

THE HIDDEN SCARS OF CONFLICT AND SILENCE

Sexual violence against
children in the Democratic
Republic of the Congo 2022-2025

December 2025



“

They came when we were sleeping. We heard shouting and shooting. We tried to hide the children, but they entered the house and took my daughter. I found her the next morning, unconscious and bleeding.

”

– Mother, eastern DRC,
February 2025

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This report analyses sexual violence against children in the Democratic Republic of the Congo between 2022 and 2025. It brings together national administrative data, UN-verified conflict-related data, and testimonies from survivors and frontline workers to provide the most comprehensive picture currently available.

It examines how sexual violence affects children in different contexts, including conflict-affected areas, communities, and households, and looks at who is most affected based on available data, the barriers survivors face in accessing care and justice, and the consequences for children's health, safety, and development. The report also assesses responses to the crisis to date and outlines priorities for progress in prevention, access to survivor-centred services, and accountability.

Map of the Democratic Republic of the Congo



Trigger warning: this report discusses sexual violence against children and women. Some readers may find this material distressing. All names and identifying details of survivors have been changed to protect their identities.

A high-contrast photograph showing the silhouettes of a woman and a young child against a bright, hazy sky. The woman is on the left, her head tilted slightly, and the child is on the right, looking towards the left. The sun is positioned between them, creating a strong backlight effect and a lens flare. The overall mood is somber and contemplative.

Executive summary: the devastating toll of sexual violence against children

Sexual violence against children in the Democratic Republic of the Congo (DRC) remains a pervasive and deeply destabilizing crisis. Despite decades of sustained national and international efforts, violations continue at alarming levels across the country. From January to September 2025, more than 35,000 cases of sexual violence against children were officially recorded¹. The true scale is far greater, as widespread stigma, fear of reprisals and limited access to services mean that many cases are unreported.

Distinct patterns emerging across provinces reveal the nature of the crisis. In the eastern provinces, conflict-related sexual violence has risen steadily since 2022, with a sharp increase in cases involving girls – who represented 47 per cent of documented conflict-related sexual violence survivors in 2024, up from 27 per cent in 2022. Armed non-state actors remain the primary perpetrators, operating in an environment where accountability mechanisms are weak and impunity prevails.

Sexual violence outside conflict zones is also widespread. Many children are abused within their own homes or communities, often by relatives, neighbours or acquaintances. Girls aged 12–17 years remain the most affected, while boys, children with disabilities and displaced children face distinct vulnerabilities and severe barriers to reporting.

Across the country, survivors struggle to access care. Distance, financial constraints, insecurity, lack of trained staff and shortages of essential supplies further limit access, while funding cuts have forced the closure of several safe spaces and community-based protection services.

The consequences for children are profound. Survivors face:

- Lifelong physical injuries
- Emotional trauma
- School dropout
- Early marriage
- Economic hardship
- Social rejection

Yet, across provinces, their resilience is remarkable. Many young survivors continue to seek support, rebuild their lives and reclaim a sense of agency, with the help of social workers, women-led organizations and local protection networks.

The government has taken important steps including establishing the Toyokana initiative, the National Fund for Reparations for Victims of Sexual Violence (FONAREV) and the first National Conference on Eliminating Violence Against Children, and has expanded commitments on education, justice and service delivery. However, the scale and urgency of the crisis require sustained action from all actors.

Every child in the Democratic Republic of the Congo deserves safety, dignity, justice and the chance to heal. Immediate, coordinated and long-term action is essential to end sexual violence and protect future generations.

¹ DRC Protection Cluster, Protection Analysis Update, November 2025.

1. The shape and scale of the crisis

“In some provinces, every week we document new cases of children being violated on their way to school or when fetching water. It never stops.”

– Protection monitor eastern DRC, February 2025

How big is the crisis?

Despite decades of persistent national and international efforts, sexual violence against children and women continues at alarming levels across the Democratic Republic of the Congo. The crisis extends far beyond areas affected by conflict: cases are reported across the country, including in provinces that are relatively stable, revealing major gaps in protection mechanisms and legal accountability. In the first nine months of 2025, more than 35,000 cases of sexual violence against children were recorded across the country.² In 2024, close to 45,000 cases of sexual violence against children were recorded across all provinces in the Democratic Republic of the Congo.³

However, the actual number is believed to be much higher due to widespread underreporting, fear of stigma and limited service coverage.

Where and in what contexts does sexual violence occur?

Conflict-related sexual violence:⁴ Across the conflict-affected eastern provinces of Ituri, North Kivu, South Kivu and Tanganyika, the number of incidents documented by the United Nations has risen steadily since 2022, increasing by 17 per cent from 70 to 82 cases between 2022 and 2024. During the same period, the proportion of cases involving girls

grew sharply – from 27 per cent in 2022 to 47 per cent in 2024 – highlighting the heightened risks they face in areas affected by armed conflict.

Rape remained the most predominant form of conflict-related sexual violence, with armed non-state actors responsible for the majority of documented violations.⁵ These trends illustrate an environment with deteriorating protection for children and weak accountability mechanisms, in which children, particularly girls, face severe and ongoing risks.

Sexual violence within the community:

Although conflict drives a large share of sexual violence, with around half of all nationwide cases reported in North Kivu, South Kivu and Ituri,⁶ a significant number of cases also occur within communities and households, including rape perpetrated by relatives or acquaintances. This underscores the need to strengthen community-based child protection systems and prevention efforts alongside the humanitarian response and essential social services.

² *Ibid.*

³ *Global Protection Cluster, DRC Protection Cluster, Annual Report 2024.*

⁴ *United Nations, Conflict-related Sexual Violence: Reports of the UN Secretary-General for 2022, 2023 and 2024.*

⁵ *Ibid.*

⁶ *Ibid.*

Age and gender distribution: Sexual violence continues to disproportionately affect girls and women, who represent 95 per cent of all survivors receiving assistance.⁷ In 2024, most child survivors were girls aged 12–17 years, confirming that adolescent girls remain the most at-risk group. Only 5 per cent of assisted survivors were boys – a figure widely understood to be underestimated due to fear of disclosure, stigma and the limited availability of services equipped to support them.

Why are survivors unable to obtain the care and support they need?

Access to services: In 2024, only 38 per cent of survivors received medical support – including treatment of injuries, post-rape care and HIV prevention – with notable differences across provinces, depending on the availability of protection and health service providers. Four out of ten survivors (41 per cent) accessed mental health and psychosocial support services, which is often the point at which many disclose the violence they have experienced for the first time.⁸

Impunity and justice: Only a small number of cases ever reach the justice system. In 2024, just 16 per cent of survivors received legal support – either legal counselling or judicial assistance.⁹ Lengthy procedures, fear of stigma or reprisals and a broader climate in which perpetrators face few consequences often lead families to abandon their complaints.

Impunity remains especially pronounced in crisis-affected settings. From 2022 to 2024, on average, fewer than 50 perpetrators of conflict-related sexual

violence were prosecuted each year – roughly 6 per cent of documented cases. Of those prosecuted, 75 per cent were members of the security and defence forces.¹⁰ Accountability for perpetrators belonging to armed non-state actors remains particularly limited.

“Some families come to report sexual violence but withdraw their complaint the next day because they fear being identified. They say, ‘better to keep quiet than be humiliated.’”

– Social worker, Kasai Central,
October 2023

Underreporting: Every survivor has the right to decide whether or not to seek support and those decisions must be respected given the risks they face. The widespread under-reporting of sexual violence remains challenging, as it hampers efforts to build evidence-based policies and bring perpetrators to justice. Service providers estimate that the actual number of cases may be several times higher than official figures, creating a cycle of silence and impunity that allows violence to continue. As one social worker said, “If no one speaks out, nothing changes. But speaking out is dangerous.”

⁷ *Ibid.*

⁸ Ministry of Gender, Family and Children, *Extent of Gender-based Violence Report, 2021–2024*, released on 16 December 2025.

⁹ *Ibid.*

¹⁰ United Nations, *Conflict-related Sexual Violence: Reports of the UN Secretary-General for 2022, 2023 and 2024*.



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La Reine - Bukavu

La Reine, 17, became pregnant after being raped when she was 16 years old. She is now receiving support at the UNICEF-supported hospital in South Kivu.*

"I was coming back from choir around 5 p.m. when a man pulled me into the forest and raped me. There was blood everywhere, and I could barely walk. When I arrived home, I was beaten by my parents, who said I had dishonoured the family. Even so, they took me to the hospital, where I explained to the doctor what had happened and I received care."

Since arriving at the facility, La Reine has been supported by a multidisciplinary team. She takes part in all the activities organized on site and remains optimistic about the future.

"My pregnancy is almost at term. All I want for now is to give birth to my child. The doctors have already told me that it is a boy. I would like him to become a minister, or even president of the Republic. After that, I want to continue my studies because I was in eighth grade when all of this happened to me. Going back to school will help me bring order back into my life and rebuild myself even more. I want to encourage girls not to give up: I had already lost the desire to live, but today I am a new person full of ambitions and dreams. After my studies, I would like to become a social worker."

2. The voices of survivors and witnesses

"When I think about what happened, I feel as if I am no longer myself. They hurt me, and now the people in my street look at me differently."

*– Adolescent girl survivor, Kinshasa,
April 2025*

"My family told me not to speak about it. They said if people know, nobody will marry me."

*– Female survivor, 15, Kasai Central,
October 2025*

"Some boys also come to us, but they whisper. They are ashamed. They cannot conceive this happened to them."

*– Social worker, eastern DRC,
February 2025*

"We see mothers who walk for hours to reach the centre. Some carry their daughters on their backs because the girls cannot walk any more."

*– Case management officer, eastern DRC,
July 2025*

Behind every statistic is a child whose life has been profoundly altered by violence. Survivors speak of shame, isolation and a loss of identity, yet they also describe a continued search for dignity and hope. These accounts, gathered by caseworkers and social workers across several provinces, reveal both the scale of the crisis and the resilience of those affected – a resilience that must guide the response.

The testimonies above show consistent patterns: silence driven by stigma, harmful social pressures and significant obstacles to seeking help. Children who survive sexual violence are frequently

blamed, pushed into early marriage, or discouraged from speaking out, leading to deep psychological harm and disrupted education and development. Fear of retaliation, family rejection, insecurity and weak protection systems further limit access to support.

Yet, even within these constraints, survivors continue to demonstrate strength. Protection and care services remain operational, community parasocial workers are present and trusted, and many children are finding ways to come forward and receive assistance.



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3. The consequences and impact



“After what happened, I stopped going to school. The other pupils laughed at me and the teacher told me to stay home until I felt better.”

– Adolescent girl survivor, 16, Kinshasa, November 2024

Sexual violence leaves deep, long-lasting scars that go far beyond the initial assault. Survivors often face physical injuries, psychological trauma, social rejection and economic hardship. For many children, such violence interrupts their education, chips away at their confidence, and can ultimately alter their life paths.

Health consequences

Medical records and field reports show that many survivors experience severe physical consequences, including gynaecological injuries, unwanted pregnancies and heightened risks of HIV and other sexually transmitted infections.¹¹

When conflict escalates sharply, hospitals frequently report stock-outs of essential medications and shortages of trained healthcare staff. For instance, the availability of critical post-exposure prophylaxis (PEP) kits, already chronically limited, is regularly disrupted as conflicts erupt in eastern DRC. Insecurity, and particular attacks on health facilities, logistical constraints, limited funding and restricted access all contribute to these shortages, undermining care when it is needed most.

“Some girls arrive bleeding and in shock. Sometimes there is no doctor. We do what we can.”

– Nurse, eastern DRC, August 2025

Psychosocial and emotional impact

Children who are subjected to sexual violence often carry heavy emotional burdens, including fear, anxiety, depression, nightmares and self-blame. Experts emphasize the urgent need for trauma-informed psychosocial support and family counselling to help rebuild children’s trust and resilience.

“Sometimes the mothers cry more than the children. They say, ‘How will she live now?’”

– Psychosocial counsellor, Kinshasa, August 2025

11 Democratic Republic of the Congo Gender-based Violence Area of Responsibility reports, 2023 and 2024.

Education and socio-economic repercussions

The impact on a survivor's education and economic well-being can be profound and long-lasting. Many are forced to leave school due to stigma, pregnancy or financial hardship. Some are pushed into child marriage or informal work to support themselves and children born as a result of sexual violence.

“I wanted to be a nurse but now I stay home. My parents say people will talk if I go back to class.”

– Adolescent girl, 16, Kasai Central,
March 2025

Social stigma and isolation

Community attitudes often deepen the trauma. Survivors are blamed, rejected or silenced, while the perpetrators frequently go unpunished. Families may fear social stigma or retaliation, pressuring survivors to stay quiet or accept informal settlements.

“When people see me, they whisper. They think I am dirty.”

– Adolescent girl, 17, Kinshasa,
September 2023

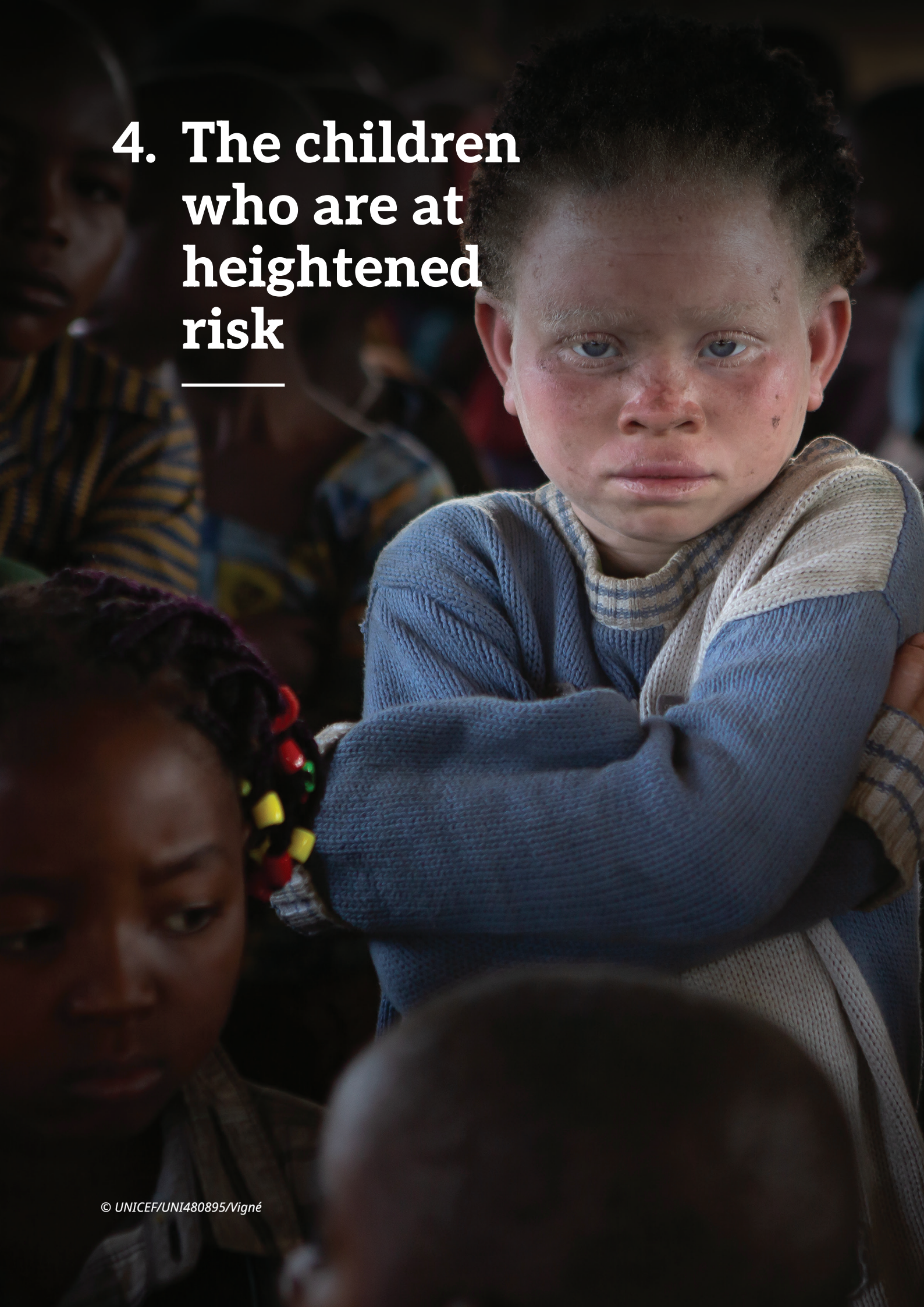
Resilience and recovery

Despite these enormous challenges, many survivors show incredible resilience. With support from psychosocial teams and women-led organizations, they find ways to reclaim their agency through education, peer group interactions and vocational training.



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4. The children who are at heightened risk



Children whose families suffer from economic hardship and those who are out of school are more likely to adopt harmful coping strategies, increasing their exposure to sexual violence as they struggle to meet basic needs. Girls who are married off face a heightened risk of repeated sexual violence and serious physical, social and emotional consequences, including child pregnancy, early parenthood and other health-related complications.

Children who are displaced, who are separated from or unaccompanied by their families, or who head households face particularly severe risks and often have limited access to protection and care. When factors such as displacement, age, gender or disability combine, the danger intensifies, leaving children even more vulnerable and exposed to further harm.

Adolescent girls

Girls aged 10–17 years are disproportionately affected by sexual violence, often assaulted near their homes, schools or local markets. Early and forced marriage, sexual exploitation and pregnancy-related withdrawal from school are a result of – and contribute to – this cycle of heightened risk. In the Democratic Republic of the Congo, 11 per cent of women aged 25–49 years reported getting married or entering into a union before the age of 15, and about one in three (35 per cent) did so before the age of 18.¹² Nearly 20 per cent of girls aged 15–19 years have already been pregnant, and 15 per cent have given birth, underscoring the significant impact on girls' health and access to opportunities.¹³ Child marriage is often justified as a form of protection. As one community leader noted, "Some families marry their daughters early, saying it is the only way to protect them."

¹² DRC Demographic and Health Survey (DHS-DRC III), 2023–2024.

¹³ Ibid.

Internally displaced children and children on the move

Children displaced by conflict or climate shocks frequently take refuge in overcrowded or unsafe settings where privacy is limited. Girls and boys collecting water or firewood or searching for food are exposed to danger on poorly lit paths and at collection points. Unaccompanied children and children separated from their families face particularly high risks of exploitation and sexual abuse as they move from place to place on their own.

"Displaced children are the most exposed. They sleep in open areas or share tents with strangers. Sometimes families have to choose between food and safety."

– Field child protection worker, eastern DRC, December 2024

Boys and young men

Boys are also subjected to sexual violence – although such cases are significantly underreported. They are particularly vulnerable in detention centres, when recruited or used by armed groups or when sexual violence is used as a form of punishment by parties to the conflict. Stigma and fear of being disbelieved prevent many from speaking out. As one parasocial worker in eastern DRC said, "When boys are assaulted, they never speak. They think people will laugh or call them weak."

Children with disabilities

Children with physical or intellectual disabilities often face heightened risks of abuse and are less likely to access services due to mobility barriers and stigma. Service providers consistently report a lack of specialized support and accessible infrastructure. As one case management supervisor in Kinshasa explained: “We rarely see children with disabilities at the centres. It’s not because they are safe. It is because they cannot reach us.”

Children born as a result of sexual violence

Rape is a crime rooted in the abuse of power and status. Girls and women who become pregnant as a result of sexual violence – and the children born from these pregnancies – must both be recognized as survivors. In the DRC, a significant proportion of girls and women subjected to sexual violence are estimated to become pregnant as a result. The stigma they face is profound. As one psychosocial counsellor explained: “The mothers hide their babies. They say people call them ‘children of shame.’” Those born of sexual violence and their mothers are often labelled, neglected or rejected by their families, excluded from school and left without legal or social recognition.



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Sephora – Bunia

Sephora, 18, is a mother of two. Her life was turned upside down two years ago when fighting erupted in her village in Ituri.*

“We were at school when the fighting began, and everyone scattered. When I reached home, I realized my family had already fled. I had no choice but to leave the village as well.

While we were escaping with other girls from school, we encountered armed men in the forest who raped us. Afterwards, they left us there. We had no option but to keep walking, even though we were in severe pain. When we reached a village that was safer than ours, we went to a health centre, where we were told we needed proper care within three days. That is how I arrived in Bunia to continue treatment.”

Sephora later learned that her father had been shot while fleeing the clashes.

To this day, she has had no news of her mother. Upon her arrival in Bunia, staff from SOFEPADI – a UNICEF partner organization supporting the rights of girls and women – helped locate an aunt who lives in the city.

“I went to live with her while continuing my treatment. I was referred to a lawyer to discuss how to report what had happened to me, but unfortunately the perpetrators were never identified.”

Sephora’s story illustrates the difficulty of bringing perpetrators to justice, even when survivors are able to come forward.

“There were five of them. I didn’t know them, but I described their faces and clothing. It wasn’t enough to identify them.”

With the support of SOFEPADI staff, Sephora gradually began to recover.

“I started living again like other girls my age. I met a man who wanted a relationship with me, and I accepted. Later, I became pregnant.”

When her aunt learned of the pregnancy, it became difficult for them to continue living together. Sephora decided to move in with her partner. She gave birth to both of her children before turning 18.

Her experience reflects how, in the absence of protection, education or economic alternatives, many girls feel they have few options other than early marriage.

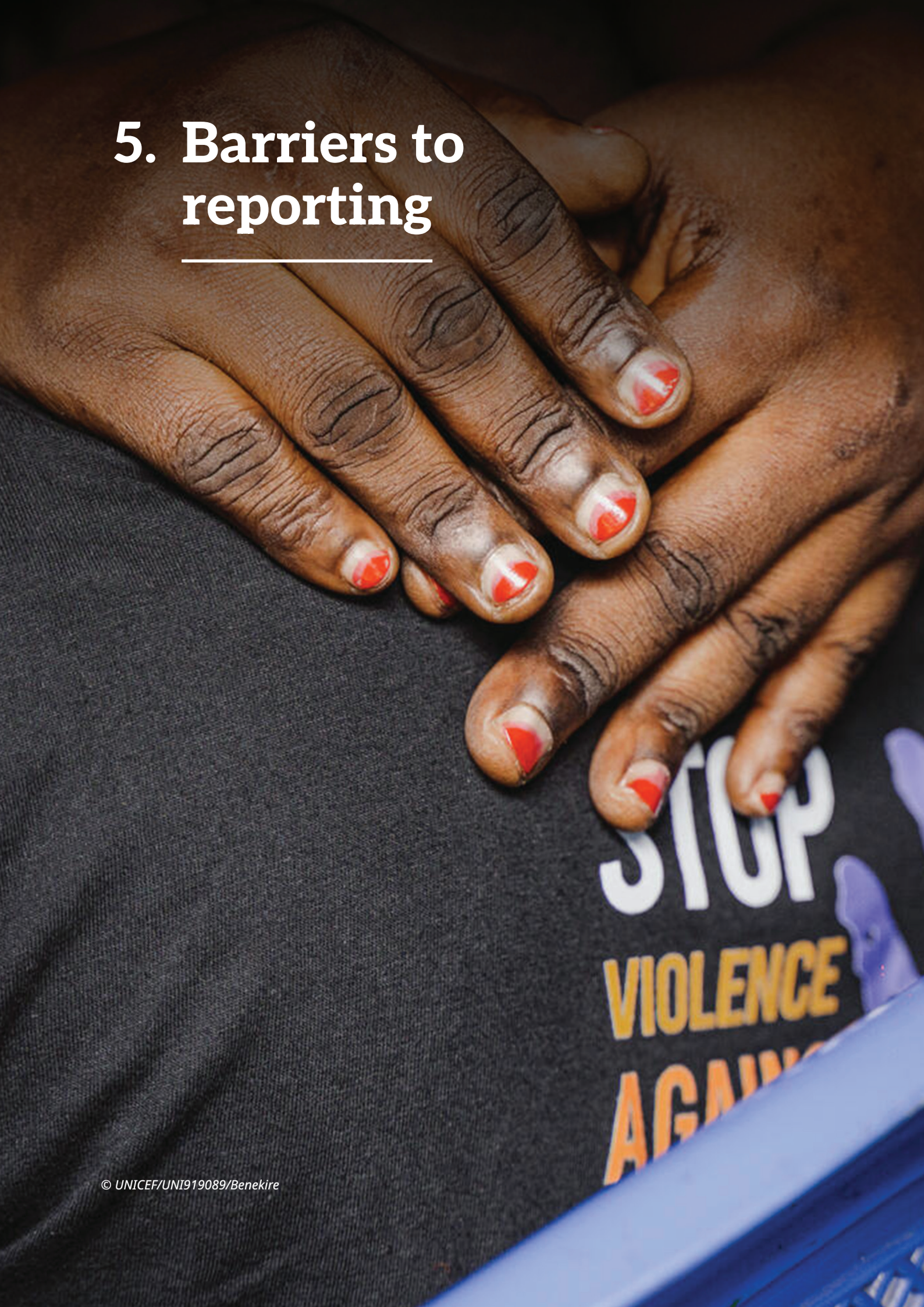
Sephora was referred to a UNICEF-supported safe space, where she enrolled in vocational training. After learning basket weaving, she is now studying sewing and tailoring.

“I stopped school in eighth grade. My hope now is to continue my training and support my husband so that together we can raise our children.”



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5. Barriers to reporting



“People tell the girls to keep quiet, that speaking out will only bring shame. So the violence continues in silence.”

– Community mobilizer, eastern DRC, April 2025

Across the Democratic Republic of the Congo, stigma remains one of the most significant obstacles to justice and healing. Many survivors and their families are haunted by fears of rejection or retaliation, which often silence their voices. As a result, the number of reported cases is only a small reflection of the true scale of sexual violence against children.

A culture of silence and blame

Deeply ingrained gender norms and harmful beliefs lead many communities to hold survivors responsible rather than the perpetrators. Families sometimes take drastic steps – such as settling cases informally or forcing survivors into marriage with their offenders – in a misguided attempt to “restore honour.” One caseworker said, “One family asked us not to record the case. They said, ‘If people know, our daughter will never find a husband.’”

Fear of retaliation and exposure

Survivors and their caregivers often fear reprisals from perpetrators or their affiliates, especially in small or insecure communities such as those affected by conflict. Many withdraw complaints after receiving threats or avoid informing judicial authorities altogether, fearing a breach of confidentiality. As one local leader in eastern DRC explained, “Families fear that reporting will bring danger. They say, ‘We prefer silence to revenge.’”

Access barriers and limited funding

Long distances and transport costs often deter survivors from reporting sexual violence or seeking care. At the health facility level, shortages of trained staff, limited privacy and the absence of female providers further discourage survivors from coming forward. Children with disabilities face additional physical and communication barriers that restrict their access to services. In conflict-affected areas, even travelling to a care centre can pose serious risks, as girls and women may be exposed to insecurity or violence along the way.

The situation has been further compounded by significant funding cuts in 2025, which have severely disrupted the availability and continuity of critical support for survivors of sexual violence. Several safe spaces, mobile clinics and community-based protection initiatives have been forced to scale down or close altogether, including in high-risk areas where support is most urgently needed. As a result, outreach, referrals and survivor-centred care have declined, particularly in remote and conflict-affected communities. The reduction in front-line services has also left fewer trained personnel to assist child survivors, weakening both the timeliness and quality of the response. These setbacks risk undermining hard-won gains in survivor trust and community engagement. By mid-2025, funding for sexual violence interventions had dropped to just 23 per cent, down from 48 per cent in 2022, placing hundreds of thousands of children at risk of losing access to life-saving support, among them 300,000 living in conflict-affected eastern provinces.



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Agnès – Kananga

Agnès, 23, is a mother of four who grew up facing significant hardship. She is the 11th of 12 children in her family and the youngest of the girls.*

“When my father passed away, it became very difficult for my mother to take care of us. We left our village and came to live in Kananga, but life there was even harder. Family members began saying that I should be married because school was not useful, and I was old enough. Seeing my mother struggle, I felt I had no choice when a man came to marry me. I agreed so my mother could be at peace.”

Agnès was married at the age of 12, stopped her studies in sixth grade, and became a mother at 13.

“Household chores were very difficult. When I had my first child, I did not have the strength to manage everything. We often had no food, and my child sometimes went to sleep hungry.”

Her husband survives on small jobs, including guard work.

“When he earns a little money, we manage. I also tried to find work. I fetched water for people so I could buy food and pay my children’s school fees.”

At a UNICEF-supported safe space, Agnès completed a sewing and tailoring training programme.

“Before, I struggled to dress my children because I had no money to go to a seamstress. Today, I make clothes myself and earn money from clients. Sewing allows me to better feed my children. I hope to build a small workshop soon and equip it with two or three sewing machines, so I can also train other girls.”

“I married at 12, stopped school in sixth grade, and now have four children. My children will not suffer as I did. I will not let them marry early. They must finish school and become independent. I ask all parents to send their daughters to school instead of marrying them off.”

Beyond learning a trade, Agnès has gained confidence, independence and life skills that support her and her children.



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6. The response from government and partners



“We cannot change what they have endured but we can help them heal. Each time a girl smiles again, it gives us the strength to continue.”

– Psychosocial worker, Kinshasa, April 2025

The Government of the Democratic Republic of the Congo has demonstrated a growing commitment to preventing and responding to sexual violence against children and women, aligning national priorities with international standards on child protection and gender equality. Over the past three years, leadership at the highest levels has contributed to tangible progress in both policy and practice.

The DRC Girls Forum

In 2022, the DRC Girls Forum, organized in partnership with the United Nations Children’s Fund (UNICEF), brought together 100 adolescent girls from across the country and 12 African nations. With strong government support, the forum gave a voice to girls’ views and experiences, and helped shape national dialogue on preventing sexual violence.

Toyokana initiative

One concrete action to emerge from the forum was the Toyokana initiative. Toyokana – a Lingala word meaning “Let’s listen to one another” – is an initiative co-designed with adolescent girls to strengthen prevention and response services for those at risk of, or affected by, sexual violence. Toyokana centres function as safe spaces where girls can access a range of support services, including basic medical check-ups and referrals, psychosocial counselling and opportunities to learn income-generating skills.

National Fund for Reparations for Victims of Sexual Violence

The government also established the National Fund for Reparations for Victims of Sexual Violence (FONAREV, from the French “Fonds National des Réparations des Victimes des Violences Sexuelles liés aux Conflits et des Victimes des Crimes contre la paix et la sécurité de l’humanité”). Created in 2022 and launched in 2023, the initiative signals the State’s commitment to supporting survivors and represents a critical step towards delivering justice and accountability.

In 2023, the government committed to establishing Toyokana safe spaces in all social services centres for children and youth nationwide, recruiting and deploying additional social workers, integrating mental health services into existing protection systems, and allocating dedicated national budget funding to sustain these efforts.

First National Conference on Eliminating Violence Against Children

In October 2024, under the patronage of the Prime Minister, the government organized the first National Conference on Eliminating Violence Against Children, with a specific focus on addressing sexual violence against girls. The high-level leadership and national framing of the conference marked the formal recognition of child protection as a central pillar of national development. The event in Kinshasa mobilized

provincial authorities, civil society and international partners, and led to the adoption of a national roadmap for the prevention of and response to violence against children.

First Global Ministerial Conference on Violence Against Children

At the First Global Ministerial Conference on Violence Against Children, held in Bogotá in November 2024, the government reaffirmed its commitment to ending all forms of violence against children, with a particular focus on sexual violence. Building on existing national policies and programmes, three priority actions were presented.

1. **Introducing free secondary education:** By introducing free secondary education, the government aims to cut child marriage by 25 per cent by 2030. This initiative is also designed to strengthen girls' agency and improve their lifelong economic prospects.
2. **Creating safer learning environments:** To strengthen prevention and early detection of abuse, all public schools will establish gender-based violence focal points and complaints mechanisms. These measures aim to ensure that children have a trusted pathway to report concerns and receive timely support.
3. **Strengthening survivor-centred services:** A series of measures will expand access to quality services for survivors of sexual violence, including:
 - Rolling out the Toyokana initiative nationwide to provide adolescent-friendly safe spaces.
 - Equipping public health facilities to offer comprehensive care for survivors of

sexual violence and pregnant girls as part of universal health coverage.

- Establishing legal clinics in every commune to improve access to justice.

In the past year, there has been tangible progress towards delivering on these pledges, as follows:

- The government has established a national commission to assess the feasibility of extending free secondary education.
- The Ministry of Education, supported by a multisectoral technical working group, has issued an order to uphold the right of pregnant girls to go to school.
- The government is advancing a plan to establish official focal points to report sexual violence and sexual exploitation and equip all public schools with complaints mechanisms accessible to girls.
- A total of 788 health centres are being established under the Local Development Programme, all of which will be integrated into the universal health coverage system. To date, 300 centres have been constructed and are progressively being equipped with trained staff and essential medical supplies.
- Twenty-one integrated multisectoral service centres have been established across eight provinces, providing comprehensive services to more than 127,000 survivors, including over 73,000 children and adolescents.
- Two Toyokana centres were established in Kinshasa as part of the nationwide roll-out, offering girls a secure, adolescent-friendly entry point for information and care.
- The Minister of Justice oversees dedicated sexual violence rulings and has been developing a national transitional justice policy. Local "truth and justice" commissions have been initiated in Kasai Central, and survivors have received reparations through FONAREV.

In 2025, the government has continued to prioritize its work to combat sexual violence against children. In addition to the initiatives detailed above, there have been two other important developments.

The Ministry of Interior has strengthened its contribution to preventing sexual violence and child marriage by improving civil registration systems and ensuring that all children have legal proof of age, which helps protect them from child marriage and age-related sexual abuse.

The Joint Technical Working Group – established under the 2012 Joint Action Plan to prevent grave violations against children and housed within the Ministry of Defence – continued to play a central role in efforts to prevent sexual violence. Working with the Democratic Republic of the Congo Armed Forces and the Congolese National Police, the group intensified awareness efforts through regular engagement with commanders and troops. It also worked to strengthen accountability by improving reporting systems, collaborating with judicial authorities and advocating for survivors' access to quality services.

Partners on the ground

Despite funding shortages and access constraints, UNICEF and partners remain committed to expanding vital, survivor-centred services across the Democratic Republic of the Congo. Working with government ministries, United Nations agencies, civil society and women-led groups – which are often the first responders – UNICEF provides technical expertise, coordination support and field presence to ensure that survivors, especially children, receive timely, confidential and quality care. At the same time, national and local authorities, together with communities, are working

to strengthen and sustain resilient protection systems.

Provision of survivor-centred services:

UNICEF works with local and women-led organizations to ensure that essential, survivor-centred services remain available for children affected by sexual violence.

Case management and referral:

UNICEF supports a network of trained social workers and community case management officers dedicated to ensuring confidential referrals to medical, psychosocial and legal services. In 2024, UNICEF and partners assisted more than 24,200 child survivors of rape with a package of services, the majority of which were in Ituri, North Kivu, South Kivu, Maniema, Kinshasa, Kasai and Kasai Central.¹⁴

Clinical care: Together with the Ministry of Health and other partners, UNICEF equips health facilities with the necessary supplies to provide care for survivors, including post-exposure prophylaxis kits that contain emergency HIV medicines to prevent infection after possible exposure. Health workers receive training on clinical management of rape and child-friendly communication.

Mental health and psychosocial support services:

Children attend both individual and group therapy sessions to help them rebuild trust and confidence. As one psychologist in eastern DRC explains, “The children start drawing again, talking again. That is when we know healing has begun.”

Safe spaces: These centres offer privacy, counselling, life-skills sessions and referral services, while facilitating social reintegration and building a community of women and girls.

¹⁴ UNICEF programme data, 2024.

Cash and in-kind assistance: Survivors receive unconditional cash grants and dignity kits. Cash support is also provided to help prevent and reduce the risk of sexual violence for children at heightened risk.

Prevention and community engagement: UNICEF partners with local authorities, community organizations, traditional and religious leaders, and youth groups to challenge harmful norms and lower risk factors. Prevention efforts include systematic engagement with women and girls to understand and mitigate risks of sexual violence in their surroundings, community awareness and mobilization campaigns, and school-based initiatives that promote respect and non-violence at the individual, family and community levels.

“When communities understand that silence protects the aggressor, they start speaking out.”

– Community facilitator, Kasai Central, September 2025

Capacity-building and coordination: UNICEF is working with its partners on the following actions to increase capacity and improve coordination across support services:

- Training health workers, social and parasocial workers, and police on child-sensitive procedures and ethical documentation.
- Supporting gender-based violence and child protection coordination mechanisms in joint planning and service mapping.
- Developing referral pathways and advocating for the integration of sexual violence and child protection services into national systems.



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Teraline - Kinshasa

Teraline, 18, was born into a situation of extreme vulnerability. Her mother became pregnant as a result of rape, and when she later married, Teraline's life changed for the worse.*

"My mother's husband severely mistreated me. He insulted me and refused to spend money on food for me because I was not his biological daughter."

Hoping to protect her, Teraline's mother sent her to live with her sister in Kinshasa.

"I was happy because I truly believed my aunt would care for me, just as my mother had cared for her when she was young. But instead, she treated me as if I had no value."

Her aunt's husband behaved inappropriately towards her, and Teraline was not allowed to attend school.

"I was treated like a domestic worker. My cousins went to school and studied, while I stayed behind doing the dishes, the laundry - everything."

When Teraline was 15, her aunt told her she had found a husband for her. When she refused, she was forced to leave the house. Without a phone, she could not contact her mother, who was living in another province. She spent time living on the streets of Kinshasa, surviving alongside other young people.

Life on the streets exposed her to exploitation and abuse, leaving her with little control over her own safety.

“Life on the streets was miserable. We suffered there because we had to sleep with men or else we would be chased away. We had no choice. We were given medication after intercourse to prevent pregnancy.”

One day, Teraline met social workers who told her about the Toyokana safe space. She went the following day.

“I felt safe. I shared my story, and the social workers listened. They reassured me and offered training opportunities so I could become independent.”

She chose pastry-making.

“I learned how to make doughnuts and how to market my products. I started earning money every day. When I invested 10,000 francs (US\$4.50), I could earn up to 30,000 francs in profit.”

Teraline encouraged other young people she had met on the streets to seek support at the Toyokana safe space. Today, she lives with an older cousin, who helped her return to school and catch up academically.

“I studied nutrition and obtained my secondary school diploma. My cousin then encouraged me to go to university and offered to cover my academic fees.”

Teraline is now studying law.

“I don’t want to become a lawyer – I want to become a magistrate. What motivates me is the injustice faced by children. The State says it protects children, but when I was a child, I was not protected. I hope to help change that.”



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7. A call for action



“We cannot allow this to remain normal. These children deserve justice, care and a chance to heal.”

– Child protection staff member, Kinshasa, September 2025

Sexual violence against children in the Democratic Republic of the Congo is a crisis that demands urgent attention. Every day that passes without action only deepens the struggles of survivors and weakens the social bonds of the nation. Addressing sexual violence calls for a united effort from the government, armed groups, humanitarian and development agencies, donors and local communities. Swift, coordinated and sustained efforts are required.

UNICEF calls on parties to the conflict to:

- Prevent and end unconditionally all forms of sexual violence against children and women in strict accordance with national legislation and international humanitarian and human rights law.
- Engage with the United Nations to adopt and implement measurable action plans to end and prevent conflict-related sexual violence against children.
- Guarantee safe access to services for survivors by protecting schools, hospitals and humanitarian spaces.
- Cease all threats, intimidation and retaliation against survivors, witnesses and service providers.
- Cooperate fully with investigations and ensure individual accountability for grave violations.

UNICEF calls on the Government of the Democratic Republic of the Congo to:

- Continue recognizing sexual violence against children as a national protection priority and scale up multisectoral prevention and response measures across the country.
- Strengthen coordination, data and ethical information systems to ensure informed, confidential and rights-based responses.
- Sustain and scale up initiatives such as Toyokana safe spaces, ensuring access to holistic, survivor-centred care aligned with commitments made at the Conference on Protecting Children in Armed Conflict held in 2023 in Oslo in 2023 and the First Global Ministerial Conference on Violence Against Children held in Bogotá in 2024.
- Ensure full and effective implementation of the sexual violence-related provisions of the 2012 Joint Action Plan to end child recruitment and prevent other grave violations against children.

UNICEF calls on humanitarian and development actors to:

- Expand access to integrated survivor-centred services (health, psychosocial support, protection, and economic assistance) tailored to the needs of children in line with the 2023 UNICEF and International Rescue Committee (IRC) guidelines.¹⁵
- Mainstream sexual violence risk mitigation in all humanitarian sectors and promote the active participation of women and adolescents in programme design and monitoring.
- Strengthen referral systems, reinforcing linkages between data collection and access to services, as well as community-based mechanisms that challenge stigma and foster long-term resilience.
- Uphold the highest standards of protection, including prevention of sexual exploitation and abuse by aid workers.

UNICEF calls on donors and international partners to:

- Recognize the prevention of and response to sexual violence and child protection as life-saving assistance, and provide predictable, multi-year and flexible funding.
- Support local women- and youth-led organizations, especially in hard-to-reach areas.
- Invest in the long-term strengthening of child protection systems, including workforce capacity and institutional integration.
- Provide resources for survivors' reintegration, education and economic empowerment to help break the cycle of violence and poverty.
- Invest in the prevention of sexual violence against women and children, addressing the root causes, to break the cycle of violence and reduce the need to respond in the long term.

"If we stay silent, the violence will not end. But when communities, authorities and partners act together, then change is possible."

– UNICEF partner, eastern DRC, October 2025

¹⁵ United Nations Children's Fund (UNICEF) and International Rescue Committee (IRC), "Caring for Child Survivors of Sexual Abuse Guidelines", Second Edition, UNICEF, New York, 2023.

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