

HUMAN RIGHTS VIOLATIONS AGAINST KEY POPULATIONS AMID ONGOING WAR IN UKRAINE

REGISTERED IN THE REAct SYSTEM FROM FEBRUARY 24 THROUGH JUNE 1, 2022:

751

incidents reported by 714 clients from key populations

50

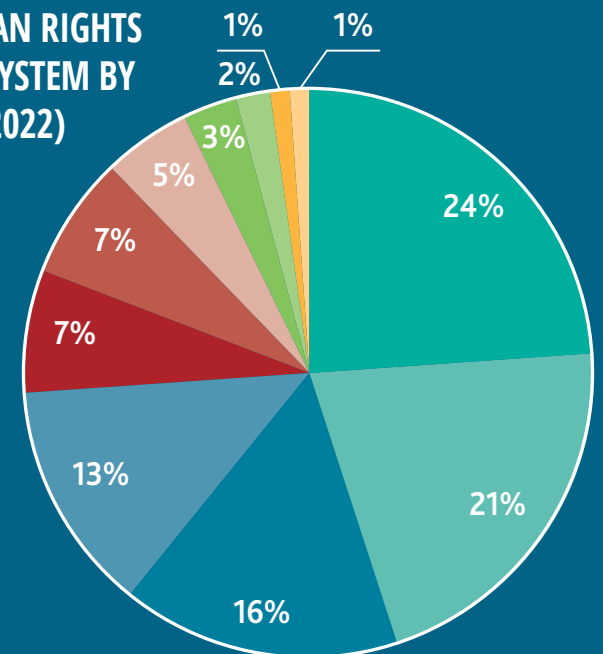
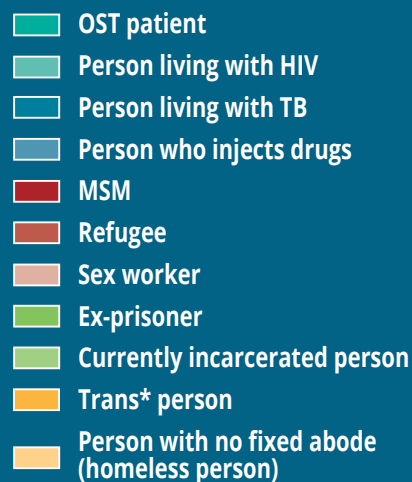
of which being cases associated with Russia's full-scale invasion into Ukraine

40

incidents involving human rights violations by the Russian invaders

Key HIV-affected communities in Ukraine face widespread rights violations, prejudice and discrimination due to their vulnerable population status. Amid Russia's full-scale invasion into Ukraine, starting from February 24, 2022, the situation with human rights violations against people who inject drugs (PWID), patients in OST programs, people living with HIV (PLHIV), people with TB, sex workers, men who have sex with men (MSM), and other most-at-risk groups has significantly deteriorated. In addition to the barriers and constraints encountered by clients under the imposed martial law, the REAct system has recorded war crimes¹ by the invading Russian military.

HIGH-RISK GROUP LINKED TO THE HUMAN RIGHTS VIOLATION REPORTED INTO THE REAct SYSTEM BY THE CLIENT (FEB. 24 THROUGH JUNE 1, 2022)



¹ **War crimes** are violations of the 1949 Geneva Conventions and other serious violations of the laws and customs of war set forth in Article 8 of the Statute of the International Criminal Court. They are regarded by international law as unconditional international crimes.

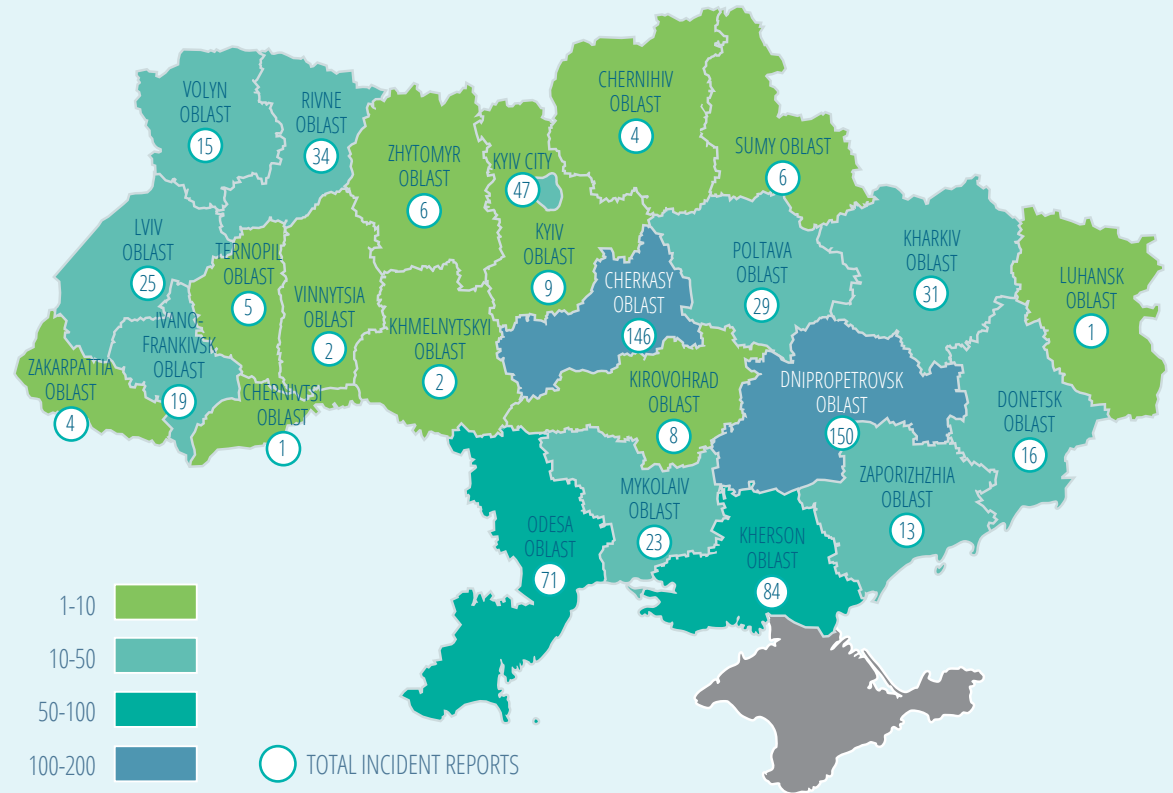
KEY TYPES OF HUMAN RIGHTS VIOLATORS AND VIOLATIONS

Just as before the full-scale war broke out, the key communities' human rights are most often violated in government-supported healthcare facilities, i.e., 50 percent of all cases involved. Most of the recorded rights violation incidents are committed by primary care service providers, which may be accounted for by an increased burden on medical personnel due to the relocation of health care workers to safer regions.

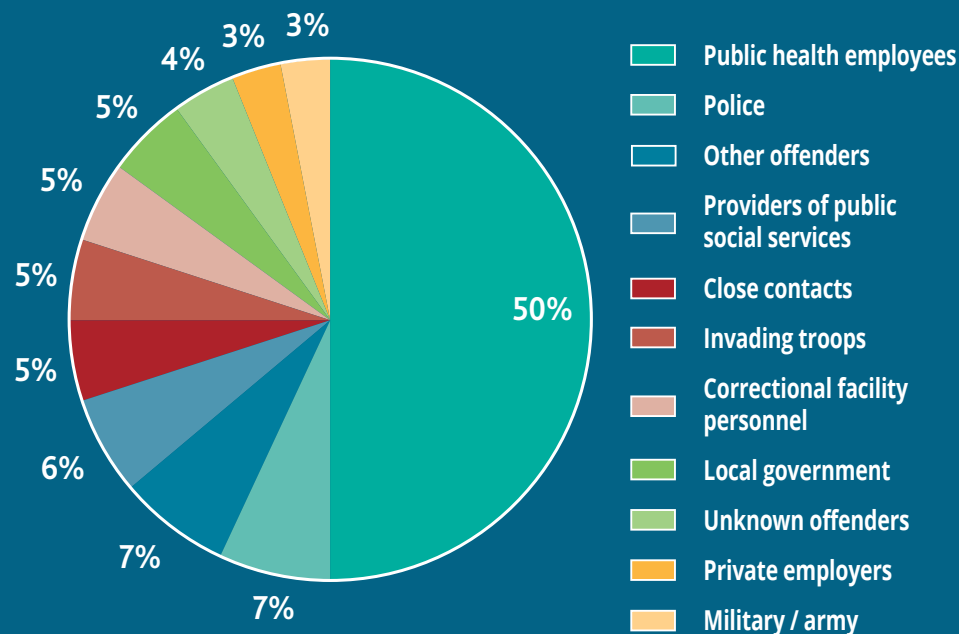
Compared to 2021, the share of rights violations by military and army personnel has increased to currently stand at 3 percent. Since the beginning of the war, rights violations by members of territorial defense units have been recorded as well. The share of rights violations by the police, on the contrary, has decreased from 19 to 7 percent, which may be attributed to the active involvement of the police in defense-related activities and a fall in routine police ID checks/detentions involving key communities.

Among the most widespread types of rights violations, the following offenses are recorded: refusal to provide assistance (care) or services – 52 percent (mostly related to the health-care sector); emotional (20 percent), and physical (12 percent) violence or harm.

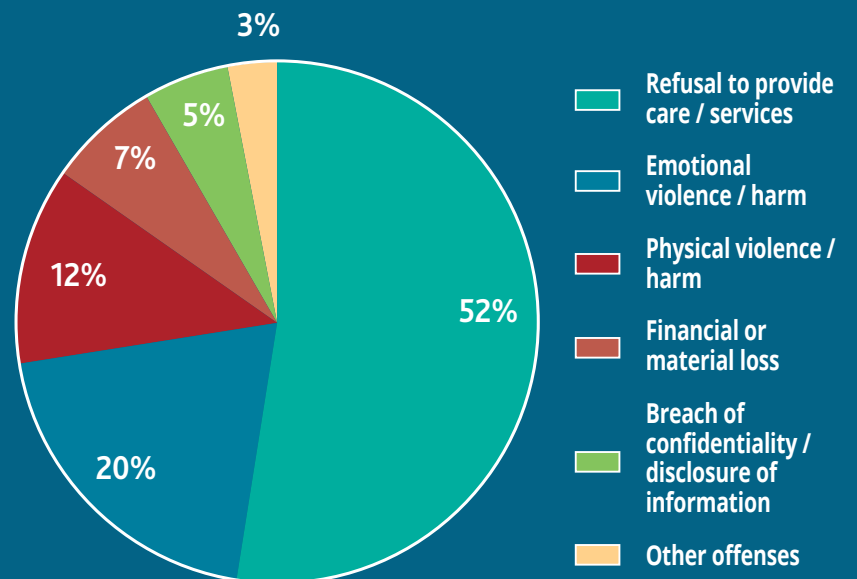
RECORDED RIGHTS VIOLATION INCIDENTS REPORTED BY CLIENTS INTO THE REAct SYSTEM BY REGION (FEB. 24 THROUGH JUNE 1, 2022), TOTAL REPORTS: 751



KEY RIGHTS VIOLATORS



KEY RIGHTS VIOLATIONS



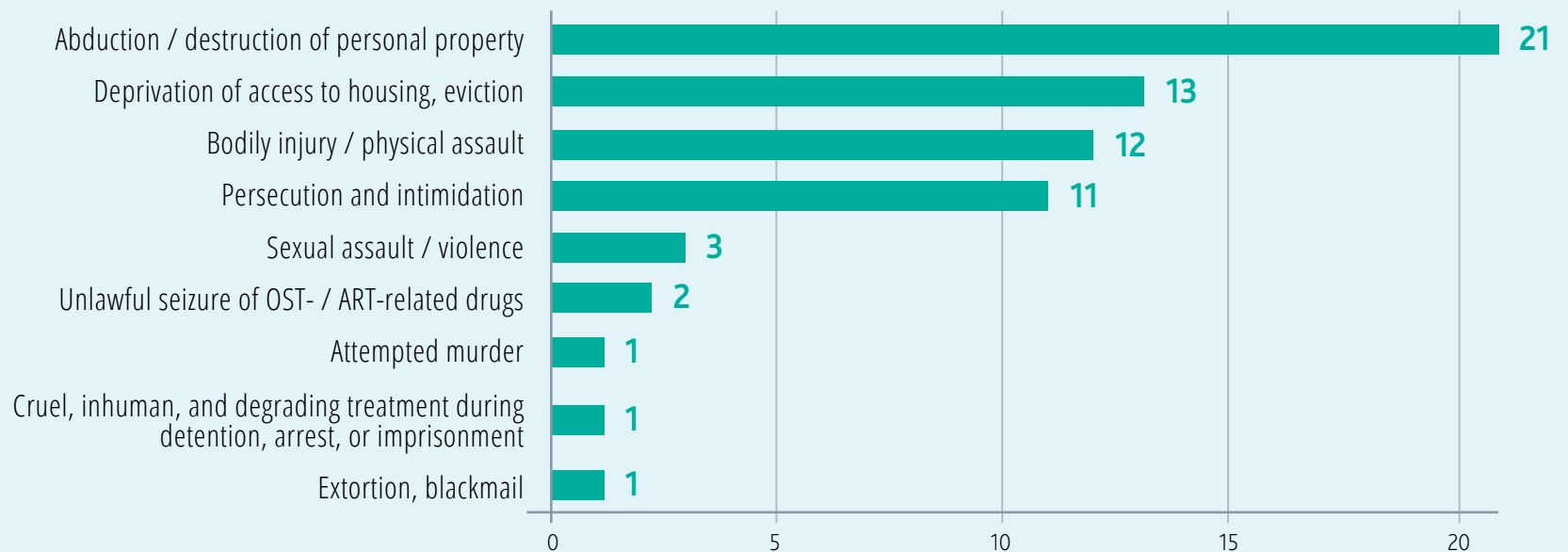
*Multiple types of human rights violators and violations are possible within one case.

HUMAN RIGHTS VIOLATIONS AND WAR CRIMES COMMITTED BY THE INVADERS

SINCE RUSSIA'S FULL-SCALE INVASION INTO UKRAINE WAS LAUNCHED, A NEW CATEGORY OF HUMAN RIGHTS VIOLATORS WAS ADDED TO THE REAct SYSTEM, I.E., INVADERS, WHICH ACCOUNT FOR 5 PERCENT OF THE OFFENDERS AMONG ALL CATEGORIES INVOLVED.

With things standing as they are, this indicator merely shows that clients were able to report the offense to REAct only in 5 percent of all registered cases of rights violations committed by invading troops. The actual number of related incidents involving relevant violations against key communities by members of invading armed forces is much higher!

TYPES OF RIGHTS VIOLATIONS AND WAR CRIMES COMMITTED BY THE INVADERS



Recorded by the REAct project, war crimes committed by Russian war criminals in Ukraine against key communities can be divided into two types according to international legal standards:

1) Grave breaches of the 1949 Geneva Conventions, specifically:

- ▶ Attempted murder through bombing, shelling, and gunfire;
- ▶ Torture and inhuman treatment
- ▶ Intentional infliction of severe suffering and harm to health

2) Other serious violations of the laws and customs of war, specifically:

- ▶ Intentionally directing attacks against the civilian population as such or against individual civilians not taking a direct part in hostilities;
- ▶ Encroachment on human dignity, particularly offensive and humiliating treatment;
- ▶ Rape;
- ▶ Using starvation of civilians as a method of warfare by depriving them of objects indispensable for their survival, including acts intentionally impeding relief supplies.



The client (an OST patient) reported his situation to the REACTor after his home was searched by the Russian military. During the search, the invaders developed unfounded suspicions that he was connected with the Territorial Defense Forces and veterans of the Anti-Terrorist Operation (ATO). They put a bag over the man's head and took him away from home to an unknown place. The invaders tortured him for several days trying to learn from him the whereabouts of the Territorial Defense and ATO participants. All this time, the client was kept in a cold room and beaten from time to time until he passed out. Later, the client was taken in an unconscious state to the outskirts of Kherson and thrown out of the car. For several days, the man was in hiding staying out on the street and ended up getting very ill as a result.



The REACTor was contacted by a woman who became a victim of sexual and physical violence. For two weeks, the invaders had abused and raped her. When she was taken out for "some fun" for the first time, she decided to scare off the military invaders by saying she had been a long-time drug user, thus getting HIV, which has now turned into AIDS. However, the RF soldiers wouldn't "buy" her story. Instead, this only got them angrier, so they gave the woman a bad beating, and then raped her. Once evacuated, accompanied and helped by the REACTor, the woman filed a police report on the same day.



The client was on substitution therapy in Snigurivka (Mykolaiv region). In March 2022, the man picked up a 30-day supply of drugs and was trying to move out of Snigurivka together with some other patients to a safer place. At the Russian-controlled checkpoint, he was body-searched. The invaders found and took away his methadone, ARV therapy, and pain relief medication, prescribed and taken on a permanent basis. In addition, they damaged his personal belongings and insulted him in every way they could. The man had to travel to another city without his medication. Once there, he called the social worker, who was able to arrange his transfer to another service delivery site, where the client is currently being served.

The Geneva Convention Relative to the Protection of Civilian Persons in Time of War² has to be respected as a mandatory requirement in case of war being declared or of armed conflict, and still applies even if one of the parties does not recognize the state of war. For war crimes committed by military force members, individuals can be held liable without prejudice to the responsibility of the State they represent under international law.

Each of the parties to the conflict is required as a minimum to abide by the following provisions:

- 1) Persons who do not directly participate in hostilities must, under any circumstances, be treated humanely without any discrimination; protected persons are entitled, in all circumstances, to respect for their persons, their honor, their family rights.
- 2) For this purpose, the following acts, committed against the persons mentioned above, are and must remain prohibited at all times and in all places: Violence to life and person, in particular murder of all kinds, mutilation, cruel treatment and torture, rape; outrages upon personal dignity, in particular, humiliating and degrading treatment; but also any other form of brutality by civilian or military agents.

The Convention separately covers guarantees that apply to any territory occupied:

- Protected persons who are in occupied territory shall not be deprived, in any case or in any manner whatsoever, of the benefits of the present Convention by any change introduced, as the result of the occupation of a territory, into the institutions or government of the said territory, not by any agreement concluded between the authorities of the occupied territories and the Occupying Power, not by any annexation by the latter of the whole or part of the occupied territory.
- Any destruction by the Occupying Power of real or personal property belonging individually or collectively to private persons, or to the State, or to other public authorities, or to social or co-operative organizations, is prohibited, except where such destruction is rendered absolutely necessary by military operations.
- The Occupying Power has the duty of ensuring the food and medical supplies of the population, as well as maintaining the medical and hospital establishments and services.

On the strength of the above, it can be safely stated that the Russian military invaders are committing numerous war crimes against key communities, both at the individual level in relation to specific persons, and through a blatant disregard for the requirement to meet their basic rights and needs in the temporarily occupied territories of Ukraine.

BARRIERS CLIENTS FACE WHEN SEEKING SERVICES AND PROTECTION OF RIGHTS DUE TO THE FULL-SCALE WAR IN UKRAINE

In addition to war crimes against key communities, Russian aggression has a negative impact on the possibility of ensuring their rights to proper health care, social and other services, as well as the ability to stand up for their rights when dealing with stigma and discrimination.

- ▶ **The lack of medical certificates/records, or ID documentation** that clients had to leave behind when fleeing war, or lost when their homes were destroyed, creates significant obstacles that prevent such clients from seeking services in the regions to which where they have relocated.
- ▶ **The operational constraints imposed on public agencies and state registers**, or their complete shutdown in the temporarily occupied territories of Ukraine make it impossible for clients to access certain services, e.g., those related to the re-issuing of their ID documents, getting a place in a shelter, etc.
- ▶ **The forced migration of health workers out of the country** or to other regions of Ukraine has led to a shortage of specialists on the ground, thus also making it impossible for key communities to access medical services. There is a critical shortage of specialty physicians and medical practitioners who have training in a specific area of medicine.
- ▶ **The increase in internally displaced persons from among clients migrating between regions** has affected the timeline for access to services by clients, as well as the quality and scope of related services. Often, clients have difficulties in getting medical services in the scope that was previously available to them before relocation to another city or region.
- ▶ **Due to the relocation of some representatives of public agencies, NGO employees, and human rights organizations**, obstacles are experienced in redirecting clients to them, as this process requires ongoing monitoring and communication support from the Project's REActors and coordinators, whereas in some areas such contacts have to be reestablished from scratch.
- ▶ **Due to a shift in clients' top priority needs**, towards food, housing, and medication, generally, clients tend to seek help in having their rights protected only rarely.

The invasion of the Russian Federation into Ukraine has created significant difficulties in the system of care for **people living with HIV and people with TB** as well as in linking them to appropriate support services. Patients are facing a shortage of medication supplies and obstacles that limit their timely access to vital drugs. This happened due to the shortcomings in the procedures for dispensing prescriptions and there being no established algorithms for providing ART and TB treatment under force-majeure conditions during wartime.

A negative impact was also experienced by OST dispensing sites, specifically through medication stock-outs due to supply chain breakdowns. This had a critical impact on the ability of **OST patients** to access treatment consistent with the previously prescribed dosage and regimen.

“DUE TO A SURGE IN OST PATIENTS, DOCTORS HAVE TO QUICKLY REASSESS THE STOCK OF AVAILABLE DRUGS, REVISE AND PRESCRIBE REDUCED DRUG DOSES TO COVER ALL PATIENTS, AS WELL AS HAVE THEIR PATIENTS PICK UP THEIR DISPENSED PRESCRIPTIONS ON A DAILY BASIS.”

L. Vlasenko, Regional Coordinator of the REAct

There have been reported cases where **patients in OST programs** were unable to obtain documentation required for transfer to another service site due to urgent evacuation from a dangerous area. This, in turn, delayed their access to treatment at a new site located in another region. Interruption of OST is sometimes initiated by clients themselves. In the temporarily occupied territories of Ukraine, in a state of high stress and psychological distress, some OST patients discontinue treatment and go back to taking street drugs.

“RUSSIAN PROPAGANDA HEAVILY UNDERMINES OUR CLIENTS' CONFIDENCE IN A POSITIVE OUTCOME, THEY NO LONGER BELIEVE THAT UKRAINE IS COMING BACK... THIS CAUSES THEM TO DISCONTINUE THERAPY, GO BACK TO TAKING DRUGS AGAIN, AND FORGET ALL ABOUT THEIR HEALTH.”

O. Ovsianikova, Regional Coordinator of the REAct Project based in the Zaporizhzhia region, specifically in the occupied Melitopol

Some **PWIDs** reported being denied access to shelters or medical services at their new place of residence after relocation to safer areas. There were multiple recorded cases of PWIDs being detained and persecuted by the police while seeking related drugs, involving police brutality cases.



A client who injected drugs was detained by the police in the evening before the curfew began, while he was looking for a hidden «stash.» Armed police officers detained the man, inflicted bodily injuries on him, and accused him of being an enemy agent who was making special marks to draw the enemy's fire. The client denied all the charges. In the end, he showed them the drugs he had picked up. Then the police officers went on to ask him who was his dealer now and who was his source of drugs before. The client replied that he had no idea because he only had a number sent to him via a text message. The police wouldn't believe him and used physical force against him again, threatening to shoot the client. Getting no further information from him, they eventually went away.



Due to Russia's invasion into Ukraine, the client (MSM) moved to Kryvyi Rih from the city of Sumy together with his boyfriend. Over there, they managed to find an apartment for rent, where they lived until their landlord burst in accusing them of «homosexuality.» He said he was informed that the client and his boyfriend were caught kissing. The owner of the apartment shouted that he would have nothing to do with the «perverts» and yelled at them to get out of his apartment immediately. To all intents and purposes, the boys found themselves out on the street.

MSM and trans*people reported facing discriminatory behaviors, forced eviction from temporary shelters, and physical abuse during evacuation, amid increased aggression and decreased tolerance in society sparked by ongoing hostilities. Such discrimination affects their ability to address significant concerns, e.g., among others, those related to their personal safety.

Sex workers fleeing the war and seeking protection in safer regions, due to stigma, faced obstacles in accessing humanitarian aid and a place in a shelter due to their belonging to this key community, opportunities to engage in sex work in a new region, as well as experienced emotional and physical violence. The status of an internally displaced person has contributed to an even greater vulnerability for members of this at-risk community, thus undermining their chances of having their rights protected.



The REActor was approached by a woman who came from the Donetsk region, fleeing the hostilities. She didn't have a job, and she eked out her living by selling sexual services to earn some extra money. She decided to continue with this business in Poltava as well. Once a man approached her and forcibly tried to drag her into his car, but the woman broke free and called the police. By the time the patrol police arrived, the man left the scene but the patrol officers wouldn't take a statement from this woman regarding the offense committed, saying that she was out of town, and, what's more, from the area of active hostilities, «One of these days, she will leave town and then go look for her...» Besides, generally speaking, they said that it was her own fault because she was engaged in such activities.

KEY SERVICES THAT CLIENTS NEED TODAY:



Psychological support, especially provided online and over the phone, including motivational counseling for clients to continue their treatment uninterrupted in the stressful realities of war.



Providing information support and materials (reminder pamphlets) regarding access to humanitarian aid, shelter accommodation, or other temporary housing, as well as traveling out of the country.



Receiving humanitarian assistance (food kits, hygiene products, medicines, HIV prevention products).



Legal advice on how to access medical assistance, how to get registered for ART and OST in other regions, what steps to follow when ART and OST drugs are seized at checkpoints, how to behave during an illegal search and seizure, how to behave when your ID documents are seized, or when you suffer physical violence or harm.