

WAR CRIMES AND VIOLATIONS OF THE RIGHTS OF KEY POPULATIONS

against the background of Russian military aggression: data from the REAct system

as of 01.12.2022

A FULL-SCALE RUSSIAN MILITARY INVASION OF UKRAINE HAS EXTREMELY NEGATIVE CONSEQUENCES FOR ENSURING THE RIGHTS OF KEY POPULATIONS IN THE CONTEXT OF HIV/TB. FIRST OF ALL, IT IS ABOUT THE VIOLATION OF THE RIGHTS OF KEY POPULATIONS UNDER MARTIAL LAW, AS WELL AS WAR CRIMES THAT ARE COMMITTED BY THE OCCUPIERS.

REAct KEY STATISTICS (24.02 – 01.12.2022)



2194

cases of violation of the rights of key populations



2153

community clients, of which

483

are IDPs,

30

are refugees



884

cases that are related to the beginning of the full-scale war of the Russian Federation against Ukraine



80

cases where the perpetrator is directly the occupiers



76

REActors who provide support to clients



56

partner NGOs are REAct participants



17

regions are involved in REAct



REAct (Rights - Evidence - Action) – is a tool for monitoring and response to human rights violations at the community level.

The system has been implemented since 2019 by the ICF «Alliance for Public Health» with the financial support of the Global Fund.

REAct Page in Facebook: facebook.com/REAct.Ukraine

Consequences of the war regarding the implementation of the right to health and access to medical services



More than 1,000 medical facilities in Ukraine have been destroyed or damaged as a result of military aggression by Russia



The departure of medical specialists to safer regions, and often outside the borders of Ukraine, has caused a lack of human resources in medical institutions



Due to urgent evacuation from cities where the active military operations were active, clients often did not have personal documents with them, which made it difficult to obtain medical services in new regions. Clients were also unable to restore documents, as the Centers for the provision of administrative services during wartime did not accept applications for the restoration of documents



In the temporarily occupied territories, the civilian population is deprived of access to vital medical services and treatment



Internally displaced persons as a risk group during war

According to the [Guidelines on Internally Displaced Persons](#), internally displaced persons (IDPs) are persons who have been forced to leave their homes or places of permanent residence, in particular as a result of or to avoid the consequences of armed conflict, situations of generalized violence, human rights violations, and who have not crossed an internationally recognized border.

[The Office of the High Commissioner for Human Rights](#) defines the following characteristics of IDPs:

- People who have been forced to flee their place of residence or leave their homes, especially in armed conflict, **are usually exposed to increased vulnerability in a number of spheres.**
- **The mortality rate of internally displaced persons is significantly higher** than that of the population in general.
- Such individuals remain **at high risk** of physical assault, sexual violence, and abduction, and **are often denied sufficient access to shelter, food, and health care.**
- **The vast majority of internally displaced persons are women** and children, and they are particularly at risk of having their basic rights violated.



Internally displaced persons from key populations which are vulnerable to HIV and TB are particularly vulnerable and face additional risks and barriers to access to services, and are more likely to face discrimination due to belonging to key populations.

Since the start of the war, **the REAct system has added a risk group category of internally displaced persons** to which key populations can belong.

In the conditions of logistical difficulties in providing health care facilities with **ART, TB and OST drugs**, IDPs face **barriers in the possibility of obtaining them according to the residual principle**:



A man is a resident of Kharkiv. Due to the attack of the Russian Federation, he was forced to leave the city. He had a sufficient amount of OST drugs with him. However, after some time he turned to the AIDS Center in Kryvyi Rih. Turning to the doctor on duty, she, unfortunately, refused him. She argued that they had enough therapy, but it was not known when the supply would be; so it was decided to issue therapy and other drugs only to those who had already received them before, not to issue OST to new clients and temporarily displaced persons.

When trying to obtain IDP status in another region of temporary residence, representatives of key communities faced **discrimination due to their belonging to one of the populations** by representatives of state social institutions:



A man injects drugs and he is an IDP. He came to Kryvyi Rih at the beginning of June. He applied to the Department of Labor and Social Protection of the Population in order to register the IDP status. He submitted the necessary documents, they were accepted, and workers told him to wait for a call when the certificate was ready. About two weeks passed like this, the man could not call the institution at the indicated numbers, so he himself visited the institution again. There it turned out that the man apparently filled out the documents incorrectly, so the certificate was not yet ready. The man first asked for the documents, which he had filled out, but they were not provided to him. The man then asked a specialist to help him fill out the documents, after which he was rudely refused, along with accusations that he injected drugs, and the financial assistance he was counting on would still «go to drugs». The man's attempts to get help were once again interrupted by the threat that if he did not leave the building on his own, he would be «helped» by the guards standing at the entrance.

HIV status, or drug use experience, or being on the OST program became barriers for IDPs when trying to settle them in hostels in other regions to which they were evacuated:



A woman appealed, she evacuated to Poltava region together with 25 patients of the state OST program from Kramatorsk and other «hot» areas, fleeing from bombings and shelling. People were on the road for almost two days. The local authorities promised to provide them with temporary shelter. Upon arrival, they were registered at the city council and sent to one of the hostels. But everything changed in ten minutes, because they found out about their stay in the OST program. People were not allowed in the hostel. For several hours, IDPs, including people with disabilities, were forced to stand in the cold. There was no mention of the dining room. It was announced that allegedly «there were no places». Although, before that there were places, and the food in the dining room was ready. People called everywhere they could, they said that people in uniform with assault rifles had appeared near them. Frozen, hungry, tired and confused, in an unfamiliar city. All conversations with the local authorities did not yield results. Arguments were put forward that «drug addicts» did not have the right to live in the hostel with other people, children, because, allegedly, they were dangerous, could kill someone, and they needed to be isolated.



A client was refused admission to the shelter due to belonging to a vulnerable group. Before settling in a hostel for IDPs, the client was asked to complete a questionnaire. Among all the questions, the social worker who was in charge of it asked if she had any chronic illnesses and such. Among the list of diseases, the client indicated her HIV-positive status, hoping for help with receiving ART in the future. After that, she was denied the opportunity to settle in the shelter.

IDPs were also forcibly evicted from the hostel, even after some time living there, when information about their belonging to key populations was revealed. **The eviction took place not only on the part of the dormitory staff, but also on the part of individuals** who volunteered to provide temporary accommodation in their individual apartments.



A client came to Lviv from Mariupol and, having received an IDP certificate, asked for help in providing temporary shelter. Some time after the settlement, the shelter workers had questions about why the client was systematically absent (the client is a participant in the OST program). The client admitted that she received the drug on the website and underwent treatment. After that, she was evicted from the shelter without even providing an alternative place to live.



The REActor was asked for help by representatives of PWUD \IDP who moved to Rivne from the temporarily occupied territories. The couple could not find housing for a long time, and when they found and settled in a rented apartment, after five days, the owners of the apartment decided to evict them. When the couple asked why they were being evicted, they answered that their neighbor, who was a nurse on the OST website, said that they were «drug addicts» and came to her for methadone in a medical institution.



Photo: Alexander Ermochenko (Reuters)

War crimes by the occupiers



War crimes are serious violations of international humanitarian law, in particular the Geneva Conventions of 1949, violations of the laws and customs of war, for the commission of which criminal liability of individuals is provided at the national and international levels. They are considered by international law as unconditional international crimes.

REFERENCE:

- On October 24, 1945, **the United Nations was founded** - a global international organization whose purpose is to maintain and strengthen peace and international security.
- On December 10, 1948, **the Universal Declaration of Human Rights was adopted** - the first international legal document that enshrined basic human rights and freedom.
- On August 12, 1949, the **valid Geneva Conventions¹ were adopted** - international treaties that ensure the protection of war victims (wounded, prisoners of war, civilians), contain restrictions on cruelty during armed conflicts.
- On July 17, 1998, **the Rome Statute of the International Criminal Court was adopted** - the international treaty that established the International Criminal Court defines four main international crimes: genocide, crimes against humanity, war crimes and crimes of aggression.



«In the event of an armed conflict, each side to the conflict is obliged to apply at least the following positions:

- *Persons who are not taking an active part in military operations should be treated humanely, without any hostile discrimination which is based on race, color, religion or belief, sex, origin or property or any other similar criteria.*
- *For this purpose, such actions against the above-mentioned persons are prohibited:*
 - violence against life and person, including all forms of murder, mutilation, abuse and torture;*
 - hostage taking;*
 - insult to human dignity, in particular offensive and humiliating treatment».*

Article 3 of the European Convention on the protection of the civilian population during the war



«The Convention applies to all cases of declared war or any other armed conflict that may arise between two or more parties, even if one of them does not recognize the state of war».

Article 2 of the European Convention on the protection of the civilian population during the war

¹ With additional protocols from 1977 and 2005

WAR CRIMES WHICH ARE COMMITTED BY RUSSIAN WAR CRIMINALS IN UKRAINE AGAINST REPRESENTATIVES OF KEY POPULATIONS AND ARE RECORDED BY THE REACT PROJECT CAN BE DIVIDED INTO TWO TYPES ACCORDING TO INTERNATIONAL LEGAL QUALIFICATION:

1 Serious violations of the Geneva Conventions of 1949, namely:

- attempted murder during shelling;
- torture and cruel treatment;
- intentional infliction of severe suffering and harm to health (in particular through lack of access to life-saving treatment).

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

- intentional attacks on individual civilians who do not take direct part in warfare;
- violation of human dignity, including abusive and humiliating treatment;
- sexual assault;
- deliberate starvation of civilians as a method of warfare by depriving them of things which are necessary for their survival, including the deliberate obstruction of aid delivery.



OCCUPIERS HAVE COMMITTED A NUMBER OF WAR CRIMES AGAINST THE CIVILIAN POPULATION, IN PARTICULAR AGAINST REPRESENTATIVES OF KEY POPULATIONS

Rights violations committed by the occupiers - the military of the Russian Federation and representatives of the occupying state (police, doctors)

Theft/destruction of the client's personal property	42	
Persecution, intimidation	21	
Bodily injury/physical assault	20	
Deprivation of housing, eviction	17	
Refusal of TB treatment	11	
Verbal abuse	4	
Sexual assault/violence	4	
Refusal to conduct an examination for TB	4	
Restricted access to OST due to active hostilities	4	
Withdrawal of ART and OST	4	
Extortion, chantage	3	
Refusal to give shelter	3	
Arbitrary detention/detention by the police	2	
Murder/attempted murder	2	
Refusal to hire	2	
Refusal to issue personal documents	2	
Compulsion to provide information about one's HIV status	1	

Within one case of a client, several types of violation of rights are possible

When the invaders came to «liberate» Ukrainian cities, people had to do everything they could to survive. Someone decided to evacuate the city under fire, and **someone was forced to spend more than one week in the basement of their own house without food and access to vital treatment.**

WAR CRIME



On February 24, the shelling of Mariupol began. On February 26, a rocket attack destroyed the client's house. Only on March 16, the client was able to leave for the city of Manhush, later for Berdyansk, where the humanitarian corridor to Zaporizhzhia was opened. The client was in the basement for 12 days with almost no food and water, access to antiretroviral drugs, complete lack of means of communication, heat and electricity.

A significant part of war crimes committed by the occupiers against the civilian population were committed at checkpoints where the occupiers stopped the cars of civilians. While trying to save their lives and leaving areas of active hostilities, clients were subjected to **compulsive checks at checkpoints** that humiliated them and witnessed the **horrific crimes of killing others.**

WAR CRIME



A woman lives with HIV. Before the war, she lived with her family (husband, 11-year-old daughter) in Irpin, Kyiv region. When hostilities began in the city of Irpin and their home was partially damaged, the woman and her family decided to evacuate the city, as living in the occupation was not possible (lack of access to food, water, medical care, including ART drugs, threat to life and health). During the crossing of the checkpoints, the occupiers committed a number of offenses against the woman and her husband (illegal searches, forced to undress, illegal seizure of personal items: phones, bank cards), threats and physical violence (kicking, pulling hands, forcing them to kneel). The woman also witnessed the shooting of civilian cars (the people in these cars were unarmed and did not resist), the car in front of them was shot.

In addition to inflicting physical damage, the occupiers selected **ART and OST medications at the checkpoints.**

WAR CRIME



A client received substitution therapy in Snihurivka, Mykolaiv region. On March 17, 2022, together with other substitution therapy patients, he received the medicine for 30 days and decided to get out of Snihurivka to a more peaceful place together with some patients, since Snihurivka was captured by the Russian invaders. Only on April 12 he found a place in a friend's car to go with them to the city of Bashtanka, but at a Russian checkpoint he was searched, methadone, antiretroviral drugs and pain medications, which he takes on a regular basis, were taken away.

Cases were recorded when **the occupiers abducted people from cars at checkpoints or from their own homes**, forcibly detained them in inhumane conditions, without access to vital treatment, tortured them.

WAR CRIME



According to the client, he was detained by the Russian military in the yard near his own house, taken (as he later understood to a prison cell in Kherson), where they were held for 17 days, and then released. During detention, they were beaten every day, ART was not given, they were fed once a day very badly, they had to sleep on the floor because of the overcrowded cells. When they released him, they did not give him his passport, they told him to get a Russian passport

REAct recorded appeals from women who found the strength to report horrific **cases of sexual violence which were committed by the occupiers.**

WAR CRIME



A woman, an immigrant, turned to the REActor. In the course of a long conversation, it turned out that the girl was a victim of physical violence in the occupied territory. She was raped by about ten men. The woman admitted that she had a very difficult psychological state and lived only for the sake of her son. When the REActor asked her why she did not contact the law enforcement authorities, she answered that, firstly, she was very ashamed, and secondly, her friend contacted the police with a similar situation and the police told her that it was a waste of time



Occupants in Stanytsia Luhanska, Luhansk region. Photo by Reuters

Human rights in the temporary occupied territory

Representatives of key populations who, under various circumstances, remained living in the temporarily occupied territories, faced almost all possible types of human rights violations by the occupiers.

Loss of housing, harassment and intimidation, use of physical force and humiliation by the occupiers, inability of clients to receive any medical or social services, humanitarian aid due to the activities of the «new» occupation authorities and changes in their priorities regarding the provision of medical aid, psychological pressure due to Russian propaganda and obsessive political ideology and passporting of the Russian Federation - individual examples from the stories of clients from the temporarily occupied territories who turned to REAct. At the same time, there are practically no ways for clients to protect their rights.



Russia, as an occupying power, is obliged to ensure the needs of the civilian population in terms of humanitarian, medical and social services. This obligation is assigned to Russia, as a state that exercises actual control over the occupied territory of Ukraine, in accordance with international humanitarian law.



«Patients of OST do not receive treatment in Melitopol, but are forced to go through 30 checkpoints to Zaporizhzhia to receive their medicines there. It is very expensive to get there. Not all clients could get there. Some were on foot, some were riding bicycles... a humiliating and terrifying corridor through the checkpoint, where a full search by the occupiers takes place with forced undressing: body inspection for tattoos, puncture marks, scars, so that they are not related to military actions...»

O. Ovsyanikova, regional coordinator of the REAct project in Zaporizhzhia



A man ended up in the city after his house was bombed in a village near Kherson. This client was being treated for tuberculosis, but after the start of the war, he could not get the drugs. After the bombing of his settlement, the client moved to the city and for some time he lived in a house with almost no «normal» conditions. Recently, the man began to cough heavily, his health worsened. Since the treatment is interrupted, he suspects that the TB disease is progressing. The medical card is missing, because it was left in the bombed-out house, the family doctor does not get in touch. The man went to the polyclinic, but found out that many doctors had left their jobs, but the doctors who work are not representatives of our state. Only the doctors who support the occupation authorities or the Russian doctors who came to the occupied territory work there. «Tuberculosis is not at the time» - as he was told at the clinic.



A man came to Skadovsk from another district, where his house became uninhabitable after shelling. He said that he was HIV-infected and was being treated for tuberculosis. Before the war, he received drugs, but since May, no one has issued anything, ART as well. He went to the hospital, but there were no doctors there, and those who remained said that they did not deal with HIV-infected and tuberculosis patients. He does not know where else to turn.



A client lost his house due to shelling and moved to Kherson from his district. He said that he contacted the regional administration, where the occupying power is now, about housing. There they explained to him that no one was provided with housing, except for teachers and doctors who had come from Russia. The man had nowhere to file a complaint because the city was occupied.



«... Clients are afraid to complain, because activity is limited by the occupiers. Activists are kidnapped and sometimes it's impossible to find them»

V. Kutsenko, regional coordinator of the REAct project in Kherson²

² Kherson was deoccupied on November 11, 2022, but part of the Kherson region is still under the occupation of the Russian Federation.



**FOR PUBLIC SECTOR
ORGANIZATIONS**

JOIN REAct



**FOR REPRESENTATIVES
OF KEY POPULATIONS,
VULNERABLE TO HIV AND TB**

**SUBMIT YOUR APPEAL AND RECEIVE SUPPORT,
IF YOUR RIGHTS WERE VIOLATED**



[reactaph](https://reactaph.org)



[REAct_APH_bot](https://reactaph_bot)

CONFIDENTIAL FREE OF CHARGE

MORE ABOUT REAct SYSTEM

[HTTPS://REACT-APH.ORG/](https://react-aph.org/)



**REACT
PROJECT**



Alliance
for Public Health