Issues of Power and Empowerment in Refugee Studies: 
Rwandan Women’s Adaptive Behaviour at Benaco Refugee Camp

Judy A. Benjamin

Abstract

This paper addresses human rights violations in the context of gender power relationships and calls attention to the need to examine the standards for human rights assessments in the context of refugee situations. This research is based on fieldwork carried out with Rwandan Hutu refugees during an 18-month assignment as Project Director for CARE International in Ngara, Tanzania. Participant observations, interviews, surveys, and focus group discussions yielded a wealth of data concerning the coping strategies of men and women. Women’s coping strategies made them vulnerable: women without partners were the least protected and took the greatest risks in their efforts to survive and feed their children. Their adaptive behaviour increased their risks of rape, sexual abuse, and exposure to HIV and other sexually transmitted diseases. These serious problems were overshadowed by the chaotic business of running a refugee camp. In the rush to accommodate the influx of hundreds of thousands of refugees, the non-governmental organizations and UN agencies established a relief infrastructure that—perversely—gave the perpetrators of crimes, positions of power within the camp, which enabled the gender violations to persist.

Précis

Le présent article aborde la question de la violation des droits humains dans le contexte des relations de pouvoir dans le sexe et attire l’attention sur la nécessité d’un examen des critères d’évaluation des droits humains dans un contexte où la question des réfugiés est impliquée. Cette recherche est basée sur un travail de terr-

Judy A. Benjamin is Technical Advisor for the Women’s Commission for Refugee Women and Children, New York, NY, USA.

The tattered curtain covering the entrance to my blinde does not stop them. They come in the night, have their way with me and leave. I am afraid but there is no one to help me. (Bernadette, unmarried mother, age 19)

My children eat cooked food every other day—there isn’t enough firewood, the maize grain takes so many hours to cook. My husband is dead. I am alone. I am afraid to go out alone to collect wood. (Zameda, mother of 5, age 30)

My parents arranged my marriage to Charles against my will. He is old and drinks too much. (Charlotte, age 14, one of 10 children)

I heard the child screaming in the night. We learned in the morning that she had been raped in the latrine by a boy of 20—he had been drinking. (Neighbour of Felicitee, age 6)

I am forced to give half of my food rations to a neighbour—he is protecting me. (Natalie, widow, mother of 4)

Introduction

The voices of Natalie, Charlotte, Zamed, and Bernadette echo those of many other refugees who endured abuses in Benaco refugee camp, Tanzania, because they were women. Being a refugee in Benaco meant surviving daily hardships and indignities, and women suffered even more than men did. This article aims to provide a theoretical framework for studying the relationship between violence against women refugees and human rights violations that occur when communities are displaced. In particular, the results of women’s survival strategies and the level of risk involved in their coping behaviour are examined.

Theoretical Basis of the Study

This work draws from theories on social change, refugee studies and gender violence. The Rwandan genocide provides a tentative theoretical framework for examining violence in refugee camps, including rapes and sexual violence against women and girls. The idea is put forth that human rights violations, particularly rape, can best be identified through the use of small focus group discussions. The notion of categorizing

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women refugees as "vulnerable" is contested in this paper. Women are not passive victims but are put into vulnerable situations especially during periods of conflict and social upheaval, including internal displacement and refugee mobility.

The Rwandan Conflict and the Flight to Tanzania

On April 6, 1994, the plane carrying the presidents of Rwanda and Burundi mysteriously crashed. Murderous rampages by Hutu extremists driven to carry out the carefully-planned elimination of Rwandan Tutsis began immediately. (For a comprehensive history of the genocide see Prunier 1995.) The genocidal slaughtering continued for more than two months until the rebel Tutsi army (Rwandan Patriotic Front) succeeded in gaining control of the country. Within a few days, and in the largest single movement of people in so short a time, more than half a million Hutus fled Rwanda to neighbouring countries, fearing retribution from Tutsi soldiers for the killings. Entire communities of Hutus left Rwanda. The genocide leaders convinced Hutus who had not been involved in the slaughter to leave by telling them that the Tutsis would kill all Hutus. The degree of control over the Hutus proved to be a crucial element in the Rwandan refugee story, although relief workers were not aware of the degree of control until late in the situation (Prunier 1995).

The Benaco refugee camp, located just 18 kilometres from the Rwandan border, became the second largest "town" in Tanzania. The United Nations, along with nearly 20 international non-governmental organizations (NGOs), quickly set up relief operations.

In December 1996, the refugees abandoned Benaco and returned to Rwanda.

Refugee Camp Organization

Human rights violations at Benaco must be viewed within the context of the genocide that occurred in Rwanda. Credible observers noted numerous human rights violations against women, although the enormity and scope of the mass murders appeared to eclipse this issue. Most rights violations against women and girls failed to draw any response from the NGOs and relief agencies. Beset by a myriad of problems—outbreaks of cholera, measles, meningitis, and ongoing security incidents—many relief workers minimized the importance of women's complaints or completely ignored them.

Refugee literature has often depicted women as powerless victims (Stein 1981). Portraying refugee women in passive dependent roles does not accurately describe the majority of refugee women (Daley 1991). In the camps, women were mainly responsible for continuing the social activities of the household, which included caring for the sick, children, and elderly family members. Along with endless daily chores—securing firewood, water, and food preparation—they also bore the physical responsibilities of pregnancy and lactation. Life in the camps entailed far more pain and suffering for women than for men. Rather than pointing to weakness, dependency, and vulnerability, the adaptability of refugee women to adverse circumstances shows their strength to do what was necessary to survive their ordeal.

The situational context of the Hutu refugees, cast in the shadow of genocide, often caused people to behave in uncharacteristic and unpredictable manners. This article focuses on the risk-taking behaviours that are the coping mechanisms of survival for refugee women. I argue that women—especially single women—are in greater danger than men because of gender power relationships that arise or are reinforced when communities are displaced. It is their tenacity and will to survive—not their vulnerability—that cause them to adopt behaviours that jeopardize their human rights, health, and social status. In Benaco, the most common rights violations encountered in this Faustian bargain to survive included rape, coercive sex (exchanging sex for food, water, firewood or protection), discrimination, social ostracizing, and financial exploitation. Coping strategies which included trading sex for needed goods or services often increased the risk of exposure to HIV and other sexually transmitted diseases (STDs), especially given the high prevalence of these diseases in the Rwandan population (van der Straten et al. 1995).

Women and Girls at Risk

Life for refugee women and girls is harsh. Many women on both sides of the conflict were beaten and raped during their exodus. For Rwandan women, social status and identity are closely linked to marriage and family. One of the biggest threats to the physical safety of women and girl refugees is the lack of employment for men. This leads to boredom, depression and an increase in alcohol consumption—which in turn lead to increased domestic violence and rape. Unfortunately, few rapes were ever reported to the authorities, partly because Tanzanian law makes prosecution for rape nearly impossible.

Women without male protectors (husbands, fathers, uncles) were particularly vulnerable in the camps. Many women who were raped during the conflict gave birth to babies. These so-called "unmarried mothers" were easy targets, with no one to stand up for them. They reported that men walked into their huts at will, raped them and left. Because they occupied such a low rung on the social ladder, they received little sympathy from the community. The AIDS prevention project helped start support groups for these women, who found strength by uniting with others suffering the same fate. They also benefited from special income-generation efforts, such as produce-growing cooperatives set up by other NGOs within the camps.

When the camps were new, large communal latrines were built some distance from the dwellings. These structures, sheltered by large sheets of plastic, became the site of many sexual assaults on women and girls. The situation improved after small four-family latrines were built nearer homes, replacing most of the communal ones. Women and children seeking firewood outside camp boundaries were also victims of assault.
In response to the number of assaults, a crisis intervention team was formed
made up of refugee social workers, counsellors and other volunteers who
provided counselling, medical and legal assistance, and social support for
victims of sexual assault.

Even women who were not victims of violence and sexual assault were often
powerless to insist on safer sex practices. Because condom use is often asso-
ciated with promiscuity, women were afraid to suggest condoms to their part-
ners.

Coping Strategies and Risk

The conditions of refugee life greatly increase the risk of exposure to HIV and
other STDs. The destruction of families, deterioration of social structures and
unravelling of social mores, loss of homes and income, overburdened
health care resources, crowding, and
commercial sex trade within refugee
camps are just some of the factors that
lead to increased risk-taking behaviour
and susceptibility. Women and adoles-
cent refugees, vulnerable to violence,
rape and coercive sex, are at especially
high risk.

Lack of social support networks for
many refugees may mean facing all
problems alone without any support.
Responses on a survey carried out in the
camp regarding attitudes on social sup-
port indicated that women without
partners felt socially isolated, with no
one to turn to for advice on personal
matters. Many women at Benaco were
either widowed or had been separated
from their families. Several of the women
interviewed attributed their tendencies
to attach themselves to men they hardly
knew to their fear and loneliness.

Social network analyses suggested
the formation of new social relations
based on need fulfilment. Groups of
young men set up shared households to
maximize resources. Many of these
“bachelor blines” were where young
girls were raped. Parents complained
bitterly that they no longer had control
over their older children. The most fre-
cuente expression of this was the case of
adolescent girls. The absence of schools
beyond primary level meant boredom
and idleness for large numbers of refu-
gee teenagers. Boys were able to estab-
lish some small income-generating
activities such as collecting and selling
firewood, taxiing people on the backs of
bicycles, etc. No such outlets existed for
adolescent girls. Adolescent girls who
participated in focus groups revealed
their feelings of anxiety and fear. They
expressed feelings of hopelessness and
distress over not having access to money
and not having activities, and especi-
ally missed being in school. Many
young girls formed relationships with
older men who gave them money or gifts.
Some of these fast-formed relationships
resulted in the girls being physically
abused.

Knowledge, Attitude, Beliefs and
Behaviour (KABB) baseline and follow-up
surveys showed that the percentage of
women who had multiple sexual part-
ners rose from 14 percent to 38 percent
during the first 12 months. These data
suggest that one of the coping strategies
of women included an increase in the
number of sexual partners, although
one should be careful not to infer too
much from this finding. The rise in the
percentage of women with multiple
sexual partners could be attributed to
increased willingness to answer per-
sonal questions.

Findings and Analyses

In addition to the AIDS/STD preven-
tion intervention activities, the project
focused on how the coping strategies of
refugees often resulted in behaviour
likely to increase the transmission risks
of HIV and other sexually transmitted
diseases. Short-term coping strategies
employed by women often entailed
long-term negative consequences.

Women may choose to live with a man
in exchange for protection or food ra-
tions. They increase their health risks
when they are forced to trade sex for
food, water, money or protection, in-
creasing their chances of exposure to
STDs, including HIV. According to the
UN Special Rapporteur on the Commiss-
ion on Human Rights in Rwanda, “100
cases of rape gave rise to one preg-
nancy” (Human Rights Watch 1996,
24). The number of pregnancies result-
ing from rapes in Rwanda following the
genocide was estimated to be between
2,000 and 5,000. Shame often prevented
women from seeking treatment when
symptoms of STDs appeared. Untreated
cases resulted in painful pelvic infec-
tions that could result in permanent ste-
tility. Shame also kept rape victims from
reporting the crime. Refugee women
and girls experience more abuses and
human rights violations because of
their coping strategies, whereas men’s
ways of adapting to life in the camps did
not expose them to such risks.

Abusive behaviour was at times excu-
cused as “cultural practices” with the
rationализation that such behaviour is
part of the culture. Westerners are reluc-
tant to interfere when the word “cul-
tural” is bantered about. Cultural
taboo against women speaking out,
fear of not being believed, and shame
prevented many women and girls from
reporting human rights abuses.

Discovering Human Rights Abuses
in the Course of a Refugee AIDS
Prevention Program

Rwanda has been hit hard by the AIDS
epidemic. In some sectors of the popula-
tion infection rates have been among the
highest in Africa. In 1992, for example,
testing of pregnant women attending
antenatal clinics in Kigali, Rwanda’s
capital, revealed that more than 30 per-
cent were HIV seropositive (Allen 1992).
One could reasonably expect that infec-
tion rates among refugees were at least
as high as they had been in Rwanda,
although HIV testing was not widely
available in the camps. The need for an
AIDS education and prevention pro-
gram for Rwandan refugees was well
supported.

The task of implementing an AIDS
prevention program for positive behav-
ior change proved daunting in a cli-
mate of resistance and contested power
relationships. The research efforts of
the project sought to provide relevant and
reliable data with which to design tar-
ged approaches for implementing the
AIDS prevention program. Furth-
more, the research tried to find un-
derlying explanations for certain behav-
ior.
Because AIDS research delves into the sexual lives of individuals, AIDS research and research on human rights violations share the very sensitive common ground of examining subjects' intimate behaviours. Unlike other research that lends itself to quantitative methods, research on sexual behaviour normally is constrained to relying on information gathered in qualitative (and more circumspect) ways. In the course of examining women's personal lives we inadvertently found ourselves examining sexual and human rights abuses, which emerged as an inseparable issue. The project provided an invaluable service by establishing safe havens and a climate in which women felt comfortable talking about their problems. Many of the abuses we learned about would never have been discovered had it not been for the project's sensitively reaching out to women and providing a safe place where these topics could be discussed. In particular, the method of small focus group discussions gave women the courage and opportunity to share traumatic experiences that they had never discussed openly. In the baseline Knowledge, Attitude, Beliefs and Behaviours survey (KABB 1994), nearly 70 percent of women surveyed felt they had no one they could turn to for personal advice. One year later, only 38 percent felt such social isolation.

Lessons Learned

This pilot AIDS project was the first of its kind in a large refugee population. We learned that forming small, non-threatening groups and knowing what questions to ask was the way to get women to feel more comfortable talking about rape, coercive sex, and other abusive behaviour. The technique of probing with questions (e.g., do you know any women who have been raped?), rather than asking outright what had happened to them personally, allowed women to respond anonymously. The small groups of six to eight women facilitated discussions of taboo subjects without endangering the participants. Often, spontaneous personal revelations would follow once women felt safe enough to tell their own painful experiences.

The first step towards getting the community to confront the problem of sexual violence was to acknowledge that a problem existed in the first place. At the onset of the project, it appeared that refugees accepted the sexual violence as an inevitable part of life within the camps. Focus groups with men in various sectors of the community were held to learn their views. When the issue was personalized in these groups, relating the abuses to "your wife, daughter, etc.," the community admitted that sexual violence was indeed a real problem and could be handled by the community itself. Such an admission proved to be the first step in community "ownership" of the problem of sexual violence, and practical solutions such as setting up group wood collections, neighbourhood watches, safe areas, etc. began to be discussed. Most importantly, the community unveiled the shroud of secrecy around rape and violence and began to discuss solutions.

Many researchers believe that qualitative data do not command the respect of hard quantitative data. However, as this study shows, qualitative data were likely to yield the richer and more reliable account. Moreover, in sensitive situations such as those surrounding rights violations within the camps, qualitative methods revealed information that would not be found in a standardized questionnaire or survey method. This advantage came not from any inherent advantage of qualitative methods but rather because the situation within the Benaco camp made qualitative methods so susceptible to manipulation that they actively hid certain truths and blatantly distorted others.

Difficulties of Undertaking Research in Refugee Camps

Authors have addressed problems experienced by researchers working with populations of refugees who have suffered unspeakable hardships (Allen 1996; Omidian 1994). Less attention has been paid to the difficulties faced by anthropologists working with refugees accused of violent crimes. Conducting research among a population harbouring known murderers proved incredibly difficult and stressful. Relief workers often lacked conviction helping people who had participated in genocide, and the aid recipients were often suspicious of the efforts made to help them. Such considerations forced researchers and relief workers to make unexpected and uncommon revisions to their field methods (Krulfeld 1994).

The subjects of trust and honesty between those studied and the researcher need to be examined when conducting anthropological research among refugees. Voutira and Harrell-Bond (1995, 209) explore the "locus of trust" in refugee situations. In the Rwandan situation, suspicion of the others' underlying motives characterized many of the encounters between relief workers, refugees and researchers. After a while, some researchers began to question the validity of their own data, gathered as they were from encounters rife with mistrust, manipulation, and, sometimes, outright deceit. However, small focus group discussions circumvented this persistent aura of falsehood and constructed responses and gave many valuable and truthful insights about the daily coping strategies of refugees.

The researcher's motivation and honesty may be called into question. Researchers may exploit refugees by subjecting them to endless questionnaires, surveys, and interviews. In most cases, refugees never have the opportunity to learn the results of research or are often not told why the research is being done. This behaviour is abusive and violates the rights of refugees. A participatory research approach engaged the refugees by first obtaining consensus for the need for information, and secondly, enabling refugees to participate in research design, select the method, carry out the research, and analyze the findings.

Recommendations

Anthropologists working in refugee settings must be ready to expand existing data collection approaches and analytical methods, and explore new ones.
Fieldwork that combines advocacy with research, recording processes of change while trying to influence positive behaviour changes, casts the researcher as an agent of change. This project showed the possibilities of engaging refugees in activities to promote health-seeking behaviour in spite of the many forces working against adopting such positive behaviour styles. What was underestimated was the effect of the militant extremists’ political control and flagrant manipulations in the camps and the brutal consequences on the lives of all—especially women and girls.

Against the backdrop of the genocide and the illicit military buildup and training activities inside the camps, human rights abuses were largely ignored. This research shows that many coping strategies are gender-specific, and suggests the need to examine why men and women responded and adapted differently to life in camps. Relief agencies may use this knowledge to design more effective programs to specifically address the needs of women refugees.

Agencies can enable women to use their skills by providing the type of assistance that will encourage positive behaviour. By being aware of detrimental coping methods and structural design of camps, relief agencies can provide safer refuge for women. At the earliest possible time, women need to be consulted in camp layout design and in the provisioning of community social and health services. Agencies can also set up commodity distributions (food and non-food items) so as to make women the direct beneficiaries. Early monitoring of household livelihood security, along with nutritional surveys that include adolescents, adult women and the under-five population, will provide baselines that can show whether or not women are actually eating the distributed food. Moreover, in order to assure that women refugees have equal access to commodities, women need to be put in decision-making roles in refugee camp management.

In refugee settings where numerous NGOs implement program services, collaboration and partnering will increase their contributions to the relief efforts. Information, survey and questionnaire results and training can be pooled and shared to maximize the impact and maintain cultural appropriateness.

The special physical and health needs of women must be taken into account from the beginning of an emergency. These needs include reproductive health services as delineated in the United Nations High Commissioner for Refugees (UNHCR) manual Reproductive Health in Refugee Situations (1995). Providing HIV/STD prevention and family planning commodities is also essential, especially among populations with high HIV seroprevalence and groups accustomed to birth spacing options. Rape crisis intervention is needed from the start of an emergency situation, and health agencies experienced in trauma counselling and treating rape cases are urgently needed. Above all, refugee services must be accessible; e.g., condoms and child spacing information need to be easily available and visible at food distribution sites.

To help women prepare unfamiliar food, cooking instructions should be provided at food distribution locations. During the first few weeks of setting up a refugee camp, firewood or fuel should be provided until such time as relief agencies can ascertain the safest and least environmentally destructive methods for obtaining cooking fuel. Men need to be organized into wood-cutting teams to reduce the risks for individual women and girls going far from the camps in search of wood. The Community Services sector should facilitate the formation of support networks for women who are not accustomed to being alone in such conditions. Support networks would be empowering for women and, at the same time, reduce the chances that women who live alone will have to resort to coping behaviour which puts their health and human rights at risk.

Conclusion

The relief operation in Tanzania was in response to violence. By not censuring violent behaviour it was perpetuated in many realms in the camps. That the perpetrators of genocide were allowed to set up shop (including arms storage and military training exercises) just across the border from Rwanda, points to the need for the international community (the United Nations, donor governments, and NGO relief agencies) to take a united stance against supporting criminal behaviour. John Shattuck (1996, 171) wrote:

...it is increasingly clear that humanitarian efforts are doomed to fail unless they are accompanied by political efforts aimed at keeping the peace, establishing accountability, and deterring conflict in the long term. One of the greatest tasks facing the international community today is to create institutional mechanisms to respond to this combined and growing pressure of humanitarian and political human rights crises.

It should not have been a surprise that violent behaviour continued inside the refugee camps, especially by those wielding the power over the unprotected, i.e. unaccompanied women and young girls. People who go unpunished for serious violent crimes perceive no constraints against further violent behaviour.

Ultimately, if the relief structure purports to care about human rights, it must ensure that human rights are not the priorities at the onset of the program, not later. The Rwandan crisis defined the new popular term “complex humanitarian emergency.” The enormous and swift influx of refugees into Tanzania and Zaire stunned the unprepared relief community. Relief efforts were concerned with alleviating suffering and providing basic needs—water, food, shelter, and medicine. The logistical problems were extraordinary. A quarter of a million people needed to be fed and housed and it seemed prudent at the time to engage the leadership to organize the distribution of rations. The practice of allowing veritable genocide criminals positions of power in the camps, however, as commune leaders, section heads, food monitors, security guards, sets the stage for the continuation of violence on another level.
To be fair, relief agencies had little or no history dealing with genocide: their mandates are simply to relieve suffering and save lives. Whereas the agencies should not be reproached for their performance in such unfamiliar circumstances, fingers should point instead at governments that would not even use the word “genocide” lest they be forced to fulfil their obligation under international law to intervene.

Situations in camps often prevent women from being able to protect themselves. Women are not inherently weak and vulnerable. Rather, situations arise in which women are unable to act in their own best interests. It is the responsibility of the relief agencies to ensure that they do not inadvertently place women into such situations. These refugee women are relying on the agencies as a source of sustenance in the life-and-death circumstances of the camps.

Knowing where to place the blame should not be the lesson learned from Rwanda. Instead, international organizations and states must urgently seek effective strategies and means to avert conditions provoking the wholesale violence witnessed there. And when relief efforts prove necessary, relief organizations must guard against accidentally providing the climate for violence to continue. In the spirit of humanitarian aid, refugee camps should be places of healing.

References