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Relating Modernity, Conflict and Sexual Violence: Discourses of Violence Against Women in

Post –War Sierra Leone

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Abstract

This paper attempts to bring two spheres of violence against women (VAW), female genital mutilation/cutting and sexual assault, together in conversation against the backdrop of post war Sierra Leone. Within the dynamic sphere of human rights, violence against women has reached a crossroads. While activists have been successful in advocating for women's rights as human rights (focusing particularly on developing and conflict saturated countries), their efforts have, in many cases, reinforced unequal gender relations. Additionally, these efforts have catapulted images equating women's rights with the literal protection of 'womanhood.' Within its small borders, Sierra Leone presents an arena for analyzing the intricacies that influence international and national attitudes on sexual violence and female genital mutilation. Extending Mino Moallem's concept of fundamentalism as informed and created by modernity, this project critically engages the relationship between female genital mutilation and sexual violence as a result of the recent civil war in Sierra Leone and the subsequent transitional justice process. Using a critical discourse analysis of institutional texts from non-governmental organizations and ad-hoc war tribunals, I argue that the framing of violence against women within the dichotomy of fundamentalism and modernity not only influences contentious perspectives of violence against women, but actually creates and aggravates divergence. This project contributes to broader, multi-faceted discussions on the dynamic relations between gender, violence and health interventions in post-war reconstruction.

Threaded through constructions of the third world woman is her subjection to sexual violence. Intervening institutions tend to combat sexual violence with the intent to *protect* women as opposed to securing women's rights as equal citizens of their communities (Miller 18). An example of this phenomenon is post-war Sierra Leone where two spheres of violence against women, sexual violence and female genital mutilation (FGM) manifest as opposing symbols of womanhood. Physicians for Human Rights (PHR) estimate that 55,000 women were sexually assaulted during the recent civil war in Sierra Leone (PHR 59). The World Health Organization (WHO) approximates the rate of FGM to be as high as 94% (WHO 29). The recognition of both of these practices as dire violations of human rights and the subsequent perceptions that frame their specific interventions presents the opportunity for possible discrepancies between mission-oriented non-governmental organizations and the local communities they wish to serve.

An intense example of this discrepancy is female genital mutilation (FGM). WHO defines FGM as those practices that amount to “partial or total removal of the external female genitalia, or other injury to the female genital organs for non-medical reasons” (Banks. et al. 1835). In a collaborative study done across six African countries, WHO concluded that increased adverse obstetric outcomes were associated with women who had undergone FGM (Banks et al. 1839). While the WHO study provides invaluable epidemiological data they do not consider the effect of medical obstetric procedures making it difficult to “know whether one is measuring a true complication [of FGM] or the effect of hospital procedures” (Obermeyer 446). Another study with a population of Somali immigrants made recommendations that encouraged medical knowledge of FGM specialty care in the pre-natal stages of gestation (Gordon 418), bringing to

light the potential confounding factor of medical knowledge related to FGM absent in the WHO study. The subsequent application of the WHO results to other areas where FGM is practiced has implications for the effective assessment and delivery of advocacy campaigns and health services. In Sierra Leone, this is not only pertinent to those women who have undergone FGM but spans to the delivery of services to survivors of war-related sexual violence.

Scholars have extensively documented the problems and lack of effectiveness caused by mismanagement and discrepancies between international and national interests in the design and implementation of the transitional justice/peace process in Sierra Leone (Dougherty 2004; Lamin 2003; Schabas 2003). The initial peace process in Sierra Leone reflects the failure to acknowledge the gendered consequences of conflict and subsequent peace agreements. Aisha Fofana Ibrahim asserts that the isolated focus on “rape/war trauma has not been appropriate or effective in Sierra Leone because the most prevalent form of trauma experienced by many is directly connected to economic survival” (Ibrahim 3). Ibrahim touches on a key insight that many human rights activists and other disciplines fail to recognize or include prominently in their assessments; the persistence of violence against women such as conflict induced sexual assault and FGM is directly tied to trauma induced by economic poverty and structural violence on international, national and local levels that (un)deliberately reinforce perceptions of gender. A specific example in Sierra Leone is the pluralistic legal system composed of common, Muslim, customary law (Bakshooden and Etchart, 59); and as a result of the conflict; humanitarian law. This paper will examine how varying interpretations of violence against women create opposing views of traditional and modern womanhood in the spaces of human rights advocacy, female initiation rituals (which include FGM), and the Special Court for Sierra Leone (SCSL).

Methods

Subjects

This study uses data compiled by the World Health Organization (WHO) and Physicians for Human Rights (PHR) on female genital mutilation (FGM) and war-related sexual violence in Sierra Leone, respectively. The report generated by PHR also contains a section generated from in depth interviews.

In both studies, all of the participants were women. In the case of PHR, the study was concentrated on internally displaced persons (IDPs) as a result of civil war in Sierra Leone. Participants in the WHO study were pregnant women who were examined and categorized according to the presence (or not) of FGM and if present, the specific type.

Analysis

The main instruments of analyses in this study are critical discourse analysis and theoretical concepts of the dynamic relationship between fundamentalism and modernity. The theoretical relationship between fundamentalism (tradition) and modernity is taken from Minoo Moallem's previous application to the political histories of Iran. I extend the theoretical basis to focus on fundamentalism in the context of cultural traditions; specifically that traditions are in constant fluid conversations with discourses of modernity (Moallem 13). It is important to note that this project does not intend to support a particular stance on FGM or negate the experiences and expectations of justice borne by survivors of sexual violence. Rather it is an attempt to focus on the dominance of hegemonic narratives within large international organizations *and* local communities.

Limitations

Although the WHO study analyzes and compares FGM data across six African countries, Sierra Leone is not included. Despite lack of specific information, the presumptions taken from the conclusions of the report have resulted in repercussions for all areas where female genital mutilation is practiced. Post war ethnographic data on FGM is limited to one village of a single ethnic group in Sierra Leone; the Kuranko. It is important to note that the perspectives of survivors of violence against women are delivered in the context of reports generated by international institutions.

Findings

The following discussion is organized into three segments. The first section juxtaposes the implications of discourse employed by the WHO against the post war significance of FGM amongst the Kuranko. The second section explores social attitudes about sexual violence using the PHR report to highlight discrepancies between the desires of the participants and the expectations of human rights discourse. The third section illuminates the simultaneous workings of international law and stereotypical perceptions of gendered space through the examination of the Special Court for Sierra Leone and the trial against the Civilian Defense Forces (CDF).

Discourses of Female Genital Mutilation (FGM)

WHO has classified four types of FGM I (clitoridectomy), II (excision), III (infibulation), or IV (other) each corresponding to the amount of external genitalia that is removed. While the WHO classification may be helpful for identification purposes as well as launching global campaigns, the term ‘female genital mutilation’ literally strips a collective of practices into a single essential act of violent ‘mutilation.’ In a multi-agency statement released in 2008, WHO defended their use of terminology stating that the:

[u]se of the word "mutilation" reinforces the fact that the practice is a violation of girls' and women's rights, and thereby helps to promote national and international advocacy for its abandonment. (22)

The intimate complex linguistic meaning of the term is lost in the power dynamics of translation. The terminology in itself justifies intervention, skipping over the necessity to understand the complex cultural meanings that are not stagnant but instead constantly shifting. Connotations embedded in the taxonomy set the stage for research that is aimed at providing evidence to cycle back in support of the intentions first laid out in the terminology. For the purposes of the WHO categorizing the varying extent of FGM,

is useful for purposes such as research on the consequences of different forms of female genital mutilation, estimates of prevalence and trends in change, gynaecological examination and management of health consequences, and for legal cases. A common typology can ensure the comparability of data sets. (23)

The terminology and classification of 'female genital mutilation' influences the methodology and research design that is aimed to support a classification necessary to justify NGO intervention. In the WHO collaborative study the *design* of the research is instrumental in framing FGM as a direct cause of adverse obstetric outcomes thereby in opposition to human rights. The important factor that influences the methodology and consequently the results are the variables that are measured in the study of obstetric outcomes. Confounding factors (variables that affect results when considered) included presence and specific type of FGM, maternal age, parity, socioeconomic status, prenatal visits, etc(1837). While the amount of antenatal care visits gives some information on the quality of pre-natal care, a more poignant detail relevant to obstetric outcome is antenatal reversal for women who have had FGM. The temporality of this

factor is also important; specifically how far in advance of parturition the reversal was performed.

Another important factor related to antenatal reversal is the skill and knowledge of the practitioner performing the procedure. Successful antenatal reversal that is done before the onset of labor is especially important for those women who have undergone FGM III (Gordon 419). The WHO collaborative study states that the obstetric “risk[s] seems to be greater with more extensive FGM” (1835) thereby increasing the importance of the time and quality of antenatal reversal. This increased obstetric risk associated with FGM III could be attributed to the timing and skill of antenatal reversal which itself is dependent on prenatal visits *and* knowledge of the medical establishment. Ignoring the responsibility of medical personnel as an explanatory variable and the already complex politics of obstetric procedures works to establish an agenda that positions FGC in direct opposition to the human rights discourse of WHO. The goal of eradication is advanced but consequently overlooks potential factors attributed to the organization of obstetric care.

Dimusu Biriye (loose translation: ‘female initiation’)

Chris Coulter presents a memoir of her perspectives on female genital mutilation (FGM) where she witnesses ceremonies of the traditional girl’s initiation ritual (of which FGM is apart), Dimusu Biriye, amongst the Kuranko in the Koinadugu District in northern Sierra Leone. Coulter’s time of ethnographic research is significant because she is observing the rituals in 2004, three years after the end of the civil war in Sierra Leone. Her timing allows for an analysis situated in a post conflict environment. Coulter realizes “that [her] own personal sense of frustration over the bodily violence, on one hand, and [her] own analytical understanding of the social context of the ritual on the other, are aspects of two different systems of thought” (440).

These two systems of thought are directly connected to terminology (specifically FGM and Dimusu Biriye) and the lingual memory that each represents. FGM is explicit to the individual and denotes a system of thought that relies on the right to authority over the self set in the context of individualism. Dimisu Biriye represents a girl's initiation into society, adulthood and more specifically womanhood. To the villagers, Dimisu Biriye is a rite of passage into womanhood and in the post-modern and post conflict setting of Sierra Leone, it not only marks a moment of transition into adulthood but also holds extreme social significance as "a key event in reconfiguring social relations after a decade of civil war" (Coulter 433). Dimusu Biriye represents a system of thought that seeks to preserve tradition, cultural values and social cohesion.

Findings of the PHR Report: discourse surrounding sexual violence.

One of the major findings of the PHR study indicates that "war-related rape and other forms of sexual violence were committed on a widespread basis. . . [with] total prevalence rates of 17%" (PHR 59). While the findings of this report are monumental for establishing grounds for the prosecution of those responsible, the theoretical and practical framework in which the report operates enforces the problematic imposition of modernity, fundamentalism and conflict. As stated previously, the main conclusion of the PHR report was to establish the extent of sexual violence as systematic, thereby warranting the criminal prosecution of combat commanders deemed 'most responsible.' It was therefore a surprising that 51 out of 88 respondents in a qualitative survey thought that their perpetrators should not be punished (Physicians for Human Rights 56). When asked what would be most useful in coping with their experience, the top three priorities were humanitarian assistance, medical assistance and income generation projects (55). It should also be pointed out that these responses reported by those who had suffered sexual

violence did not present a significant difference ($p < 0.05$) than those women who were not subject to sexual violence but did face other human rights abuses (60). Priorities related to survival substantiate Aisha Ibrahim's claim that "the most prevalent form of trauma experienced by many [in Sierra Leone] is directly connected to economic survival" (Ibrahim 3). This claim of trauma induced by economic survival is not meant to negate the horrors suffered by those subjected to sexual violence. It instead provides an example where hegemonic narratives of transitional justice, specifically criminal prosecution in the form of a war tribunal are not the focal point of reconstruction to many Sierra Leoneans.

An additional finding of the PHR report describes ideas of 'Women's Rights and Gender Roles in Society.' Responses generated seemingly conflicting results indicating that

Despite 80% of women expressing that there should be legal protection for the rights of women, more than half . . . reported that their husbands had the right to beat them and it was a wife's duty to have sex with her husband even if she did not want to. The apparent disparity between such beliefs and international principles of human rights suggests a need for public discourse and education on local, regional and international levels. (PHR 61)

At first glance, these statements appear contradictory but in actuality "such beliefs" may actually be attributed to the stipulations of 'customary law.' It is important to note that there is a somewhat pluralist legal system in Sierra Leone (Bakshooden and Etchart, 59); common law, customary law, Muslim law and in the recent wake of the civil war, humanitarian law. The responses in the survey potentially reflect the tensions and subsequent negotiation of the various legal systems by the respondents. By stating the importance of a "need for public discourse and education", there is an implication that there is a lack thereof, further suggesting ignorance or

partial understanding of human rights on the part of the participants as opposed to the intricate negotiation between values in varying legal systems.

Special Court for Sierra Leone: Trial against the commanders of the Civilian Defense Force

Major armed factions in the Sierra Leonean conflict included the Revolutionary United Front (RUF), West-Side Boys, the Sierra Leonean Army (which turned against the Kabbah government), Armed Forces Revolutionary Council (AFRC) and the Civilian Defense Forces (CDF). The leaders of each group were prosecuted in the Special Court for Sierra Leone, an ad-hoc war tribunal established to try those responsible for war crimes. In the prosecution against CDF leaders it became apparent that there was an issue with the admissibility of evidence pointing towards sexual violence. The reasoned opinions of Justice Bankole Thompson of Sierra Leone and Justice Benjamin Itoe of Cameroon (Judge Pierre Boutet of Canada dissenting) stated the prosecution's absent specificity to explicitly state sexual violence as an offence in the indictment (Kendall and Staggs 2). While a detailed look at the series of motions brought forth by the prosecution and the subsequent decisions handed down from the justices will not be explored what is pertinent to the current research project is the implication of the language used by Justice Thompson and Justice Itoe to justify their decisions to exclude any testimony indicating sexual violence. In the first ruling against the substance of a particular witness' testimony, Justice Thompson "render[s] such evidence inadmissible, as being, as it were, forbidden evidentiary territory" (Special Court 11).

The thematic undertones of secrecy and reluctance are emphasized through the synchronization of 'acts of sexual violence' and 'forbidden evidentiary territory.' A separate but concurring opinion written by Justice Itoe goes further to explicitly link the gender of the witness with inadmissibility of evidence. This becomes especially relevant with respect to the

implications of abduction when he claims “that if the women were captured and retained ‘on the other side’ against their consent, this was enough that they were either raped or retained as wives” which again renders the evidence inadmissible (Kendall and Stagg 16). Itoe has successfully managed to legally interpret the feminized experience of war as sexual and therefore inadmissible in court, on par with Judge Thompson’s idea of ‘forbidden evidentiary territory.’

Interpretations of Judge Itoe and Judge Thompson mirror the stereotypical gendering of space, namely the deferring of women’s experiences to the private sphere and the masculine to the public sphere. The masculine arena of the Special Court views sexual assault experienced by women viewed as unsuitable to the public space of the court. This is ironic in that it augments the stigma of women who have suffered sexual violence in the very space meant to counter ‘tradition’ and vigorously prosecute such crimes. The suppression of sexual violence in the modern space of international law perpetuates, prolongs and festers images of ruined womanhood as a result of sexual assault.

Conclusion

In prioritizing protection over economic sustainability, human rights discourse has created a battle with tradition, framing its enemy as fundamental and backward. In the arena of women’s rights, the creation terminology is problematic because it can occlude important determinants by oversimplifying the context of practices. The politics of naming and those of intervention are inevitably bound and become dangerous when used by the WHO, PHR and other institutions to accrue goals at the expense of an accurate depiction of the complexities of communities. The institutional creation of a permanent conflict between fundamentalism and modernity is gendered and the battlefield is the literal status of women’s bodies.

Depending on international templates of justice such as legal eradication of FGM or the establishment of a Special Court for Sierra Leone as a mechanism to prosecute sex crimes, is not entirely aligned with the needs of survivors affected by sexual violence *and* abject poverty.

Sierra Leone is an example of a nation that was and is severely lacking in economic resources for its people. Current strategies of modern justice/advocacy might actually impede women's rights and consequentially, empowerment.

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