

Risk Assessment of the Women Suffering from Sexual & Gender Based Violence in North Kivu Province, DRC to Stabilize Health System Improvement

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II. Executive Summary

In the Democratic Republic of Congo (DRC), countless women continue to experience serious human rights violations, as they suffer from sexual and gender-based violence (GBV). Women in these areas are exposed to high rates of gender-based violence “due to the presence of armed actors, a scarcity of basic resources, and unsafe living conditions” (OCHA, 2023). Not only that, but the issue continues to grow worse in severity as time goes on. Specifically, in the past few years the number of gender based violence cases have increased, with a 91% increase present from 2021 to 2022, specifically in North Kivu (Refugees International, 2024). In the DRC, some of the top most GBV affected areas include Ituri, North Kivu, and South Kivu (UNICEF, 2024). Out of the three, North Kivu faces the harshest conditions, with people even fleeing from North to South Kivu to escape the violence.

The start of this conflict can be traced back to 1996, when Rwanda and Uganda invaded eastern DRC. In the following year, the DRC looked to diminish Rwanda’s influence on the DRC’s government. This led to the M23 rebel group breaking away from the Congolese army as they blamed Congolese authorities for not effectively removing Rwandan Hutu rebels who were settling in eastern DRC. This conflict between these rebel groups and the Congo still exists today, but their violence also affects thousands of women. As the war in Congo intensifies, so do the gender and sexual based violations. One strategy to impose fear and control on populations is through attacking women. To satisfy their need for dominance and control, rebels raid villages and harm/rape women. Women and children are continuously harmed by the rebel fighters through crimes such as sexual assault, child recruitment into armed groups, and abductions (Refugees International, 2024).

The two biggest factors that appear to contribute to this problem are Health Financing and Leadership and Governance of the DRC health system. These two building blocks aren’t able to function properly because of the apparent gaps. Since the DRC struggles in health financing, women have had to turn to other methods because of food insecurities. For example, women have had to adopt transactional sex in order to earn money for their families (Sheira et al., 2023).. Instead, other methods should be proposed in order to pool money from developed countries that have the resources to help the DRC. Also, the government for a while now has faced issues with corruption. To break this corrupt cycle, strategies can be implemented by the youth in order to break the gender norms that continue to harm women and children in the DRC. If the gender norms are broken with government support and more equity advances in areas such as North Kivu are made, the DRC will be able to resolve this conflict.

III. Introduction

The DRC is one of the world's most complex crises. Over 6 million people are displaced in the country, 98% of them in the Eastern provinces (Lawal, 2024b). The Eastern Congo is most affected by inhumane public health problems including traumatic gynecological fistula, and genital injury from brutal sexual violence and gang rape. Three of the most heavily affected areas include Ituri (population of 3.6 million) North Kivu (population of 6.6 million) and South

Kivu (population of 5.7 million). The use of sexual violence in Ituri has a military strategy has only gotten worse as the violent conditions have only been intensified since 2020. Since the problem has gotten so large, this sexual violence has become normalized for characteristics of brutality in the war torn population.

One location that faces the most violence is the North Kivu province. This violence is known to be “the war within the war” by Human Rights Watch as countless women continue to experience serious human rights violations by suffering from sexual and gender based violence. Women in this area are exposed to high rates of gender based violence “due to the presence of armed actors, a scarcity of basic resources, and unsafe living conditions” (OCHA, 2023). Armed men in these areas attack defenseless women and exert dominance over them as a strategy to control the region through means of fear in local populations. Perpetrators use these violent means to satisfy their need for power and dominations; desire to control and violate the physical and mental integrity of women and girls. The issue has increasingly become worse over time: “In 2022, M23 rebels resurfaced after 5 years of inactivity and gained control of large parts of North Kivu by July 2023” (Global Conflict Tracker, 2024). The level of reported sexual violence has skyrocketed in the last two years of the Eastern part of DRC (with cases doubling from 40,000 to 80,000 in 2022). USAID, the largest bilateral donor for North Kivu, has worked to make advances in health and education while also providing life saving humanitarian assistance. However, areas have become increasingly vulnerable in Eastern DRC and still struggle in terms of the sexual and gender based violence that happens within these provinces.

The sexual violence in North Kivu is widespread and horrific. The harshness of these crimes is overwhelming: “Gang rape is often exacerbated by other forms of sexual savagery, including the use of crude objects (tree branches)” (Longombe et al., 2008). Women are sometimes tortured through genitalia mutilation, resulting in high rates of infection and in the worst case scenario, fatality. To help aid this issue, shelters have been located in North Kivu for those displaced by violent conflict, climate disasters, economic crises, and disease outbreaks. One of these shelters is called North Kivu’s Bulengo displacement program; makeshift housing (no electricity, gas, or access to basic services). These shelters don’t always offer complete safety; women have come forward to talk about their experiences of being attacked by groups of men as they were collected firewood or collecting supplies because of the increasing hunger levels, and being raped at gunpoint. Survivors are often scared to reach out to gender based violence services to report their abuse because of “fear of stigmatization by their communities or retaliation by perpetrators” (Christian et al., 2011).

As time has gone on, the problem has only gotten worse. According to the United Nations Fund for Population Activities (UNFPA), gender based violence reports have risen 91% since 2021 and 2022. Lack of security and lack of livelihood have added to this problem as even makeshift camps can’t offer protection. Organizations such as the DRC’s Humanitarian Response Plan and UNFPA have been set up to increase funding in order to address GBV. However, these organizations often fail to meet their goal due to lack of humanitarian aid and resurgence of GBV cases. Multiple failed attempts to raise awareness and money for the problem go to show the deeper structure of the issue. The problem, while it may be present at surface level, will take much more to fix. For example, issues in the DRC’s leadership and governance only aid the problem as the political system of the DRC has become paralyzed in recent years due to “manipulation of the electoral process by political elites” (Freedom House, n.d.).

The unstable political situation caused by militant groups violence against government forces hurts women and girls and it raises GBV rates. The Health Financing aspect of the DRC also worsens this problem. As discussed above, many international organizations often do not reach their funding goal due to lack of aid. In the DRC as well, there is little to no governmental financing for women's basic needs. This causes women to turn to negative coping strategies because of their food insecurities. Foreign investors also have trouble getting involved with the DRC because of the economy that is negatively affected by the unstable political situation.

More detailed measures need to be taken to address this issue. Without meaningful action being taken raw materials will continue to be exploited as women in the DRC are faced with sexual and gender based violence.

IV. Problem Statement

Women in North Kivu province suffer from sexual and gender-based violence and is a major public health issue as many women succumb to infection, long term emotional distress, and in most cases death. The ages of women suffering in North Kivu range from 11-70 years. However, the majority of the women fall into the 21-30 category. A United Nations Population Fund even noted that "in 2008 65% of victims were adolescents younger than 18 while 10% of victims were younger than 10. From 2021 to 2022, the GBV cases almost doubled from 40,000 to 80,000" (Peterman et al., 2011). In 2022, North Kivu accounted for more than 38,000 reported cases in that year alone. In the first three months of 2023, North Kivu witnessed a 37% increase in the number of GBV reported cases. As the pattern has shown, the problem only continues to get worse. It should also be taken into consideration that these numbers are only the women that felt comfortable stepping forward and asking for help. Nobody truly knows how many, but many victims still don't feel comfortable coming forward because of fear of shame from their community or fear from their perpetrator.

V. Analysis

One of the main questions that has to be asked in this given situation is: To what extent have female genital mutilation (FGM) and Gender-based violence health programs been proposed, developed, or implemented in this community in order to mitigate, prevent, and adapt to the health outcomes?

Providing health services to sustain womens and childrens health during this lengthy conflict is challenging. Services and methods emerged in 2000 and have since developed in a variety of issues, however, the coverage is inadequate and lacks addressing the root of the problem. The economic factor is still the defining cause of the problem. For example, poor infrastructure, an uncertain legal framework, corruption, a lack of openness in government economic policy and financial operations continuously make help challenging when these factors are holding improvements back. Also, problems arise in the questions of the feasibility of solutions as well. For example, challenges to health services include availability of skilled personnel, lack of basic materials and equipment, and insufficient financial resources (for workers and facilities costs). USAID however helped place some health programs in North and South Kivu. For example, they set up IMA World Health help from 2017-2022. IMA World Health,

“Provided emergency and long-term assistance to sexual and gender-based violence (GBV) survivors and strengthens Congolese institutions to address GBV needs. It has provided services, including medical care, psychosocial support, legal support, and vocational and literacy training to thousands of survivors in North Kivu” (USAID).

USAID also organized the Education Development Center from 2018-2022. According to USAID, In order to promote equity and positive gender norms, the Education Development Center creates a network of Gender Champions at the local level who facilitate discussion groups. In addition, Gender Champions lead couples' discussion groups and help young people create action plans that will strengthen their resolve to promote gender parity, alter cultural norms, support women in leadership roles, and prevent gender-based violence.

Another important question is: What vulnerability assessments have been performed, if any, to determine factors that contribute to the issue?

Impunity is a major factor in the perpetuation of these crimes - no fear of the consequences of their actions. Studies have been conducted in local towns to determine why this problem has yet to be solved. The main reason for the lack of solving this problem is the limited impact of assistance provided. Also, gaps in knowledge and resources which may prevent the implementation of adequate and efficient responses. USAID has implemented many programs to help the issue but not as many to assess the issue itself.

The last question to ask is: What factors have contributed to the problem and have health services built capacity to mitigate or prevent the issue?

Since North Kivu is rich in mineral resources, armed groups are placed in positions of power to control these areas; illegal exploitation is the main cause of this violence. These armed areas are transformed into regions of violent rivalry; these armed groups use sexual violence as a weapon of war to control the region and destroy families and communities. USAID has offered assistance with medical care, psychosocial support, legal support, and vocational and literacy training to thousands of survivors in North Kivu. War Child has also offered aid by focusing on child protection and psychosocial support. War Child has also run a collection of child protection centers in the heart of communities. While organizations such as these offer aid that mainly focuses on helping the people inside North Kivu, it lacks focus on the illegal mineral exploitation that is causing the problem.

The stakeholders in this situation are the women themselves. A stakeholder is “a person with an interest or concern in something”. In this situation, the women are the one’s being affected the most and have the strongest sentiments towards the issue. As they have been continuously harmed and not been given the proper aid that they need to physically help themselves and mentally cope as well, they are in turn being affected the most by the actions of many others, whether it is the militia groups or corrupt government situation.

Two major building blocks that are affecting this problem are Leadership and Governance and Health Financing. As discussed previously, there are various factors as to why this problem is caused and why it has trouble improving. Most of these factors link back to gaps that are visibly present in the Leadership and Governance and Health Financing systems of the Congo.

For the Leadership and Governance present in the DRC, corruption is widespread within the government and these war-torn communities are neglected by government intervention. Members of armed groups and government security forces continue to rape and other sexual abuse against women and girls, and in a smaller number of cases, men and boys. The current president of the DRC is Felix Tshisekedi. While he has made promises to address recurring violence and improve the lives of all Congolese, many Congolese don’t support him because his

ministers and him don't seem to be making that much improvement. Under previous presidents there was at least a government in the DRC cities, but now anarchy apparently has taken over in some areas. Suspicion also exists against him for the corruption that has taken over the government has made many people weary to trust Tshisekedi. While he has appointed a female prime minister who is a women's rights activist, freedom of the press/media is complicated. The unstable political and security situation continues to negatively impact the economy, which is why armed groups have continued to illegally exploit the minerals in North Kivu.

Secondly, the Health Financing problems in the DRC also largely contribute as to why this problem is having difficulty being fixed. The healthcare system is underfunded due to several constraints that make it difficult to sustain health financing. Even prior to Covid-19, the DRC's healthcare system struggled with "low coverage of health services, low quality of care, limited resilience of health facilities to emergencies, and low levels of community accountability" (Democratic Republic of the Congo, n.d.). There is a lack of money for service delivery and little to no government financing for basic needs in the DRC. Because of this, women are adopting negative coping strategies due to food insecurity. Desperate to earn money to feed their families, women have been forced to engage in transactional sex as well as being exposed to other forms of GBV such as physical violence and sexual exploitation and abuse. Women and girls reported taking out loans to buy basic goods; unable to pay them back they are forced into a form of sexual slavery with the debtor. There is a proliferation of brothels in and around the camps that "hire" adolescent girls; these are children who are raped and exploited on a daily basis in exchange for money

VI. Recommendations

In order to improve the Leadership and Governance of the DRC, some strategies can be implemented. To start, the DRC should work to advance equity and positive gender norms. At this time, the DRC does not have a strong gender equality framework which makes gender based violence more common and more susceptible to happen. Not only that, but the DRC should also set up measures to assist youth to develop action plans to solidify their commitment to achieving gender equity. This way, the pattern of gender and sexual based violence isn't passed down between generations and the youth will be able to slowly break the cycle of GBV. Besides help from within the country, the DRC can also look further to other countries for leadership figures to help sustain a fair government system unlike the corrupt situation that the DRC finds itself in now.

Another recommendation can be strategies implemented in the Health Financing system of the DRC. Since the health financing system of the DRC is lacking the funds to successfully be able to provide the support for the women that are hurt from GBV violence, financial mechanisms can be implemented. An ideal strategy would be one that is anchored by developed countries and integrating new developed financial mechanisms for the DRC. For example, a common fund can be created by organizations where all of the money sent will be sent to provinces in the DRC that are most affected so that they will have more medical care. Initiatives and goals can be set by outside countries that can pledge to not only raise money and awareness for countries like the DRC, but many others that struggle with gender based violence.



VII. Conclusion

In conclusion, the sexual and gender based violence that has existed in the Democratic Republic of the Congo for decades needs to come to an end. Not only has the problem been around for a long period of time, but it continues to rise dramatically, as conditions grow worse for women. Without the proper aid and assistance to control and stop this problem from continuing any further, countless more violence against women will lead to severe injuries and in the worst case scenario, death. As gender based violence influence grows in the DRC, it continues to grow across the globe as well. Countries such as Colombia, Iraq, Somalia, South Sudan, and Syria also are at great risk of sexual violence. The problem will continue to grow until people acknowledge it and act to help. Currently the media coverage on the crisis in the DRC is limited and overshadowed by various other global crises. There needs to be a greater awareness for the homicide and sexual violence occurring within the Congo need as horrific crimes continue to occur in the DRC which disregard womens rights. If action doesn't happen now, that is thousands of women's lives that are put in danger at the hands of rebels in the DRC. We must be the voice for the women in the DRC who aren't given the resources to speak for themselves.

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