

BREAKING THE SILENCE

A needs assessment of survivors of sexual violence
in Burundi

Report commissioned by Tearfund

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God Bless you all.

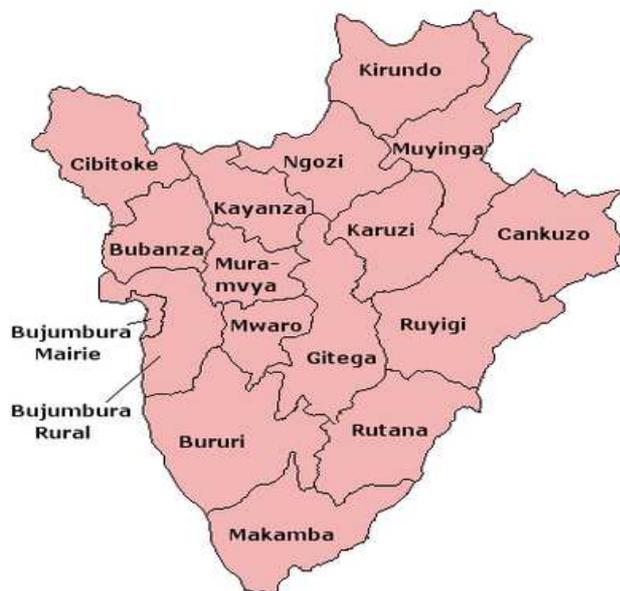
1. Introduction

1.1 Background and Rationale

Worldwide, women continue to suffer gender-based violence of various kinds. One aspect of such suffering is sexual violence manifesting in different forms. The World Health Organisation (WHO) (2002) reported that globally, one in four women will likely experience sexual violence by an intimate partner and one in three girls' first sexual experience is forced. The worst of this kind of sexual violence is perpetrated in conflict-ridden countries such as Burundi.

Since independence from Belgium in 1962, Burundi has suffered ethnic conflicts between Hutus and Tutsis, although the root causes of these conflicts predate independence. The Belgian colonizers were replaced by a constitutional Monarchy with Mwami Mwambutsa IV as king and both Hutus and Tutsis represented in parliament. The constitutional monarchy was short lived, with Mwambutsa deposed by his son, Prince Ntare V in 1966, who in turn was removed in a coup by Tutsi Prime Minister, Captain Michel Micombero in the same year. This marked the beginning of a series military and undemocratic regimes that would dominate Burundian politics and aggravate ethnic relations (Peace Direct, 2014). The 1972 massacre resulted in more political instability (Ndikumana, 2005:5-6). It is estimated that more than 300,000 lives were lost with over 100,000 displaced since 1962 as a result of these conflicts.

Figure 1: Provincial demarcation of conflict-ridden Burundi



In 1993, Burundi held its first democratic elections. Melchior Ndadaye won these elections and led a government which was more inclusive with a Tutsi as a prime minister. In October of that year, Tutsi soldiers assassinated him. This engulfed Hutus and Tutsis in another round of violence. Peace talks were brokered between 1993 and 2003 by former president of Tanzania Julius Nyerere and the then president of South African, Nelson Mandela. A ceasefire was signed in 2003 as a result of these talks between the government led by the Tutsi president Pierre Buyoya and the larger Hutu rebel group. This resulted in democratic elections being held in 2005, ending the cycle of violence.

While Burundi has achieved some political stability since then, a fragile democracy and poor governance prevail.

Burundi consists of 17 provinces. In 2011, Burundi was among the 20 poorest countries in the world with a GDP per capita of \$615 which placed it fourth poorest country on the list after

Democratic Republic of Congo, Liberia, and Zimbabwe (Said, 2012). In 2013, Burundi slid to third place after Democratic Republic of Congo and Zimbabwe (Said, 2013).

Poverty and conflict have been found to be detrimental to most-at-risk populations, notably children and women (Enarson, 1991). In the case of women, conflict and poverty have been viewed as factors that aggravate sexual violence (Watts and Zimmermann, 2002). During conflicts, structures such as the legal system that deters offenders malfunction. Furthermore, sexual violence has been used by belligerent parties as a weapon of revenge against innocent civilians. These crimes against humanity are typical of Burundi.

While many cases are unreported, statistics on sexual violence are alarming. The ACAT and OMCT (2008: 3) report that between 2004 and 2007, MSF Belgium registered 5,466 cases of sexual violence (mainly rape). This is an average of 1,366 victims per year or 27 victims per week.

The problem with these statistics is that they do not tell the full story of the experiences of survivors of such violence. The WHO (2002) notes that, due to social stigma and deep cultural biases, sexual violence often remains under-reported. In the case of Burundi, this situation is compounded by possible intimidation, and the malfunctioning legal system resulting from the long-standing conflict, resulting in few prosecutions.

1.2 Purpose, objectives and significance

Purpose of the study

The purpose of this study was to enable the voices of survivors of sexual violence in Burundi to be heard. Breaking the silence enabled these survivors to share their experience of sexual violence in the country with the understanding that such silence is not only detrimental to their healing, but also conceals crucial information that policy makers could act upon.

The WHO defines sexual violence as “*any sexual act, attempt to obtain a sexual act, unwanted sexual comments or advances, or acts to traffic, or otherwise directed, against a person’s sexuality using coercion, by any person regardless of their relationship to the victim, in any setting, including but not limited to home and work*” (WHO, 2002:149)”. This definition implies that sexual violence can occur under different circumstances (at home or elsewhere) and involve different types of actions (a coercive sexual act, unwanted sexual comments), different types of perpetrators (husbands, partners, and strangers), and different concepts (action requiring force, action not involving force).

Since the definition implies multiple dimensions of sexual violence, experiences of such violence are likely to be different in different contexts. Therefore, evidence relating to one context cannot be applied to another context such as Burundi. Burundi has been a conflict-ridden and politically unstable country for a long time and may therefore present different kinds of evidence. This study thus sought to break the silence on sexual violence in Burundi by listening to the voices of survivors. It is anticipated that it will contribute to the literature by reporting sexual violence issues specific to Burundi that could form the basis for policy action. It is also hoped that the

views of these survivors on the envisaged global survivors' movement will help policy makers to plan and implement such a movement which would be a forum for speaking out and solidarity.

Research objectives

The objectives of this study were to:

- Explore survivors' understanding of sexual violence
- Understand why survivors remain silent
- Map and explain the impact of sexual violence on the lives of individual survivors
- Explore survivors' needs
- Map survivors' priorities and begin to understand the process of healing and restoration for survivors
- Determine whether survivors view a survivors' movement as beneficial.

Significance of the study

- To date, the voice of survivors of sexual violence have been silent and reports on sexual violence have mainly been based on police statistics. These statistics do not represent the voices of survivors in rural and conflict-ridden areas where such instances take place, while legal and security systems are compromised and under pressure. Furthermore, these studies do not provide in-depth evidence of specific issues of sexual violence experienced by survivors. The significance of this study lies in the fact that these voices will be heard.
- In an African context, some forms of sexual violence that are discomfoting are not viewed as such by survivors because they are entrenched in cultural practices. However, these practices need to be challenged in order to restore women's dignity as human beings. It was expected that the study methodology, which enabled in-depth discussions about sexual violence, would make these forms visible for appropriate policy action.
- Little is known about the in-depth experiences and needs of survivors of sexual violence, particularly in Burundi. The evidence on sexual violence in other countries cannot be generalized to Burundi. It is therefore hoped that this study will generate greater understanding of survivors' experiences and needs in this country. Providing an open forum for survivors' voices will empower individual survivors and facilitate a survivors-led focus in policy development and interventions.
- Sexual violence may affect survivors in many ways. Without in-depth evidence on how such violence affects survivors, policy makers cannot craft effective interventions.
- A global movement for survivors of sexual violence has been mooted. This would be a forum where women can speak about their plight and practice solidarity. This study also solicited survivors' views on the formation of such a movement. The movement will have to be strategic and effective in order to achieve its objectives and it thus needs to be informed by such views.

1.3 Methodology

1.3.1 Study design

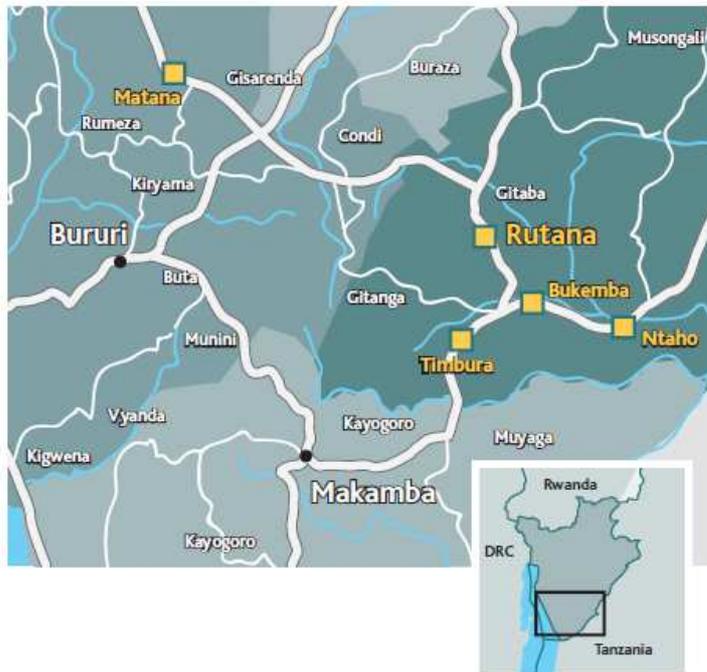
A qualitative study design was employed. This consisted of focus group discussions. Focus groups can reveal a wealth of detailed information and deep insight. When well executed, a focus group creates a non-threatening environment that puts participants at ease, allowing them to thoughtfully answer questions in their own words and add meaning to their answers. The discussions produce different results which can then be grouped into major themes in relation to the research objectives.

Given the multi-dimensional facets of sexual violence, women may not give explicit responses to questions posed in relation to the objectives of the study. We encouraged open discussion so that they could come up with new ideas and insight into the questions (objectives) under investigation. Given the fact that sexual violence is a sensitive topic, especially in African communities, it was expected that participants would be reluctant to respond to specific questions. The focus group discussions included techniques such as probes to prompt participants to engage in deeper discussion. Furthermore, such discussions can often cause emotional distress. Therefore, the discussions were combined with techniques such as group therapy to address these situations. Due to the violent nature of sexual violence in conflict zones such as Burundi, the focus group was deemed to be an appropriate research design.

1.3.2 Study population

The study population consisted of survivors of sexual violence. These survivors are clients of Tearfund partner organisations, namely FECABU and the Anglican Church. FECABU provides services to survivors of sexual violence in two communities: the **community of Bujumbura** in the province of Bujumbura Marie and the **community of Giharo** in the province of Rutana, while the Anglican Church provides services to survivors in the **communities of Ntaho in the provinces of Rutana and Matana in the province of Bururi**. Most of the communities covered by the study are shown on the map below.

Figure: Map showing most of the areas covered by the study



FECABU came into contact with survivors in the community of Bujumbura through its services to the homeless living on the streets. The organization assisted beggars with food, clothes, soap, and spiritual counselling as well as finding activities that can provide a living. While providing services, FECABU realized that women on the streets were survivors of sexual violence who were rejected by their different communities. FECABU has since offered special care to these survivors, assisting them with funds and technical skills to start small businesses, and helping them form savings and credit groups. However, this group is new and needs more training in order to heal their memories.

The services provided by FECABU to survivors of sexual violence in Giharo in the province of Rutana were promoted by a report on the churches' role in fighting sexual violence in Burundi (Niyonizigiye and LeRoux, 2011). FECABU supports survivors to develop agricultural activities and also helps them form microfinance groups to raise funds. The community of Giharo is near the border of Tanzania and has suffered high levels of military and sexual violence. Belligerents have been using Tanzania as a base to launch attacks in Burundi and because this region borders Tanzania, the survivors were the first casualties.

While FECABU has been providing targeted assistance to survivors of sexual violence, the Anglican Church in Burundi has been assisting these survivors in the broader context of gender-based violence. The Anglican Church identifies victims of gender-based violence among its members in various communities and provides assistance in the form of religious and spiritual counselling. These services are concentrated in Ntaho in the province of Rutana and Matana in the province of Bururi. Because sexual violence is an integral component of gender-based violence, the study was interested in the population of Anglican Church clients who have suffered sexual violence.

Four groups of survivors, one in each of the communities described above, were selected to participate in focus group discussions. These groups were labeled Group1, Group2, Group3 and Group4 representing groups from the communities of Bujumbura, Giharo, Ntaho and Matana, respectively. The first three groups were made up 15 clients each and Group 4 had 14 clients. Therefore, the total sample was 59 clients.

Figure 1 (in appendix) shows differences among the groups' experiences in the aftermath of sexual violence. It shows that Group 2 in Giharo community and Group 3 in Ntaho have suffered the impact of sexual violence for a relatively shorter period than Group 1 in Bujumbura and Group 4 in Matana based on the gap between the respondents' current age and the age at which first rape was suffered.

A close look at the statistics (Table 1 below) suggests that the groups do not differ significantly in terms of the average age at which members were first raped except for Group 3 in Giharo.

The average age at which a group member was raped in each group is 18.6, 20.14 15.5 and 20.46, respectively for Group1, Group2, and Group 4 (See Table 1 and Figure 1). In Group3, the average age at which a group member was raped is much younger, that is 15.5. Except for the Giharo group, the groups also do not differ much with respect to current average age which is 34, 24.7, 40.5 and 30.5. The groups are also similar in terms of some of the effects such as pregnancy arising from sexual violence. Most women carried babies who they said were the result of rape.

However, the groups differed when one compares the average age at which a member was sexually assaulted and the current average age in each group. Group 3 in Matana appears to have been suffering the effects of sexual violence longer than the other groups, with the average age at which a member was raped being 15.5 and the average current age being 40.5. The Giharo group has suffered sexual violence for a relatively shorter period than the other groups, with the typical current age being 24.7 and the age at which a member was raped being 20.14.

These characteristics among the groups of survivors suggested that the discussions would be meaningful as the groups involve different age categories, regions, and urban status. This implies that they reflect the broader views of other survivors of sexual violence in Burundi as a whole.

Table 1: Summary of the characteristics of the groups of survivors used in the discussion

Group characteristics	Group 1	Group 2	Group 3	Group 4	Total
Province of origin	Bujumbura	Rutana	Rutana	Bururi	-
Area of origin		Giharo	Ntaho	Mutana	-
Urban status	Urban	Rural	Rural	Rural	-
Size (number of members)	15	15	15	14	59
Church in charge	FECABU	FECABU	Anglican	Anglican	
-Age range at the time of rape	12-45	17-49	9-20	13-25	-
-Average age at the time of rape	18.6	20.14	15.5	20.46	
Current age range	20-53	18-52	16-62	14-55	
Current average age	34	24.7	40.5	30.5	
Organisation into advocacy groups	Organised as sexual violence survivors	Organised as sexual violence survivors	Organised as victims of gender-based violence	Organised as victims of gender-based violence	
Other demographic characteristics	Most have been pregnant as a result of sexual violence	Most have been pregnant as a result of sexual violence	Most have been pregnant as a result of sexual violence	Most have been pregnant as a result of sexual violence	

1.3.3 Data collection

Data collection was done through focus group discussions using semi-structured methods. This data collection methodology allows a researcher to elicit in-depth responses from participants in order to meet a study's objectives. Open-ended questions were asked in order to enable elaboration of the objectives of the study. Stimuli and probes were used where necessary.

The data collection methods were designed to achieve the research objective of determining clients' experiences and perceptions of sexual violence. The group of survivors in Burundi was particularly reluctant to discuss the sexual violence they had suffered. Discussions and stimuli were used to encourage this group to share their experiences. Talking about traumatic experiences of sexual violence was very emotional for some participants. In such instances,

group therapy methods were employed (Zastrow, 2009). As this is a very sensitive topic, it is understandable that some participants were still reluctant to discuss it, despite stimuli or group therapy. In such cases, one-on-one discussions were held between the researcher and the survivor to ensure that confidentiality was maintained.

The group discussions were recorded. Participants used the local “*Kirundi*” language, with which both researchers are familiar. All discussions were translated during data analysis.

In compliance with standard ethical practice, the study participants were informed that their participation was voluntary. The purpose of the study was explained and they signed consent forms. The researchers were also aware of the participants’ values and norms and respected these norms. Furthermore, participants were assured that data will be treated and stored in a confidential manner on the researchers’ password-protected computers. They were also assured that their names would not be included in the report.

1.3.4 Data analysis

Data analysis started immediately after data collection. The focus group discussions, transcribed verbatim in “*Kirundi*”, were translated immediately in the course of data analysis. The analysis of the data collected on each objective of the study was organized according to themes that emerged from the participants’ responses.

2 Results

The results of the study are presented in line with the major themes that emerged around the following research objectives: to explore survivors’ understanding of sexual violence; to understand why survivors remain silent; to explore survivors’ needs and explain how their lives are affected; to map the survivors’ priorities and to determine their views on establishing a survivors’ movement. These results are presented one by one in the following sub-sections.

2.1 *Survivors’ understanding of sexual violence*

The survivors revealed a fair level of knowledge of what sexual violence is. However, this was mainly limited to violent rape which most of the survivors had experienced. The discussions unveiled other implicit forms of sexual violence especially on the part of the survivors’ partners.

❖ *Use of force*

The survivors’ conception of sexual violence as use of force reflected different understanding, depending on the circumstances of the rape. Most survivors perceived rape as the act of being violently forced into the sexual act.

“I was sleeping with my husband and our baby in our room, our daughter heard militaries coming and fled away. My husband did the same while I was trying to carry on my baby. They raped me ...” (Client 2 from Group 2, Bujumbura)

Others perceived sexual violence as being forced to engage in sex by an unknown person who takes advantage of the darkness or the fact that the survivor is in a remote area or a place where they cannot be rescued.

“...I was raped by a man whom I didn’t know when I was looking after goats in a hidden place. The man called me from a distance and asked me to bring him some water in river that was near me. When I reached there, he took me by force and raped me...” (Client 1 from Group 2, Bujumbura)

I was coming from church and it was being dark. We met 3 men and they asked us where we came from. When we saw that they wanted to catch us, we ran but I fell down because my skirt tied me. They raped me (Client 2 from Group 2 in Ntaho, province of Rutana)

The instance of sexual violence I suffered happened when my husband was absent. When I woke I saw a man who was staying next door besides my bed who then raped me...” (Client 5 from Group 1, Bujumbura)

There was also some agreement that sexual violence consisted of rape when men offered help in the absence of the husband and took advantage of the situation to force a woman into unwanted sexual activities.

“Sexual violence took place when I was raped in my home by a military neighbor who came in trying to help with households’ chores...” (Client 4 from Group 1, Bujumbura Mairie)

Other participants defined rape as the act of more than one man forcing one to be involved in sexual activities. This type of rape is common in conflict zones.

“I was raped by 3 young boys who have the same age as mine. I was going to the market and they called me pretending to be rebels but they were not. They jumped on me and raped me” (Client 1 from Group 3, province of Rutana)

The study sought to determine whether there were differences in perceptions of rape as sexual violence across the four groups of women. These women appear to have experienced these issues to the same extent. The discussion that follows details the survivors’ experiences across the different communities.

❖ *Intimidation*

The survivors seemed to confuse gender-based violence, such as being beaten or sent away from marriage, with sexual violence. Although it is true that the root cause of beating was sexual violence, the participants focused on the consequences, which are basically issues relating to the

broader area of gender-based violence. The following responses suggest that the women did not regard unrealistic sexual demands as sexual violence.

“We had good relations with my husband until he met his friends who told him that other wives discharge vaginal fluid during sex while I don’t. He tried to get it (vaginal fluid) but he couldn’t tell me what was wrong with.....He tried to find faults on me in order to beat me until I saw that it was too much and decided to go back to my parents. But my mother was always asking me why he was beating me and she could guess what it was (not releasing the fluid).She wanted to give me some traditional herb to help me but I refused because I am born again. ...A friend of me who is a nurse gave some drugs and now I have what he (husband) wants.” (Client 1 from Group 3 in Ntaho, Province of Rutana)

“I am married and recently my husband came home very furious and showed me a pornographic film in his phone. He told me that he wants me to do as the lady in the film was doing if not I choose to quit my home to give way to those who are able to do so. I tried my best but the following day I felt too tired to work while he can’t even help me working. Until now I carry that burden. And I have no one to help me.”(Client 3 from Group 3 in Ntaho, province of Rutana)

“I am married and my husband was beating me almost every day. The reason is that he asked me to have sex with him the way he watched in the pornographic film. I saw that I couldn’t and he brought another woman and built her a house beside mine. Now he is no longer fulfilling his duties as a father in the home.” (Client 4 from Group 3 in Ntaho, province of Rutana)

2.2 Why survivors remain silent

The survivors identified many interrelated factors that prevent them from speaking out about sexual violence. All these factors fall within the area of social rejection which is a major reason for women remaining silent in Burundi. The major themes that emerged from the discussions were: gossip, taboo, stigma, fear of losing the relationship, and threats of being killed.

❖ Gossip

Being sexually assaulted and raped is considered shameful. In Burundi, as in many other parts of the developing world, survivors are blamed by society. People in the society talk to each other about the victim. Someone who has been raped is considered worthless and is unlikely to be approached for marriage. Gossip is therefore an important factor that motivates women to remain silent.

“I could not speak out because of the gossip that circulate around the community.” (Client 3 from Group 4 in Matana, Province of Bururi)

❖ *Taboo*

A related factor is taboo. Burundian culture does not permit a woman to divulge sexual violence committed by her husband or partner to anyone. Indeed, sexual violence perpetrated against women, especially by husbands and partners, is not recognized as such in the eyes of Burundian society. Speaking about sex is taboo in these communities. This lifestyle and norms were identified as factors that keep women silent in this typical iteration:

“Sexual matter are taboo in Burundi especially sexual violence by family relatives.” (Client 7 from Group4 in Matana, Province of Bururi)

❖ *Fear of losing the relationship*

Survivors indicated that one of the factors that keep them silent is the fear of losing their relationship with their partners. This may happen if they disclose the sexual violence perpetrated by these partners or by other men.

“When one is raped, telling to the husband is dangerous because he can chase you away.” (Client 9 from Group3 in Giharo, Province of Rutana)

❖ *Stigma*

Gossip causes one to become known as a survivor of sexual violence and is therefore the starting point for being stigmatized. However, survivors also recognized stigma as a standalone factor leading to silence about sexual violence, whether the survivor was known as such through gossip or other means and whether the survivor suffered sexual violence from a partner or a stranger. Children born out of rape are stigmatized by the family of the survivors. So the need to protect the child against such a stigma is another factor that keeps survivors of sexual violence silent. The following typical statement provides evidence of the stigma suffered by survivors.

“I did not want to talk about it. I wanted to avoid stigma. The society does not believe in it.”(Client 4 from Group 1, Bujumbura)

In some instances where husband are supportive, stigma imposed by the broader community keeps survivors silent. The statements below are typical:

“I remained silent because my husband said we have to avoid stigma.” (Client 5 from Group3 in Ntaho, province of Rutana)

“I feared to be expelled by my husband and to be stigmatized by the neighbor.” (Client 5 from Group4, Matana, Province of Bururi)

“I am a widow and had no right to stay with the in-laws with another family’s baby, the children will not accept the baby as one of them.” (Client 6 from Group4 in Matana, Province of Bururi)

❖ *Threat of being killed*

Given the grave consequences that rape can have for the survivor, perpetrators are conscious of their power over survivors. They sometimes threaten to kill the survivor or the child born out of rape if she discloses the incident. These threats have kept survivors silent about sexual violence in Burundi.

“I remained silent because my husband is very tough and could even slaughter me. I also wanted to protect the child to be born” (Client 8 from Group1 Bujumbura, Province of Bujumbura Mairie)

“I was raped when I was in class 7. But I didn’t say it out because my father had said that if one of his daughters become pregnant before marriage, he will kill her.” (Client 5 from Group 2 in Giharo, Province of Rutana)

❖ *Poverty*

Poverty was also identified as a cause of survivors remaining silent, because in most of cases survivors are dependent economically to perpetrators, especially in the case of a perpetrator being a father to the survivors (incest).

“Because of poverty, it is not easy to denounce the father. If the father is arrested it means the loss of the main source of income of the family.” (Client 3 from group 4 in Matana, Province of Bururi)

The factors highlighted above that cause survivors of sexual violence in Burundi to remain silent can be grouped under the broad category of “societal rejection”. Therefore, societal rejection was the most important factor leading to silence among the community of women in Burundi.

2.3 How survivors’ lives are affected

Sexual violence affects survivors’ lives in many different ways. Following the themes that emerged from the focus group discussions, these impacts can be grouped into four broad categories: the health impact, psychological impact, social impact and economic impact.

2.3.1 Health impact

Health impacts are the direct consequence of rape. They include Sexually Transmitted Infections (STIs), HIV/AIDS infection, physical weakness, pregnancy and related problems, and infertility.

❖ *STIs or HIV/AIDS*

A number of women contracted either STIs or HIV/AIDS as a result of sexual violence. These diseases have a negative effect on their livelihoods. They also increase the need for medical care.

“The perpetrator infected me with HIV/AIDS. Now my health has been affected very badly...” (Client 4 from Group3 in Ntaho, Province of Rutana)

❖ *Weakness*

Many survivors reported weakness or pain both immediately after the sexual assault and in the long term.

“...I remained there (after being raped) the whole day because I was very tired.... and the following day I went to hospital...” (Client 1 from Group2 in Giharo, Province of Rutana)

“ ... I am always tired and too weak to work... ” (Client 3 from Group4 in Matana, province of Rutana)

❖ *Pregnancy and related problems*

Women also mentioned unwanted pregnancies. As pregnancy is a health challenging condition. Sexual violence-related pregnancy resulted in particular problems. In some cases, babies died at birth.

“Pregnancy from rape is particularly problematic. I was taken to hospital from time to time for check up by my mother...” (Client 2 from Group 3 in Ntaho, Province of Rutana)

“...When time for delivery came the baby died but my daughter survived.” (Client 2 from Group 2 in Giharo, Province of Rutana)

❖ *Infertility*

Some of the participants suffered hormonal disturbances and infertility as a consequence of rape.

“After I suffered sexual violence, I felt a malfunctioning of my hormonal system. Since then, I feel a disgust against sex and have been trying to have a baby but I cannot.” (Client 8 from Group 1 in Bujumbura, province of Bujumbura Mairie)

2.3.2 Psychological impact

Sexual violence is a traumatic experience that affects the way people think as well as how they behave. The survivors in Burundi said that they suffered constant fear, felt ashamed, unworthy and unhappy, and developed resentment towards men.

❖ *Constant Fear*

Most survivors have developed a fear of men or sexual intercourse. Those who managed to marry talked about their problems with their current partners that arise from their prior experience of sexual violence.

“Most of the time, I feel in the mood of not wanting sexual intercourse with my husband. Even if I accept I develop an unconscious refusal of coitus. This is sometime combined with the impossibility of feeling voluptuous ...” (Client 10 from Group1 in Bujumbura, Bujumbura Mairie)

There were also reports of irrational fear and obsessive behavior in certain situations, which may go back to a distant trauma (rape, attack). In this case, the fear was related to enclosed spaces such as bedrooms.

“I have always fear to go to the room where I was raped and when I sleep on this room I have nightmares of the perpetrator coming back to rape me.” (Client 9 from Group3, Bujumbura)

“I was full of fear and”(Client 1 from Group 3, Rutana)

❖ *Shame and loss of self-esteem*

After being raped, the survivors feel shame, especially when the community is aware of what happened. Victims of sexual violence are deeply humiliated, especially when society suggests that they could have avoided such a situation. The majority of the women we met had an inferiority complex and could not imagine that anyone would be interested in them.

“To be sexual violated by a child is a shameful thing. It is the worst thing a human being can face.” (Client 1 from Group 2 in Giharo, province of Rutana)

“ ... This was a shameful situation because I was a virgin and full of fear of men till now.” (Client 1 from Group1 in Bujumbura, Province of Bujumbura Mairie)

“The sexual violence incidence I underwent was so disrespectful and aggressive that I lost confidence in me.” (Client 8 from Group2 in Matana, Province of Bururi)

❖ *Unhappiness*

The participant's discussions revealed that unhappiness is rampant among women who have suffered sexual violence. The following statements indicate the extent of the problem.

"...and I was crying tears every time." (Client 1 from Group3 in Ntaho, Province of Rutana)

"For me I understand sexual violence as breaking the heart into pieces. Until now, my heart is like pieces."(Client 2 from Group 1 in Bujumbura, Province of Bujumbura Mairie)

❖ *Resentment*

A loss of confidence in men, including husbands, was common among the survivors. Some completely lost interest in the marriage, while others who tried to get married experienced difficulties in their relationship as a result of rejecting their partners.

".. I hate men and will never get married."(Client 2 from Group3in Ntaho, province of Rutana)

"Most of the time, I feel in the mood of not wanting sexual intercourse with my husband. Even if I accept I develop an unconscious refusal of coitus..." (Client 10 from Group 1 in Bujumbura, Bujumbura Mairie)

2.3.3 Social impact

Social rejection was found to be one of the major reasons that cause survivors to remain silent. Family breakdown and social rejection in the form of stigma were highlighted as two social impacts of sexual violence.

❖ *Family breakdown*

Some survivors indicated that they were chased away by their partners or their partners' parents when they discovered that they had been a victim of sexual violence. Sexual violence also impacted future relationships.

".. I fled from my home for a whole year." (Client 6 from Group3 in Ntaho, Province of Rutana)

"They raped me and found myself home without knowing how I arrived there. I had a fiancé but when he heard that, he married another woman." (Client 7 from Group 4 in Matana, province of Bururi)

❖ *Stigma*

Survivors identified social rejection as the most devastating impact of sexual violence. This stigma comes from all walks of life starting with rejection by the husband or future husband, or parents.

“When my father saw that I was pregnant from rape, he expelled me from home for a year.”
(Client 5 from Group2 in Giharo, Province of Rutana)

2.3.4 Economic impact

Survivors of sexual violence are often already poor before the rape. However, rape aggravates their poverty. The survivors indicated that they are unable to meet basic needs, including food, clothing and caring for themselves and their children.

❖ *Caring for Children*

Survivors struggle to meet their own and their children’s needs. As a result, they become involved in activities that they have never engaged in.

“I learned to cultivate to get food and my life is very hard. I will accept to suffer for my child”.
Client 3 from Group 4in Matana, Province of Bururi)

❖ *Food*

Survivors also cited going hungry due to a lack of income. Sexual violence impacts their ability to work.

“Sometime we do not eat food, because I am not working. I used to work but after rape I cannot cultivate because I feel very weak.” (Client 3 from Group4 in Ntaho, Province of Rutana)

❖ *Clothes*

Survivors of sexual violence in Burundi are so poor that they lack clothes. Many survivors fell pregnant as a result of rape and now have to look after children. This prevents them from earning an income.

“There is no way I can go to do any work. I have to care for my child. That is why I cannot even get the money to buy clothes.” (Client 8 from Group3 in Ntaho, Province of Rutana)

2.4 What do survivors need in order to heal?

The survivors were asked what they need in order to heal. Their discussions culminated in the following major need themes: economic independence, health care, stopping societal rejection, help to remain normal.

❖ *Economic independence*

Survivors' discussion led to the understanding that their dependence on husband and on society was due to the poverty they suffer. They indicated that being economically independent would help them to heal as they would avoid fresh incidents of sexual violence. Incidents continue to happen because of their dependence to husbands, relatives and partners; and because of economic hardship that exposes them to perpetrators in remote areas while struggling to survive.

"...I was raped by a man whom I didn't know when I was looking after goats in a hidden place... When I reached there, he took me by force and raped me..." (Client 1 from Group 2, Bujumbura)

"Because of poverty, it is not easy to denounce the father. If the father is arrested it means the loss of the main source of income of the family." (Client 3 from group 4 in Matana, Province of Bururi)

❖ *Health care*

The participants expressed the need for health services to respond to the consequences they suffer as a result of sexual violence. This need was expressed in these terms.

"Most of the time, I cannot get medication. I would feel better if I get medical care" Client 7, Group 4 in Matana, Province of Rutana.

❖ *Stop the societal rejection*

A number of survivors expressed the need to sensitize society to recognize sexual violence, report cases when they occur, and to stop rejecting survivors of sexual violence.

"The families, the neighbors, the teachers, the nurses or doctors and the entire community have to be sensitized to recognize and report the cases of sexual violence if they are found." (Client 3 from Group 3 in Ntaho, Province of Rutana)

❖ *Help to remain normal*

One of the needs expressed in relation to the psychological impact of sexual violence was the need to be supported to live a normal life, despite having endured an abnormal problem. The need for such a help was echoed in this typical statement.

"I need support so that I do not confuse the abnormal character of the perpetrator of violence with my own identity." (Client 5 from Group 2 in Giharo, Province of Rutana)

Assessing the relative emphasis accorded to these factors during discussions, it emerged that survivors in Burundi lent more weight to social consequences, namely social rejection. This was in contrast to the researcher's expectation that health and psychological issues, as well as poverty would be the most important.

2.5 Would a survivors' movement be of benefit?

Survivors were excited at the idea of a survivors' movement. Through the discussions, they identified the following advantages of such a movement: self-advocacy, learning from one another, and a forum to express feelings.

❖ Self-advocacy

Survivors indicated that such a movement would be a platform where they can put together ideas of a concerted actions to mitigate the impact suffered. Survivors also highlighted under this theme that it would be a platform to advocate their rights and to ensure that decision making is informed by their concerns.

"In such a movement, we could raise together as one the voices to claim our rights..." Client 6 from Group 1 in Bujumbura, Province of Bujumbura Mairie

"..I will have an opportunity to ask for the best response to my situation...", Client 3 from Group 2 in Giharo, Province of Rutana.

❖ Learn from one another

The survivors indicated that the movement would be beneficial as it would help them to know what survivors in other parts of the world are doing to solve their problems. They believed that interactions with others in the world would increase their strength. The movement would enable taking actions that deal with every aspect of sexual violence.

"How other survivors solve their problems could help us in solving our problems too." Client 9 from Group 3 in Ntaho, Province of Rutana.

"Together as a movement, we can know more about the sexual violence and know how each problem can be solved" Client 4 from Group 1 in Bujumbura, Province of Bujumbura Mairie

❖ Forum to express feelings

Burundian survivors of sexual violence felt that a survivors' movement would encourage people to report sexual violence and the bitter feeling suffered. They added that in such a movement voices raised will be heard and responded to.

"That movement will allow to feel free to express our feeling." (Client13 from Group 2 in Giharo, province of Rutana)

"Rape would be recognized by society as crime." (Client 6 from Group 1 in Bujumbura, province of Bujumbura Marie)

“We will gain as a movement as we will be allowed to express our inner feelings on a problem that is taboo in Burundi.”(Client 3 from Group4 in Matana, province of Bururi)

3 Discussion of the results

An in-depth analysis of the voices of survivors of sexual violence revealed crucial information. The key finding was that the survivors had limited understanding of sexual violence, especially one perpetrated against them by their husbands or partners. They believe they have to comply with this kind of violence. This limited understanding was concurrent with the researcher’s observation that this population of survivors, which fairly represents survivors of sexual violence in Burundi, were reluctant to speak out about sexual violence. Survivors identified social rejection as the main factor preventing victims from speaking out, pointing to the consequences suffered by those who have. The participants were excited with the idea of a global movement for survivors; they felt that this would encourage women to speak out, given the belief that social rejection plays a key role. As it might take some time for a global movement to become operational, changes within Burundian society are therefore deemed necessary to allow survivors of sexual violence to speak out. These results were similar across the communities covered. The detailed results are discussed below, starting with the question of whether survivors are aware of what sexual violence is.

3.1 Unawareness or fear of the worst?

One of the important findings of the study is that sexual violence is widespread in the communities in which the study was conducted. The violence is so extensive that it appears to be part of the normal lifestyle. The survivors noted that it is dangerous for women to be in a dark or isolated place at night. The prevalence of sexual violence is also illustrated by the fact that incest-related rape is common in Burundi. Even young boys who have not reached marriageable age are involved in sexual violence. Furthermore, rape is generally not recognized by society. The police seem to ignore sexual violence complaints unless they have witnessed the violence. Sexual violence is so widespread and so much part of the normal way of life that even minors commit it. For example, one minor in Rutana was raped by three minor boys. Sexual violence is part of men’s mindset and that of society at large; this is demonstrated by the culture of marrying women by force. Boys wait for women to be in a dark or isolated place, carry away any girl they catch and take her home as a wife. The girl is raped and forced to remain at the home. One can only imagine how unhappy girls are in such a situation. Sexual violence of this nature and other types of sexual violence are then perpetuated during the so-called ‘marriage’.

The research study also uncovered another type of sexual abuse by Burundian men who are married to or in partnership with women. This consists of demanding a kind of sexual intercourse that their partner is not able or willing to give. For example, a partner may be shown a pornographic movie and forced to commit the acts portrayed in the movie. Another form of abuse concerned the demand that a woman secrete vaginal fluid during sexual intercourse which is completely outside her control. While the latter form of sexual violence is likely to be suffered

by all women in the communities covered, women in the rural areas are more likely to suffer the former form of violence as they may not adapt to requests to perform pornographic acts.

The problem that requires attention is that women have a limited understanding that such sexual attitudes are a form of sexual violence. They tend to agree with the perpetrators that these are legitimate demands, but then complain about related abuse such as being beaten, sent home or subjected to polygamous relationships, which are the direct consequences of unreasonable sexual demands not being met. Even though sexual violence by partners or husbands is generally ignored in African culture and has been underreported, this study found the problem to be more significant in the communities of survivors of sexual violence in Burundi. Despite the severity of their partner's violence, survivors were unwilling to discuss it. Coupled with concern about maintaining the relationship with the abuser, this raises the question of whether women are really unaware of sexual violence in their families or whether the tendency to remain silent on this issue is calculated to avoid the worst (losing the relationship).

3.2 Speaking out overshadowed by interlocking factors

The values and norms on sexual violence in Burundi dominate the way women think about the factors that keep them silent. Throughout the focus group discussions, the participants tended to lend more weight to social rejection as the reason for their silence. This is cause for serious concern. While rejection, stigma or any kind of discrimination is one of the reasons for keeping silent about sexual violence in other conflict and poverty-stricken countries, such as in Democratic Republic of Congo (Solange and Isazu, 2014), it has not been as important as in Burundi.

Another factor that may underlie the silence is that survivors are generally very young and have little education. Most (70%) became pregnant as a result of sexual violence and are consequently very dependent. Under such circumstances, being rejected is the worst that could happen. Rejection can be detrimental in many respects. Previous research on the roots of rejection has found that the pain of being excluded is not much different from the pain of physical injury. Rejection also has serious implications for an individual's psychological state of mind. Social rejection can influence emotions, cognition and even physical health. Ostracized people sometimes become aggressive and can turn to violence (Weir, 2012). Taking this evidence and the circumstances in Burundi into account, it is possible that social rejection is the most important factor causing the silence on sexual violence.

The malfunctioning of the legal and security systems is another reason for not speaking out. While these systems can be expected to have malfunctioned, especially during the war, survivors do not blame them for their silence. Whether this implies ignorance of the role of legal system in protecting them when they speak out, needs to be determined. The survivors interviewed for this study did not refer to it as problem.

3.3 Visible impact not recognized

The most visible impacts of sexual violence on survivors are poor health and poverty. Most of the survivors are infected with HIV/AIDS and other STIs. A striking feature of the health impact noted by the researchers is that sexual violence has resulted in many pregnancies. Most of survivors participating in the discussions were carrying children who they said were a result of sexual violence. Other health impacts include the death of the mother or the child, as both are at greater risk when the mother is very young. For example, in Matana, a girl aged 18 died after delivering her baby and the baby died some days later. The health impact illustrates the extent of suffering among these survivors. If sexual violence was rare, it would not have resulted in so many pregnancies.

Burundi is one of the poorest countries in the world. The health impacts of sexual violence prevent survivors from working and earning an income. Firstly, most survivors have little education and were sexually assaulted at a young age. The only human capital they have is their good health that would enable them to work. However most of these women reported being weak after being raped. Furthermore, almost all survivors had children to care for and others have acquired STI diseases such as HIV/AIDS. This renders survivors of sexual violence in Burundi the poorest of the poor.

Besides these visible impacts, survivors suffered psychological problems after traumatic sexual experiences. Most of the participants reported constant fear, loss of self-esteem, and constant anger and depression. These problems affect the way survivors behave and cope with life in general. Psychological problems are responsible for failure in life and this can be expected of survivors of sexual violence in Burundi.

At a social level, the fear of social rejection prevents survivors from speaking out, as those who have done so are rejected by society. Rejection, stigma, and discrimination against survivors are a reality in Burundi.

Despite invisible psychological impacts and visible physical impacts in terms of poor health and associated poverty, it was striking that survivors tended to ignore these impacts. They were more concerned with the social impact in the form of rejection. This prompted the researchers to ask why women do not emphasize health and poverty. It was concluded that poverty and dependence on charity, even if unspoken, are the driving force behind the scene of women citing rejection as the main impact suffered. Such poverty and dependence are therefore likely to compound sexual violence in a society with a pro-sexual violence mindset.

3.4 A global survivors' movement

Survivors were very excited by the idea of a global survivors' movement, as they felt it would help to address sexual violence. This reinforced the conclusion that the society and environment in Burundi is not conducive to speaking out against sexual violence. Not only is social rejection an important issue, but such rejection has compelled survivors to overlook the real impact of sexual violence even when they have an opportunity to speak out such as in this study. The social mindset and circumstances are such that survivors consider the psychological impacts of sexual

violence less important, undermining their human dignity. The long-term effect of such a situation could be severe.

It is therefore concluded that a global survivors' movement would be effective in re-asserting the survivors' human dignity. The psychological impacts of sexual violence could be addressed if survivors were able to speak their mind on sexual violence issues. Without this kind of forum, Burundian survivors might not heal from these psychological effects. However, since it might take time for such a movement to become operational, a similar forum in Burundi for survivors of sexual violence is desperately needed.

4. Conclusions and recommendations

4.1 Conclusions

- Survivors of sexual violence in Burundi suffer sexual violence at the hands of belligerents, strangers, neighbors, relatives and partners. Despite this suffering, they are forced not to talk about sexual violence due to fear of rejection. They speak when they are forced to do so by unavoidable situation, such as body suffering, pregnancy, etc. but they still do not label sexual violence from husbands, partners and relatives as such. The way they refer to partners' violence suggests that they confuse it with gender-based violence. When other questions of interest to the research study were explored, it appeared that they are compelled to ignore sexual violence of this nature because of the environment they live in.
- The exploration of the factors that cause survivors to remain silent about sexual violence clarified why they fail to recognize sexual violence committed by partners and sometimes relatives. Sexual violence is widespread in Burundi and is established in the mindset of general society as a norm. The fact that this research study had to use advanced techniques to encourage survivors to share their experience shows that cultural norms have affected their behavior, understanding and responses to the impact of sexual violence. Women who make themselves known as survivors are rejected by society, causing them to remain silent. This could also explain why women do not speak out about sexual violence perpetrated by strangers.
- Social rejection in the form of stigma, marginalization and discrimination is based on the experience of those who have spoken out. Indeed, survivors of sexual violence regard social rejection as the most important factor affecting their lives. They seem to lend less weight to visible impacts such as poor health and associated poverty although a close analysis of the situation suggests that poverty, which renders survivors dependent on charity, is the driving force behind the recognition of this factor as the most important.
- Survivors were excited about the formation of a global survivors' movement. In light of the circumstances in Burundi and the general disposition of survivors not to speak out about their experiences, this excitement signals that survivors indeed suffer societal oppression and rejection.

4.2 Recommendations

Addressing cultural beliefs and practices

- Survivors in Burundi and more generally, Burundian society require education and training about sexual violence. In particular, programs that change the way society understands sexual violence would contribute greatly to a full understanding of sexual violence by survivors as it seems that survivors understanding of sexual violence conform to society's understanding, which is shaped by culture and norms.
- To prevent sexual violence, the entire community; including families, the local administration and other community members need to be sensitized to the effects of sexual violence on victims and the fact that they are not to blame.
- Since poverty is an important driver and consequence of sexual violence, it should be considered when addressing sexual violence. However, alongside poverty reduction interventions, one of the most important interventions required for Burundian survivors is providing them room to speak. The circumstances in which survivors live and their attitude towards speaking out suggest these survivors suffer severe psychological impacts that are detrimental to their well-being. Poverty interventions that are not accompanied by psychological interventions would not be effective. Therefore a survivors' movement, which survivors were eager to be part of, or something similar would help survivors in Burundi to speak out, heal and live a normal life as human beings even in poverty-stricken situations.
- Another intervention could be strengthening the legal system, paying special attention to this issue by alerting communities to the legal consequences of sexual violence. They therefore require training on lay counselling for the leaders in the communities.

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Appendix:

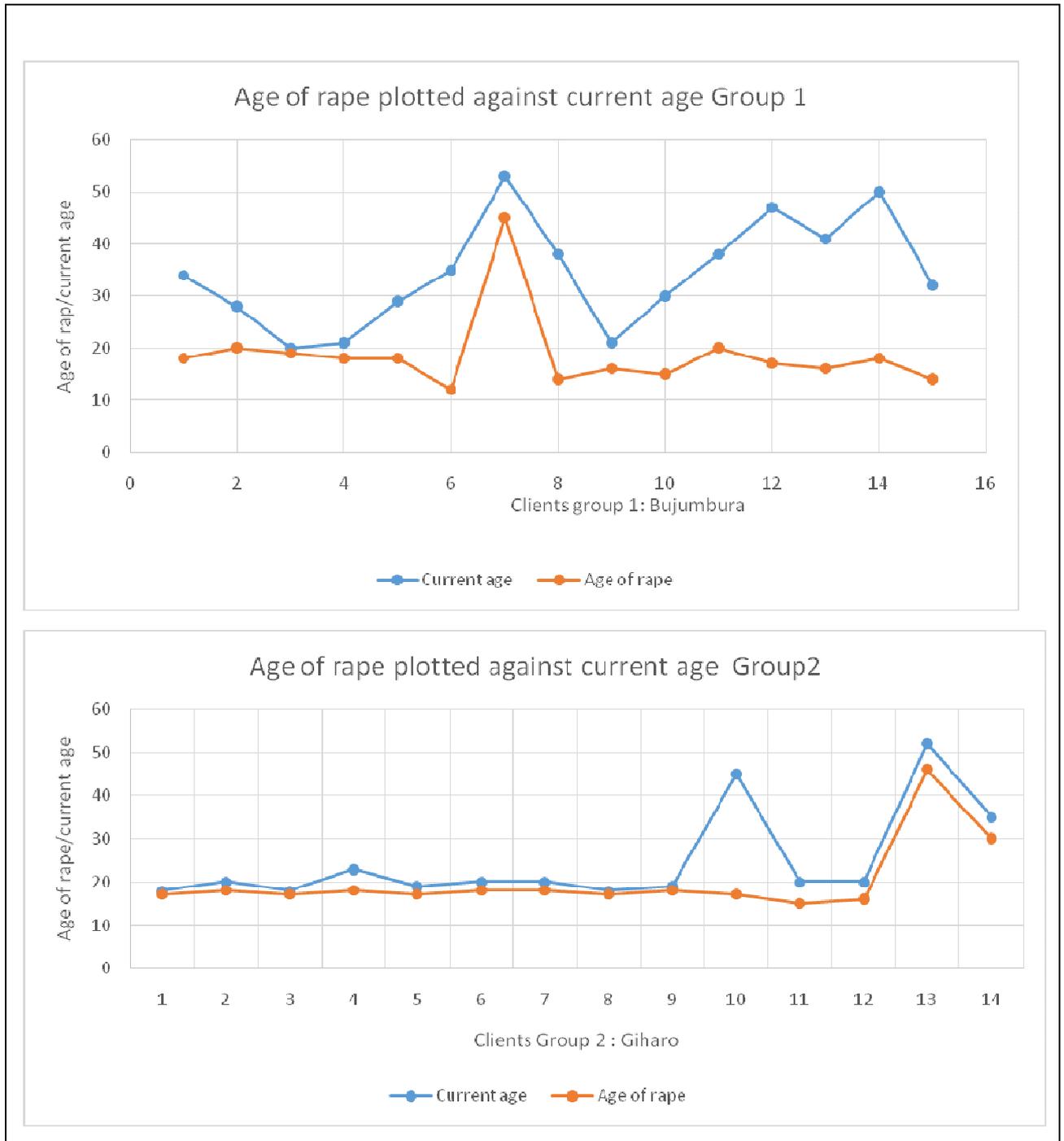


Figure 1 Panel A: comparison of age at first rape and current age among the communities covered

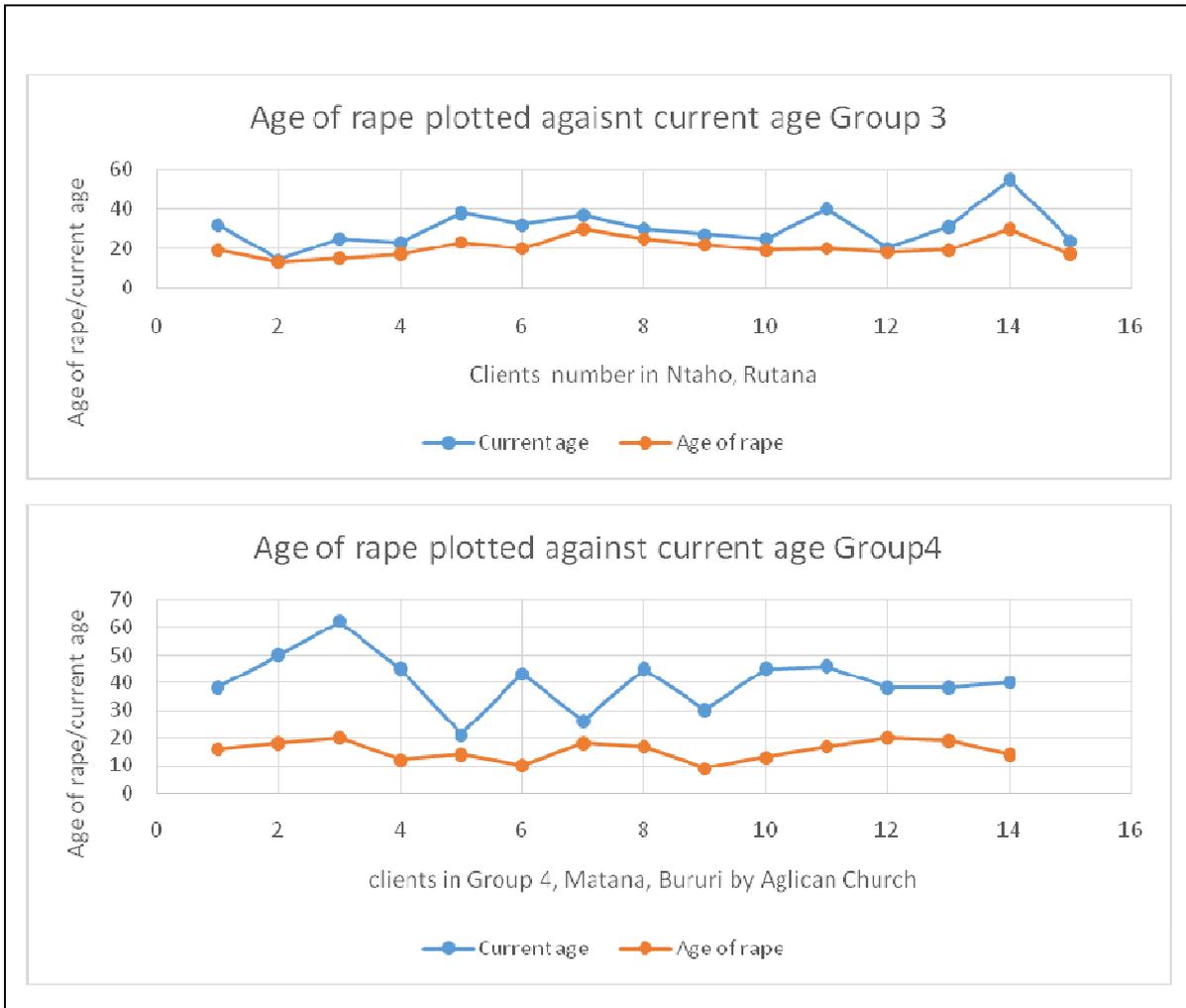


Figure 1 Panel B: comparison of age at first rape and current age among the communities covered