

# The Silencing of Gender-Based Violence

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## Abstract

Gender-based violence (GBV) has been a central area of concern for feminist peace and conflict research and advocacy, yet it was an issue that did not loom large in our research on gender and peacebuilding in Indonesia and Nigeria. In this interlude, we examine the explicit reasons why our project did not focus on questions of GBV, and the silences that exist in our case study locations around the issue. We, further, discuss the ways in which we may have inadvertently contributed to the silencing of narratives of GBV through our approach, and what can be done to try and avoid or minimise these impacts.

## 1 Introduction

Over the past decades, researchers and activists across the globe have highlighted the multiple impacts of conflict and displacement on all forms of gender-based violence (GBV)—be it committed by armed actors or civilians—against persons of all gender identities (see, for example, Féron, 2018; Serrano-Amaya, 2018; Swaine, 2018; Zalewski et al., 2018). While much of this research has focused on pre-mediated and ‘opportunistic’ GBV practised by armed actors against civilians and combatants, civilian-to-civilian GBV may also increase in times of conflict, in part due to the weakened rule of law and reduced effectiveness of and trust in the police and other state actors. In spite of the difficulties of researching GBV in conflict-affected societies, the topic has attracted a great deal of academic and policy interest over the past decade. At times, this has happened to the degree that the focus on it has eclipsed and silenced narratives pertaining to other forms of harm experienced in conflict and/or taken a voyeuristic and sensationalist position, dynamics we sought to explicitly avoid in our research (Baaz and Stern, 2013; Meger, 2016).

This interlude humbly attempts to address the question of the possible inadvertent silencing of GBV that might have happened as part of our research in conflict-affected communities in Indonesia and Nigeria. While our focus was

on the interlinkages between gender, conflict and peacebuilding, the issue of GBV was not a central theme in it, and rarely came up spontaneously in interviews. We explore these silences here along with the possible role our research design and methodology had in contributing to them, in particular with respect to forms of GBV or groups of victims/survivors that tend to be already invisibilised, such as sexual violence against children, against men and boys, or against lesbian, gay, bisexual, trans, queer, intersex and other (LGBTQI+) individuals.

In our research design, we did not highlight the issue of GBV, in part due to the risk of a focus on it overshadowing other gendered dynamics of conflict and peacebuilding and in part out of our concern not to re-traumatise participants, especially as we were not able to provide any direct counselling or support. While we in no way discouraged research participants from relating instances of violence if they so wished, we also did not ask interviewees to seek these out or to dig deeper into these experiences. Our research questionnaires included one question on domestic violence, but on occasion respondents did also mention other forms of GBV. When it came up in interviews, it was often in very discreet, euphemised ways. The most direct mentions came not from community members or direct survivors, but rather from healthcare workers, NGO activists or other service providers, often in off-the-record and informal discussions, between or after interviews. At times, respondents would deny the existence of domestic violence in their communities or regard it as a strictly private matter. Most of the GBV cases mentioned were rapes of women or girls by armed state and non-state actors, with other forms of GBV being mentioned less, or not at all.

## 2 Comparing the Country Contexts

The issue of GBV came up more rarely in the interviews in Indonesia compared to those in Nigeria, possibly because the widely publicised acts of GBV perpetrated by Boko Haram (*Jamā'at Ahl as-Sunnah lid-Da'wah wa'l-Jihād*) have sparked more of a discussion around these issues in the latter country (Oriola, 2017). This does not mean that it is not an issue of concern in the former country as well, and of our Indonesian case study sites conflict-related sexual violence has been documented in both Aceh and Maluku, and domestic violence is an issue in all communities in both countries (Braithwaite et al., 2010; Brown, Wilson and Hadi, 2005; Clarke, Wandita and Samsidar, 2008; IOM, 2007).

The issues of GBV and sexual violence against children are particularly taboo, and information is lacking in both countries. Two review research articles on cases of child abuse in Indonesia reach similar conclusions, pointing

to the scarcity of data on this issue while also underlining the high risk of sexual violence affecting boys and girls due to societal taboos on sexual matters, early child marriages, a lack of institutional support for reporting, and poverty (Rumble et al., 2020; Wismayanti et al., 2019). Testimonies from social workers in Nigeria collected during the course of our research suggested egregious cases of violent rape of very young children in Jos and Enugu, but there is a lack of systematic collection of information on this issue in Nigeria as well. In spite of national (in Indonesia) and regional (in Nigeria, as recently passed in Delta State) legislation prohibiting or criminalising it, female genital mutilation is still widely practiced in both countries (Lubis and Jong, 2016; Okeke, Anyaehie and Ezenyeaku, 2012).

Research data on domestic violence is more readily available in both countries, although data remains sparse. Data from Indonesia has indicated increased reporting of cases, which can be indicative of greater trust in reporting systems, of better reporting systems, or of an actual increase in acts of violence. According to the National Commission on Women (Komite Nasional Perempuan, Komnas Perempuan), between 2011 and 2012 there was a dramatic increase in reported cases of violence against women in Indonesia; and from 2014 to 2015 there was an increase of 9 per cent (data from the National Commission on Women, Komnas Perempuan). According to the United Nations Population Fund (UNFPA), 33 per cent of women in Indonesia aged from 15 to 64 have experienced physical and/or sexual violence (UNFPA, 2017). In a similar manner, in Nigeria in 2018 the reported proportion of women aged 15–49 who had experienced physical or sexual violence in the previous 12 months was 31 per cent (NPC, 2019, 429).

While collecting information on GBV is notoriously difficult in times of 'peace', this task is even more difficult in conflict-affected situations. These challenges are further exacerbated in contexts where cultural, religious and legislative arrangements consider sex and sexual violence as taboo, and stigmatise victims and survivors of sexual and gender-based violence as wrongdoers. One reason for the absence of GBV narratives in our data is the sensitivity of the issue. As in many other societies, discussions around sexual activities in general tend to be taboo in the communities we engaged with, violence within families or between intimate partners is seen as a private issue, and survivors of sexual violence face social stigmatisation. Non-heterosexual orientations are often either condemned morally or legally prohibited (in Nigeria, and regions of South Sumatra and Aceh in Indonesia; see *Equaldex*, 2020a and *Equaldex*, 2020b), making any research on violence against these communities particularly challenging. Patriarchal representations and constructions of masculinities have been and are challenged on multiple levels by men and women alike at the community level (see several contributions in this volume, as well as

Kunz, Myrntinen and Udasmoro, 2018 and Prügl et al., 2019), but nonetheless they continue to impede awareness and acceptance of violence against men and boys.<sup>1</sup>

### 3 Addressing Silences

The key questions arising from our data for us as researchers are: How do we engage with these silences around GBV and did we inadvertently contribute to a shutting down of discussion? Was our decision to not pry into questions of GBV an ethical one, avoiding voyeurism and re-traumatisation, or one that marginalised survivors? Did we afford more space, agency and potentially dignity to our respondents by allowing them to talk about GBV if they so wished, or did our lack of questions around it make them feel that we did not want to hear about these experiences? There are no easy answers.

Silences and silencing have attracted increased interest in recent years, including among feminist-inspired researchers of conflict-affected societies (Eastmond and Selimovic, 2012; Fujii, 2010; Selimovic, 2020). Selimovic has categorised silences related to conflict and violences along two axes: one of social remembering and social forgetting, and one of enabling and disabling silences:

Disabling silences are imposed on the agent, sometimes over the *longue durée*, and attempt to erase events and agents from memory and discourse, or relegate victims to constrained subject positions. Enabling silences can be articulations of experience, a strategy for resistance, and part of communication and a normalising discourse.

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These dynamics around silencing are not necessarily mutually exclusive and may be at work simultaneously or to different degrees at different points in time. For us as researchers, we see that this requires a balancing act: ensuring that our research design, its implementation, and the analysis simultaneously do not shut down the possibility of addressing experiences of GBV and also respect the respondents' right to maintain silences. Depending on the context, this will require different kinds of research approaches and different ways of seeking to ensure safe spaces: what can work in one situation for one

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<sup>1</sup> As also acknowledged by researchers focusing on sexual violence against men; see Féron (2018), Zalewski et al. (2018) and Touquet and Schulz (2020).

respondent to create a sense of safety might evoke deep insecurity in others. We also need to adapt our research methodologies to be more accommodating of the fragments of data gleaned from the grey spaces of off-the-record interviews, of indirect allusions, and of what is left unspoken. In both the research and the analysis, we should also remain mindful of how our own interpretative biases, analytical tools, and categories may do injustice to the lived realities of survivors by seeking to oversimplify the inevitable messiness of experiences of conflict and violence as we seek to stress certain aspects we see as important while de-emphasising others (see Touquet and Schulz, 2020)

#### 4 From Research to Practice

As we have also highlighted elsewhere in this volume (Interlude 2; chapters 8 and 1), one of the concerns of this research project has been to contribute to peacebuilding practice as much as to research. In terms of addressing GBV, we hope that in the longer term more gender-equal peacebuilding and conflict prevention will reduce all forms of GBV. In the short and medium term however, there is a need for peacebuilding actors to seriously take all forms of GBV into account in their work. The impacts of GBV in conflict and post-/non-conflict settings remain severe for survivors. These include increased rates of morbidity and mortality, physical consequences, forced pregnancies, and sexually transmitted infections, including HIV/AIDS, in addition to the emotional impacts as well as social effects of ostracisation. Given the silencing of GBV and the profound lack of information and systematic data, policies responding to and seeking to prevent GBV often remain limited. In the past decade, there has been a growing awareness of the links between sexual and gender-based violence, health, human rights and national development. However, few programmes simultaneously aim at addressing the drivers and consequences of sexual and gender-based violence in an integrated and comprehensive manner, with responses being implemented separately by state and non-state actors, and by separate line ministries within national governments.

In conflict-affected contexts, civil society organisations (CSOs) and in particular women's groups have been at the forefront of care and support for survivors of GBV. Anchored in conflict-affected communities and trusted by community members they are often the first line of response for survivors who might fear reporting to more official authorities such as the police, or who might not trust these authorities to respond. CSOs can provide safe spaces in which to express experiences of victimisation, provide counselling and guide survivors to medical support, and propose trauma-healing sessions, training

on HIV/AIDS, and gender-empowerment coaching. Women's organisations—both national and, especially, state and local community associations—are, however, badly under-resourced and may find themselves at a disadvantage vis-à-vis better resourced international NGOs (Imam, Biu and Yahi, 2020).

In spite of an increasing awareness of the issue and solid research emerging on GBV in times both of conflict and of non-/post-conflict, severe limitations regarding data collection persist and affect possible prevention as well as care and support policies for survivors. GBV deserves urgent attention/intervention programmes from both state and non-state actors in order to protect affected populations, improve mechanisms of prevention, and develop adequate institutions to support survivors at the physical, psychological, and societal levels.

Reflecting on our research methodologies and on silencing, we see a need for flexible and reflective approaches that maximise respondents' options for agency: to share their experiences on their own terms or to remain silent. For us as researchers, this requires a willingness to engage deeply with these narratives, to be aware of our own biases and to continue to listen more closely to what is being said and what is not.

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