Bemguema in Sierra Leone, 2002. A young girl, followed by women from her village, passes a group of soldiers from the national army on break from training. The war in Sierra Leone gained notoriety for the level of atrocities committed on civilians by gangs of young men and boys, who often were high on drugs and alcohol. The gangs were linked to different militias or rebel factions, and they raped, mutilated and killed thousands of civilians.

Image: Jan Dago
sexual violence in times of war

By 1993, the Zenica Centre for the Registration of War and Genocide Crime in Bosnia-Herzegovina had documented 40,000 cases of war-related rape.\(^1\) Of a sample of Rwandan women surveyed in 1999, 39 percent reported being raped during the 1994 genocide, and 72 percent said they knew someone who had been raped.\(^2\) An estimated 23,200 to 45,600 Kosovar Albanian women are believed to have been raped between August 1998 and August 1999, the height of the conflict with Serbia.\(^3\)

In 2003, 74 percent of a random sample of 388 Liberian refugee women living in camps in Sierra Leone reported being sexually abused prior to being displaced from their homes in Liberia. Fifty-five percent of them experienced sexual violence during displacement.\(^4\) Of a sample of 410 internally displaced Colombian women in Cartagena who were surveyed in 2003, 8 percent reported some form of sexual violence prior to being displaced, and 11 percent reported being abused since their displacement.\(^5\)

The changing face of war

A growing body of data from the wars of the last decade is finally bringing to light “one of history’s great silences”: the sexual violation and torture of civilian women and girls during periods of armed conflict.\(^6\) Until recently, the evidence — along with the issue — had been generally ignored by historians, politicians and the world at large, yet it is hardly new. The licence of victors to “rape and pillage” the vanquished dates back to Ancient Greek, Roman and Hebrew wars.\(^7\) In examples from the last century alone, Jewish women were raped by Cossacks during the 1919 pogroms in Russia; the Japanese military trafficked thousands of “comfort women” from countries across Asia and sexually enslaved them during World War II; over 100,000 women were raped in the Berlin area directly following World War II; and hundreds of thousands of Bengali women were raped by Pakistani soldiers during the 1971 Bangladeshi war of secession.\(^8\)

Despite the history of sexual violence committed against women and girls by men in times of war, what is especially disturbing about the statistics from the past 10 years is how rife the phenomenon appears to have become. It might be argued that the current data simply reflect greater international attention to the issue — provoked in part by the media coverage of the sexual atrocities committed during the conflicts in the former Yugoslavia and Rwanda, and even more importantly by the decades of intensive awareness-raising by women’s activists around the world — rather than a significant rise in absolute numbers of victims. A more likely explanation, however, is that the nature of warfare is changing, in ways that increasingly endanger women and girls.

Since the latter half of the last century, combat primarily limited to military engagements between national armies has been largely supplanted by civil wars and regional conflicts that pit communities
along racial, religious and/or ethnic lines. The result is that civilian populations are victimised on a massive scale. Between 1989 and 1997, an estimated 103 armed conflicts were launched in 69 countries across the world.\textsuperscript{9} Civilian casualties during these more recent conflicts are estimated to be as high as 75 percent, a stunning contrast to the 5 percent estimate from the start of the last century.\textsuperscript{10} Although overall more men than women continue to die as a result of conflict, women and girls suffer myriad debilitating consequences of war.\textsuperscript{11} So much so, according to a 2002 report of the Secretary-General of the United Nations, that “women and children are disproportionately targets” and “constitute the majority of all victims” of contemporary armed conflicts.\textsuperscript{12}

\textbf{What the current data conceal}

However disturbing the current statistics are, they probably conceal more than they reveal in terms of the true extent of sexual violence against women and girls during armed conflict. For a number of reasons, data on rape in war are exceedingly difficult to capture — as seen in the sometimes dramatic variance in estimates from any given country, such as those from Bosnia that range from 14,000 to 50,000, and from Rwanda that range from 15,700 to a half million.\textsuperscript{13} Sometimes the discrepancies reflect political interests, where a government or armed group may seek to downplay the extent of crimes committed by its members, while others are working to highlight those crimes. Yet even when research is undertaken by nonaligned human rights or other groups, obtaining an accurate representation of the scope of sexual violence presents tremendous challenges.

Research on sexual violence against women during war is in its relative infancy. Investigators have only just begun to develop and test methodologies for collecting representative data. In addition, substantial underreporting of rape is commonplace even in times of peace, in times of war and its aftermath, when constraining factors such as stigma and shame are compounded by political instability and threats to personal safety, rates of reporting are likely to be even lower. Exposing violence in the context of active conflict can represent a security risk for all involved — as evidenced by the May 2005 arrest of the Médecins Sans Frontières (MSF) head of mission in Khartoum, Sudan, who was charged by the Sudanese government with crimes against the state after publishing a report on women seeking rape-related medical treatment in MSF facilities throughout Darfur.\textsuperscript{14}

In many more instances, there is simply no institutional authority or organization to whom a woman can recount her experience. Even where services do exist, pervasive impunity for perpetrators of war-related sexual violence means that many survivors may accurately reason that no justice — and thus no purpose — will be served by reporting their victimisation. Notably, in a 2001 study from Timor Leste (East Timor), only 7 percent of women who had experienced physical or sexual violence during the crisis of 1999 ever reported their victimisation to a local authority.\textsuperscript{15} In a survey from Rwanda, only 6 percent of respondents who had been raped during the genocide ever sought medical treatment.\textsuperscript{16}

The current statistics — detached as they are from the nature of the crimes — also do not reveal the depths of violence to which women and girls have been exposed, or the terror they are forced to endure when their bodies become the ways and means of war. It is only the personal accounts that do this — accounts that most of the world will likely never hear.

\textbf{Three personal stories}

Since the 1996 outbreak of hostilities among multiple armed factions in the eastern part of the Democratic Republic of Congo (DRC), atrocities against women have been so horrific and extensive that the violence has been referred to colloquially as the “war within a war” and the “war against women”.\textsuperscript{17} Although a peace process was initiated at the end of 2002, the prevailing lawlessness in the eastern part of the country continues to put many women and girls at risk. In recent research in South Kivu, 492 women — 79 percent of whom had been sexually assaulted by between two and 20 attackers — shared their experiences of rape, mutilation and torture.\textsuperscript{18} One incident was related by a victim still confined to a hospital bed:

“A few moments after the Interahamwe [Rwandan militia] arrived in the village I heard my neighbour screaming. I looked out of the window and I saw some men, all holding rifles. Immediately, I wanted to run away and hide but three of them turned up at our house. My husband pretended to be asleep … they grabbed me roughly. One of them
Young girls and adolescents may be particularly vulnerable to sexual violence during war and civil unrest. In eastern Democratic Republic of Congo, where this photograph was taken, the prevalence of rape is extremely high. Noncombatants – in addition to militiamen and soldiers – are also perpetrators. United Nations peacekeepers have been implicated in cases of sexual exploitation and coercion as well.

Image: Evelyn Hockstein
A mother in Darfur, western Sudan, looks down at her newborn son — the child of a rape she survived in 2004. Rape in Darfur has been a common weapon of the Janjawid militias. Women and girls have been assaulted in their villages, while looking for firewood outside camps for the internally displaced and even inside neighbouring Chad. The rapists commit their crimes in a climate of complete impunity while their victims often suffer the additional indignity of marginalisation by society and, at times, their own families.

Image: Evelyn Hockstein
restrained me, while another took my *pili pili* pestle and pushed it several times into my vagina, as if he was pounding. This agony seemed to be a neverending hell …

... they grabbed me roughly. One of them restrained me, while another took my *pili pili* pestle and pushed it several times into my vagina, as if he was pounding. This agony seemed to be a neverending hell …

neverending hell … then they suddenly left. For two weeks my vagina was discharging. I was operated on … I have to relieve myself into a bag tied to an opening in the side of my belly. They also killed my husband and my son."  

In another instance, a Congolese woman described the brutality she endured at the hands of militia:

"I was busy cutting wood, when four armed men suddenly appeared at the other end of the field. They told me to undress and to volunteer myself to one of them. I refused. Then they took me, spreading my legs out and tying them, one to the bottom of a tree, the other to another tree trunk. They stuck my head between two sticks held diagonally, so that I couldn't sit up without hurting myself. I stayed in this position and one of the attackers penetrated me forcefully from behind in the vagina, and the other pushed his penis into my mouth, right into my throat … I was retrieved by neighbours who watched my ordeal from a distance. When they found me I had fainted and was covered in blood."  

Similar atrocities were committed by all parties to Sierra Leone's 10-year civil war. The primary perpetrators of the most egregious abuses, however, were among the rebel forces, particularly the Revolutionary United Front. They raped as a matter of course, often in gangs, often in front of family members. They forced boys and men to rape their mothers and wives. They sexually assaulted and then disembowelled pregnant women. They mutilated women's genitals with knives, burning wood and gun barrels. One particularly violent rebel incursion, on the capital city of Freetown in January 1999, let loose a "hellish cycle of rape, sexual assault, and mutilation." A 13-year-old girl, abducted during the incursion and forced into sexual slavery by rebels, already had given birth to a baby girl born of rape by the time she told her story to researchers in 2001. She remembered how her captivity began:

"We were taken to a house with about 200 people in it. My older cousin was sent to go and select 25 men and 25 women to have their hands chopped off. Then she was told to cut off the first man's hand. She refused to do it, saying she was afraid. I was then told to do it. I said I'd never done such a thing before and that I was afraid. We were told to sit on the side and watch. So we sat. They chopped off two men's hands. My cousin couldn't watch and bowed her head down to avoid the sight. Because she did that, they shot her in the foot. They bandaged her foot and then forced her to walk. We left the two men whose hands had been cut off behind. We were then taken to a mosque in Kissy. They killed everyone in there. … They were snatching babies and infants from their mother's arms and tossing them in the air. The babies would free fall to their deaths. At other times they would also chop them from the back of their heads to kill them, you know, like you do when you slaughter chickens. One girl with us tried to escape. They made her take off her slippers and give them to me and then killed her. … One time we came across two pregnant women. They tied the women down with their legs eagle spread and took a sharpened stick and jabbed them inside their wombs until the babies came out on the stick."  

The “murderous madness” of sexual violence in conflict

The motivation for rape committed during armed conflict varies. The violence can be a by-product of the collapse in social and moral order that accompanies war. In DRC, rape has become so indiscriminate as to be referred to as “murderous madness”. In one example, a Congolese mother walked into her house to find a paramilitary raping her 10-month-old baby. Such incidents are not only limited to combatants. Men from the local community may exploit the chaos of conflict to commit sexual violence against women without fear of punishment. Under the volatile and disorganized rule of the Mujahideen, for instance, rape and sexual assault in Afghanistan’s capital city of Kabul were reportedly so commonplace that the oppressive police state established after the Taliban takeover in 1996 was initially perceived by some women as a welcome reprieve.  

Sexual violence may also be systematic, carried out by fighting forces for the explicit purpose of destabilising populations and destroying bonds within communities and families. In these instances, rape is often a public act, aimed to maximise humiliation and shame. In Timor Leste, Indonesian military reportedly raped women in front of their families and forced Timorese men to rape Timorese women. Researchers on a 2004 fact-finding mission to Northern Uganda, where an 18-year insurgency by the Lord’s Resistance Army (LRA) continues, spoke with...
one man who was commanded by members of the LRA to have sex with his daughter:

“I refused. … They ordered my son … for the fear of a cocked gun he complied. … I was then forced to have sex with a hole they had dug in the floor using a knife. … They forced my private part in the hole several times — the skin was totally destroyed. … It was impossible to fight someone who is armed. … This was all done in front of my wife, son, and the daughter. … My wife went mad.”

A Sudanese man recounted to researchers his family’s similar degradation in Darfur: “In February 2004, I abandoned my house because of the conflict. I met six Arabs in the bush. I wanted to take my spear and defend my family, but they threatened me with a weapon and I had to stop. The six men raped my daughter, who is 25 years old, in front of me, my wife and young children.”

Sexual violence also can serve to quell resistance by instilling fear in local communities or in opposing armed groups. In such cases, women’s bodies are “used as an envelope to send messages to the perceived enemy.” In the Shan Province of Myanmar, where the government has been trying to violently suppress a local rebellion since the mid-1990s, hundreds of women have been systematically raped. In one example, an army major approached a young girl and “asked her about her parent’s [whereabouts] and ordered his soldiers to wait at the edge of the farm and arrest anyone who came to the farm. He then raped [the girl] in a hut several times during the day and at about 4 a.m. burned [her alive] in the hut, and left the place with his troops.”

Comparable violations by Russian soldiers in Chechnya have been reported during “mop up” operations that ensue after rebel Chechen fighters have decamped a town. Of four Chechen women vaginally and orally assaulted by Russian military in February 2000, one purportedly suffocated to death while a soldier sat on her head. In Colombia, paramilitary control of some regions often includes sexual violence and torture of women and girls. Intimidation campaigns are carried out on their bodies, as in one of many cases reported in 2001 to the United Nations Special Rapporteur on Violence Against Women, where a Colombian girl was raped and killed, her eyes and nails then removed, and her breasts cut off.

Particularly in conflicts defined by racial, tribal, religious and other divisions, violence may be used to advance the goal of ethnic cleansing. Public rapes in Bosnia, for example, were used to instigate the flight or expulsion of entire Muslim communities. Forced impregnation, mutilation of genitals and intentional HIV transmission are other techniques of ethnic cleansing. Women in Rwanda were taunted by their genocidal rapists, who promised to infect them with HIV. In Bosnia, Muslim women impregnated by Serbs reportedly were held captive until late term to prevent them from aborting. In Kosovo, an estimated 100 babies conceived in rape were born in January 2000 alone — the International Committee of the Red Cross speculated at the time that the real number of rape-related pregnancies was likely to be much higher. Sometimes attacks on women’s bodies — particularly their reproductive capacities — specifically target perceived rival progeny. One woman from Darfur reported in 2004, “I was with another woman, Aziza, aged 18, who had her stomach slit on the night we were abducted. She was pregnant and was killed and they said, ‘It is the child of an enemy.’ ”

Sexual slaves to armed combatants

Many other instances have been identified where women and girls are abducted for the purposes of supplying combatants with sexual services. According to one soldier from DRC, “Our combatants don’t get paid. Therefore they can’t use prostitutes. If we politely ask women to come with us, they are not going to accept. So, we have to make them obey us so we can get what we want.” An elderly victim from Liberia, thought to be around 80 years old at the time she related her story to investigators, acknowledged being held by rebels in the town of Voinjama, where “at night, the men would come, usually more than one. They would rape me. They said they would help me. If I was lucky, they gave me 10 Liberian dollars (US 20 cents).”

More often the victims of sexual slavery are younger, and in many cases their victimisation comes under the terms of military duty. An estimated 40 percent of child soldiers around the world are girls, the majority of...
The decomposing bodies of a woman and girl, victims of the 1994 genocide in Rwanda.

“… if you looked, you could see the evidence, even in the whitened skeletons. The legs bent and apart. A broken bottle, a rough branch, even a knife between them. Where the bodies were fresh, we saw what must have been semen pooled on and near the dead women and girls. There was always a lot of blood. Some male corpses had their genitals cut off, but many women and young girls had their breasts chopped off and their genitals crudely cut apart. They died in a position of total vulnerability, flat on their backs, with their legs bent and knees wide apart. It was the expressions on their dead faces that assaulted me the most, a frieze of shock, pain and humiliation. For many years after I came back home, I banished the memories of those faces from my mind, but they have come back, all too clearly.” (Excerpted from *Shake Hands with the Devil*, by Lt Gen Roméo Dallaire, Force Commander of the United Nations Assistance Mission to Rwanda, 1993-1994.)

Image: Mariella Furrer
Bosnian government troops reach out towards a Muslim woman who sits mute with shock by a roadside in Travnik, central Bosnia, in the summer of 1993. The woman was part of a group of Muslim detainees held captive by Bosnian Serbs. They had been deported across the frontline to the government-controlled area only minutes before this photograph was taken. Detainees who were with her said she had been raped.

Image: Anthony Lloyd
whom are forcibly or coercively conscripted. Their responsibilities may range from portering to active combat, with the additional expectation that they will provide sexual services to their superiors or fellow combatants. Much of the violence reportedly committed against women and girls by guerrilla groups in Colombia, for example, is in the context of forced recruitment.

Even those women and girls who “voluntarily” join fighting forces are unlikely to anticipate the extent to which they will suffer sexual exploitation. Data collected in 2004 from women participating in Liberia’s disarmament and demobilisation programme indicated that 73 percent of the women and girls experienced some form of sexual violence. In Uganda, a former child soldier of the National Resistance Army remembers:

“We collected firewood, we carried weapons. For girls it was worse because … we were girlfriends to many different officers. … At the end it became, like, I don’t own my own body, it’s their body. It was so hard to stay the 24 hours a day thinking, Which officer am I going to sleep with today?”

In a similar account from a 19-year-old woman voluntarily associated with the Maoists in Nepal, “Sometimes we are forced to satisfy about a dozen [militia] per night. When I had gone to another region for party work, I had to have sex with seven militia and this was the worst day of my life.”

Some girls who are forced or coerced into sexual slavery may succeed in escaping their captors only to be seized again. Such was the experience of 16-year-old “Hawa”, from Sierra Leone:

“There were about 20 men. We ran to the bush, but I got separated from my family. I was with other people from the village, and we were captured by the rebels and taken to Liberia. … At first I refused to be a ‘wife’, but I had to agree because there was nobody to speak up for me, and nobody gave me food except the rebels. I was a wife for about eight months. … I had not even started my periods.”

Hawa eventually escaped and walked for three days in the bush until she got to a town where she found her parents. When they returned together to their remote village, Hawa recalled, “It was very sad when I … met my sisters because I felt I was somehow discriminated against because I had been raped.” Two years later, Hawa recaptured: “It was a different group: This time I was always with them at night as their wife.”

Hawa escaped a second time and was reunited with her family. For too many other women and girls who attempt to escape the perils of war, the threat of sexual violence follows them — from flight, to displacement in camps or other settings, through to their return and resettlement in their home communities.

**Flight**

The United Nations High Commissioner for Refugees (UNHCR) estimated the total number of people displaced by armed conflict in 2004 at 34 million: 9.3 million were refugees in neighbouring states, and another 25 million were internally displaced in their home countries. According to the United Nations Secretary-General, “The differential impact of armed conflict and the specific vulnerabilities of women can be seen in all phases of displacement.”

During flight, women and girls remain at high risk for sexual violence — committed by bandits, insurgency groups, military and border guards. Many women must flee without the added safeguard of male relatives or community members, further increasing their vulnerability. In the case of 17-year-old “Tatiana” from the DRC, the results were devastating:

Tatiana was eight-and-a-half-months pregnant when her husband and her two-year-old son were hacked to death by irregular militia in May 2003. When she, her mother and two younger sisters heard that the same militia intended to raid the district of Bunia, where they lived, they fled. Six days later, they reached a militia checkpoint, but her mother could not pay the $100 demanded. The militia cut her throat, killing her. When Tatiana’s 14-year-old sister began to cry, she was shot in the head. Her other sister, age 12, was taken to a nearby clearing and gang-raped. Tatiana was told to leave at once or suffer the same fate. After six days walking, she went into labour and gave birth to a girl. Although she had lost a lot of blood, she had to take to the road again the following day. The baby later died.
Without money or other resources, displaced women and girls may be compelled to submit to sex in return for safe passage, food, shelter or other resources. Some may head towards urban settings, possibly in search of the relative security of a densely populated area or in the hope of obtaining employment. Whatever the motivation, both internally displaced and refugee women and girls in urban settings are at risk of exploitation by local residents, especially because they are less likely than encamped populations to be targeted for assistance and protection by governments or by humanitarian agencies.

Afghan refugee women living in the city of Peshawar, Pakistan, for example, described being forced to exchange sex for rent-free housing. In Colombia, the Ministry for Social Protection reported in 2003 that 36 percent of internally displaced women in the country had been forced by men into having sexual relations. This statement was later confirmed in a study undertaken in the same year, which found that displaced women living in barrios in or near the city of Cartagena had suffered higher levels of physical and sexual violence after their displacement. Unaccompanied girls are likely to be among the most vulnerable to sexual exploitation. A 1999 government survey of over 2,000 prostitutes in Sierra Leone found that 37 percent of the young women were under the age of 15, and that the majority of them had been displaced by conflict and were unaccompanied by family.

Still others attempting to escape from war may be the target of traffickers. The absence of border controls and normal policing make conflict-affected countries prime routes for traffickers. In Colombia, the ongoing internal conflict has given rise to one of the western hemisphere's most active trafficking networks. Colombia's Department of Security estimated that 35,000 to 50,000 women and girls were trafficked in 2000, the majority to countries in Asia and Western Europe, as well as to the United States. Myanmar, also wracked by long-standing civil conflict, is thought to supply some 40,000 trafficked women and girls annually for work in brothels, factories and as domestic labourers in Thailand.

**Displacement to camp settings**

Camps for internally displaced persons (IDPs) or refugees may offer only limited protection from sexual violence. Humanitarian aid workers have consistently identified the danger to women who must venture far outside the confines of camps to search for firewood or other staples unavailable in the camp. Research undertaken almost 10 years ago among refugees living in camps in Dadaab, Kenya, found that more than 90 percent of reported rapes occurred under these circumstances. Despite the long-standing evidence, however, not enough has been done to anticipate and avert this predictable risk in more recently established camps.

One 27-year-old Liberian woman who had been raped twice before seeking safety in an IDP camp described the circumstances of her third rape, in 2003, when she left the camp to look for firewood:

“There were three government soldiers with guns. One of them saw me and asked, ‘Where are you going?’ I said I was looking for wood. Then he told me, ‘You are assigned to me for the day.’ I was very afraid. He forced me to go far into the bush, and he undressed me. Then he raped me. When I got dressed afterwards, he took 50 Liberian dollars from me. … My stomach is very painful, but I don’t have any money to go for treatment.”

The trend continues for encamped women displaced by the conflict in Darfur, Sudan, but in this instance, repeated reports by a number of international human rights organizations resulted in recent efforts to improve policing and security related to firewood collection. For many women, however, these security measures have come too late.

Women are also at risk of rape in or near camps, particularly when the camps are poorly planned and/or administered. In a 1996 survey of Burundian refugee women displaced to a camp in Tanzania, more than one in four reported being raped during the prior three years of conflict, with two-thirds of the rapes occurring since displacement, either inside or close to the camp. The majority of perpetrators were other refugees (59 percent), followed by local Burundian residents (24 percent), and then local Tanzanians, soldiers and police. As with firewood collection, advocates and humanitarians have for several years spoken out about the relationship between ill-considered camp design and violence against women, and have put forth recommendations for reducing women's vulnerability.
A Sudanese refugee who was shot in the shoulder and leg as he defended his daughters against the Janjawid militiamen who were trying to rape them. The militiamen later tortured him by tying a cord around his testicles and pulling on it. The ubiquity of rape as a weapon of war places enormous strain on male family members, who often are helpless to prevent such assaults.

Photographed in Goungour, Chad, in 2004.

Image: Francesco Zizola/Magnum
Former abductees — some of whom spent years as forced labourers and “wives” for the Lord’s Resistance Army in northern Uganda — relax in the Gusco Rehabilitation Centre. One girl holds a baby while another reads a newspaper with the headline, “Love: Don’t force it. Don’t rush it. Don’t hurt it.”

Image: Sven Torfinn/OCHA
Nevertheless, the problem persists in many settings. A risk assessment carried out in 2004 in seven IDP camps in Montserrado County in Liberia concluded that overcrowded conditions, insufficient lighting at night, the close proximity of male and female latrines and bathhouses, and poor or unequal access to resources all conspired to increase the likelihood of sexual violence against women and girls. In a study undertaken in Northern Uganda, also in 2004, a woman living in one of many IDP camps in the region told investigators, “Rape is rampant here … a woman was recently harassed by two men who held her legs wide open and used a flashlight to observe her private parts and allowed another man to rape her while they observed.”

Lack of institutional protection

Not unlike rape in war, these acts of violence flourish in the environments of impunity that too often circumscribe the lives of displaced populations. The problem can be especially dire for IDPs. Despite the fact that in 1998 the United Nations produced guiding principles on the protection of displaced populations, there is still no United Nations agency specifically mandated with their care and protection. UNHCR is increasingly stepping in to fill the void, but in 2004 the refugee agency assisted only 5.6 million of the estimated 25 million internally displaced persons around the world. More often, the responsibility for IDPs falls primarily to national governments, whose resources are likely to be drained or diverted by the conflict. A global evaluation of the reproductive health of refugees and IDPs by an interagency working group found that reproductive health services are most lacking among IDP populations, of which services addressing gender-based violence are the least developed.

The scenario may be only marginally improved for refugees. In too many instances there are not enough UNHCR staff on the ground who are designated to address the issue of gender-based violence. Even where staffing is sufficient, UNHCR's ability to provide sustained protection against sexual violence is all too often only as good as a host country's commitment to addressing the issue. Wherever a host government or local community is hostile, the risk of all forms of violence against refugees — including sexual violence — is higher.

Following a statement issued in 2000 by the president of Guinea, for example, in which Liberian and Sierra Leonean refugees were blamed for sheltering armed rebels responsible for attacks on Guinea, women and girl refugees reportedly were raped in mob reprisals launched by Guinean police, soldiers and civilians. Some 50 Burundian refugee women in Tanzania allegedly were attacked in May 1999 by a group of over 100 Tanzanian men who were apparently avenging the death of a local schoolteacher. Thousands of Afghans in Pakistan and Burmese in Thailand have never been granted official refugee status by their host governments. The fear of forced return means that they are unlikely ever to report a case of sexual violence committed against them to local authorities. Not surprisingly, in both Pakistan and Thailand multiple incidents have been recounted by refugee women and girls of local police or security colluding in or even perpetrating sexual violence against them.

Reconstruction or exploitation?

Evidence suggests that sexual violence does not necessarily end with the cessation of armed conflict. Incidents of rape are reported to have increased sharply in the context of ongoing insecurity in post-war Iraq, for example. One of the victims, “Dalal”, was abducted, held overnight and allegedly raped in 2003 by four Iraqi men who she believes “wanted to kidnap anyone … to take what they wanted.” In other post-conflict settings, incidents of rape may decrease, but risk of exposure to forced

What is perhaps more surprising is the extent to which humanitarian actors — those whose commitment is to provide assistance — have been implicated in sexual crimes against refugees and internally displaced persons.
or coerced prostitution, as well as trafficking, may increase. Events in
the Balkans — where prostitution and trafficking burgeoned in the
aftermath of wars in the former Yugoslavia — illustrate how criminal
elements may replace fighting factions in the continued sexual
victimisation of women and girls. The added presence of peacekeeping
forces, who have been implicated as users of commercial sex workers in
places such as Bosnia-Herzegovina, Sierra Leone, Kosovo, Timor Leste
and the DRC, may supply a notable portion of local demand.

In many instances, the risk to women and girls of falling prey to sexual
exploiters is exacerbated by reconstruction programmes that fail to
specifically target their needs, or to address long-standing patriarchal
traditions that discriminate against women. After the genocide in
Rwanda, for example, inheritance laws barred surviving women and girls
from accessing the property of their dead male family members unless
they had been explicitly named as beneficiaries. As a result, thousands
were left with no legal claim to their homes and land.67 Such
impoverished women, returning to their communities without family or
resources, are more likely to be caught up in the sex trade.

Ironically, and sadly, women and girls who experienced sexual violence
during conflict are probably the most vulnerable of all to further
exploitation in post-conflict settings. Some rape victims may be rejected
by their families and communities for having “lost their value.”68 In
Burundi, women who had been raped told researchers in 2003 that “they
had been mocked, humiliated and rejected by women relatives,
classmates, friends and neighbours because of the abuse they had
suffered.”69 Raped women may be abandoned by husbands who fear
contracting HIV, or who simply cannot tolerate the shadow of
“dishonour” they believe their raped wives have cast across them.
Without prospects for the future, prostitution may seem the only viable
option to these women.

For other women and girls, their histories of victimisation may dull them
to the dangers of entering the sex trade. One young girl in Sierra Leone
who previously had been abducted by rebels voluntarily became a
prostitute after she was released by her captors. She reportedly
“considered herself fortunate that she was now being paid.”70 In

Rwanda, an HIV-positive woman in Kigali spoke of her sister’s
resignation: “After the war, we saw our family decimated … my little
sister for whom I care is a pseudo-prostitute because she has no money.
She says that she will continue this lifestyle even if she becomes HIV-
positive. She says she looks at my health degrading and insists that she
wants to taste life before she dies.”71 Disregard for one’s own wellbeing
is only one of the many potential devastating effects of sexual violence
on its survivors.

The impact on the survivor

Sexual violence against women in war and its aftermath can have almost
inestimable short and long-term negative health consequences. As a
result of the systematic and exceptionally violent gang rape of
thousands of Congolese women and girls, doctors in the DRC are now
classifying vaginal destruction as a crime of combat. Many of the
victims suffer from traumatic fistula — tissue tears in the vagina, bladder
and rectum.72 Additional long-term medical complications for survivors
may include uterine prolapse (the descent of the uterus into the vagina
or beyond) and other serious injuries to the reproductive system, such
as infertility, or complications associated with miscarriages and self-
induced abortions.73 Rape victims are also at high risk for sexually
transmitted infections (STIs). Health clinics in Monrovia, Liberia,
reported in 2003 that all female patients —
most of whom said they had been raped by
former government soldiers or armed
opposition — tested positive for at least one
sexually transmitted infection.74 Untreated
STIs can cause infertility — a dire
consequence for women and girls in cultures where their value is linked
to reproduction. STIs also increase the risk of HIV transmission.

HIV/AIDS is among the most devastating physical health consequences
for survivors of sexual violence — as evidenced by the continued
suffering of women in Rwanda. In a study of over 1,000 genocide
widows undertaken in the year 2000, 67 percent of rape survivors were
HIV-positive. In the same year, the United Nations Secretary-General
concluded, “Armed conflicts … increasingly serve as vectors for the HIV/AIDS pandemic, which follows closely on the heels of armed
troops and in the corridors of conflict.”75 Despite the level of
recognition of the urgency of the problem of HIV/AIDS in war,
insufficient resources have been dedicated to addressing the issue. In
Rwanda, as elsewhere, treatment for rape victims infected with HIV has
been characterised as “too little, too late.”76 The story of one HIV-
Recently liberated girls, who were forced to work as porters and domestic “slaves” for the Lord’s Resistance Army in northern Uganda, await treatment for their injured feet in Kitgum at St Joseph’s Hospital. They are among the tens of thousands of children who have been — and continue to be — abducted and made to serve the rebels. During the two-decade-long conflict, young girls and women have been vulnerable to physical and sexual abuse, not only from the rebels but also from government soldiers.

Image: Sven Torfinn/OCHA
In 2002, this woman fell victim to the Revolutionary United Front (RUF) rebel forces. In both Sierra Leone and neighbouring Liberia, the RUF amputated civilians’ arms and hands to intimidate communities and spread terror. Despite the peace in the region today, thousands of men, women and children live with the irreparable reminders of these brutal tactics.

Image: Brent Stirton
positive victim of the genocide illustrates the tragic consequences:

“Since I learned I was infected [in 1999], my husband said he couldn’t live with me. He divorced me and left me with three children, so now I don’t know how to pay for food, rent, school and so on. I have no family left. My six-year-old has many health problems, and she must have HIV.

“I regret that I’m alive because I’ve lost my lust for life. We survivors are broken-hearted. We live in a situation which overwhelms us. Our wounds become deeper every day. We are constantly in mourning.”

She should be on antiretrovirals, but there isn’t the money. Since I was married after the war, it is difficult for me to access help from the Genocide Survivor’s Fund. My greatest worry is what will happen to my children if I die. I want to get sponsors for them, so at least I can die in peace.77

The challenges of meeting the myriad health needs of survivors of war-related sexual assault are complicated by the absence of adequate facilities and trained staff in many war-torn settings. In research conducted in post-conflict Timor Leste and Kosovo, and among internally displaced women in Colombia, over two-thirds of women interviewed reported that reproductive-health services were difficult to access.78 Even where services do exist, they may not be free — as is the case in many countries in Africa, where state-run health centres operate on a cost-recovery basis. Moreover, many health clinics are constructed with open waiting areas where women and girls may be expected to disclose their reasons for seeking care; in the absence of confidentiality, they are likely to conceal their victimisation. Health workers’ beliefs that it is their responsibility to “prove or disprove” rape is also a limiting factor in quality of care. In some settings, a woman seeking medical treatment may be required first to report her case to the police in order to get a medical referral. This prerequisite, in turn, may expose women to further violence.

Rape victims in Darfur, for example, have been arrested for “illegal” pregnancies (occurring outside the context of marriage). One 16-year-old Sudanese girl, who had already suffered the rejection of her family and fiancé, endured additional abuse at the hands of police:

“When I was eight months pregnant from the rape, the police came to my hut and forced me with their guns to go to the police station. They asked me questions, so I told them that I had been raped. They told me that as I was not married, I will deliver this baby illegally. They beat me with a whip on the chest and back and put me in jail. There were other women in jail who had the same story. During the day, we had to walk to the well four times a day to get the policemen water, clean and cook for them. At night, I was in a small cell with 23 other women. I had no other food than what I could find during my work during the day. And the only water was what I drank at the well. I stayed 10 days in jail and now I have to pay the fine — 20,000 Sudanese dinar [$65] they asked me. My child is now two months old.79

For those who are subject to discrimination by family and community, and who also do not receive basic psychological support, the emotional effects of their violation may be as debilitating as any physical injuries. Many rape survivors in Rwanda reportedly “still live under a constant shadow of pain or discomfort which reduces their capacity to work, look after and provide for their families.”80 One such survivor, who was gang raped and beaten unconscious during the genocide, woke up only to witness the killing of people all around her. Ten years later, she says:

“I regret that I didn’t die that day. Those men and women who died are now at peace whereas I am still here to suffer even more. I’m handicapped in the true sense of the word. I don’t know how to explain it. I regret that I’m alive because I’ve lost my lust for life. We survivors are broken-hearted. We live in a situation which overwhelms us. Our wounds become deeper every day. We are constantly in mourning.”81

The implications of such testimony make clear the fact that programming to assist survivors is imperative to any lasting efforts at reconstructing the lives and livelihoods of individuals, families and communities in the wake of armed conflict. In most conflict-affected settings, however, human rights and humanitarian activists are still fighting to ensure that the most basic services are accessible. The ultimate goal — putting an end to the epidemic of sexual violence against women and girls during war — seems an even more distant aspiration than developing adequate response services.

Assisting and protecting survivors

International humanitarian initiatives aimed at addressing violence against women in refugee, internally displaced and post-conflict settings are relatively new. Most have been introduced only in the last 10 years. Particularly during the late 1990s, a number of relatively
small-scale but nonetheless vital projects were implemented in various sites around the world. The lessons learned from these efforts gave rise to a theoretical model, currently promoted by UNHCR and others, that recognises the importance of integrating prevention and response programming within and across service-delivery sectors, specifically in the areas of health, social welfare, security and justice. In other words, survivors must have access to medical care as well as psychosocial assistance; they should be able to rely on the protection of the police, peacekeepers and local military; and they are entitled to legal assistance should they choose to prosecute those who perpetrate violence against them. Addressing sexual violence also requires national education and sensitisation — at the family and community level and at the level of service provision — so that doctors, lawyers, judges and police are able to respond to survivors efficiently, effectively and supportively. It further requires advocating for improved legislation to protect women and girls, as well as policies that support gender equity and equality.

While the broad outline of roles and responsibilities within this “multisectoral model” provides a general framework for addressing violence against women, an assessment undertaken in 2001 concluded that the implementation of the model was weak in virtually every conflict-affected setting around the world. Foremost among the limitations to establishing multisectoral programming was the failure — at both the international and national levels — to prioritise violence against women as a major health and human rights concern. The result was a lack of financial, technical and logistical resources necessary to tackle the issue. Many survivors, the 2001 assessment observed, were not receiving the assistance they needed and deserved, nor was sufficient attention being given to the prevention of violence. The outcomes of an independent experts’ investigation spearheaded by the United Nations Development Fund for Women the following year echoed these findings in their conclusion “that the standards of protection for women affected by conflict are glaring in their inadequacy, as is the international response.”

These inadequacies persist even today. However, the number of field-based initiatives addressing the issue of sexual violence against women and girls continues to grow, even against a reassuring backdrop of limited funding. Methodologies are being refined by many humanitarian organizations to try to extend and improve services for survivors, as well as to build the capacity of local agencies to take on the issue. Standardised procedures for medical management of rape are being adopted in an increasing number of settings. Training modules have been developed to build local capacity to meet the psychosocial needs of survivors. Efforts are being made, most evidently in post-conflict settings but also in some refugee settings, to support legal reforms that would provide greater protection against multiple types of gender-based violence against women and girls.

Widespread community-based education aimed at changing attitudes and behaviours that promote sexual and other forms of violence against women has been carried out in a number of settings. Research on the nature and scope of the problem has also multiplied in recent years, and is bringing pressure to bear on international actors as well as on states to take more aggressive measures to address violence against women in conflict and its aftermath.

In addition, several high-level international initiatives are currently underway to promote more coordinated and comprehensive action by humanitarian aid organizations. New guidelines issued by a task force of the United Nations Inter Agency Standing Committee (IASC) provide detailed recommendations for the minimum response required to address sexual violence in emergencies and hold all humanitarian actors responsible for tackling the issue in their respective areas of operation. The IASC released a statement in January 2005 reconfirming their commitment to “urgent and concerted action aimed at preventing gender-based violence, including in particular sexual violence, ensuring appropriate care and follow-up for victims/survivors, and working towards holding perpetrators accountable.”

To this end, a global initiative to “stop rape in war” is being developed collaboratively by United Nations entities and nongovernmental organizations. The two major pillars of the initiative include conducting advocacy at the international, regional, and local levels, and strengthening programming efforts among those currently engaged in addressing the issue of sexual violence in conflict. One of the notable outcomes of the proposed initiative is to reduce the prevalence of rape in target countries by at least 50 percent by 2007. Such ambitions will require a “quantum shift” in approaches to sexual violence in war, most especially in terms of prioritising all efforts to end the levels of impunity.
Girls chat together in the dormitory of the Gusco Rehabilitation Centre in northern Uganda. Most of the former abductees at the facility were virtual slaves to the rebel Lord’s Resistance Army (LRA) and forced into sexual relationships with its soldiers. “Cecilia” (not pictured here), aged 20, was abducted from a secondary school in Pader when she was 15 and spent five years in captivity. She is now at a rehabilitation centre in Kitgum.

“I was given to John Okech, one of [LRA leader Joseph] Kony’s senior commanders. I was his fourth wife. He soon brought in four other young girls. They were to become his wives when they were slightly older. In the meantime, they were told to baby-sit for his other wives. When you are given a commander as your husband, you’re expected to produce food. You’re also given a gun and expected to fight. I was often picked to go out on patrols.

“I became pregnant in early 2002, when Kony predicted an attack from the UPDF [United People’s Defence Forces] on our bases in Sudan. By June, our whole group sneaked back into Uganda and hid in the Imatong mountains. This was the most difficult time for captives. My husband was part of the attack on Anaka [a village in Gulu district]. He was shot in the chest by the UPDF. He died a few days later. I gave birth to a baby boy, but he died after a month.

“I was released after my husband died. I only returned from the bush a few days ago. I’m still haunted by frightful dreams. I dream only that I’m still in the bush. I hear children crying. I dream that we are being attacked, or fighting, walking for days in the hot desert without food or water. I’m happy to be back, but I have no hope of returning to school. I heard that my entire family was displaced. They are scattered in camps in the district.”

[Excerpted from “When the sun sets, we start to worry …” An account of life in northern Uganda published by the United Nations Office for the Coordination of Humanitarian Affairs (OCHA)/Integrated Regional Information Networks (IRIN) in 2003.]

Image: Sven Torfinn/OCHA
Due to the unending insecurity in northern Uganda, over 1.6 million people currently are living in over 200 camps for internally displaced persons (IDPs). Residents at the camps report that IDP life has had a disastrous effect on their society. Signs of the social breakdown include high levels of promiscuity, substance abuse, unprotected sex and increased numbers of child mothers. As people stay longer and longer in the camps, what is left of their dignity is gradually eroded. Disrespected by the traumatised youth, forced to look on, powerless, as their society is turned inside out by violence and fear, some of the older adults become mentally ill, according to camp leaders.

For households headed by women, the difficulties are heightened. One woman, “Risper”, said that residents who sleep in their huts in the camp at Kitgum face great danger. Risper, whose husband died in 2003 of an AIDS-related illness, is raising her three children on her own. The youngest is two years old and seriously ill. Risper could not find anyone to help her build her hut. “Everybody wants money,” she said. While it normally would have taken one day to finish, Risper has been working for days. “I am not strong enough to finish the work quickly,” she said. “I also have other responsibilities.” After working on the house, she had to cook the children their sole meal of the day. The only ingredients she had at hand were a cup of sorghum flour and some green vegetables. “We will eat and then find a place to sleep,” she said. “We don’t sleep in our huts.”

Image: Sven Torfinn/OCHA
that have given rise to the “shocking scale and stubborn persistence” of the violence.86

The final frontier: ending impunity

Along with an increase in field-based programming, the last decade has produced significant advances in international standards and mechanisms of accountability for those who commit sexual violence. International criminal tribunals for Rwanda and the former Yugoslavia have prosecuted sexual violence as crimes of genocide, torture, crimes against humanity and as war crimes. The Rome Statute of the recently established International Criminal Court (ICC) has enumerated rape, sexual slavery and trafficking, enforced prostitution, forced pregnancy, enforced sterilisation and other forms of sexual violence and persecution as crimes against humanity and as war crimes. The ICC is initiating investigation into cases from several conflict-affected countries.

Another groundbreaking advance was the United Nations Security Council’s adoption of Resolution 1325 in 2000, which specifically “calls upon all parties to armed conflict to take special measures to protect women and girls from gender-based violence, particularly rape and other forms of sexual abuse, and all other forms of violence in situations of armed conflict.”87 Since that time, the United Nations Secretary-General has submitted two reports to the United Nations Security Council on the implementation of Resolution 1325. While these reports concede that much remains to be done, especially in terms of holding states accountable for the actions of fighting forces and in increasing the level of participation of women in all stages of peace-building, they also note that major advances have been made in introducing codes of conduct that establish “zero tolerance” for all United Nations personnel, including peacekeepers, who might sexually exploit those they are meant to serve. Since these codes of conduct were implemented, action has been taken against offenders in a number of countries, such as the DRC, where an inquiry into allegations of sexual exploitation committed by over 100 peacekeepers is underway.

However, grave problems with impunity persist in virtually every conflict-affected setting around the globe. International tribunals can only prosecute a fraction of cases, and many national governments do not have the resources or the commitment to pursue sexual crimes against women. In some cases national jurisdiction does not extend to foreign fighting forces who commit abuses within their territory. In others, governments do little to support victims in coming forward. Evidentiary requirements often mean that the burden of proof lies with the victim. Some must pay for legal assistance. Where forensic evidence is required, healthcare providers must be able to collect it in a timely manner and be prepared to present that evidence at a trial. Police or relevant security forces must be trained to investigate and appropriately document their findings. The frustrating reality for many survivors of sexual crimes in conflict-affected settings around the world is that there are no systems to ensure basic protection to survivors, let alone access to justice.

Such impunity both reflects and reinforces the widespread cultural norms that acquiesce to the inevitability of violence against women and girls whether in times of peace or of war. And it is these norms that must be targeted aggressively in order to ensure reductions in levels of abuse: “In a world where sex crimes are too often regarded as misdemeanours during times of law and order, surely rape will not be perceived as a high crime during war, when all the rules of human interaction are turned on their heads, and heinous acts regularly earn their perpetrators commendation. … What matters most is that we combine the new acknowledgement of rape’s role in war with a further recognition: humankind’s level of tolerance for sexual violence is not established by international tribunals after war. That baseline is established by societies, in times of peace. The rules of war can never really change as long as violent aggression against women is tolerated in everyday life.”88

In a world where thousands of women and girls suffer sexual violence committed with impunity in the context of conflict, the message needs to be made clear: A single rape constitutes a war crime.
"Helena" is 25 years old and the victim of rape by a soldier in Sake, Democratic Republic of Congo. Her daughter "Fara", the child of the rape, is two-and-a-half years old.

"I was sent to buy salt one night and was grabbed by a group of soldiers hanging around by the market. They dragged me to a disused house nearby, where they regularly raped people they had taken from the market. There were 10 men, one of whom raped me. He pushed me to the floor and beat me, helped by the others. I told the man that I was a child and didn't want to do such things, but he just carried on. I felt so much pain in my stomach. I was taken by force to Kimbumba, 30 kilometres from Goma, where he kept me for a week until he was sent to war. I was left there, pregnant with his child. My parents had thought I'd disappeared so they welcomed me back into the home when I returned. But I have many problems: I rely on my mother for food, but sometimes we don't eat at all. I feel rejected by society because of what happened."

Images: Georgina Cranston/IRIN
"Elizabeth' and her four-year-old daughter were brutally raped and beaten by six militiamen near their home in Masisi, Democratic Republic of Congo. Her daughter was carried away by their attackers, and the baby son that Elizabeth was carrying on her back throughout the assault subsequently died. Through counselling provided by Doctors On Call Services (DOCS), Elizabeth has been able to begin the healing process.

"I am now ready to talk about my story. Before I was raped, both my parents were killed in the war, as were many of my relatives. In fact, my three sisters are widows because their husbands were all killed.

"One morning in November 2004 I went to look for food in the field with two of my children. My four-year-old daughter and I were carrying baskets, but my son was just a baby so I had him on my back. We were going to our *shamba* [fruit and vegetable garden] 15 kilometres away to look for bananas, plaintain and pineapple, when the militiamen appeared in front of and behind us. The six men pushed us from the path to the nearest field and tied my daughter's and my arms behind our backs. They started to beat us with their guns, and also beat and kicked my baby. I still suffer from intense pain now, even if I carry the smallest bucket.

"As they were beating me, I fell to the ground with my baby still on my back. It was then that they took off my skirt and began raping me, with my baby on my back throughout. It was impossible to resist — we couldn't even make any noise. I was raped by three men and my daughter was raped by the other three at the same time, lying next to me on the ground. While one raped each of us, the other two would point their guns and hold us down with their feet. When one finished, the next would start. I felt totally useless — there was no way to shout as they would have killed us. When it was over, they took my daughter away with them. I have not seen her since.

"I had such terrible pains in my stomach, vagina and back that they had left thinking I was dead. I could only crawl, and crawled through the bush for three days. They had taken everything I had, so I was completely naked. I put leaves on my body, and carried my baby, who was very sick. He had been beaten badly and when I fell to the ground I had landed on him. He died a week after the attack.
“Some people passed me in the bush and I sent them to fetch my sister. She took me back to Masisi, where I found that my house had been looted the same day that I was raped. Everything had been taken. My husband, who had married again and was living in Mweso with his new wife, and I had been friends, but after the rape he rejected me entirely.

“Through my sister I met the counsellors [connected to DOCS] who helped me. I was taken to hospital a week after the attack, where they told me that my stomach was damaged. I was unable to walk, so I was sent home, and I am now waiting until I am strong enough to travel to DOCS. They wouldn’t let me travel before, as my condition was so bad that they thought I might die on the way. I am getting stronger but my back is still very bad.

“I used to go to our shamba every day, but my back was so damaged by the beating and the rape that I can’t anymore — I just don’t have the strength. I am also too scared to go. Sometimes I have nightmares and can’t sleep. At other times I wake up and lose all hope, as I have been dreaming of dying. Support from my community has helped me, as has my faith in God. DOCS came to counsel us — they gave us hope and encouraged us to continue living.

“DOCS has also given me a goat, beans and a hoe. I am so happy — it proves to me that I am loved. I live with my six children and had to beg for food as before today I didn’t have the materials for working. We are so poor, my children can’t go to school. But I am going to rear the goat and grow the beans for food.”
A young former “bush wife” in Sierra Leone, who was abducted from her family at age 10 by rebels from the Revolutionary United Front. After a killing spree that decimated most of her village, the rebels took her away with them to work as a cook, porter and sex slave. When she tried to escape, the rebels poured acid over her arm and breast as a warning to other abductees. After two years in captivity, she was able to escape. She recently joined a small self-help group of female torture victims. Sierra Leone has only one psychologist, and there are thousands of female victims of sexual abuse and torture — who have no choice but to help themselves.

Image: Brent Stirton