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Majority of displaced are women and children

Eileen Pittaway

There are currently 11 million refugees and over 20 million internally displaced people (IDP) in the world. The majority of these are women and children, most of whom have fled from situations of armed conflict.

There has been increasing acknowledgement over the past decade about the endemic nature of systematic rape and other forms of sexual torture in conflict and post-conflict situations.

Women and children are raped to humiliate their husbands and fathers, to degrade communities, and to exhort information or to create fear. The atrocities range from gang rape by groups of soldiers, horrors such as rape by trained dogs and the brutal mutilation of women's genitalia.

These atrocities often occur publicly and involve a level of depravity which is difficult to understand. For example, fathers and sons are forced at gun point to sexually violate mothers and daughters. Whole villages of women are raped and have their nipples mutilated with wire cutters.

Forced pregnancy is used as a form of cultural genocide. During flight, women and girls are raped by border officials and security forces who are assured of acting with impunity.

However, escape to a refugee camp or settlement does not provide protection for most women and children, as they are often raped by rival groups, police, "peace-keepers" and even by humanitarian aid workers.

To quote the head of one camp, "If you can find one woman here who has not been raped [while they are in the camp], I will give you a prize."

The United Nations High Commissioner for Refugees (UNHCR) acknowledges that a majority of all refugee women and many children are routinely raped and sexually abused. This has devastating consequences. Women who have

been "shamed" by their public rape in the community are shunned in the camp.

Some women and girls are abused by their husbands, or expelled from their families or communities, and left to fend for themselves in situations of extreme danger. Many children are born to refugee women and girls as the result of rape.

Many women and girls are forced to trade sex for food for themselves or go hungry and without medicine to feed and care for their children. Aside from the above, refugee women may also have traumatised children who may have witnessed torture and rape.

Some children have experienced it first hand; they may have also seen fathers, brothers, uncles killed, or have them "disappear." Children may have nightmares because they remember bombing and living on the run. Their traumatised mothers have to respond to the needs of the children as well as their own.

It is only very recently that these issues have been placed high on the agenda of UNHCR and other UN agency meetings.

This situation has been acknowledged in international law, in the International Criminal Court Statute, which declares that rape in conflict situations is a crime against humanity, a war crime and, in some cases, an act of genocide.

It is included in United Nations Security Council Resolutions 1325 and 1820, which address the role of women in conflict and post-conflict situations. UNHCR has developed some excellent guidelines to assist humanitarian workers to address the issue in refugee and post-conflict situations.

Even so, often these issues are hidden in a welter of euphemistic language. The public health system has been one of the few groups to deal with this issue and offer services to women, but this has been done under the banner of "reproductive health."

At the time when these services began, it was the only way that they could breach the silence. Yet, there is so much that is lacking within this approach.

The health risks to women and children, both physical and mental, from these experiences are extreme, and yet, at the field level, they are still often hidden behind a wall of silence.

There is little access to contraception, or emergency contraceptive and safe abortion services to prevent continuation of unwanted pregnancies.

There is exposure to HIV and AIDS and other sexually transmitted infections yet there is often inadequate prevention and management services. Women's genitalia are often severely damaged but there is no access to specialist health care.

Despite the horrendous trauma experienced by many women and girls, there is seldom access to counselling or psychosocial support. - Third World Network Features