to address protection-related concerns and promote the prevention of sexual violence. These activities will benefit from the support of an adviser based in the ICRC regional delegation in Nairobi, Kenya.

Making health services available

The ICRC will support primary-health-care centres run by the Somali Red Crescent Society, which provide basic curative and preventive health care, including specialized treatment for victims/survivors of sexual violence. The ICRC will organize training sessions for health-care staff to ensure that they can provide good-quality services, and work with them on making proper referrals for further care. It will continue to support the operations of a hospital that provides treatment for fistula, a condition often associated with sexual trauma or complications in childbirth. Victims of sexual violence will also be included in ICRC income-support activities, to help them restore or improve their self-sufficiency.

The Somali Red Crescent Society and the ICRC will continue to engage with communities, to reach a fuller understanding of their health needs and make an effective response to them. The ICRC will also help the National Society develop its capacity to address various aspects of the problem of sexual violence.

Furthermore, the ICRC will seek to include the prevention of sexual violence in its discussions with the authorities and parties to the conflict.

Plan of action

- discuss protection for civilians with authorities, weapon bearers, and community leaders; submit oral and written representations when necessary; make recommendations for mitigating violence-related risks to civilians, including the threat of sexual violence
- strengthen dialogue with authorities, armed groups and members of civil society on the ICRC's mandate, guiding principles and humanitarian activities; raise awareness among parties to the conflict of the basic provisions of IHL on the prevention of sexual violence, among other topics
- document protection-related concerns – especially in areas controlled by armed groups or under their influence – and, if necessary, provide financial and/or other assistance to the people affected; implement community-based activities to help address these concerns
- conduct information sessions on sexual violence and other related activities for communities, health personnel, authorities and weapon bearers
- give National Society-run clinics comprehensive assistance, including supplies, equipment, staff training, and funds to cover running costs and infrastructural upgrades
- train female community-based health workers to provide basic obstetric and neonatal care to women of child-bearing age and their children, and medical care for victims/survivors of sexual violence; document cases of sexual violence and provide treatment and mental-health support for victims/survivors
- set up a system for identifying fistula cases and making referrals to the Keysaney hospital; cover the running costs of the hospital, give it medical equipment and supplies, and organize training sessions for its staff
- provide members of impoverished communities, including victims/survivors of sexual violence, with support (e.g. cash grants, beekeeping kits, fishing tools, skills training) for income-earning activities
- give the Somali Red Crescent Society comprehensive support for developing its staff's ability to identify violations of IHL, including sexual violence and obstruction of health-care delivery

SOUTH SUDAN

The armed clashes in the Equatorias, and the communal violence that persists in many other parts of the country, cause injuries and deaths, destroy property and displace people. Indiscriminate attacks, sexual violence and other unlawful conduct by weapon bearers have been reported. There are few services for victims of sexual violence and other forms of violence, and support for people dealing with the psychological effects of such abuse is also severely lacking.

The ICRC will continue to implement a multidisciplinary approach to addressing the issue of sexual violence related to conflict and other situations of violence in South Sudan. The implementation of this approach will be overseen by a sexual violence operations manager and designated field officers. The ICRC will continue to deepen its understanding of conflict-related sexual violence, monitor the availability of services for victims of violence, help 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 delegation will also carry out community-based, participatory monitoring and evaluation of its activities, with a view to continuously improving ongoing and future initiatives.

The ICRC will pursue its partnership with the South Sudan Red Cross on addressing sexual violence and gender-based violence, under an agreement signed by the two organizations in 2020. It will ensure that its work complements that of local organizations and other actors.

Supporting access to health care

As part of its support for primary-health-care centres in areas that are prone to violence or heavily affected by fighting in the past, the ICRC will supply them with post-exposure prophylaxis medication (adult and children's doses) for victims/survivors of sexual violence, and train their staff to administer these. It will also organize training sessions, on the clinical management of rape cases and basic psychological counselling, for health staff. Similar support will be provided to staff at two ICRC-supported hospitals: the ICRC will help them to expand their capacities in such areas as gynaecology and treatment for rape victims/survivors.

Moreover, the ICRC will urge community leaders and traditional birth attendants to broaden awareness of the importance of seeking preventive care and of the various services available.

The ICRC will seek to refer victims/survivors of sexual violence, especially those who sought support through the means described above or through other ICRC services, for further assistance. For example, it may offer them livelihood support or connect them with other organizations. Cash assistance will be given to victims/survivors of sexual violence, as necessary, to help them meet their daily needs or pay for the services they require.

Contributing to risk mitigation and the prevention of sexual violence

In line with its community-based protection approach, the ICRC will deepen its engagement with violence-affected communities in order to understand their protection-related concerns and coping mechanisms more fully, and to help them develop their own activities to reduce threats to their safety. In partnership with the South Sudan Red Cross, for example, it will engage with community leaders, women groups and others to understand barriers to access to services and factors related to stigma and discrimination.

The ICRC will also work with the authorities and others (e.g. non-governmental organizations, aid agencies, other civil-society groups) to ensure that victims/survivors of sexual violence – among other groups – have access to the assistance they require, including mental-health and psychosocial support. The authorities will be urged to address the needs of victims/survivors of sexual violence without exposing them to stigmatization or other harm; the ICRC will discuss with the interior and health ministries the adverse consequences of requiring health facilities to report cases of sexual violence to the police before treating the victims/survivors.

With a view to preventing the occurrence and/or recurrence of sexual violence and other abuses, the ICRC will remind authorities and weapon bearers on all sides to meet their obligations under IHL, human rights law and other applicable norms on the prevention of sexual violence. The ICRC will seek to broaden public awareness, and influence public opinion and behaviour, in a number of important areas, including the unlawfulness of sexual violence. It will conduct information campaigns – through radio spots and street theatre, for example – to reach as many people as possible with key humanitarian messages and to strengthen support for its neutral, impartial and independent approach to humanitarian action.

The ICRC will also promote the findings of its research studies, on the humanitarian impact of mandatory reporting requirements and on male perceptions of sexual violence. It will share these findings and relevant recommendations to the authorities, members of civil society and with members of the national gender-based violence sub-cluster.

The ICRC will also seek to pay attention to the issue of sexual violence when carrying out activities for people deprived of their freedom.

Plan of action

- through oral and/or written representations, remind authorities and weapon bearers to fulfil their obligations under IHL and other applicable law; organize briefings and workshops for armed groups and other weapon bearers on IHL, international human rights law, and humanitarian principles, and on preventing sexual violence
- convene round tables with officials from the health and interior ministries on the protection-related needs of victims/survivors of sexual violence
- organize round tables with the authorities and other stakeholders, and meetings with communities, to discuss the findings and recommendations of the ICRC's study on male perceptions of sexual violence
- assist victims of violence and give them information on issues related to sexual violence, the rights of victims/survivors and the services available to them; as necessary, refer victims/survivors of sexual violence to other organizations for further assistance
- meet with violence-affected communities to understand the risks and threats that they face, gather their views and suggestions on ways to mitigate these, and inform them of the ICRC's activities; organize workshops on community-based measures to increase their resilience to the effects of violence
- provide health centres with a regular supply of medicines and consumables, financial support for staff incentives, and comprehensive training for health staff; conduct information sessions on the services available to victims of violence, particularly victims/survivors of sexual violence
- train health staff in mental-health and psychosocial support for victims of violence, including 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
- provide the South Sudan Red Cross with material, logistic and financial support, as well as training and on-the-spot coaching to help them address the protection-related concerns of victims of violence, including sexual violence

SUDAN

The ICRC in Sudan will seek to develop its response to sexual violence, with an initial focus on providing victims/survivors with health care and other assistance. It will also pay attention to their protection-related concerns, including those that it may encounter while implementing a joint protection and economic-security initiative to provide people affected by trafficking, and hosted at a safe house, with income support.

Supporting the provision of quality health care

The ICRC will strive to make primary health care more readily available to communities affected by violence, by helping health facilities strengthen their capacities in reproductive, curative and preventive care. It will also facilitate referrals for specialized or further treatment to strengthen the continuum of care for victims/survivors of sexual violence and others. Victims/survivors of sexual violence will also be included in the ICRC's income-support initiatives, which are meant to help conflict-affected households pursue activities that can help them earn or increase their incomes. This support will be dispensed as cash, which gives people the flexibility of choice and stimulates local commerce.

Contributing to people's protection and the mitigation of risks

The ICRC will monitor and analyse the protection-related concerns of people affected by violence, including victims/survivors of sexual violence. It will continue to develop its networks with the relevant stakeholders and actors of influence. For example, it will organize disseminations sessions to help them learn more about IHL and humanitarian principles. Where possible, it will seek to discuss protection concerns, as well as trends, in bilateral and confidential dialogue with the pertinent authorities.

Plan of action

- provide primary-health-care facilities with medical equipment and supplies, and with training, on-the-job mentoring and incentives for staff; donate medical supplies to more centres in case of emergencies
- where needed, facilitate referrals to advanced care for victims/survivors of sexual violence, and cover their expenses for transportation and treatment

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 the framework of its multidisciplinary response to the humanitarian consequences of tribal fighting and communal tensions in Papua New Guinea, the ICRC will strive to provide health services, including mental health and psychosocial support, protection and other forms to victims/survivors of sexual violence while working to prevent the occurrence of such abuse or to help people mitigate their exposure to risk. These activities will be supported by an adviser based in the ICRC regional delegation in Bangkok, Thailand.

Reinforcing the provision of health services

Health facilities in the Highlands of Papua New Guinea will be given comprehensive support to ensure the availability and quality of specialized care for victims/survivors of sexual violence, among the other services they offer. The ICRC will also help health facilities to provide mental-health and psychosocial support at ICRC-supported facilities. More broadly, it will partner with the Papua New Guinea Red Cross Society and work with communities and health staff to raise awareness of mental-health and psychosocial support, with a view to encouraging victims/survivors of sexual violence to seek these services.

Supporting risk mitigation at community level

The ICRC will continue to interact closely with violence-affected people, in order to understand their protection-related needs more fully and respond accordingly, and to help them devise ways to mitigate risks to their safety and reinforce their positive coping mechanisms. The ICRC will also inform them of the humanitarian assistance available to them.

At the same time, the ICRC will continue to draw the attention of the parties concerned to the humanitarian consequences of communal violence. It will urge them again to abide by basic principles of humanity, especially in terms of protecting people from sexual violence and other abuse. It will also remind local authorities to address prevailing needs – particularly of victims of communal violence and victims/survivors of sexual violence – and support their efforts in this regard.

The ICRC will endeavour to promote respect among military, police and security forces in Papua New Guinea for international law enforcement standards, and for international human rights law and other pertinent norms. It will help them to integrate these standards and norms into their training and operations and seek to broaden awareness among them of issues of immediate concern, such as preventing sexual violence. The ICRC will document allegations of abuse and relay these to the authorities and weapon bearers concerned, with a view to ending or preventing such misconduct.

The ICRC will seek to pay attention to the issue of sexual violence when carrying out activities for people deprived of their freedom. Specific issues of concern will be followed up with the pertinent authorities, including the needs of particularly vulnerable detainees, such as children separated from their families, and victims/survivors of sexual violence.

Plan of action

- engage the authorities in dialogue on measures to ensure that civilians are protected and that communities affected by communal violence have access to essential services; bring to their attention documented allegations of unlawful conduct
- through information sessions, dramatic play and other means, impress upon parties to communal violence – including local leaders and fighters – the necessity of respecting basic principles of humanity
- work with leaders and members of communities to implement projects for coping with and mitigating the threat of communal violence and sexual violence
- as part of the ICRC's regular support to health facilities in the Highlands:
 - train health staff in basic emergency care and post-exposure prophylaxis for victims/survivors of sexual violence
 - train and supervise health staff in mental-health and psychosocial support
 - facilitate referrals of victims/survivors of sexual violence to other facilities offering secondary care
 - make repairs at health facilities (family support centres) treating victims/survivors of sexual violence
- with the Papua New Guinea Red Cross Society, train community volunteers to disseminate key messages about mental-health and psychosocial support
- create a community support group for victims/survivors of sexual violence

SYRIAN ARAB REPUBLIC

As the ICRC delegation in Syria continues to develop its efforts to address sexual violence, it will focus on deepening its understanding of the issue and reinforcing the capacities of staff, across different units and teams. It will organize workshops and training sessions for staff members to this end. It will work on improving coordination between different teams and with other actors, including working with them to establish safe referral pathways. This work will benefit from the support of an adviser based at the ICRC delegation in Iraq.

The ICRC will also continue to integrate the prevention of sexual violence and response to its consequences in its broader operations. For example, it will consider the issue of sexual violence when designing and implementing water- and- habitat and income- support activities for violence- affected communities, and when assessing and addressing the needs of families of missing persons. It will also strive to include the issue when discussing with forensic professionals, particularly regarding the extent to which the necessary policies and standards, including for victims/ survivors of sexual violence, are covered in existing medico- legal frameworks. Where possible, it will seek to discuss the necessity of preventing sexual violence during meetings, training sessions and workshops for the authorities and weapon bearers.

In terms of responding to the needs of victims/ survivors of sexual violence the ICRC will seek to facilitate access to health services, especially mental- health and psychosocial care. It will do so by supporting health services in both government- controlled areas and areas controlled by armed groups. To make mental- health and psychosocial support more widely available, it will organize awareness sessions for health staff and community members and provide training to Syrian Arab Red Crescent staff working in ICRC- supported health facilities.

The ICRC will also pay attention to the issue of sexual violence when carrying out activities for people deprived of their freedom, particularly by integrating the issue in its analysis of the situation in places of detention.

Plan of action

- give supplies, including personal protective equipment, training, and other support regularly to health facilities, including several clinics run by the National Society
- offer mental health and psychosocial support to patients at up to ten ICRC- supported health facilities
- organize training in addressing the needs of victims/ survivors of sexual violence for the Syrian Arab Red Crescent's personnel

FINANCE

SPECIAL APPEAL 2022: BUDGET

	BUDGET IN KCHF ⁷
HEADQUARTERS	
Headquarters	187
SELECTED DELEGATIONS	
Bangladesh	499
Caracas (regional) ⁸	443
Central African Republic	1,388
Colombia	1,707
Congo, Democratic Republic of the	10,828
Ethiopia	3,407
Iraq	603
Kuala Lumpur (regional) ⁹	49
Mali	565
Mexico City (regional)	2,824
Nigeria	4,100
Panama City (regional)	144
Philippines	557
Somalia	340
South Sudan	4,979
Sudan	49
Suva (regional) ¹⁰	637
Syrian Arab Republic	1,789
TOTAL	35,093

These budgets are also included in the funding requirements presented in the ICRC's *Appeals 2022*, launched in November 2021.

7. The figures in this document are rounded off and may vary slightly from the amounts presented in other documents.
8. For activities in the Bolivarian Republic of Venezuela
9. For activities in Malaysia and nearby countries
10. 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.¹¹ 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 IHL¹² 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.¹³ Furthermore, rape and other forms of sexual violence in armed conflict amount to serious violations of IHL and thereby constitute war crimes.¹⁴ Sexual violence may also constitute a crime against humanity or an act of genocide.¹⁵ At all times, acts of sexual violence are prohibited by international human rights law and of 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 offenses 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 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 [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, human 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.

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11. For more information, see the [ICRC Strategy on Addressing Sexual Violence 2018–2022](#).
 12. 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.
 13. 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](#); for the practice collected about Rule 93, see http://www.icrc.org/customary-ihl/eng/docs/v2_rul_rule93 (all web addresses were accessed in February 2021).
 14. 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.
 15. Article 6 b) c) d) of the ICC Statute, *op. cit.*; and ad hoc International Criminal Tribunal for Rwanda, *Akayesu* case, Judgement, September 1998; available at <http://unictr.unmict.org/sites/unictr.org/files/case-documents/ictr-96-4/trial-judgements/en/980902.pdf>.

ANNEX II: THE ICRC'S APPROACH AND STRATEGY

In 2013, the ICRC made a four-year commitment to enhance its response to sexual violence, seeking to address the issue in a proactive manner in recognition of the severity of the problem and the fact that it is underreported, even invisible, in many of the contexts the ICRC works in. The ICRC further strengthened its commitment by including sexual violence among the priority issues it seeks to address in its Institutional Strategy, and with the launch of the [ICRC Strategy on Addressing Sexual Violence for 2018–2022](#), in which it clarified its imperative to take a survivor-centred and holistic approach to tackle sexual violence during armed conflict and other situations of violence and in detention settings. In 2022, the ICRC decided to extend the strategy on sexual violence until 2024, while assessing the progress achieved thus far.

On the assumption that sexual violence occurs in all the contexts in which it operates and that sexual violence and other forms of gender-based violence are exacerbated by conflict and other crises, the ICRC acts proactively to respond to it. 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. This is aligned with the people-centred approach prescribed by the ICRC's Institutional Strategy 2019–2024, in which the organization reiterates its commitment to putting people at the centre of its action, by recognizing and respecting that “communities affected are experts on their own situation, first responders and agents of change”. This commitment reflects a shift in power that recognizes, facilitates and promotes people's agency to define their own needs, priorities, their solutions and to participate meaningfully in all stages of the response to ensure more effective programming. This alignment between the ICRC's approach to sexual violence and its overall approach to humanitarian action is crucial to increasing the impact and sustainability of its activities to prevent sexual violence and mitigate and respond to its effects. 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 social power analysis and its ability to disaggregate data by sex, age and disability.

Consistent with how it carries out all of its activities, the ICRC strives to uphold the “do no harm” principle when addressing sexual violence. 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 risks of sexual and gender-based

violence 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. 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.

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.

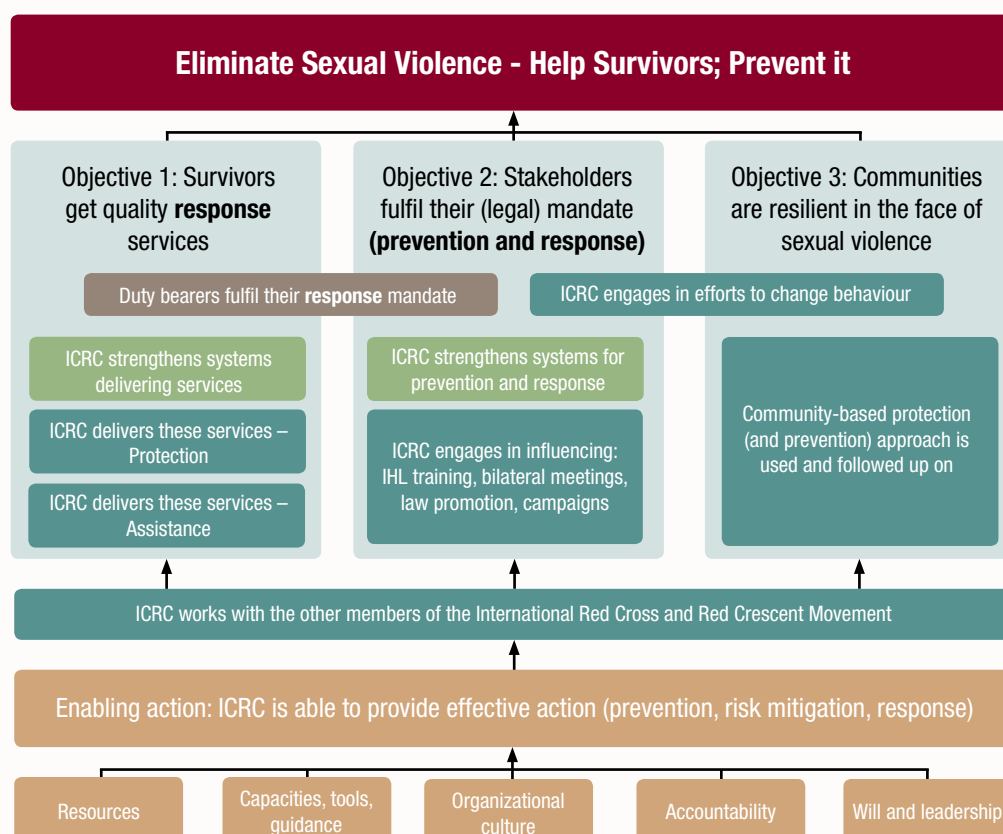
These four operational considerations for engagement are:

- 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.

These considerations are applicable only to circumstances outside places of detention. 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.

THEORY OF CHANGE SUMMARY: STRATEGY AND ENABLING ACTIONS



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 does 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 populations affected or directed at actors of influence; and the means needed to work with or in coordination with Movement partners.

Contributions for 2022 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 present 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 Donors¹⁶ 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:

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



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