Listening to the women of Darfur

The following is extracted by the FMR editors from a recent UNFPA/UNICEF report on The Effects of Conflict on Health and Well-Being of Women and Girls in Darfur: Conversations with the Community.¹

How do the women and girls of Darfur assess the risks they face? UNFPA and UNICEF interviewed conflict-affected women and their male household members in order to better understand priority actions needed to improve women and girls' health and well-being.

The counter-insurgency strategy employed by the Government of Sudan and the Janjaweed militia appears to have been one of asset stripping and population displacement. Indiscriminate attacks on villages have not only killed and injured civilians but also destroyed or looted housing, infrastructure, community services, wells and irrigation systems, fruit trees and other property such as cattle. The result has been the large-scale movement of a highly vulnerable, traumatised population of 2.75 million people, rendered almost completely dependent on humanitarian aid for survival.

Prior to the conflict, the majority of the women interviewed primarily worked in farming and cultivation, animal raising and making handicrafts. Today most are unemployed. The little income women in camps can earn comes from collecting and selling firewood and fodder or from trading food items received from humanitarian organisations. Some girls work for foreigners in their houses or in aid organisation offices. Many men report relying on women's income from firewood collection.

Sexual violence and abuse was mentioned in every group discussion. Women and girls have often been raped in front of male relatives who were beaten and forcibly restrained. Women reported that most rape victims did not scream during or after the rape and did not report incidents, in order to avoid scandals in the

community. The majority of families of survivors of sexual violence prefer to treat them inside their homes by traditional medications, usually by washing the victims with salted hot water or tea. Due to shame, most rape survivors – especially unmarried girls – only seek medical attention as a last resort. Children born as a result of rape are not taken to hospitals as their mothers do not want doctors to ask about their babies.

Girls said that a child born as a result of rape is considered an "Arab child": "We still look after them but they do not enter our hearts – ma be houshou al gelib."

Incidents of sexual violence, abuse and abductions are ongoing. There is a significant lack of trust toward all armed groups, and most women would only consider returning to their villages under the protection of an international security force, preferably the African Union or the UN. Until this is possible, women and girls are left without the option of resettlement, and the security situation within and surrounding the camps remains precarious. Girls have reported incidents of military personnel entering the camps firing weapons into the air, and most incidents of rape and abduction occur when women leave the camps in search of firewood or fodder. There is general distrust toward the police. Men have reported feeling helpless and humiliated about the continuing attacks against their wives and daughters, as incidents reported to the authorities seem to have been disregarded. Men have suggested that work opportunities for women may improve the security situation. Most respondents report that family and community support, as well as belief in religion, helps them to cope.

"Most women live as if they are psychologically normal but they live with the war inside them."

Health problems mentioned by women include physical injuries due to beatings, rape, miscarriages, excessive bleeding or injuries sustained during flight from the enemies. Sexually transmitted diseases, malnutrition, irregular menstrual cycles and nightmares were mentioned frequently. Most women are dissatisfied by health services in camps. They complain they have to queue for a long time, that medicines are in short supply and that they have to pay for medicines supposed to be free – and often only receive painkillers. Although clinic deliveries are free, obstetric complications are generally only treated in hospitals at great cost. Many women are less healthy than they were prior to displacement as they no longer eat fruit, vegetables and meat but are forced to subsist on food rations provided in camps.

"Before the war we had everything. Life was so nice but now we have nothing. We have lost everything, even our souls and life."

The Darfurian IDPs called for:

- increased prevention and response to sexual and gender-based violence
- more consistent African Union presence in and around camps and firewood collection areas
- reduced presence of armed government police and military inside the camps/settlements
- community-based policing based on dialogue with IDPs about their needs
- ensuring legal redress is available for victims of crimes
- fuel-efficient stoves
- free provision of drugs, transport to hospital and an increased number of international medical staff

- increasing the number of medical personnel and supplies needed to treat women and girls suffering from fistula
- ensuring that all health facilities offer privacy to women and girls seeking treatment
- sensitising traditional birth attendants, traditional healers and community leaders about

- the health and emotional needs of survivors of sexual violence
- financial support for women (including grandmothers/foster mothers) taking care of babies born as a result of rape
- formalising the role of IDP committees – with male and female members – in management of camps.

Violence against women and children by warring groups in Darfur is reaching alarming levels. Extreme violence has been a feature of the civil conflict since it erupted in 2003. However, in the past months, attacks on women and girls, both within and outside camps for the displaced, have soared.

UNICEF, October 2006²

- 1. At: www.unicef.org/infobycountry/files/sitan_unfpaunicef.pdf
- 2. www.unicef.org.uk/press/news_detail.asp?news_id=811