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**33rd INTERNATIONAL CONFERENCE
OF THE RED CROSS AND RED CRESCENT**

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**Sexual and gender-based violence:
Joint action on prevention and response
(Resolution 3 of the 32nd International Conference)**

Progress report

Document prepared by

**the International Federation of Red Cross and Red Crescent Societies and the
International Committee of the Red Cross, with the support of the Norwegian Red
Cross**

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EXECUTIVE SUMMARY

The adoption of the resolution “Sexual and gender-based violence: Joint action on prevention and response” (the Resolution) by the 32nd International Conference of the Red Cross and Red Crescent Movement (International Conference) in 2015 was an important step in the International Red Cross and Red Crescent Movement’s (the Movement) efforts to address sexual and gender-based violence (SGBV) in armed conflict, disasters and other emergencies. It specified what needed to be done by National Red Cross and Red Crescent Societies (National Societies), the International Committee of the Red Cross (ICRC) and the International Federation of Red Cross and Red Crescent Societies (IFRC) Secretariat; underlined areas in which they should collaborate; and set out obligations of States. The Resolution requested the ICRC and the IFRC to report on progress in this regard to the 33rd International Conference.¹

Movement and State actors have made considerable progress in strengthening SGBV prevention and response since 2015. Important steps have been taken to increase awareness and understanding of international humanitarian law (IHL) and disaster law (DL). Tools and training materials have been developed and rolled out to governmental, judicial, military and police audiences, as well as to Movement staff and volunteers. Prevention of and response to SGBV are increasingly being addressed in field operations by qualified surge personnel, and specialized projects and programmes are being implemented across the globe, including by National Societies. Positive coordination and collaboration have been established and are ongoing between States, the United Nations (UN), non-governmental organizations (NGOs), civil society organizations and the Movement.

However, challenges remain, as, unfortunately, SGBV remains prevalent in all contexts. Countless victims/survivors continue to suffer in the aftermath of such traumatizing events because of the stigma and lack of access to the necessary health and support services. Barriers to progress that have been identified include: inadequate funding or unsatisfactory allocation of funds for prioritizing SGBV prevention and response; and inconsistent availability of and access to training materials and expert guidance for Movement staff and volunteers, including for developing policy and procedures to prevent and respond to sexual exploitation and abuse (PSEA) by humanitarian actors.²

Nevertheless, the comparative advantage of the Movement in being able to reach remote areas and adapt messages to local contexts is clear, and there is potential for further complementarity in situations of armed conflict, disasters and other emergencies, as well as in the context of development and peacetime activities.

It is imperative that the commitments made in the Resolution are adhered to by all parties and that efforts are stepped up to raise awareness of SGBV, its causes and its harmful consequences. There must also be continued emphasis on working with all victims/survivors – regardless of sex, age and other intersectional factors – to address their various needs.

This progress report takes stock of efforts by components of the Movement and States to implement Resolution 3 on SGBV and, as such, encourages all parties to maintain momentum in addressing the issue. The report is based on information from National Societies,³ the ICRC and

¹ Paragraph 35 of the Resolution “requests the ICRC and the IFRC to report to the 33rd International Conference on progress they have made and on any information provided for this purpose by members of the International Conference about their respective efforts”.

² While SGBV programming addresses violations committed by parties to the conflict and within societies, PSEA focuses on instances of sexual exploitation and abuse of affected persons by humanitarian actors. While the services for victims/survivors are largely the same, prevention and response approaches in these instances differ from those used in wider SGBV programming.

³ Written information about their SGBV work was provided by the National Societies participating in the Global RCRC Gender and Diversity Network and the SGBV Working Group. Twelve subject experts from the ICRC and the IFRC Secretariat, plus 17 representatives from National Societies were interviewed. Four interviews were

the IFRC Secretariat, and from States, and includes information from the 2017 interim progress report on the Resolution.

1) SUMMARY OF KEY ACHIEVEMENTS⁴

LEGAL AND POLICY FRAMEWORKS

- **The Movement** has made significant progress in its efforts to strengthen legal, political and strategic frameworks in relation to the prevention of and response to SGBV, with the publication of the **ICRC Strategy on Sexual Violence**, launch of the **IFRC appeal in support of work to end SGBV in humanitarian crises** and revision of the **IFRC Gender and Diversity Policy**.
- The **ICRC** has updated the commentaries on the First and Second **Geneva Conventions** and the related online IHL database to make clear that sexual violence in non-international armed conflict constitutes a grave breach. Legal assistance to integrate the **prohibition of sexual violence under IHL into domestic frameworks** has also been provided to several States.
- The **IFRC** has worked on integrating prevention of and response to **SGBV into disaster law** and has developed country case studies with **National Societies in Ecuador, Nepal, Zimbabwe, Indonesia, the Philippines** and the **Lao People's Democratic Republic**, as well as a global study.
- **States** such as **Slovenia** and **Denmark** have invested in supporting UN Security Council Resolution 1325 on Women, Peace and Security, and **the Czech Republic** has reviewed its national legal framework for armed conflict and disaster response in relation to SGBV.

OPERATIONAL IMPLEMENTATION

- **National Societies** have engaged in a wide range of **prevention** activities to address various forms of SGBV – including intimate partner violence, forced and child marriage, female genital mutilation and economic violence – via the likes of community-based prevention, outreach, awareness-raising and group support (women's, youth and men's groups).
- Several **National Societies** have provided **direct services** to victims/survivors of SGBV, mostly in the form of **psychosocial support and referrals/links** to medical services. They were able to do so by training staff and volunteers in survivor-centred approaches, and by working closely with non-Movement actors and responders. Some National Societies also provide **case management** and a growing number is working on **mainstreaming SGBV prevention and response** into all humanitarian activities, with the support of the IFRC.

"Before this project started, I was already a **Burundi Red Cross** volunteer, but I was not sensitive at all to SGBV victims/survivors. I blamed them and always believed it was their fault. I had a very negative attitude towards women who had suffered SGBV, especially rape survivors.

I learned a lot from this project. I am now an activist in my community and have also changed my attitude at home. I am very grateful to my trainer and colleagues, who guided me in making this change."

Male volunteer, Burundi Red Cross

conducted with State representatives. Voluntary reports provided by 31 July 2019 from seven States, as well as from the EU, on behalf of its Member States, and 11 National Societies have also been included.

⁴ A more detailed overview of progress and achievements can be found in Annex 1.

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- **National Societies and the ICRC** have worked with **armed actors** to improve such parties' knowledge and understanding of SGBV, so that they are better able to prohibit, identify and prevent it. **States** such as **Norway, Canada, the United Kingdom and Denmark** have also trained armed actors in various countries.
- The **ICRC** has developed a more holistic approach to the prevention of and response to sexual violence by **taking both into account across all operations** and by stepping up targeted and specialized services, such as **health-care or cash-based assistance** for victims/survivors. The ICRC is increasingly using its community-based protection approach, often involving National Societies, to help build communities' resilience, by, among other things, addressing the stigma and negative coping mechanisms linked to sexual violence. It is also focusing more on prevention of and response to SGBV as part of its detention-related activities. Furthermore, the organization has appointed seven **sexual violence operations managers** in the field to further strengthen coordination between colleagues and activities addressing sexual violence across its different programmes.
- The **IFRC Secretariat** has, under its umbrella approach **Protection, Gender and Inclusion (PGI)**, and together with invested **National Societies**, developed comprehensive surge capacities to prevent and respond to **SGBV in emergencies**. A specialized **technical competency framework** for PGI delegates has been developed and PGI has been incorporated into the **core competencies** for all surge personnel deployed in emergency situations. A variety of **basic training modules** – stand-alone and embedded in existing sector-specific training, such as for health-care or WASH personnel – has been developed and delivered in the field, while regional and global **training sessions for delegates specialized in PGI** have ensured more qualified personnel are available to respond to emergencies. **Deployment of PGI experts** in the earliest stages of recent large-scale humanitarian operations, such as Cox's Bazar, has meant **direct technical support** was available to staff and volunteers in all sectors. Such experts ensure services are tailored to prevent and safely respond to SGBV, that **referral pathways** are tested and disseminated, and that specialized services and **holistic survivor care** are facilitated through the vast reach of Movement volunteers and staff. **In several large-scale emergency operations, the IFRC has developed community-based PGI programmes** and activities that promote SGBV prevention and response mechanisms and are led by members of the community affected.
- **States** have shown their willingness to prevent and respond to SGBV, both domestically and abroad, by, for example, supporting the work of the **UN Special Representatives on Sexual Violence in Conflict** and the Inter-Agency Standing Committee initiatives **GenCap⁵** and **ProCap⁶**. Various steps have been taken by States to hold perpetrators of SGBV to account. These include efforts by the **European Union (EU)** and **its Member States** to implement the *Guide to Practical Actions at EU Level for Ending Sexual Violence in Conflict* and the recently adopted *Joint EU Gender Action Plan*.

⁵ <https://www.humanitarianresponse.info/en/coordination/genicap>

⁶ <https://www.humanitarianresponse.info/en/coordination/procap>

ZERO TOLERANCE FOR SEXUAL EXPLOITATION AND ABUSE (SEA)

- **The IFRC Secretariat** has significantly stepped up its efforts both to prevent and address sexual exploitation and abuse. It has adopted a new **policy on PSEA** and has established a new position of **global PSEA coordinator**, who leads the efforts to help National Societies (15 a year until 2020) develop their own policies on PSEA. In addition, **training materials, Standard Operating Procedures** for emergency operations and further guidance have been developed and tested in the field – for example, during the large-scale response to cyclone Idai in Mozambique.
- **The ICRC** has, through its Global Compliance Office, significantly enhanced its internal safeguarding mechanisms and has developed and adopted a **revised Code of Conduct and mandatory e-learning module** in this regard. The ICRC has appointed a **PSEA adviser** to advance work in this area. Safeguarding efforts are also encompassed by its Accountability to Affected People Institutional Framework.⁷

RESEARCH, KNOWLEDGE AND CAPACITY-BUILDING

- **The Movement** has conducted several studies and issued myriad publications on SGBV. The **ICRC**, for example, has produced publications on sexual violence in detention, prevention and risk reduction, the prohibition of sexual violence within military doctrine and the *Roots of Restraint in War* report. It is currently looking at mandatory reporting requirements for sexual violence, sexual violence against men and boys, and sexual and gender minorities. The **IFRC**, meanwhile, has conducted global and country studies on prevalence and forms of SGBV in disasters, risks and types of SGBV faced by migrating and unaccompanied children, and SGBV provisions in disaster law, including case studies developed by the **Norwegian Red Cross** and the **Netherlands Red Cross** on the lessons learnt through projects implemented by the **Burundi Red Cross, Colombian Red Cross** and **South Sudan Red Cross**.
- **The ICRC** has developed tools to improve prevention and response to sexual violence, such as the **toolkit for engaging weapon bearers** in dialogue on preventing and responding to sexual violence, based on its research into how the issue is addressed in military doctrine for State armed forces. The ICRC has also developed extensive training materials and opportunities, including in collaboration with the Geneva Centre for Education and Research in Humanitarian Action, and has made further efforts to engage State institutions in training, promote more effective **training for staff** in priority contexts and advocate the inclusion of sexual violence in the **induction training** for all new staff in any role.
- The **IFRC Secretariat** has developed several tools and training programmes, including the **Minimum Standards for Protection, Gender and Inclusion (PGI)** in all sectors of emergency work and the **Joint Action for Prevention and Response to Sexual and Gender-based Violence training**. Specific training on psychosocial support for people affected by SGBV has also been rolled out by the **IFRC Reference Centre for Psychosocial Support**. Training based on all of these is provided on an ongoing basis

As a result of a long-term commitment by its leadership to working on SGBV, the **Kenya Red Cross Society** has conducted dedicated projects and incorporated SGBV into all activities in emergency and development contexts. The National Society works closely with the Kenyan government and follows the latter's guidelines. It was the first National Society to adopt a PSEA policy, in 2014. The British Red Cross also has its own PSEA Policy.

⁷ <https://www.icrc.org/en/publication/accountability-affected-people-institutional-framework>

to National Society staff and volunteers, as well as to staff of the IFRC and ICRC in all regions. **More than 600⁸ people have been trained** since 2015.

- Numerous training and capacity-building initiatives have been implemented by or with the support of **States**, such as the International Protocol on the Documentation and Investigation of Sexual Violence in Conflict, which is aimed at governments, the judiciary, police and civil society. Furthermore, **Denmark and others** have supported the work of the United Nations Population Fund (UNFPA) to develop **Global Inter-Agency Minimum Standards on Addressing GBV in Emergencies**.

COLLABORATION AND PARTNERSHIP

- **The Movement** has established the **Global Red Cross Red Crescent SGBV Working Group**, as part of the Global Red Cross Red Crescent Gender and Diversity Network, which is co-chaired by National Societies and the IFRC Secretariat. The membership includes the ICRC and National Societies with an interest in working on SGBV.⁹ The group has developed tools, training and Movement-wide guidelines.
- Several **regional forums on SGBV** have been organized by the **Norwegian Red Cross** in Africa and the Americas. Co-facilitated by the ICRC and the IFRC Secretariat, these have brought together up to 19 National Societies at a time to share experiences and challenges.
- The **Call to Action** is a global initiative and major platform for collaboration that brings together 82 partners, including States and donors, international organizations (including the IFRC) and NGOs. The **EU, Canada** and **Switzerland** have all taken on leadership roles as part of their membership.
- **The Movement**, along with several States, has **partnered** with the League of Arab States, the Centre for UN Peacekeeping for South-East Asia, UNFPA, CARE International, UNICEF, the Association of Southeast Asian Nations (ASEAN), the Commonwealth and the GBV Area of Responsibility (GBV AoR) on various collaborative efforts.
- Collaboration **within the Movement, between States and with partners** has been enhanced by **several events and initiatives**, such as the **UK's Preventing Sexual Violence in Conflict Initiative**, the *Stand Speak Rise Up* conference in **Luxembourg** in March 2019 and the *Ending Sexual and Gender-based Violence in Humanitarian Crises* conference in May 2019. Known as the Oslo Conference, this was hosted by **Norway** and co-organized by **Iraq, Somalia, the United Arab Emirates**, UN OCHA, UNFPA and the ICRC. In addition, the first joint statement on this subject by the UN secretary-general and the ICRC president, speaking on behalf of the Movement, was made in February 2019.

2) REMAINING CHALLENGES AND OPPORTUNITIES

REMAINING CHALLENGES

There is still a notable lack of reporting on the Resolution and interviewees indicated that knowledge of commitments to prevent and respond to SGBV is limited among States and Movement components. The extent of the SGBV problem is not fully appreciated, nor are the facts that it is exacerbated by armed conflicts, disasters and other emergency situations, and that

⁸ There are no accurate figures for the number of training sessions conducted globally. Regarding the figures that are available, it is possible that those who took part in several training sessions or programmes have been counted more than once.

⁹ See footnote 22 for the list of members.

evidence of it is often hidden. (Contrary to accepted standards, proof that SGBV has occurred is often required before any prevention and response activities are prioritized in humanitarian work.) Although SGBV often remains “invisible” for various reasons, including stigma or fear of reprisals, there is enough global evidence to assume that SGBV is happening all of the time and in all contexts. Consequently, the IFRC Secretariat and the ICRC have taken a proactive approach to addressing SGBV without waiting for incident data. This is, in fact, a sector-wide accepted standard¹⁰ and requires further dissemination. According to one State, the reluctance to work on SGBV may stem from the perception that being raped is less serious than being killed, and that addressing sexual violence is therefore something that is only “nice to do”. This suggests there is much more work to be done to convey – at the individual level, community level and national level – the seriousness of the implications of SGBV and the destabilizing effects of sexual violence in conflicts.

Although SGBV is a gendered phenomenon often linked to harmful social and traditional practices and structural inequalities, not many National Societies reported having worked on gender and diversity inclusion in relation to SGBV. Several Movement interviewees said that gender and diversity-related areas of work, including SGBV, are not given the requisite level of priority by their governance or leadership. This leads to lack of expertise and structures that could help improve the quality of SGBV prevention and response efforts.¹¹ Representatives from States also mentioned that gender equality and empowerment of women and girls are considered by some as development rather than humanitarian issues. Both National Society and State representatives mentioned that mainstreaming SGBV awareness, prevention and response across humanitarian sectors is a challenge, and few National Societies – even those already running specific SGBV projects – reported having mainstreamed even basic SGBV mitigation actions.¹² Consequently, there is a high risk that, in conducting humanitarian activities, vulnerabilities will be exacerbated, the principle of impartiality will not be adequately applied and harm will be done.

The Resolution highlights two main areas of work: sexual violence in armed conflict and SGBV in disasters and other emergencies. A number of Movement interviewees expressed concerns that colleagues can sometimes make artificial distinctions between contexts of disaster, emergency or armed conflict, with the result that responsibilities to prevent and respond to SGBV are not clearly defined or shared. The concern is that “siloes” attitudes or approaches based on a narrow understanding of scope, role and mandate may lead to victims/survivors of SGBV not receiving the support they need. For example, a person who experiences violence from an intimate partner during times of armed conflict may not receive help because the abuse was not a direct result of the armed conflict, or Movement actors may not see it as their responsibility to respond if the area is not affected by an emergency. This demonstrates a need for better understanding of the Resolution to ensure that a principled

In April 2015, a devastating earthquake shook Nepal. As part of the earthquake response operations, the **Nepal Red Cross** began working on SGBV at the programme and organizational levels. In the aftermath of the earthquake, the Nepal Red Cross began including SGBV activities in other projects too, including disaster preparedness, emergency response and community development. Staff and volunteers have now been trained on protection, gender and inclusion in non-emergency settings, meaning they are now better equipped to prevent and respond to SGBV in the event disaster strikes.

¹⁰ See IASC Gender-Based Violence Guidelines, 2015 – <https://gbvguidelines.org/en/>

¹¹ As an example of good practice in this regard, the **Colombian Red Cross** expanded its SGBV project, including increasing the types of SGBV it addressed, after it began mainstreaming gender and diversity in all the organization's areas of work.

¹² Such actions include, primarily, safe and confidential referrals to service providers via coordinated referral pathways but also such provisions as sex-segregated toilets with locks and lights. For a full overview, see: IFRC, *Minimum Standards for Protection, Gender and Inclusion in Emergencies*, 2018 – <https://media.ifrc.org/ifrc/document/minimum-standards-protection-gender-inclusion-emergencies/>

approach is taken when responding to the needs of victim/survivors and that humanitarian needs do not go unmet.

Several interviewees mentioned that working on prevention of SGBV as part of disaster preparedness or prevention and response in contexts of population movement was not prioritized by the National Society because such work generally takes place outside of conflicts, disasters or other emergencies. This would appear to be a misunderstanding of the Resolution, which does call on States to ensure adequate attention is paid to SGBV in disaster preparedness and other emergencies, including contexts of migration and population movement. Further, some Movement and State representatives emphasized that a holistic approach to addressing the root causes of SGBV must include working outside of armed conflict, disaster and emergency settings, which National Societies are ideally placed to do, thanks to their long-term engagement with local communities. Strengthening prevention and response and ensuring preparedness for the expected increase in SGBV in crises and conflicts is difficult when infrastructure, legislation or knowledge have not already been established in calmer times. It is evident that the Resolution needs to be understood more clearly in terms of the Movement's broader mandate and principles before, during and after emergencies or conflict, and that the importance of the development-humanitarian nexus needs to be acknowledged.

Several Movement interviewees emphasized that all field personnel in contact with potential victims/survivors need to be sufficiently trained in gender-sensitive and non-judgemental behaviour and in the survivor-centred approach, including the importance of confidentiality. Ensuring that cultural misconceptions, victim-blaming attitudes and beliefs about SGBV or its victims/survivors do not affect the quality of the services provided is a common challenge reported by the Movement. Without adequate training, legitimate considerations relating to the principle of "do no harm" often lead to inaction – which, in itself, can cause harm.

There is considerable demand from all Movement actors for such training and capacity-building to be provided to the governance, managers, staff and volunteers of each of the components. Some respondents said they did not know about the materials and training developed by the ICRC and the IFRC Secretariat. Among those who are aware of these, many are frustrated that training opportunities, resources and expertise are often unavailable, sometimes because materials have not been translated into relevant languages. This lack of training and information about the concrete actions that can be taken in relation to SGBV, and how to perform them safely, has led to reluctance on the part of some within the Movement to address the issue.

Several Movement interviewees indicated that the commitment in the Resolution in 2015 to work on PSEA was not sufficiently prioritized by States or within the Movement until the recent revelations of large-scale misconduct in the humanitarian sector and the onset of the #AidToo campaign in late 2017. Within the IFRC, including in most National Societies, there are still gaps in: reporting mechanisms; the range of assistance services provided to victims/survivors; investigation procedures; and human resources expertise. According to some interviewees, there is confusion over: legal definitions; what implementing "zero tolerance" and "survivor-centred" approaches means in practice; how to adapt policies and procedures to national laws; the degree to which National Societies are responsible for penalizing and sharing information about perpetrators; and how to compensate victims/survivors.

Underlying all of the above challenges is a lack, or inadequate allocation of, funds to carry out SGBV prevention and response work. This, in turn, leads to a lack of available expertise and human resources across the Movement, and also manifests itself in limited training opportunities and follow-up support, as well as difficulties implementing activities. While a growing number of National Societies are implementing robust SGBV projects, several with proven records of good results are now having to phase out their activities owing to cessation of funds. Those National Societies that would like to do more to tackle SGBV simply do not have the required resources.

OPPORTUNITIES

The International Red Cross and Red Crescent Movement – given the different mandates of its components and broad reach, including via the approximately 14 million National Society volunteers globally – is **well placed to address SGBV in different settings and at multiple levels**. The ICRC focuses on sexual violence in conflict, other situations of violence and detention, and in relation to its specific mandate linked to international humanitarian law; the IFRC Secretariat's role is in disasters and emergencies, and as a supporter and coordinator of National Societies; and National Societies, through their presence before, during and after crises, are able to address a wide spectrum of SGBV.

The **Movement's inclusive approach** of assisting the most vulnerable regardless of gender, age, sexual orientation or other diversity factors, together with its community-based expertise and long-term engagement, ensures it is in the best position to respond based on need and in a holistic way. Although women and girls are disproportionately affected by SGBV, the Movement's focus on intersectionality and diversity inclusion serves to highlight that men and boys, LGBTQI people, the elderly and people with disabilities can be victims/survivors, too. The ICRC's work in detention has traditionally focused on male victims/survivors; recently, it has also, through research and public engagement on the subject, increased its efforts to promote a definition of survivors of sexual violence that is truly inclusive. The IFRC Secretariat, too, has been promoting an inclusive definition of victims/survivors of SGBV through its training, policies and research. National Societies have the potential to raise awareness within communities that anyone can be a victim/survivor of SGBV. The Movement's focus on an inclusive approach to working on SGBV should continue, as it complements the work of organizations focusing specifically on women.

In addition, the **growing expertise** in the ICRC, through dedicated sexual violence operations managers, and in the IFRC, through PGI delegates and surge rosters, offers the opportunity to bolster existing SGBV prevention and response programming, facilitate mainstreaming into other sectors and start new activities.

The research and case studies conducted by the Movement components are of great value – not just to the Movement itself but also to the wider humanitarian system. Through these initiatives, the **Movement contributes to a better understanding of the challenges relating to SGBV** prevention and response, and proposes recommendations on how to overcome them, giving the Movement the chance to showcase its expertise. The ICRC, IFRC Secretariat and National Societies should therefore continue their efforts in this area.

The Movement is also **uniquely placed to work on prevention of SGBV** by addressing root causes, attitudes and behaviour relating to SGBV. This includes dialogue with States, armed forces and non-State armed groups, as well as work deep within communities, which affords opportunities to work with potential perpetrators based on international law, changing mindsets and addressing harmful social norms. It also includes working with communities, social structures, institutions and States to address inequalities in relation to gender roles, minorities and disadvantaged, marginalized and excluded groups.

Importantly, this Resolution brings together the **world's largest humanitarian network – the Movement – and States party to the Geneva Conventions**. The potential impact on victims/survivors and those at risk of SGBV of increased efforts to implement the Resolution cannot be overstated.

3) CONCLUDING REMARKS AND RECOMMENDATIONS

Resolution 3 on SGBV has been a significant driver behind the Movement's work to prevent and respond to SGBV since 2015. The knowledge base, training materials and tools developed have made it easier for the ICRC, the IFRC and some National Societies to implement activities to assist victims/survivors of SGBV. States have also supported and implemented several important and broad initiatives to address sexual violence in armed conflict, and SGBV in disasters and other emergencies. Nevertheless, reports received and interviews conducted strongly indicate that not enough progress is being made by the parties to the Resolution and that there are many more opportunities to use their collective potential to prevent and respond to SGBV more effectively.

Based on the Resolution and progress to date, the following recommendations are proposed:

1. The ICRC and the IFRC should continue scaling up their efforts to address SGBV across various contexts, in line with their respective institutional policies and according to the principled approach that presumes that SGBV always takes place. The goal is to increase the number of delegations and National Societies working to prevent and respond to SGBV and, consequently, improve access by victims/survivors to assistance and protection.
2. The ICRC and the IFRC should continue to establish and improve systems for recording and monitoring SGBV prevention and response activities conducted by both organizations. The ICRC's priority delegations (as defined each year in its annual appeal on addressing sexual violence) and the IFRC Secretariat should inform National Societies about the Resolution and the materials available for conducting SGBV prevention and response activities, especially with regard to mainstreaming. The goal is for the Movement to have an evidence base and record of impacts achieved so that it can continuously improve its work on SGBV.
3. The ICRC and the IFRC should increase SGBV training opportunities for all Movement managers, staff and volunteers. The goal is for Movement staff and volunteers to have a sound understanding of the Movement's mandates and approaches to SGBV, so that they have the confidence to address the issue in a manner appropriate to their skills and professions.
4. The ICRC and the IFRC should continue to step up their efforts on PSEA. This includes ensuring that all National Societies and delegates participating in surge rosters receive regular briefings on their roles and responsibilities regarding PSEA and agree to abide by the existing rules and regulations under the Code of Conduct and relevant PSEA policies. All National Societies should be encouraged to adopt their own PSEA policies and sign the *Inter-Agency Scheme for Disclosure of Safeguarding Related Misconduct in Recruitment Processes within the Humanitarian and Development Sector*. All reporting and investigation systems established within the Movement should comply with Commitment 5 on complaint mechanisms in the Core Humanitarian Standards.¹³ The goals for the Movement are to prevent sexual exploitation and abuse from being committed by its staff and volunteers, reduce the risk of recruiting former perpetrators and be able to reassure communities and affected people that correct and accountable actions will be taken if misconduct is suspected or occurs.
5. National Societies should ensure that their governance and leaders are informed of the Resolution and aware of their responsibility to include SGBV prevention and response across their humanitarian work. Priorities and adequate resources should be allocated to ensure that staff and volunteers have the necessary gender and diversity awareness, and knowledge of SGBV prevention and response, including the survivor-centred approach and PSEA, so that they have the confidence to address SGBV in a manner appropriate to their skills and professions. National Societies are further encouraged to report activities to the IFRC Secretariat for recording and collaborate with other Movement and non-Movement partners to share information, learn from

¹³ <https://corehumanitarianstandard.org/files/files/CHS-Guidance-Notes-and-Indicators.pdf>

each other and coordinate multi-sectoral and holistic work. The goal is to increase the number of National Societies that can help prevent and respond to SGBV.

6. States, in line with IHL and international human rights obligations and commitments, should follow up on the Resolution, continue their work to prevent and respond to SGBV in armed conflict, disasters and other emergencies, and consider the complementarity of this work with commitments made in related UN resolutions, as well as in relation to Goal 5 of the Sustainable Development Goals.

7. States and National Societies should make pledges, inspired by the model pledge, regarding SGBV at the 33rd International Conference in 2019. States, the ICRC and the IFRC Secretariat should report on ongoing implementation of the Resolution and the aforementioned pledge in 2023. The goal is to increase efforts to prevent and respond to SGBV and for the Movement to have an evidence base of its work and the outcomes achieved.

ANNEX 1

PROGRESS AND ACHIEVEMENTS

Legal and policy frameworks

The IFRC, ICRC and National Societies have all made progress towards stronger legal, political and strategic frameworks for preventing and responding to SGBV. In 2018, the ICRC's Strategy on Sexual Violence (2018–2022) was adopted and, in 2019, the IFRC Secretariat issued its first appeal to end SGBV in humanitarian crises, which outlined its holistic strategic approach. In addition, the IFRC is currently developing a new Gender and Diversity Policy with stronger commitments to addressing root causes of SGBV, as well as specific commitments regarding targeted prevention and response.

The ICRC fosters a legal and policy environment conducive to the elimination of sexual violence. Since the 32nd International Conference, updated commentaries on the First and Second Geneva Conventions have been published, in which the prohibition, in the Conventions, of sexual violence in non-international armed conflicts is analysed and the gravity of a breach of this prohibition is emphasized. The database on customary IHL, which is publicly available online, is continually updated and now features national practice from seven more States relating to the prohibition of sexual violence. The ICRC has also raised the issue of sexual violence at various forums, including the UN Security Council, the African Union's Peace and Security Council, and the League of Arab States, and has provided legal assistance to States on integrating the prohibition of sexual violence under IHL into national and regional legal frameworks and military codes in countries including **Afghanistan, Bangladesh, the Central African Republic, Sri Lanka and the United Arab Emirates**.

Through the Disaster Law Programme, National Societies, supported by the IFRC Secretariat, are working to include prevention of and response to SGBV in disaster law and policies. A global study and country case studies – undertaken with National Societies in **Ecuador, Nepal and Zimbabwe** – were published in 2017 and, in 2018, a report featuring country case studies from Indonesia, the Philippines and Lao People's Democratic Republic was issued. These studies revealed a significant knowledge gap in the area of law and policy relating to gender equality and SGBV in disasters. Based on the findings in these countries, the Disaster Law Programme will continue to develop contingency plans aimed at ensuring continuity of SGBV prevention – including gender and diversity inclusion elements – and response services during major disasters.

States have invested considerable effort in working on legal and policy frameworks. Several have supported UN Security Council Resolution 1325 on Women, Peace and Security, including **Slovenia and Denmark**. The **Czech Republic** has conducted a review of its national law concerning criminalization of SGBV during armed conflict or in the aftermath of disasters and other emergencies. The **European Union (EU) and its Member States** have worked to implement the *Guide to Practical Actions at EU Level for Ending Sexual Violence in Conflict* and recently adopted a *Joint EU Gender Action Plan*, which includes clear actions regarding prevention of and response to SGBV in emergencies. In addition, the **European Commission** has worked on policies to integrate SGBV into humanitarian work.

Operational implementation

Across the Movement, we have seen an increase in efforts to address SGBV and steps to prevent and reduce the risk of violence in operations. According to the March 2019 *Survey on National Societies' Protection Activities Report* by the Advisory Board of the Protection Community of Practice, 53 of the 85 National Societies that responded said they address SGBV.

Prevention

A number of National Societies work on community-based prevention of SGBV in emergency- and disaster-related situations. Some also work on prevention in conflict-affected areas together with the ICRC. Community-based prevention work included raising awareness of what SGBV is and its negative and life-threatening consequences, as well as conducting behavioural-change activities, such as working with schools, creating radio shows and visiting homes in the community. The **Lao Red Cross** has used theatre to create awareness of the topic, and several National Societies have engaged with youth, women's and men's groups, local government officials and local and religious leaders on SGBV. National Societies have addressed a wide range of SGBV issues, including intimate partner violence, forced marriage, female genital mutilation and economic violence. They have also worked to reduce the stigma surrounding victims/survivors of sexual violence. In addition, there have been mitigating initiatives, such as the installation by the **Uganda Red Cross** of solar streetlights in the West Nile refugee operation to reduce the risk of violence against women and girls at water points and markets.

The Movement's ability to work closely with and understand armed actors facilitates collaboration with them on the prevention of sexual violence in conflict. The ICRC, through bilateral and confidential dialogue, and based on analyses of the context, sought to help actors identify patterns of violations and adopt and implement relevant measures to address these. Both the **Norwegian Red Cross** and the **Canadian Red Cross** have worked with their countries' armed forces on SGBV as an IHL issue and on integrating the prohibition of sexual violence into training and/or military doctrine.

Further, the ICRC, often together with National Societies, has been helping to strengthen communities' resilience, including by addressing the stigma and negative coping mechanisms linked to sexual violence. It has also worked on preventing and addressing sexual violence in detention, provided information to and run campaigns within communities to raise awareness and followed up on individual cases through its regular protection activities.

Meanwhile, the **United Kingdom** (UK) has trained more than 17,000 military and police officers on sexual violence and has deployed its team of experts on more than 85 occasions. **Denmark** has also supported the training of military, police, prison guards and other personnel as part of the Peace and Stability Programme for **the Horn of Africa** and the **East African** Standby Force. In addition, the **UK** has, through its #EndStigma campaign, supported projects to reduce the stigma surrounding victims/survivors of sexual violence and children born as a result of rape.

Response

A number of National Societies, such as the **Danish Red Cross** and the **German Red Cross**, provide services to victims/survivors of SGBV, mostly in the form of psychosocial support and often as part of responding to needs relating to migration, which have escalated in recent years. Training volunteers to ensure that the standards of the survivor-centred approach are followed was cited by several National Societies as crucial to delivering quality services. Certain National Societies use professional staff to provide services, such as the **Guatemalan Red Cross**, with its Centre for Integrated Assistance. Several National Societies offer clinical health services, such as the **Kenya Red Cross**, in refugee camps, and the **South Sudan Red Cross**, which has helped

build the capacity of local health staff in terms of clinical management of rape. Case management for victims/survivors is conducted by several National Societies, including the **Armenian Red Cross** and the **Turkish Red Crescent**. Furthermore, some National Societies provide livelihood services to victims/survivors, including the **Red Cross Society of the Democratic Republic of the Congo** and the **Nepal Red Cross**.

More and more National Societies are endeavouring to mainstream SGBV prevention and response into all humanitarian activities, including the **Samoa Red Cross**. This includes referring SGBV victims/survivors to non-Movement actors to ensure they receive multi-sectoral support, such as legal assistance, which the National Societies might not offer themselves. National Societies that prioritize SGBV response coordinate well with local governments, NGOs and humanitarian partners, often through national humanitarian cluster systems or networks. Examples include the **Philippine Red Cross** and the **Indonesian Red Cross**, which have developed Standard Operating Procedures for SGBV referrals.

The ICRC has a multi-disciplinary and holistic response to sexual violence in armed conflict. It strives to ensure that victims/survivors have access to all necessary services, that communities and individuals build their resilience and that future incidents are prevented. The ICRC has worked to **integrate** this response throughout its operations, particularly in the 14 contexts identified as priority in 2019. It has provided health-care services, including mental-health and psychological support, to victims/survivors, either directly or through health institutions and/or National Societies. Depending on the individual delegations' strategies, the ICRC has, among other activities, provided transport, selected victims/survivors for micro-economic initiatives and engaged in individual follow-up. It also continued its work to engage communities on sexual violence to build their resilience, reinforce positive coping strategies and provide alternatives to potentially negative ones – for example, through micro-economic initiatives or **cash-based** assistance programmes. Since 2014, the ICRC has reported **annually** on its activities to prevent and respond to sexual violence, in connection with its annual special appeals on addressing sexual violence. The ICRC has also appointed seven sexual violence operations managers in the field to support and oversee the coordination and implementation of activities relating to sexual violence in its priority contexts.

Since 2017, the IFRC Secretariat has, together with 14 interested National Societies,¹⁴ led extensive work to ensure SGBV prevention and response are central to optimizing emergency surge efforts globally. The IFRC approach to preventing and responding to SGBV falls under the umbrella of Protection, Gender and Inclusion (PGI) to ensure a holistic and comprehensive perspective and scope, and to avoid siloed actions that may cause further harm. Within PGI and specifically in relation to SGBV, the IFRC has developed a PGI technical competency framework for expert surge delegates and integrated PGI into the IFRC Core Competency Framework for all personnel. It has also developed and provided numerous PGI training sessions for staff and volunteers responding to emergencies, including two regional/global expert PGI delegate sessions, in order to develop a roster of experts within the IFRC who can be deployed immediately to emergency contexts. The number of such deployments coordinated by the IFRC has increased since 2015, including as part of the first rotation of the Field Assessment and Coordination Teams (FACTs). The **Australian Red Cross** has developed its own PGI surge roster, while the **Bangladesh Red Crescent**, **Mozambique Red Cross** and **Uganda Red Cross** have prioritized PGI in preventing and responding to SGBV in recent emergencies in their own contexts.

States have worked on and supported SGBV response both domestically and abroad. **Finland** has provided services to female victims/survivors arriving from conflict areas and established a safe house for immigrant women who have experienced SGBV. The **EU and its Member States** have supported the work of the UN Special Representatives to improve the international community's response to sexual violence in armed conflicts and SGBV in disasters and other

¹⁴ American RC, Australian RC, British RC, Burundi RC, Canadian RC, Cote D'Ivoire RC, Danish RC, Guinea RC, Kenya RC, Netherlands RC, Philippine RC, Swedish RC, Turkish RC, Uganda RC.

emergencies, as well as that of other UN bodies, i.e. UN Women. **Switzerland** has supported the Inter-Agency Standing Committee expert hubs of the GBV Area of Responsibility¹⁵ and the GenCap¹⁶ and ProCap¹⁷ rosters.

Access to justice, investigation and prosecution

Several broad initiatives have been taken by States to reduce impunity and work with legal systems. The **EU and its Member States**, including the **UK**, have worked on the revision, translation and roll-out of the *International Protocol on the Documentation and Investigation of Sexual Violence in Conflict*, together with **Bosnia and Herzegovina, Colombia, the Democratic Republic of the Congo, Iraq, Nepal and Uganda**. **Switzerland** supports the Women's Initiatives for Gender Justice in Uganda and the Democratic Republic of the Congo advocating for gender justice through both domestic mechanisms and the International Criminal Court. **Slovenia** has also supported the ICC to ensure accountability for breaches of IHL, including for sexual violence in armed conflict. **Finland** has been chair of the Justice Rapid Response network.¹⁸

Zero tolerance of sexual exploitation and abuse

Efforts to implement Resolution 3 on SGBV have resulted in significant progress in terms of policy relating to the prevention of and response to PSEA. In 2018, the IFRC Secretariat adopted a new policy on this issue. Currently, few National Societies have a specific policy on PSEA, including established reporting and investigation systems, in place. The **Kenya Red Cross** and the **British Red Cross** do have such a policy, while many others refer to PSEA in their Codes of Conduct. In addition to adopting its own policy, the IFRC Secretariat committed to supporting 15 National Societies per year from 2018 to 2020 in developing and adopting their own policies on PSEA. Several webinars and two policy workshops have been held to support National Societies, and a policy template has been drawn up for them to adapt to their own national laws.

The ICRC has significantly enhanced its internal safeguarding mechanisms in relation to PSEA. A compliance and integrity framework has been in place since 2018, composed of the staff Code of Conduct and its accompanying operational guidelines and policies, including the policy on prevention of and response to sexual misconduct. This policy provides definitions and explanatory notes on the prohibitions of sexual misconduct and clarifies the responsibilities and standards of behaviour expected from employees and managers in terms of preventing and responding to violations in these areas.

In terms of staffing, a PSEA adviser has been recruited. This position is shared between the Accountability to Affected People/Operations Department and the Global Compliance Office, thus strengthening the link between accountability to affected people and staff behaviour, as well as between HQ policy development and the field. Safeguarding efforts are also encompassed by the Accountability to Affected People Institutional Framework.¹⁹

An e-learning module on the Code of Conduct was launched in October 2018, covering PSEA and other sexual-misconduct case studies. This training is mandatory for all ICRC employees and forms part of the induction training package. Efforts are underway to improve coordination of the various functions with a prevention or response responsibility.

The ICRC has established a centralized system for receiving and handling complaints. The organization promotes the escalation of complaints received at a number of intake points at

¹⁵ <https://gbvaor.net/>

¹⁶ <https://www.humanitarianresponse.info/en/coordination/genacap>

¹⁷ <https://www.humanitarianresponse.info/en/coordination/procap>

¹⁸ <https://www.justicerapidresponse.org/>

¹⁹ <https://www.icrc.org/en/publication/accountability-affected-people-institutional-framework>

delegation and HQ level, which include managers, the Global Compliance Office and a web-based reporting mechanism called Integrity Line. This mechanism can be used by people within and outside of the organization to report allegations of misconduct, which can be done anonymously. The ICRC and the IFRC Secretariat have both signed the *Inter-Agency Scheme for Disclosure of Safeguarding Related Misconduct in Recruitment Processes within the Humanitarian and Development Sector*,²⁰ an initiative developed by the Steering Committee for Humanitarian Response to allow information on misconduct to be shared so that recruitment of former perpetrators can be avoided.

Research and knowledge²¹

The ICRC has issued publications on sexual violence in detention, how to prevent and reduce the risk, and how informal processes shape the behaviour of members of armed groups in relation to issues such as sexual violence. Research has been conducted on the prohibition of sexual violence within military doctrine, training manuals and other materials of State armed forces. The ICRC is currently studying the humanitarian consequences of mandatory reporting requirements for incidents of sexual violence, as well as sexual violence against men, boys and those from sexual and gender minorities.

Case studies have been issued by the **Netherlands Red Cross**, **Norwegian Red Cross** and the IFRC Secretariat on behalf of the Global Red Cross Red Crescent SGBV Working Group,²² describing the lessons learnt and good practice developed as a result of projects implemented by the **Burundi Red Cross**, **Colombian Red Cross** and **South Sudan Red Cross**. Between 2016 and 2018, these three National Societies helped 1,400 victims/survivors of SGBV by providing health and psychosocial support, and other services. They also trained 372 local service providers and staff from public institutions in how to deliver quality services and use referral pathways.

Since 2015, the IFRC Secretariat has published several global and country studies looking at the prevalence of SGBV in disasters, types of SGBV and to what extent SGBV provisions are included in disaster laws and policies. The studies show that the risk of SGBV is exacerbated during crises; that risks differ depending on gender, age and ability; and that better coordination and planning is needed in disaster risk management. A study has also been published on the risks and types of SGBV faced by migrating and unaccompanied children.

²⁰ https://interagencystandingcommittee.org/system/files/inter-agency_misconduct_disclosure_scheme_explanatory_notes_002.pdf

²¹ For the full list of 16 studies and training materials published, see Annex 2.

²² Membership comprises representatives of the IFRC and the ICRC, as well as the National Societies of the following States: Afghanistan, Armenia, Australia, Bangladesh, Burundi, Canada, Colombia, Cook Islands, the Democratic Republic of the Congo, Denmark, Fiji, Finland, France, Ivory Coast, Kenya, Malaysia, Nepal, the Netherlands, Niger, Norway, Republic of Ireland, Samoa, Sweden, Tonga and the United Kingdom.

Training and capacity-building²³

The ICRC and the IFRC Secretariat, in collaboration with the Geneva Centre for Education and Research in Humanitarian Action, have developed a range of SGBV materials and training. The ICRC has included the topic of sexual violence in its induction training for all new staff, as well as in internal professional training across different departments. Capacity-building has also been offered to National Societies and local service providers in countries in which the ICRC works on sexual violence. Based on its research on military doctrine for State Armed Forces, the ICRC has developed a toolkit to support the organization's engagement with weapon bearers. Indeed, practical tools are continuously being developed and updated, including tools for case management, referrals and engaging with victims/survivors. In addition, deployment of sexual violence operations managers in the field has contributed to training and capacity-building of ICRC staff in priority contexts. The ICRC conducted further training with State institutions, often in the framework of the Women, Peace and Security agenda and/or the UN Department of Peacekeeping Operations.

The IFRC Secretariat has developed a number of reports, tools and training courses. These include the Minimum Standards for Protection, Gender and Inclusion (PGI) in all sectors of emergency work, and the Joint Action for Prevention and Response to Sexual and Gender-based Violence Training. Both set out practical actions to ensure prevention of and response to SGBV. PSEA is addressed throughout the Minimum Standards and in the training modules, which have been developed to give Movement staff and volunteers the necessary understanding of gender, diversity and protection, including core and specialized PGI surge competencies. A specific training course on psychosocial support for people affected by SGBV has also been developed by the IFRC Reference Centre for Psychosocial Support. Training based on these modules is continuously being rolled out to National Society staff and volunteers, as well as to staff of the IFRC and the ICRC in all regions. Since 2015, more than 600 people have been trained.²⁴

Numerous training and capacity-building initiatives have been implemented by or with the support of States. In addition to those mentioned under *Prevention*, above, training has also been provided to governments, the judiciary, police and civil society on the *International Protocol on the Documentation and Investigation of Sexual Violence in Conflict*. Furthermore, **Denmark** and others have supported the work of the United Nations Population Fund to develop Global Inter-Agency Minimum Standards on Addressing GBV in Emergencies.

Collaboration and partnership

Despite limited resources, the Movement has achieved a great deal in its SGBV work, largely because of good internal coordination and collaboration. The **Global Red Cross Red Crescent SGBV Working Group**, under the Global Red Cross Red Crescent Gender and Diversity Network, was established in the run-up to the 32nd International Conference and is co-chaired by National Societies and the IFRC Secretariat. The membership includes representatives of the ICRC and National Societies with an interest in working on SGBV,²⁵ and it has been essential in developing training materials, tools and Movement-wide guidelines and indicators for monitoring, jointly organizing training and sharing good practice. Additionally, the regional and sub-regional **Gender and Diversity Networks in the Asia-Pacific region** have tested training materials and contributed to the IFRC Secretariat's country studies on SGBV in disasters. In Africa, four annual **SGBV forums** have been organized by the **Norwegian Red Cross**, the ICRC and the IFRC Secretariat, in which 19 African National Societies participated in 2018. In 2017, a regional forum,

²³ A more detailed overview of progress and achievements can be found in Annex 1.

²⁴ There are no accurate figures for the number of training sessions conducted globally. Regarding the figures that are available, it is possible that those who took part in several training sessions or programmes have been counted more than once.

²⁵ See footnote 12 for the list of members.

in which 13 regional National Societies participated, was held in the Americas. Participants reported that the forums were highly inspirational and provided opportunities for sharing learning on how to work on SGBV prevention and response in the regions. These forums have also been a platform for demonstrating progress in programming over the years.

The Resolution has resulted in the formation of new partnerships and collaborations with non-Movement actors at global level. For example, the ICRC and the IFRC Secretariat have become members of the GBV AoR, and the IFRC Secretariat is now a member of the Call to Action on Protection from Gender-Based Violence in Emergencies.²⁶ At country level, National Societies and local actors are now coordinating referral pathways and training. The ICRC, for its part, has worked with the Association for the Prevention of Torture, the League of Arab States, the Centre for UN Peacekeeping for South-East Asia, the San Remo Institute, InterAction and the Commonwealth. For the IFRC Secretariat and National Societies, the expertise and resources accessed through collaborating with UNFPA, UNICEF and the International Planned Parenthood Federation have been especially valuable. One such collaboration, between the IFRC Secretariat and CARE International, encompassed several training sessions and capacity-building initiatives for 14 National Societies in the Pacific region in 2016-2017. The IFRC Secretariat also collaborated with the Association of Southeast Asian Nations (ASEAN) and the London School of Economics and Political Science on country-specific studies in the Asia-Pacific region. In February 2019, the UN secretary-general and the ICRC president, speaking on behalf of the Movement, presented a joint statement on sexual and gender-based violence, calling for urgent action.

As a global initiative that brings together 82 partners, including States and donors, international organizations and NGOs, the Call to Action has been a major vehicle for collaboration. The **EU**, **Canada** and **Switzerland** have all taken on leadership roles as part of their membership. Another prominent forum for collaboration was the Role of National Action Plans in Promoting the Women, Peace and Security Agenda. **Slovenia** hosted an event in this context in 2018, which was attended by representatives from all seven Western Balkan countries. Other events on SGBV included the **UK's Preventing Sexual Violence in Conflict Initiative**, the *Stand Speak Rise Up* conference in **Luxembourg** in March 2019, and the *Ending Sexual and Gender-based Violence in Humanitarian Crises* conference in May 2019. Known as the Oslo Conference, this was hosted by **Norway** and co-organized by **Iraq**, **Somalia**, **the United Arab Emirates**, UN OCHA, UNFPA and the ICRC, and brought together hundreds of State and civil society representatives from around the world.

ANNEX 2

FURTHER READING

Publications by the International Red Cross and Red Crescent Movement on sexual and gender-based violence

<https://www.rodekors.no/contentassets/9bb4fe9324f6427880895bb57e249b80/rcrc-publications-on-sgbv-for-sgbv-conference-2019.pdf>

²⁶ <https://www.calltoactiongbv.com/>