



**Ending Mass Rape in the
Democratic Republic of Congo:
The Role of the International Community**

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Introduction

The Democratic Republic of Congo (DRC) is one of the world's poorest countries. It is ranked 168 out of 177 countries on the UN's Human Development Index ¹, has an average life expectancy of 43 and one of the worst records on gender equity anywhere in the world ².

These challenges notwithstanding, the DRC is in an era of unprecedented hope. The destructive international wars that killed an estimated four million people ³--the highest death rate since World War Two ⁴--have been brought to an end and a United Nations peacekeeping force (MONUC) brought in. The one-party rule of President Mobutu - a name synonymous with corruption ⁵ and mismanagement ⁶ - has ended, and a democratically elected government, led by President Kabila, put in place. Aid is flowing into the country, debt cancellation through the Highly Indebted Poor Countries Initiative is expected in 2008 and the economy is growing at roughly 6% per annum ⁷. With considerable minerals and precious metals, and a resourceful and resilient population, the DRC is well equipped for future development.

Despite recent progress, all is not well. Human rights abuses are still widespread in the volatile and lawless Eastern region of the country, in particular in the province of South Kivu where this report is focused. One of the most shocking forms of abuse is the sexual violence routinely perpetrated against women and children as young as three and as old as 75 ⁸. The violence is shocking both in its frequency - with an average of 45 rapes reported a day in South Kivu alone - and in its brutality.

Sexual violence is closely linked to the armed groups operating in South Kivu, in particular a group known as the FDLR (Rwandan Liberation Democratic Forces) - many of which have links with the Rwandan genocide of 1994. Yet sexual violence is also perpetrated by civilians and by those who are supposed to be protecting them. Members of the Congolese army and police have been found guilty of abusing the innocent people they were supposed to protect.

Creating a lasting peace agreement and demobilising armed groups is a crucial step in ending sexual violence. But it is not the solution in its entirety. Women in the DRC will never truly be at peace until the culture of impunity is ended. They will never have genuine security until they have a say in the institutions responsible for making the rules and signing the peace agreements in their name. As Sister Josephine Zihahirwa from SCIAF partner CDJP (the Diocesan Peace and Justice Commission) argues, the problem of sexual violence is 'not only a problem of peace; it is also a problem of justice' - and needs to be tackled on both these levels simultaneously. Various actors in the DRC - survivors of sexual violence, civil society, local and national government - are starting to do just that, but the scale of the task is immense and the resources available miniscule.

Long suffering communities in the DRC are looking to the UK government, and to the international community as a whole, for help and support at this crucial period in their history. We must not let them down.

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Chapter 1

The extent of sexual violence in South Kivu

The crisis of sexual violence in the Eastern DRC, and in South Kivu in particular, is without precedent. Yakin Erturk, the UN special Rapporteur on violence against women, its causes and consequences, has noted that 'the situation in South Kivu is the worst crisis of violence against women that I have so far encountered'⁹. The UN Emergency Relief Coordinator, John Holmes, notes that sexual violence in the Congo is 'the worst in the world'¹⁰ and that the levels and brutality of violence against women are 'almost unimaginable'¹¹. Men and young boys are also victims of sexual violence, but this report focuses on the experience of women and girls, who constitute over 99% of cases recorded in South Kivu¹².

Sifa Mudekeneza knows the reality of sexual violence all too well. The FDLR took Sifa from her home, a village outside Walungu, when she was 14 and held her captive in the forest. During this time, she was beaten repeatedly on her arms, thighs and her face, forced to 'be the wife' of one of the men and eventually became pregnant. After five months she managed to escape by walking through the forest for three days.

Following the attack, Sifa no longer felt safe. She decided to stay with her uncle and aunt in Bukavu (the capital of South Kivu). Yet shortly after her arrival, her uncle's house was burgled. During the course of the burglary, Sifa and her aunt were raped by several men. Sifa contracted HIV/AIDS and became pregnant for the second time. She is too afraid to return to her village – the FDLR continues to threaten her and has burnt down her house. She now lives with her son, Pascal, and her daughter, Pascaline, in a different village.¹³

Kanga Mushagalusa, from Bukavu, is 15 and studying to become a doctor. She was only nine when she was raped by a friend of the family. Kanga showed considerable bravery and worked with SCIAF partners AJV (Judicial Support for Survivors of Gender Based Violence) to press charges against her attacker. It was a long drawn out legal process and she had to face her attacker in court twice. Despite her bravery, he is still at large and living in the neighbourhood. When asked how she feels about this, Kanga just shrugs and says 'That's Congo justice.'¹⁴

The experiences of Sifa and Kanga are far from isolated incidents. 4,066 cases of sexual and gender-based violence were recorded between January and March 2008 in South Kivu alone – the equivalent of 45 rapes a day¹⁵.

Attempts at comparisons with South Kivu and Scotland are fraught with difficulties¹⁶. The number of reported rapes or attempted rapes in Scotland in a year is 1,123, compared to 4,066 cases of sexual and gender based violence in three

months in South Kivu alone. It should also be remembered that South Kivu's population is just a third of that of Scotland¹⁷. These statistics are only the tip of the iceberg, as many women never report attacks. The real figure is undoubtedly much higher; in the Shabunda region of South Kivu, it is estimated that 70% of the female population have been raped¹⁸.

Sexual violence has long-lasting emotional, physical and practical consequences for the individuals violated. Medical needs are urgent: 20% of survivors are left with permanent damage to their genital organs¹⁹ and many others are left with sexually transmitted diseases including HIV/AIDS. Pregnancies as a result of rape are also common.

Survivors of sexual violence have complex psychological needs. All have faced brutal attacks, many with horrifying levels of violence. Many are children — it is estimated that 50% of the victims are under 18²⁰ — and are rejected by their families. Survivors urgently need economic assistance to help them reintegrate into their communities or make a living in new surroundings, and have expressed a strong desire for justice and a preference for using the formal Congolese justice system as opposed to informal, traditional justice systems. One survivor interviewed for the report said that:

'I feel like I'm losing my mind. How can I forgive when I am unable to make a living, when I am unable to feed and to educate my child? The men should be arrested and sentenced.'

Another survivor said that:

*'No-one will ask me to marry them as everyone knows what has happened to me, everyone mocks me for having been raped by the Interahamwe. My life has been destroyed.'*²¹

The sexual violence that these women and children experience also has severe socio-economic consequences for entire communities in Eastern DRC. As Sister Josephine Zihahirwa from SCIAF partner CDJP notes, 'everyone is a victim of sexual violence, directly or indirectly'.

Women's groups argue that sexual violence in the DRC is being used as a military tactic, and the UN Security Council has classified it as a 'tactic of war.'²² Sexual violence is a highly effective way for illegal armed groups to humiliate, oppress and destroy communities. Children are left deeply traumatised after witnessing attacks on their parents and may have no-one to care for and protect them; rape survivors are rejected by their husbands, shunned by the community and are often forced out of the area; women are often rendered infertile or become pregnant as a result of rape.

Sexual violence also further compounds the poverty which rural communities suffer. Women’s work is essential to rural economies in the DRC; 70% of people involved in agricultural production in the Kivus are women and 90% of market traders are female ²³.

Survivors of sexual violence are often physically unable to carry out the roles they previously took on, such as collecting firewood and drinking water, and providing food for their family. Women and girls who have not experienced sexual violence live in constant fear that they might be next. This deters them from rearing animals in the fields, from planting crops and from taking their produce to market. Many women walk hours out of their way in an attempt to minimise the risk of sexual violence; many more decide not to make the journey at all. Children’s education is also suffering because women are too scared to walk their children to school and because children who have been raped often leave formal education at an early age due to their sense of shame and abuse from other children. As the UN’s General Assembly has noted, violence against women not only impedes their psychological development. It also *‘impedes the social and economic development of communities and states, as well as the achievement of the Millennium Development Goals.’* ²⁴

Sexual violence is not simply a consequence of conflict; it also helps to maintain and prolong conflict. The deeply intimate nature of the violence affects not only the women violated, but also weakens and destroys community bonds. Sexual violence provokes tension within and between communities and leaves behind long lasting fear and suspicion. The particular nature of the violence prolongs conflict, complicates the peace process and makes reconciliation work even more difficult.

The consequences of rape and sexual violence thus go beyond the individuals who have been violated. Sexual violence must be tackled as a matter of urgency if women are to have the security they deserve and if communities in South Kivu are to be able to benefit from the growth being seen in the DRC as a whole.

The story of Aimerance Chibalonza

My name is Aimerance Chibalonza and I live in a village near Walungu town in South Kivu. I was married when I was 16, to my husband Moushagalusa. I gave birth to my first child a year later. By the time I was 23, we had seven children together.

Two months after the birth of our seventh child, six members of the FDLR came and attacked the village in the middle of the night. My husband gave them all the money he had but it was not enough. They attacked my children, and threw my two month old baby onto the ground.

They tied my husband to a tree. They dragged me and my father-in-law outside, stripped me naked and demanded that I have sex with him. When I refused they stabbed me on my stomach and my arms – you can still see the scars today. Eventually I had to give in. My husband asked to be killed so that he didn’t have to see. The FDLR tortured him and cut his arms with a machete, but they left him alive so he had to watch. Afterwards, the FDLR divided into two groups. Some took my husband, my father-in-law and my two eldest children, ‘Thank You’ and ‘Je T’aime’, away from the village. They killed them all; they made my father-in-law step on a landmine. They decapitated my husband and put his head in a tree for the village to see.

The others took me into the forest and enslaved me for a year. They raped me repeatedly and beat me so badly that I still have stomach injuries to this day. They cooked food for me and the other captives using water mixed with urine. If anyone refused to eat, they would be hit with sticks covered in faeces, and if they still refused, they killed them with a machine gun. I was forced to dig mass graves for the people they killed.

Eventually I managed to escape and made my way to the Panzi hospital in Bukavu, where I was given medical treatment and clothes. Today I am living back in Izegea village. I have been given counselling by (SCIAF partners) CDJP but I still feel sad when I remember how my life was before the attack, how happy we were. Nowadays I am hungry, I can’t give my children the food that they need and I can’t send them to school ²⁵.



Aimerance Chibalonza at CDJP listening centre, Walungu

Chapter 2

Causes of sexual violence in South Kivu

Sexual violence in the DRC flourishes because of a set of interrelated but separate factors. The existence of active armed groups on the one hand, and a weak state on the other, have combined with patriarchal attitudes in Congolese society to produce a culture of impunity where rape goes unchallenged and unpunished. Sexual violence is increasingly seen as an acceptable way to settle conflicts that arise in everyday life and, like a contagious disease, its use is spreading from armed groups to the Congolese army, police force and citizens.

The role of armed groups

The role of armed groups is crucial in understanding sexual violence; in 2007, 70% of rapes in South Kivu were committed by non-state groups²⁶. There are over 20 different armed groups in the Kivus, and many of these groups commit sexual attacks and other human rights violations. MONUC has reported on cases of sexual violence committed by the local Congolese defence forces known as the Mai-Mai²⁷ and by the forces of General Nkunda²⁸.

However, the largest armed group in both North and South Kivu — and the one most heavily involved in sexual violence — is the FDLR. The establishment of this group in the Congo can be traced back to the Rwandan genocide of 1994 when over one million people fled over the border to South and North Kivu²⁹. Many of these people were innocent refugees — but a significant proportion of them had participated in the genocide. Today the FDLR is estimated to consist of 7,000 – 9,000 men³⁰ and is comprised of three components: Rwandan nationals implicated in the genocide, commonly referred to as the Interahamwe; Rwandan nationals with no involvement in the genocide; and Congolese citizens, who are estimated to account for 30% of the total³¹.

Women's groups agree that widespread rape and sexual violence dramatically increased following the arrival of the FDLR in 1994, and that this group commits the greatest number of sexual attacks in South Kivu. The UN Independent Expert on Violence Against Women found that 'the FDLR and its various factions are major perpetrators of rape in South Kivu'³². Statistics are notoriously unreliable but tend towards the same trend; 90% of victims accessing CDJP listening centres in 2006 have identified the FDLR as the perpetrators³³; 88% of cases dealt with by Centre Olami between 2002-2007 were identified as being committed by 'Rwandan Hutu' armed groups³⁴.

Creating peace in the East is an essential part of the solution to sexual violence. But it is not the solution in its entirety.

The role of the state

Armed groups are only one part of the problem, and the role of the state in South Kivu is also problematic. South Kivu has never been under the authority of the Congolese state — partly due to its distance from Kinshasa, partly due to its historical occupation by various international and national armed groups — and President Kabila's democratically elected government now faces a massive challenge in fulfilling the state's core obligation to protect its population from human rights abuses and to provide them with access to justice.

The police and army are often unable to protect citizens from human rights abuses and some officers commit atrocities themselves. 16% of rapes reported in South Kivu in 2007 were carried out by members of the Congolese army and police force³⁵, and police and army officials often deliberately obstruct investigations and shield their subordinates from arrest.

Even when the state is not directly implicated in sexual violence and other human rights abuses, it is unable to prevent human rights violations of its citizens by non-state actors. It has been unable to prevent sexual violence being committed by the FDLR and other armed groups and it has seen an increase in the number of rapes committed by civilians. Moreover, despite the positive reforms made to the law on sexual violence in 2006, the Congolese government is struggling to provide access to justice for those whose rights have been violated. The justice system is severely underfunded — in 2007 it was awarded just 0.3% of the national budget³⁶ — and this causes multiple problems for survivors of sexual violence.

The state is unable to provide free legal services for complainants and only 7% of women who want legal assistance are able to obtain it³⁷. Even when women manage to obtain legal counsel, they are faced with multiple barriers to justice. It is almost impossible for the police to locate and arrest members of armed groups due to security concerns and capacity constraints, whilst cases against civilians or members of the Congolese security forces are often dropped due to a variety of factors including political interference.

a problem of justice'

Courts are ill-equipped, are few and far between and have too few staff to be able to handle cases quickly and effectively. For example, South Kivu has one military court, two military tribunals and one military magistrate. The magistrate has to try 22 cases in 10 days and when he is on annual leave, both tribunals have to shut ³⁸. Complainants also face a series of court fees — both legal and illegal — and there are few incentives for women to bring cases. If successful, complainants are expected to contribute towards enforcement costs (£150 on average ³⁹), don't receive any compensation and often see their attacker walk free.

These factors all combine to undermine confidence in the justice system and to create a culture of impunity. Between January 2005 and July 2007, over 31,700 cases of sexual violence were recorded in South Kivu alone ⁴⁰. Less than 1% of these cases were reported to the judicial authorities; and less than 0.2% were brought to court ⁴¹. Of the total cases reported, just over 0.1% result in a conviction. The real figure is much lower than this, as many cases go unreported.

Rape is seldom punished and is increasingly regarded as an everyday occurrence. In 2007, 14% of rapes reported in South Kivu in 2007 were committed by civilians ⁴². Civilians are responsible for 74% of sexual violence cases reported in Fizi and 70% of sexual violence cases reported in Shabunda in January to March 2008 ⁴³.

Thus, the problem of sexual violence in the DRC is linked to a lack of peace and a lack of justice. Until solutions are found to both of these problems, the physical and emotional torture of women, girls and entire communities will continue unabated.



Villagers in Mukongola, South Kivu.

Chapter 3

How the international community can support survivors to rebuild their lives

The scale and complexity of sexual violence in the DRC necessitates a response on multiple levels. Political support, military support (through the UN peacekeeping force MONUC) and financial support must all form key parts of the solution – and this section sets out recommendations for the international community, including the UK government, in each of these key areas.

Congolese civil society is trying to tackle the causes of sexual violence and to minimise its impact, and the Congolese government is starting to take the issue more seriously — but their efforts have not put an end to the problem. Survivors of sexual violence are now looking to the international community to do more to help them in their plight. The UK government, the UN and the international community are already making some attempts to tackle sexual violence and the problem of armed groups in the East and should be commended for this. However, their efforts need to be redoubled if the women of South Kivu are at last to have the peace and security to which they are entitled.

The UK is well positioned to exert influence in this regard. The UK government is committed to ending sexual violence and to promoting women's participation and has made many helpful interventions in this respect. The UK government also holds a number of influential positions: it is a permanent member of the UN Security Council, a highly influential member of the EU and has representatives in Kinshasa and Kigali. The Foreign and Commonwealth Office (FCO) also has a representative in Goma, North Kivu, who is a member of the international facilitation team set up by the international community to provide support, accompaniment and international backing to the peace process. The Department for International Development (DFID) is an important player in the region; it is the second largest bilateral funder to the DRC and the largest bilateral aid donor in neighbouring Rwanda⁴⁴. It must ensure that it uses this influence to maximum effect.

Political support

One key way for the international community and UK government to tackle the problem of sexual violence is through using their political influence.

The international community has actively supported several recent attempts to use diplomacy to deal with the problem of armed groups in the Kivus. In November 2007, the DRC and Rwandan government agreed on a series of measures

to deal with the presence of armed groups in the Kivus, with particular reference to the FDLR and the forces of Laurent Nkunda (the Nairobi Communiqué). In January 2008, a series of agreements was reached between the DRC government and over 17 armed groups operating in the Kivus (with the exception of the FDLR), including an immediate ceasefire and eventual disarmament. These agreements were known as the Goma Acts of Engagement, and a government peace programme known as the 'Amani Programme' has been established to turn the commitments made at the Goma Conference into reality.

These diplomatic initiatives are essential for long term peace in the region and the agreements reached to date are a key step forward. The Congolese and Rwandan governments have made serious and far-reaching commitments and are increasingly demonstrating the political will necessary to make these commitments a reality and to deliver peace in the region⁴⁵.

Yet both democratically elected administrations face significant constituencies who believe that changing the status quo in the ways outlined in the Nairobi Communiqué — and other negotiated documents — is not in the national interest. It has been argued that certain elements have engaged in economic activities with the FDLR⁴⁶ and some voices argue that the Congolese state benefits strategically from their presence. There has been some evidence to suggest links between members of the Congolese army and the FDLR⁴⁷, including collaboration against the forces of Laurent Nkunda⁴⁸, whom many perceive to have Rwandan backing⁴⁹. There is a serious question mark about the ability of the Congolese army to defeat the FDLR.

Some elements within Rwanda argue that, as long as the FDLR remains active on its border, Rwanda has a powerful strategic reason to ensure the survival of Laurent Nkunda's forces who can counter-balance its military power. Some argue that Rwanda also stands to benefit economically from the continued insecurity and the lack of state presence in the East. Rwanda received considerable economic benefit from the DRC's natural resources during the war⁵⁰, and many argue it continues to benefit from fraudulent mineral exports to this day.⁵¹

In more detail: Goma Acts of Engagement and the Amani Programme

In January 2008, armed groups in North and South Kivu signed a document known as the Goma Act of Engagement. The FDLR was excluded but other key groups — including Mai-Mai groups, the FRF and the forces of Laurent Nkunda — agreed to respect human rights, to observe a ceasefire and to disarm and either be integrated into the Congolese army or reinserted into civilian life in the DRC. The government agreed to the return of Congolese refugees living in Rwanda and elsewhere and agreed to give militia members amnesty for having committed insurgency – but not for committing war crimes, crimes against humanity and genocide ⁵⁹.

Many of the fine details were postponed, to be dealt with by the newly created government peace process, the Amani Programme, and to four specialised commissions set up within it. Although the Amani Programme was formally set up in April 2008, it is not yet fully operational and it is therefore difficult to assess the extent of participation by women, women's groups and civil society. Yet it would appear that the Amani Programme, as currently constituted, has insufficient space for participation by these crucial actors. There are two observatories which have been set up for civil society to monitor the activities of the mixed technical commissions, but there is insufficient participation in the key decision making structures themselves.

For example, the Mixed Technical Commission on Peace and Security deals with issues of crucial importance for survivors of sexual violence and for civilian population including;

- specifying terms and conditions for reinsertion of ex-combatants into the army;
- setting timetables for demobilisation and disarmament;
- dealing with issues around reinsertion of ex-combatants into local communities;
- deployment of MONUC troops to protect civilians; issues around refugees and internally displaced people ⁶⁰.

However, the composition of the Commission includes representatives from armed groups, the Congolese government and international backers – but no representatives from civil society or from women's groups. Similarly the Amani Programme's Steering Committee is comprised only of officials from government ministries and the National Co-ordinator of the Amani Programme. There is limited opportunity for civil society voices to be heard at the highest level ⁶¹.

This may be no more than a temporary oversight — but it is crucial that it is rectified as soon as possible and that the participation of women's groups and of civil society is as extensive and meaningful as possible. The appointment of representatives on key decision making structures is a pre-requisite for genuine participation – but it is not always sufficient to ensure that their voices and interests are genuinely taken on board. Therefore other methods of participation should also be sought and an independent special advisor on human rights for Eastern DRC should be appointed, to ensure that the interests of civilians are heard at the highest level.

It is also crucial that the international community works with the DRC government to ensure adequate funding is available for the Amani programme. This may involve working with the DRC government to design a feasible budget, or it may mean overcoming delays in dispersing funds.

There is also concern about voluntary repatriation of the FDLR back to Rwanda. Rwanda is already densely populated and the influx of a significant number of ex-combatants — many of whom have been linked with the Rwandan genocide — could only add to these existing pressures and social tensions.

At this crucial moment in time, both countries need the encouragement and support of the international community to ensure that the more progressive, far-sighted positions in the debate continue to prevail. The international community also has a crucial role in working with the governments of Rwanda and the DRC to help them resolve the serious flaws in the peace process that do exist, in particular the lack of meaningful female participation and representation.

UN Security Council Resolution 1325, adopted in 2000, emphasises the 'importance of involving women in all peacekeeping and peace-building measures' and gives state a duty to 'ensure increased representation of women... (in all) mechanisms for the prevention, management, and resolution of conflict.' Security Council Resolution 1820, adopted in June 2008, further states that women should have 'equal participation and full involvement in all efforts for the maintenance and promotion of peace and security' and makes particular reference to their involvement in demobilisation, disarmament and reintegration processes. It also specifies that they must have 'equal and full participation... at decision making levels'. The European Parliament has also adopted a resolution echoing these themes, calling to EU member states to 'promote equal participation of women in diplomatic conflict resolution and reconstruction initiatives at all levels'⁵².

Women's groups are still waiting for these words to be turned into practice. As Venantie Bisimwa Nabintu, Executive Secretary of women's organisation RFPD (Réseau des Femmes pour la Défense des Droits et la Paix) notes, 'there will be no peace without respect for women's rights. Despite the peace programme, violence continues in Shabunda, in Kaniola. If we want to build peace, we must involve women in the processes of conflict resolution.'⁵³ The danger is that agreements reached without adequate consultation with women will not take into account their particular concerns, nor lead to improvements in their personal security.

Indeed, despite various peace conferences, there has been no noticeable reduction in sexual violence in South Kivu. If anything, the problem has worsened; the UN Secretary General reports that sexual violence is increasing throughout South Kivu as a whole⁵⁴. There are also indications that the security situation as a whole is deteriorating. Armed groups such as Laurent Nkunda's forces and a Tutsi based militia group known as FRF have been continuing recruitment in an effort to bolster their position in the on-going negotiations⁵⁵. The peace process has also created incentives for dormant and largely inactive armed groups to restart in an attempt to get a share of the spoils⁵⁶.

If peace agreements are to result in real improvements in women's security, women and civil society must be adequately represented in the Amani Programme and in efforts to assess and monitor the Nairobi agreement. It is also important that civilians in both North and South Kivu are adequately represented in these arrangements, as the situation in the two provinces differs quite dramatically. Much attention has focused on North Kivu because of the presence of General Nkunda, and it is important that South Kivu is adequately represented.

SCIAF also believes there is merit in appointing a special adviser on human rights for Eastern DRC to further ensure that human rights concerns are central to the peace discussions. This post would not have to be a UN appointment but could be made by the Head of the Amani Programme, Father Malu Malu, in conjunction with representatives of the international community who are supporting these agreements. With an appropriate mandate and adequate resources, this would help to fill the gap left by the UN Human Rights Council's decision to abolish the independent expert on the situation of human rights in the DRC in March 2008. It would also provide a source of support and expertise to help parties implement their commitment to protect human rights, made under the Goma Act of Engagement. It could also help to focus attention and action on protecting civilians at risk and provide an additional way for civilians' viewpoints and concerns to be heard at the highest level of peace negotiations.

In more detail: The Nairobi Communiqué

In the Nairobi Communiqué, signed in November 2007, the Congolese government, supported by MONUC agreed to design and implement a plan for disarming and neutralising the FDLR by voluntarily measures initially, but by force if necessary. In return, the Rwandan government agreed to refrain from supporting armed groups operating in the DRC and to facilitate the return of those members of the FDLR not wanted for genocide or war crimes⁵⁷. The international community played an important facilitating role and continues to be engaged through a 'joint monitoring mechanism'. These agreements were important steps forward and both countries have taken positive steps towards implementing their commitments. These efforts are starting to see results; the number of combatants repatriated voluntarily between January and mid-May 2008 rose by 25% compared to the same period last year⁵⁸.

However, implementation of the Nairobi Agreement has not been plain sailing. Given the potential for a climate of distrust developing, SCIAF recommends that the international community should engage with the Rwandan and DRC governments to help them build upon their demonstrated commitment to the Nairobi Agreement by, for example:

- the DRC intensifying its efforts to encourage the FDLR to voluntarily disarm, and to strengthen its targeting of Congolese elements in the FDLR.
- Rwanda issuing a revised list of people in the DRC wanted in connection with the genocide. This will help encourage members of the FDLR with no involvement in the genocide to return to Rwanda without fear of prosecution for crimes they didn't commit.
- the international community helping to foster an inter-Rwandan dialogue between the Rwandan government and the FDLR to encourage voluntary repatriation.
- both governments being supported in their commitments to refrain from aiding and abetting armed groups.

In line with Resolution 1325 the international community should ensure that women's groups and survivors of SGBV are represented in the Nairobi Joint Monitoring Mechanism.



Survivors of sexual violence in CDDJ listening centre.

Peacekeeping support: the role of MONUC

Another key way for the international community and UK government to tackle the problem of sexual violence is through their support of the UN peacekeeping force, MONUC. MONUC is the world's largest peacekeeping force with over 17,000 personnel and has been present in the DRC since 1999⁶². Over this time, sexual violence against women has continued unabated and some MONUC peacekeepers have themselves been found guilty of sexual exploitation and abuse⁶³.

These serious criticisms notwithstanding, MONUC has an important role to play in South Kivu, and a strong mandate to protect civilians⁶⁴. It is authorised not simply to respond to attacks, but to take proactive measures to actively deter, pre-empt and prevent attacks on civilians. The mandate also contains specific references to sexual and gender based violence and a Senior Advisor has been appointed to put in place a mission-wide strategy for dealing with this issue⁶⁵.

In addition to these duties, MONUC also has a duty to help the Congolese army with the process of demobilising and disarming armed groups. This process is crucial to achieving long term peace in the region and it is right that MONUC should play a supporting role. However, there is an inherent tension between MONUC's duty to protect citizens on the one hand and, on the other, to help disarm militias and fulfil several other additional duties mandated by the Nairobi and Goma Agreements⁶⁶. The Secretary-General of the UN⁶⁷ has noted that 'current force levels do not reflect the critical role MONUC is expected to play under the Goma and Nairobi processes... (and these agreements) are generating additional demands on MONUC resources'⁶⁸. It is crucial that these additional duties do not detract from MONUC's core task of protecting civilians.

It is also crucial that MONUC forces are not withdrawn prematurely. The current mandate expires at the end of 2008 but it is crucial that withdrawal is linked not to arbitrary dates but is linked with genuine progress in stability and human security. In a positive development, the UN Secretary General has set out three preconditions that need to be fulfilled before MONUC withdrawal can be discussed⁶⁹. He has also identified benchmarks to help assess progress towards achieving a stable security environment in the East⁷⁰. Progress towards these benchmarks will be used to help determine the speed of MONUC withdrawal.

However, the issue of sexual and gender based violence is not explicitly mentioned in either the preconditions or in the benchmarks. Given the Secretary-General's personal commitment to ending violence against women and the UN's organisational commitment to treat sexual violence as a security issue, this a surprising omission. Sexual violence is more hidden than other forms of violence against civilians and has had a long history of falling under the radar of security institutions. It is therefore all the more important that it is taken into account when discussing MONUC's withdrawal. If progress has been made in many areas, but women still experience sexual violence at the hands of non-civilian actors, they cannot be said to have true security. The UN Secretary General has committed to setting out indicators to measure progress in each of these benchmarks⁷¹. A decrease in sexual violence committed by non-civilian agents must be included in these indicators and sexual violence should be flagged up as a benchmark in its own right.



A police officer and a pregnant woman stop for a chat in Bukavu

Financial Support

Another key way for the international community and UK government to tackle the problem of sexual violence is through financial support. The UK government is the second largest donor in the DRC spending £74.5 million in 2007-8⁷² — and funds a variety of positive initiatives with this money. However, whilst some of its planned activities will provide help to survivors of sexual violence indirectly, only a small amount is currently set aside to help survivors directly. £2 million is being spent on helping women and survivors of sexual violence receive access to justice, and an undisclosed amount will be spent on training the police in sexual and gender based violence in the future⁷³.

SCIAF is already working with local partners to help survivors of sexual violence (see box on page 17) but our contribution is limited. We believe that the problem of sexual violence merits much greater funding from DFID, for several reasons. First, the degree of unmet need is shocking. Nationwide, 30% of survivors who report the attacks do not get medical assistance and 27% do not receive any psycho-social assistance. 86% do not receive any help with reintegration into their local communities and 93% of women who would like to take legal action do not receive any judicial support⁷⁴.

Second, as existing efforts to educate and raise awareness in local communities bear fruit, and the taboo and stigma around rape decreases, there is likely to be an increase in the percentage of women who choose to report sexual violence. It is important that services are in place to deal with this increased demand. Better services could also act as an incentive for even more survivors to come forward and report the attacks, further breaking the conspiracy of silence around this issue.

Third, combating sexual violence fits with DFID's stated aims and objectives for the DRC to create a peace dividend — so that even the poorest people feel they have gained from the elections and peace — and reduce the negative impacts of violent conflict⁷⁵. Tackling the problem of sexual and gender based violence is integral to the achievement of both of these objectives. Sexual violence is one of the most powerful, damaging, long-lasting ways in which violent conflict impacts upon individuals and society as a whole. A programme that deals with the impact of conflict but does not deal with the impact of sexual violence is missing an integral dimension. Moreover women, in particular survivors of sexual violence, account for a large proportion of the poorest people in the DRC and have a history of being marginalised and ignored by society as a whole. If the benefits of peace and democracy are to be felt across Congolese society as a whole, women — in particular survivors — must benefit from the peace dividend in tangible ways and must feel that they have a stake in Congo's peaceful, democratic future.

Fourth, increased funding by DFID would not only bring practical benefits. It would send a powerful diplomatic signal — both to the Congolese government and to the international donor community — about the importance of tackling SGBV. With aid and debt relief to the DRC through

the World Bank and IMF Highly Indebted Poor Countries Initiative expected to increase dramatically over the coming years, and with local elections expected in 2009, this signal could not be more timely.

For all these reasons, SCIAF recommends that DFID should work with co-ordinating structures in country to scale up its assistance to SGBV. Without pre-empting that discussion, SCIAF research has shown a particular need for funding in the following areas:

Scaling up medical provision in rural areas

Medical provision in rural health centres and hospitals is insufficient. Many health centres lack the drugs necessary to prevent the transmission of HIV/AIDS and other sexually transmitted infections, while rural hospitals lack the equipment and training to perform even the most simple of operations (see case study overleaf). Survivors who require anything other than the most basic of treatment have to travel to Bukavu — but women who have already travelled long distances whilst physically and emotionally fragile are understandably reluctant to travel even further. Often women are suffering from severe injuries; internal wounds and tears, chronic infections and fistula (a condition where the vagina has become linked to the bladder and / or rectum causing urinary and rectal incontinence) which makes walking almost impossible. Often the journey entails passing through areas of insecurity, heightening the risk that women will be attacked once more. The whole experience risks exacerbating the stigma that women suffer, heightening their sense of exclusion from the community and making reintegration more problematic. More services need to be available locally⁷⁶.

DFID has already earmarked money to be spent on improving the health system in the DRC by providing free access to medical services in 20 health zones⁷⁷. User fees are certainly a barrier to access in many cases. Yet often survivors are unable to access services not because of financial constraints, but because the necessary services are simply not available in their local area. DFID and other donors should not only consider providing existing services free, but should also look at expanding the services that are available for survivors of sexual violence where they are most needed. As a first step, DFID could look at increasing services available to SGBV survivors in the 20 health centres that it has already earmarked for interventions⁷⁸.

Medical treatment: a case study of Kaniola district hospital

Medical facilities in South Kivu are not equipped to deal with sexual violence. For example, the risk of contracting HIV/AIDS as a result of rape is reduced if women receive post-exposure prophylaxis (PEP) treatment within 72 hours of the rape occurring. However, UNFPA, which co-ordinates the medical response to sexual violence in South Kivu, can only provide the necessary medical equipment to 30% of health centres in South Kivu.

Doctors at Kaniola district hospital explain that patients have to walk up to 34 kilometres to reach them and often by the time they arrive, it is too late for emergency treatment. Kaniola hospital is unable to provide anti-retroviral drugs to help combat HIV/AIDS, and doctors are also unable to provide surgery for women with internal complications. Kaniola hospital lacks x-ray equipment and lights for surgery, and medical staff lack the necessary training. This means that women with conditions that are relatively simple to treat have to be referred to Bukavu for treatment. Local health centres, which are many women's first port of call, lack emergency PEP treatment to help prevent HIV/AIDS and in many cases lack even HIV testing kits.

The lack of facilities is a constant source of frustration for all the medical professionals interviewed for this research. A particular source of annoyance for medical staff is their inability to treat fistula: doctors consider the surgical procedure to be relatively straightforward and urgently want training to allow them to perform surgery themselves – yet without external funding, are unable to do so. The consensus was that medical services urgently need to be scaled up to allow women to receive good quality treatment in their local area ⁷⁹.



Patients outside the health centre in Ludaha

Increased psycho-social support

The emotional consequences of sexual violence vary from one individual to the next, but include: post-traumatic stress disorder, depression, social phobias, anxiety, and suicidal tendencies. The likelihood of such reactions is heightened in a conflict situation such as the DRC and high quality, long term psychological assistance is crucially important.

But existing structures are failing to provide adequate psycho-social services for all survivors of sexual violence. Facilities offered by health centres are insufficient; the Chief Medical Officer at one such health centre, Ludaha, explained that only one of their four nurses is trained in counselling and due to pressures of work, can only spend 20 minutes with individual victims ⁸⁰. NGOs are trying to fill the gap but are similarly struggling to cope with demand. SCIAF partner CDJP opened a 'listening centre' in Walungu and were so overwhelmed with demand that they have opened two more ⁸¹.

It is not only survivors of sexual violence who need psychological assistance. In little more than a decade, the population of Eastern DRC has seen two international wars fought on its territory and experienced ongoing violence even in periods of supposed peace. Countless people have suffered some form of violence directly; many more have witnessed attacks on family and friends. All those affected would benefit from some form of psycho-social support; and children are particularly vulnerable.

There is an urgent need for DFID and other donors to devote some of their resources to providing psycho-social support. Such support is inexpensive and is crucial both for the women concerned and for the long term development of the DRC. If peace-building is to be successful, traumatised individuals and communities need help to deal with their experiences.

Sifa Mudekeneza with her children in their home village.



Case study: the sexual violence and infant protection police unit, Bukavu

Major Munyole Sikujulma Honorine, who heads the sexual violence and infant protection unit in Bukavu, explains the constraints that her department faces. The unit has no budget for expenses, has limited stationery and no computer. Officers have to ask victims to provide their own paper to document the cases. The unit does not have a dedicated vehicle, which prevents staff from transporting victims to the police station and to and from hospital. Many women are unable to arrange their own forms of transport and end up dropping cases as a result. The unit urgently requires forensic equipment and training; it has no equipment for collecting DNA or even for taking finger-prints.

There is no formal victim and witness protection scheme. In the absence of a formal system, victims are placed with members of their extended family or stay with members of the police force themselves. Intimidation of victims is common, as is the traditional way of settling disputes by exchanging money or goods. Lawyers estimate these are key reasons why cases are dropped.

Even a small amount of the £40 million DFID has earmarked for police reform would go a long way to help the unit function more effectively⁸⁷.



Major Munyole outside her office in Bukavu

Access to justice and security sector reform

There is an urgent need to scale up the legal help available for victims of sexual violence so that the trickle of successful cases becomes a flood. NGOs such as SCIAF partners AJV are helping rape victims bring their cases to court – but with 36 successful judgements over two years, AJV's work is slow and constrained by a lack of resources⁸². Nevertheless, AJV demonstrates that the justice system can deliver results, and it is making a difference in the fight against impunity. In the long term, it is the Congolese government's responsibility to ensure that free legal counsel is available but in the short to medium term DFID could play a useful role by providing funding to allow more women to bring and win cases.

DFID could also play a useful role in helping women who have won cases to claim compensation. Under Congolese law, successful complainants are entitled to receive \$5000 compensation from the state in cases of rape by members of the security forces⁸³. This money is crucial to offset the costs of bringing a case and to provide survivors with funds to help them reintegrate into their local communities. Yet in 2008, the budget contained only enough money to compensate one victim⁸⁴. It has been suggested that the creation of compensation fund with monies from international donors — including DFID — would be extremely helpful. It would ensure that victims received at least some compensation and would also encourage more women to bring their cases to court. The fund could also be operationalised in a way that would encourage the Congolese government to take its responsibilities more seriously. Further reforms to the justice system are also urgently needed if access to justice is to be improved, and increasing the enforcement rate of court decisions is crucial.

Expenditure on the police force is also urgently needed. The Congolese government is showing increased political will for police reform⁸⁵ and this is an opportunity that must be maximised. DFID is already planning to spend £40 million on police reform over the next five years, some of which will be spent on training for dealing with SGBV and on improving the infrastructure and equipment available to police⁸⁶. SCIAF considers these two areas to be priorities and would like to make the following further suggestions:

- The judicial police tend to be predominantly male. Funding initiatives aimed at facilitating the entry of female police officers into the judicial police (e.g. by giving them the necessary training) would be useful.
- There is also need for comprehensive training on sexual violence for a greater number of judicial police officers.
- Particular attention should be paid to increasing the capacity of the sexual violence and infant protection unit and to the establishment of victim and witness protection schemes.
- Additional money should be provided for the establishment of a compensation fund and to help more survivors access legal assistance.

Reintegration assistance

As the Special Rapporteur on violence against women notes, 'Economic assistance to women survivors of sexual violence to re-establish their livelihoods has so far been largely neglected by the donor community'⁸⁸. There is a need for DFID and other donors to fill the funding gap so that all women who require assistance with reintegration can access it. Particular attention needs to be paid to children who have suffered sexual violence, many of whom subsequently drop out of formal education, and to women who have become pregnant as a result of rape. These women need help not only with economic aspects of integration (e.g. livelihood generation through skills training, micro-credit schemes etc) but also with the social side of integration. More work needs to be done to change attitudes towards victims of rape and to end the stigma they suffer.

DFID is allocating £24 million for communities in the East to 'jointly plan and rebuild local infrastructure and promote economic activity'⁸⁹. Given the marginalised position that women, in particular survivors of sexual violence occupy in Congolese society, there is a need to ensure that the kind of socio-economic activities promoted take account of their needs and are accessible to them. DFID might also consider creating a budget line specifically to help survivors integrate back into their local communities both socially and economically.

How does SCIAF help?

Thanks to the generosity of its supporters, SCIAF is working with local organisations in South Kivu to provide practical assistance to survivors of sexual violence. SCIAF is currently spending over £143,000 on a range of activities, including:

- medical treatment for survivors of sexual violence and for children born of rape. SCIAF partner CODILUSI provides equipment and medication (HIV and syphilis tests; treatment for sexually transmitted infections; obstetric and gynaecological services) to local health centres and hospitals, so that treatment can be sought locally where possible. CODILUSI also supports staff salaries to ensure that patients do not have to pay for treatment.
- clothing, food and other practical assistance for children born of rape; and advocacy and legal assistance to help them claim their rights, also through CODILUSI.
- psycho-social support to survivors through listening centres run by CDJP. SCIAF funds the running costs of centres and trains staff in trauma counselling, active listening and psycho-social support techniques.
- legal assistance so that women can pursue justice and take their cases to court, through lawyer's organisation AJV.
- support to help women to reintegrate back into their communities, through micro-credit activities, and awareness raising work among local communities to help reduce the stigma and discrimination that survivors face.

SCIAF also helps tackle the root cause of the problem by tackling the culture of impunity that currently exists in South Kivu — by bringing rapists to justice and by publicising the 2006 law on sexual violence — and by its advocacy work on this issue.

Potential sources of DFID expenditure

Many of the activities suggested above are already incorporated, in some shape or form, in DFID's country plan for the DRC and we are asking DFID to ensure that they receive adequate attention when the appropriate budget line is allocated and plans are operationalised in more detail.

Some of the interventions discussed above would require extra funds, but the sums of money involved are not massive. HIV tests cost 80 pence; treatment for sexually transmitted diseases cost £4 per person per year; gynaecological services cost £23⁹⁰ and an operation to treat fistula costs £100⁹¹. Training on trauma counselling and active listening costs £37 per person and providing materials and running costs for a listening centre costs £75 a month⁹². Judicial support to survivors costs, on average, £100 per person⁹³.

If DFID was to spend £200 on every rape victim that reported in South Kivu in 2008 (based in first trimester figures), this would cost just £3.2 million. This is 0.06% of DFID's total expenditure in 2007⁹⁴, and less than one 300th of the amount that UK spends on make-up in a year.⁹⁵

Research from other country contexts has found that even major, large scale interventions come with a low price tag. In Tajikistan, the costs of setting up a primary health care system (for child health, maternal health, major infectious diseases, and sexual and reproductive health) would cost roughly £58 per capita annually. Interventions to tackle sexual violence, such as training and awareness campaigns and interventions to combat violence against women would cost only £2.60 per capita annually⁹⁶.

SCIAF anticipates that some of the money could come from lines in the DRC budget that have not already been allocated. Another option would be to increase the total amount of resources available for expenditure in the DRC. Over £70 million of DFID aid is spent in upper-middle income or high income countries⁹⁷, with significant amounts going to countries such as Jordan (£3.3 million)⁹⁸; Yemen (£8.3 million) and China (£39 million)⁹⁹. Reprioritisation of some of these resources towards the DRC would mean that more of DFID's money would go to the world's poorest and most vulnerable populations.

Another option would be to meet the UN target — which specifies that OECD countries should give 0.7% of their Gross National Income in overseas aid — more quickly than is currently planned. The UK government has currently committed to meet this target in 2013, 43 years after the target was originally set¹⁰⁰. If the UK government was instead to meet this target in 2010, some of the substantial additional resources could be channelled towards the DRC.

DFID could also work with the DRC government to encourage increased levels of spending in certain areas and to explain the long term rationale for such investment. The DRC is expected to complete the World Bank and IMF Heavily Indebted Poor Countries Initiative in 2008, which should result in the cancellation of £6.3 billion of national debt¹⁰¹ – money which could be ploughed into social services (such as health, policing, the judicial sector) and support for survivors of sexual violence¹⁰². Ideally the DRC government should be spending 2% - 6% of the national budget on the judicial sector¹⁰³ and 15% of the national budget on health care (a target set by the African Union in 2001)¹⁰⁴. This, combined with increased DFID expenditure along the lines indicated above, would go a long way to give survivors of sexual violence the help they need.

BONUS

A motorcyclist in Bukavu speaks out against sexual violence



‘there is no-one

Conclusion and Recommendations

The UK government and the UN should be commended for their efforts to tackle sexual violence and the contribution they have made to peace and justice in the Eastern DRC. Yet these efforts urgently need to be redoubled. The sexual violence and other human rights abuses that are a daily reality in Eastern Congo ruin countless women’s lives, threaten the socio-economic development of the area and perpetuate insecurity throughout the whole of the Great Lakes region.

Aimerance, Kanga, Sifa and other survivors are looking to the international community and the UK government for action on this issue. One survivor explained that the UK government must help because ‘there is no-one else to help me. My family would like to help, but they are suffering too.’ Rwata Dismas, a counsellor with CDJP’s listening centre in Walungu also notes that ‘survivors need help. When women return from the forest (after having been abducted) they often find their crops taken, their house burnt down and husband killed. The local community that would normally help them through this situation is unable to give assistance as they too are affected by the attacks’.

SCIAF recommends that the international community heeds these voices and that the UK government, in particular DFID and FCO takes the following action:

Offer political support

- Provide further political support and encouragement to the governments of Rwanda and the DRC to help them abide by the spirit and the letter of the Nairobi Communiqué and fully and effectively implement their commitments under the DRC peace process.
- Ensure that sexual violence survivors, women and civil society representatives from North and South Kivu are represented in the Nairobi Joint Monitoring Mechanism and in the key decision-making fora of the Amani programme, including the Mixed Technical Commission on Peace and Security.
- Support the appointment of a Special Advisor on Human Rights for the Eastern DRC, as called for by the Congo Advocacy Coalition. Ensure that the Special Advisor has an effective mandate that ensures his or her independence, is supportive of and does not detract from the long term needs of the peace process and has adequate funding.
- Work with the DRC government and the international community to resolve the current lack of funding for the Amani Programme. This may include contributing to core costs of the Programme if necessary.



Sexual violence survivor, Conselata Mushangasha

Use its influence in the Security Council to:

- ensure that the additional duties given to MONUC by the Nairobi and Goma Agreements do not detract from MONUC's core duty to protect civilians.
- extend MONUC's mandate to beyond 2008, working to ensure that MONUC withdrawal should not be attached to arbitrary dates but should be linked to genuine progress in the security situation.
- push for a revision of the Secretary General's benchmarks as set out in his 24th report, to ensure that it includes sexual and gender based violence committed by armed groups and Congolese security forces as a criterion. Ensure subsequent indicators developed also bear specific reference to sexual violence committed by non-civilian actors.
- ensure that SGBV survivors in South Kivu are adequately consulted in the development of a mission-wide strategy.

Work with Congolese civil society and other donors to co-ordinate structures in country and provide increased funding to help survivors of sexual violence

- Scale up medical provision available to survivors in rural areas, in particular in South Kivu and in the 20 health zones where DFID is already planning medical interventions.
- Expand the psycho-social services available to survivors and to traumatised communities more generally.
- Provide funding to increase the number of survivors who receive legal assistance; to help establish a compensation fund and to implement other justice sector reforms.
- Provide funding for: training for judicial police, including measures to increase the number of qualified female officers; support for the sexual violence and infant protection unit; and the establishment of a protection scheme for victims and witnesses.
- Ensure that sufficient attention is given to survivors of sexual violence in the apportioning of the £24 million to be spent on community reconstruction.
- Provide additional funds to help survivors with community reintegration.
- Encourage the DRC government to spend 2-6% of the national budget on the justice system and 15% on the health care sector.

Glossary

AJV	Judicial Support for Survivors of Gender Based Violence
CDJP	Diocesan Peace and Justice Commission in Democratic Republic of Congo
CNDP	National Congress for People's Defence
DFID	Department for International Development
DRC	Democratic Republic of Congo
FCO	Foreign and Commonwealth Office
FDLR	Rwandan Liberation Democratic Forces
FRF	Republican Federalist Forces
HIPC	Highly Indebted Poor Countries Initiative
IMF	International Monetary Fund
MONUC	United Nations Organization Mission in the DRC
OECD	Organisation for Economic Co-operation and Development
PEP	post-exposure prophylaxis treatment to minimise HIV/AIDS transmission
RFPD	Réseau des Femmes pour la Défense des Droits et la Paix
SGBV	Sexual and Gender Based Violence
UNFPA	United Nations Population Fund



Endnotes

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- 48 <http://news.bbc.co.uk/2/low/africa/7023708.stm>; Human Rights Watch Renewed Crisis in South Kivu. In addition, in October 2007, Richard Sezibera, Special Envoy to the Great Lakes Region of President Kagame stated that Rwanda had proof of such collaboration between the FARDC and the FDLR in fighting against Nkunda
- 49 UN Group of Experts states that 'MONUC, national and military authorities reported to the Group that Nkunda's forces have been receiving weapons via the border areas of Bunagana, Uganda, and Runyoni, Rwanda. The Governments of Uganda and Rwanda have explicitly denied any official cooperation between their armed forces and the CNDP military wing.' The report further states that; 'In July 2007 Laurent Nkunda publicly acknowledged that he had received recruits from North Kivu's refugee camps in Rwanda'.
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- 56 ibid
- 57 Joint Communique of the Government of the Democratic Republic of Congo and the Government of the Republic of Rwanda on a common approach to end the threat posed to peace and stability in both countries and the Great Lakes Region
<http://www.monuc.org/News.aspx?newsId=17443>
- 58 <http://www.monuc.org/News.aspx?newsId=17443>
- 59 Republique Democratique de Congo (2008) Act d'engagement
- 60 Ordinance no 08/008 du 2nd Fevrier 2008 portant organisation et fonctionnement du programme national de securisation, pacification, stabilisation et reconstruction des provinces du Nord-Kivu et du Sud-Kivu, denomme 'Programme Amani.
- 61 op cit
- 62 www.monuc.org
- 63 Erturk, Y (2008) op cite notes that 'an investigation conducted by the United Nations Office of Internal Oversight Services (OIOS) in Bunia (Ituri District) between May and September 2004 confirmed that sexual contact between Congolese women and girls and peacekeepers occurred frequently, usually in exchange for food or small sums of money, often involving girls under the age of 18, with some as young as 13. The investigation revealed a "pattern of sexual exploitation"... 'In February 2007, the UN Office of Internal Oversight Services reported that it had substantiated allegations that a military contingent member of MONUC had sexually abused an under-age girl, which resulted in the birth of a child.' Pt 47-50
- 64 MONUC is authorised to 'use all necessary means to protect civilians under imminent threat of physical violence' Res 1794 (2007)
- 65 Ki Moon, B / UN (2008a) Twenty-sixth report of the Secretary-General on the United Nations Organization Mission in the Democratic Republic of the Congo S/2008/433
- 66 These additional duties include working with the Congolese army on a strategy to disarm the FDLR, to hosting weekly meetings to assess progress on the Nairobi agreement; to monitoring ceasefire violations.
- 67 Ki Moon, B / UN (2008b) Twenty-fifth report of the Secretary-General on the United Nations Organization Mission in the Democratic Republic of the Congo
- 68 Ki Moon, B / UN (2008a) op cit and Ki Moon, B / UN (2008b)
- 69 Specifically, only when the militias 'no longer posed a significant threat to peace and stability' and when the Congolese army and police are able to 'assume responsibility for the country's security' should MONUC be downsized and removed. Ki Moon, B / UN (2007) Twenty-fourth report of the Secretary-General on the United Nations Organization Mission in the Democratic Republic of the Congo S/2007/671 OP 58
- 70 These include completion of demobilisation of armed groups; development of a professional, effective army and police force which respects human rights; establishment of an independent, functioning judicial system.
- 71 Ki Moon, B (2007) op cit
- 72 £4.5 million through the Conflict Prevention Pool, a joint initiative with the Ministry of Defence and FCO. DFID (2008) Democratic Republic of Congo Country Plan <http://www.dfid.gov.uk/pubs/files/DRC-countryplan08-10.pdf>
- 73 DFID (2008) op cit
- 74 Ki Moon, B / UN (2008b)
- 75 DFID (2008) op cit
- 76 Interviews with health professionals, doctors and nurses conducted in various locations week commencing 4th August
- 77 DFID (2008)
- 78 For example, extending availability of post exposure prophylaxis treatment for HIV/AIDS, training in counselling, training in surgery so medical staff can provide those services 'in house.'
- 79 Interview with Doctor Jean Baptiste Byandunia, Hospital Director at Kaniola Hospital. Conducted by author on 6th August 2008
- 80 Interview with Jean Claude Bulumba, Chief of Staff, Ludaha Health Centre conducted by author on 12th December
- 81 Interview with Rwata Dismas, counsellor at Walungu listening centre. Interview conducted by author on 6th August 2008
- 82 Yves Kasongo, Toto Manimani and Zena Baharanyi, advocates with AJV, interview conducted with author on 4th August
- 83 Information from the UN
- 84 Ibid
- 85 Evidence – judicial council; police reform bill etc
- 86 DFID (2008) op cit
- 87 interview conducted by author on 7th August 2008
- 88 Erturk, Y (2008) op cit
- 89 DFID (2008) op cit
- 90 CODILUSI project proposal
- 91 Interview with staff members at Kantana district hospital conducted on 9th August 2008
- 92 CDJP project proposal
- 93 AJV project proposal
- 94 Total DFID programme in 2007 was £5,202m. DFID (2007a) Statistics on International Development: 2007 Edition
- 95 UK citizens spent £1 billion on makeup in 2006 alone <http://www.the-infoshop.com/study/mt44593-make-up.html>
- 96 UN Millenium Project (2005) Taking Action : Acheiving Gender Equality and Empowering Women http://www.unmillenniumproject.org/reports/tf_gender.htm
- 97 DFID (2007a) op cit <http://www.dfid.gov.uk/pubs/files/sid2007/table-13.xls> excluding debt relief
- 98 DFID (2007a) op cit <http://www.dfid.gov.uk/pubs/files/sid2007/table-14.3.xls> excluding debt relief
- 99 DFID (2007a) op cit <http://www.dfid.gov.uk/pubs/files/sid2007/table-9.xls>
- 100 DFID (2007b) UK aid is increasing and we are delivering says Benn
- 101 Expressed in net present value terms http://www.jubileeresearch.org/hipc/hipc_news/congo240903.htm
- 102 The World Health Organization has reported that, currently, for every \$1 spent on healthcare, \$4 is spent on debt repayments. cited in Campaign to Cancel Africa's Debt (accessed 2008) Illegitimate Debt After Decades of Turmoil: The Case of the Democratic Republic of the Congo http://www.africaaction.org/campaign_new/docs/DRCDebtSpotlight.pdf
- 103 Erturk, Y (2008) op cit
- 104 African Union (2001) Abuja Declaration on HIV/AIDS, Tuberculosis and other related infections diseases <http://www.uneca.org/ADF2000/Abuja%20Declaration.htm>

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