

Developing a Culturally Sensitive Framework for Assisting Bosnian Women Refugees

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Cet article étudie le viol comme stratégie importante des forces militaires en temps

Sexual violence can result in trauma which may not manifest itself until women are settled into the community.

de guerre. L'auteure examine plus précisément comment les Serbes ont violé les femmes de Bosnie afin d'humilier et de punir les hommes musulmans, afin d'ôter toute fierté et toute cohésion au peuple et ultime-ment, afin d'abolir le futur du groupe en souillant l'identité nationale, culturelle et religieuse des musulmans. L'auteure fait quelques suggestions et offre quelques recommandations pour le développement d'un programme d'aide sensible aux moeurs culturelles et sexuelles des réfugiées de Bosnie qui ont survécu le viol et autres agressions.

In April 1991, the Serbian-led Yugoslav army began an assault on Bosnia-Herzegovina ("Bosnia") after the Bosnian government declared its independence from Yugoslavia. Violence directed against civilian Bosnians was reported on a scale unlike anything seen in Europe since World War II. Reports of "ethnic cleansing,"¹ indiscriminate killing, concentration and rape camps shocked the world. Although all three warring factions—the Serbians, Croats, and Bosnian Muslims—are charged with using rape in the conflict, this strategy appears to have been primarily used by Serbian military and para-military forces against Bosnian Muslim women. By December 1992, as internal fighting continued, over one million people had fled Bosnia-Herzegovina, most to Croatia.² Nearly one million remain displaced within the country. In re-

sponse to this crisis, Canada initially agreed to resettle 562 Bosnian refugees, about one-quarter of whom were women. The majority arrived in February 1993, after being released from Omarska, described by the United States Senate Committee on Foreign Relations as one of the worst detention camps (1,21). According to Amnesty International, reports confirm "that rapes took place there [Omarska]" (9).

Canada has an extensive system of settlement agencies, developed originally in response to the resettlement of Vietnamese refugees in the mid-1970s. As such, most cities are reasonably well prepared to receive the Bosnian refugees. However, few agencies have programs to deal specifically with the sexual violence associated with the Bosnian conflict. Sexual violence can result in severe trauma which may not manifest itself until women refugees are settled into the community, at which point they face greater isolation and are less likely to access remedial services. This is compounded by language barriers and cultural and religious perceptions of, and responses to, sexual violence.

In response to this need, the Research Resource Division for Refugees at Carleton University (RRDR), in conjunction with the Ottawa Bosnian community, undertook an assessment of the needs of Bosnian refugees in order to suggest guidelines and make recommendations for the development of a culturally and gender sensitive remedial program. The assessment involved a cultural profile of Bosnian Muslims; a review of the conditions of conflict in Bosnia; consultation with the Ottawa Bosnia-Herzegovina Medical Relief Fund and Information Centre;² an information session with the Bosnian women refugees in Ottawa;³ a review of assistance programs which have been set up for women refugees from Bosnia,

most of which are located in Croatia; a review of problems of, and counselling for, survivors of rape and sexual violence based on existing literature and materials from women's counselling and assistance programs mainly in Canada and the United States.⁴

Rape in Bosnia-Herzegovina

During the conflict in the former Yugoslavia, rape, far from being a side effect of war, became a major part of its strategy. The mass rape of Muslim women was initially used to terrorize the population into leaving their homes and entire areas. Rapes continued in the small towns and villages. Schools and hotels were often used as sites for make-shift rape camps where women and girls were forcibly confined for long periods of time. Women were raped without regard for their age and kept prisoners until they were too far advanced in pregnancy to have an abortion.

Various sources estimate that the number of Bosnian Muslim women raped by Serbian soldiers is more than 20,000, although in recent reports by the United Nations High Commissioner for Refugees (UNHCR), the Bosnian government estimates that over 35,000 women have been held in rape camps (1993a). Accurate numbers are difficult to compile due to the conditions of war, the deaths of many of the women who had been raped, and the fact that women subjected to torture or violence, including rape, in most cases do not volunteer such information to persons they do not know and may not trust. While it cannot be assumed that all Bosnian Muslim women coming to Canada have experienced rape, we can assume that, due to the violent aspects of the war, women have experienced violence either directly or through having witnessed atrocities including the rape of other women,

and the murder or torture of children and family members.

Organized and systematic rape of women in specialized rape camps during war is more complex than the rape women experience during peacetime. Rape during war is often contextualized as the soldiers' expression of pent-up and uncontrollable sexual desire. In many cases, this form of violence is excused as an acceptable and unavoidable consequence of

war. This myth obscures the brutality of the aggression and does not take into account the power relations involved. While the consequences are directly experi-

enced by the women who have been victimized, male relatives (brothers, fathers, husbands, kin) also experience them indirectly through their feelings of humiliation, and apparent weakness and inability to protect the women of their community in the face of the enemy.

When a woman is raped in war, she and her family and ultimately her community internalize the rape as an assault upon their identity. The rape of Bosnian Muslim women is intended to humiliate and punish Muslim men, break the pride and cohesion of a people, and destroy the group's future by breaking down the Muslim national, religious, and cultural identity. Women are being impregnated by Serbs to bear Serbian and not Muslim children, breaking the line of Muslim descent. In this way, rape contributes to the ultimate goal of ethnic cleansing.

For the women, the humiliation of rape is often reinforced by the fact the act is carried out in front of others—daughters are raped in the presence of their families, and mothers are raped in front of their husbands and children. Some rapists force the women to shout that they are enjoying the rape, making them appear to be willing participants. After the rapes, many women are threatened with

further violence if they speak of or report the incidents. Some women report that the most disturbing aspect of the abuse is that many Serbian rapists are from their villages and were their neighbours before the war.

Feelings of shame and degradation are overwhelming in the majority of cases. To speak about the details of the abuse often elicits feelings of embarrassment and self-blame. As such, details are frequently deleted from their accounts until they can come to terms with the violation and the impact the attacks have had upon their lives. Survivors are "frequently reluctant to report the incidents or give details, *even after reaching places where they are safe*" [emphasis added] (Amnesty International 1). Reluctance to talk about their experiences may also be a result of their fear of consequences for their relatives who may still be in Bosnia. Survivors of rape and sexual abuse are also generally reluctant to speak openly about the assaults in front of men, particularly their fathers, husbands, brothers or other male kin, for fear of being judged and blamed for the assault.

It has, in fact, been suggested that some women who have reported rape have been harshly judged, blamed for the attacks, and treated badly by members of their community, particularly the authorities to whom they reported the crimes (Gutman). Speaking openly about what has happened to them may result in ostracization within their community and by their families. In Bosnia, many women who have been raped have been cast out of their homes and abandoned by their families (Williams). To avoid this treatment, many women repress their memories of the event, or pretend it did not happen. As a result, many are overwhelmed by the burden of coping alone with their memories.

At this time, however, we know very little about what the consequences of this kind of psycho-sexual trauma are. The trauma experienced by Bosnian Muslim women may vary in degree according to their previous sexual life, the ethical, cultural, and emotional meanings attached to sexu-

ality, the duration, intensity and extent of sexual torture, and the physical consequences of the sexual torture (Agger).

Intervention in Bosnia and Croatia

The estimated 10,000 Bosnians who fled to Croatia from December 15 to January 15, 1992 are primarily women and their children. UNHCR shelter workers, government, non-governmental organizations, and local women's groups there have begun to actively address the psycho-social needs of women survivors of violence, striving to identify, in a non-stigmatizing way, women who are survivors of violence who may benefit from more specialized programs. Most organizations stress an integrated approach to assist rape survivors and have employed highly skilled local people to accomplish this.

However, the UNHCR did not implement a social services program in Croatia until early February 1993. At this early stage its interventions merely aim at assisting women to survive daily life under stressful conditions. The assistance to victims of violence that UNHCR recommends includes letting victims know that services are available to them; ensuring culturally appropriate responses and treatment which do not further

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stigmatize them; using and strengthening existing medical and counseling facilities rather than creating parallel structures; and avoiding a matter-of-fact approach as this can contribute to the de-dramatization of the rapes for the victim, her family, and the community.

UNHCR's attempts to respond to the needs of Bosnian Muslim women

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and children, however, have been hampered due mainly to security factors. In addition, the attitudes of Muslim men towards rape make it difficult for the UNHCR to seek out women who need help without stigmatizing them. A lack of knowledge of existing services restricts access to counselling services. Moreover, few counselling services have interpreters and only a small percentage of refugees speak a language other than

Bosnian. While hundreds of women have received some form of treatment, the majority have most likely not received any. It is, therefore, highly unlikely that the women and girls

which have been resettled in Canada have had assistance in this area. However, the efforts made by UNHCR, women's organizations, and international relief agencies in both Bosnia and Croatia can be used to develop a framework from which to build appropriate and effective services in Canada.

Intervention in Canada

A general intervention framework for Canada should take into consideration general information, as well as specific treatment techniques for survivors of sexual violence. First of all, Bosnian Muslim refugees to Canada have been released on the condition they agree never to return to Bosnia. They have expressed mixed feelings about being in Canada. They are grateful for Canada's role in obtaining their release and accepting them for settlement. However, they believe that the international community, including Canada, is unintentionally helping achieve ethnic cleansing by agreeing to the no-return condition. These feelings need to be understood by counsellors and community workers.

Furthermore, western (in this case Canadian) counsellors/researchers cannot be assumed to be "experts" in

the area of violence against immigrant and refugee women. Counsellors should undergo specific training to become aware of the cultural background of the women, the status of women within Bosnian Muslim society, their values and beliefs and how they manifest in everyday life, and the political circumstances which have led to the mass refugee movements. They should also understand the abuses perpetrated against Muslim women during this war.

While some information is already available, it is advised that counsellors look to members of the Bosnian Muslim communities or others familiar with Bosnian Muslim culture to augment this information as necessary. Including members of the community as partners at the information-gathering stage and inviting them to assist in training sessions will also establish an ongoing relationship of trust with the community as a whole. Without knowledge of the culture, counsellors will be limited in the assistance they can offer and may even unwittingly contribute to a woman's stress.

We cannot assume that Bosnian refugees, particularly those from outside urban centres, are familiar with the Canadian (western) medical model of treatment for mental health. Although Bosnia has an extensive system of social services centres, they are unequally distributed throughout the country and specifically lacking in rural and isolated areas (Aleskan 128). As a result, refugees may mistrust a system they do not understand and cannot relate to within their terms of reference. Counsellors can begin to address this barrier by creating a safe and non-threatening environment and ensuring women that the contents of counselling sessions will be kept confidential.

In addition, women with some knowledge of how the system works may attach a negative connotation to seeking "psychiatric" help and accessing mental health services. To avoid the risk of further stigmatizing women, it may be useful to hold counselling sessions in other facili-

ties. Community health centres and medical facilities used to delivering primary care can also be used for this purpose, allowing counselling to be seen as part of the woman's general health needs.

Members of the Bosnian community in Canada (in some cases, also those of Croatian origin) can assist as translators or interpreters and, with some form of training, can also be used as counsellors. These community workers must also be trained to be sensitive to the issues surrounding assistance to survivors of rape and torture.

Short-term counselling, often referred to as "crisis intervention," may not be useful in this situation. Crisis workers, some of whom may be volunteers, usually undergo a training program within feminist organizations which provide services to women. However, the hopelessness and intensity of the trauma suffered by Bosnian women may easily overwhelm workers who do not have some form of professional training in psychology. Organizations which offer such services may be more helpful in establishing ongoing support in the community for the women.

Survivors of mass violence often experience survival guilt which may manifest as "somatization" and "post-traumatic stress disorder." We suggest that any counsellor's training program needs to become informed about the various treatment methods developed and used by professionals dealing with these symptoms (see Scurfield).

The healing process cannot be totally dominated by professionals, however. Community support programs including the Host Program can be linked to the professional treatment of individual women. However, host matches must be carried out carefully. Our community consultation indicated that many of the matches have been inappropriate in the past, making them less effective.

Women can also benefit from the support of a self-help group. Feminist organizations (such as Rape Crisis Centres and Sexual Assault Sup-

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port Centres) as well as programs within the community (settlement agencies, Community Resource Centres) have employed this method for other newcomer groups and women in crisis. We encourage contact with such organizations to develop an integrated approach to the issue.

In our consultation with the Bosnian refugee women in Ottawa, concerns were expressed over any discussion revolving around personal

experiences during the Bosnian conflict. The women did not wish to be asked any questions which would directly relate to their experiences in the detention

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camp. General and open-ended questions are therefore recommended during the initial stages of counselling. Detailed and specific questions about their experiences may increase women's stress, especially if there are events they are not yet prepared to speak about. Stories may be related in the third person until the women have established a trust with their counsellor. Since the definition of rape and the conceptualization of sexuality differ depending upon one's ethno-cultural community (Morrow 28), questions asked within the counselling sessions need to be culturally sensitive. It is suggested that questions be framed in a general and non-threatening manner. For example, "it is like this in our society... can you tell me how it is in yours" (Agger and Jensen 688).

In order to render initial counselling sessions meaningful and relevant for women, torture and rape and its consequences need to be "re-framed" within Bosnian culture. Re-framing refers to the process of de-individualizing the violence from the woman who has been raped and re-contextualizing it in the context of the present war and the strategy of Serbian "ethnic cleansing." Re-framing assists the woman in the process of restoring her human dignity.

Conclusions and recommendations

Canada, as a recognized country of resettlement, has a responsibility to ensure that proactive measures are taken to establish services appropriate to Bosnian women refugees in Canada (UNHCR 1993b: 4). However, in order to create the support systems which UNHCR deems necessary to facilitate the integration of women survivors of sexual violence, specific services must be implemented.

As the extent of the consequences of "ethnic cleansing" upon the psycho-social health of Bosnian Muslim women are unknown, a consultation group should be formed to facilitate an understanding of the issues relevant to the Bosnian situation and to establish links between individuals and organizations, including members of the Bosnian communities in Canada, mental health practitioners, psychiatrists, settlement agencies, women's organizations, and researchers. The consultation group can best work in partnership with the Canadian Centre for Victims of Torture, an organization based in Toronto which has developed a mutual support model for newcomers to Canada who have survived torture and abuse.

Existing community training models can be considered for possible use in the development of a training package for social workers, English as Second Language (ESL) teachers, counsellors, and others who come into contact with the Bosnian refugee women. The training package developed by the Community Resource Centre of Kanata, Goulbourne and West Carleton is one which deserves closer examination. Training packages for professional counsellors should include cross-cultural training seminars, a briefing on the political situation in Bosnia, materials on gender-specific empowerment models of counselling, and training in general areas of rape and sexual violence against women.

Contact should be made with persons from the Bosnian Muslim community residing in Canada who can

be trained to provide counselling assistance in the area of violence against women. Their initial task would entail establishing contact with Bosnian refugee women and acting as primary support workers in the counselling process. Members of the Croatian community could assist in certain circumstances.

The existing government-sponsored Host Program should be utilized to match the Bosnian refugee families with suitable Canadian counter-parts. Care should be exercised in matching hosts and families in terms of gender, race, class, and family status.

Consideration should be given to planning a national study—in conjunction with the Federal Department of Immigration, Settlement Branch and possibly Multiculturalism—to coordinate services throughout the country. Specifics of a project with this kind of national scope would need to be worked out in consultation with members of various community organizations in each province, members of the Bosnian community in Canada, and professionals working in the area of torture, sexual violence, rape, and the training of counsellors.

If Canada admits Bosnian Muslim women, identified as rape survivors by the UNHCR, under its "Women at Risk" program, we believe these suggestions are highly relevant to the

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development of a culturally-sensitive framework for assisting Bosnian women refugees and for the implementation of an extended support program.

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AIDA FARRAG GRAFF

To A Bosnian Mother

Hot dry tears...
The hackneyed phrase of anguish.
A daughter's screams
That echo in the chambers of a mother's
ears.
A ball of fire rocking back and forth
Between the cradle of her breasts.
Her crime, a crescent smile
That draws the ghouls out from the hills.

The hills that pound, pound, pound,
While statesmen fumble, hem and haw,
Around the niceties of law.

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¹Ethnic cleansing in the context of Bosnia is defined as the practice of targeting other religious and ethnic groups, in this case, Croats and Muslims, for persecution, killing, expulsion and imprisonment in order to rid parts of Bosnia of non-Serb populations.

²RRDR consulted with Dr. Fersada Bajramovic, president of the Bosnia-Herzegovina Medical Relief Fund. and with Amina Adams and Selma Serhatbegovic from the Bosnia-Herzegovina Information Centre.

³Of the eight women in Ottawa, six agreed to participate in the focus group. Two other women from the community participated as translators and interpreters during the session.

⁴Canadian contacts include: Canadian Centre for Victims of Torture, Education Wife Assault, Ottawa Rape Crisis Centre, Interval House of Ottawa-Carleton, Kanata Community Centre, Family Service Centre, Immigrant and Visible Minority Women Against Abuse, Voice of Women, Canadian Council of Muslim Women, Women's Urgent Action, Women Living Under Muslim Laws, Changing Together Immigrant Women's Centre, Settlement Branch of Immigration Department and the UNHCR. American contacts include: Women's Commission on Refugee Women and Children, International Rescue Committee, King County Sexual Assault Resource Centre, Refugee Policy Group and *MS Magazine*.

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