

Women and Armed Conflict

Helen Hakena from the Leitana Women's Development Agency, in Bougainville Papua New Guinea, where there has been an armed conflict for over a decade describes how young men and women were brought together to speak openly about the use of guns and sexual violence towards women.

The result was a common understanding of each other's fear and a resolve to build awareness amongst the community. A thousand women in black marched against this gendered violence and in opposition to the war.

When asked by the army "Who is your leader?" We said: "All of us are leaders. We all own this march." The soldiers couldn't arrest everyone.

The blockade is now over. UN peacekeepers are helping to disarm the community. Justice through the courts will ensure a short-term check on violence.

But women like Helen Hakena are working for a cultural shift. "We can softly and silently break the cycle of violence by putting women in positions of power," Ms Hakena recounted.

Adapted from an interview by Chris Richards in New Internationalist magazine, October 2002



Women experience armed conflict in diverse ways as victims, survivors, leaders and peacemakers. Violence against women in conflict zones is often an extension of the gender discrimination that already exists in peacetime. Because of their lack of status within society women are systematically excluded from decision-making opportunities, they are often stereotyped as victims and their experiences and contributions are virtually ignored in conflict zones and in nations emerging from war. Despite this women can also play a significant part in peacemaking if they are properly supported and genuinely included.

Far more men than women directly engage in armed conflict, which increases the responsibilities on women to maintain standards of care, health services, industry and agriculture. This work is often unpaid and goes unacknowledged. Women may also participate in conflicts as combatants, nurses, cooks, or sex workers and work as caregivers, nutritional providers, organisers, managers and protectors of men and children.

Women and their dependents in conflict zones are likely to lose access to adequate healthcare, including safe contraceptive methods as a greater proportion of money is being directed into war. Armed conflict often leads to a reduction in formal medical or psychological support for home-based carers, most of whom are women.

Sexual violence against women during conflict is a tactic of war that has reached epidemic proportions. For example, up to 500,000 women were raped¹, many at gunpoint, in Rwanda in 1994.

In addition:

- Women are often raped to humiliate the men to whom they are related (the men are often forced to witness the assault).
- In societies where ethnicity is inherited through the male line, "enemy" women are raped and forced to bear children.
- Women are kidnapped and used as sexual slaves to service troops, as well as to cook for them and carry their loads from camp to camp. They are purposely infected with HIV.

Violent conflicts force women from their homes, and expose them to indiscriminate violence while they search, unprotected, for safe havens. In refugee camps, many displaced women who have often assumed the traditional male roles of breadwinners and family protectors must contend with sexual attack and gun violence as they care for their families. Those in positions of power, including aid workers, often turn a blind eye to violations for fear of compromising their "neutrality."

The risks do not end when the war is officially over; the number of guns in the community increases with returning soldiers, whose often violent behaviour is now directed at women and other family members. Violence by soldiers against their partners and family members rises significantly during armed conflict, and does not dissipate after it ends.

Women's contributions and experience are undervalued in responses to armed conflict and the proliferation and misuse of small arms. After conflict ends women, who may have stepped outside of 'traditional roles,' are often expected to go back to do 'women's chores.'

There is little recognition in international agreements of the impacts of small arms on women's lives, or their contributions to peace building and their specific needs as combatants when demobilised. However, in October 2000, the UN Security Council passed Resolution 1325 on Women, Peace and Security, which urges for women's genuine and equitable participation in peace negotiations in war zones and the aftermath. In support

of the implementation of Resolution 1325, women's organisations around the world are campaigning to:

- Include gender dimensions in small arms and peace-building agreements
- Identify avenues to promote women's participation at leadership levels in discussions and decision-making processes, even in militarised areas
- Address the connection between weapons availability and sexual violence
- Identify and highlight successful strategies implemented by women to limit small arms conflict and determine how they can be replicated in different parts of the world

The Women's Network of the International Action Network on Small Arms aims to support organisations to mobilise, energise, organise, and resist armed violence in their communities and to ensure that the experiences and views of women are adequately represented in decision-making forums.

To join the IANSA Women's Network and find groups working on women and gun violence visit the IANSA Women's Network Portal www.iansa.org/women e-mail women@iansa.org

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¹ *Organisation of African Unity (2000) Rwanda the Preventable Genocide, Report of the International Panel of Eminent Personalities to Investigate the 1994 Genocide in Rwanda and the Surrounding Events.*

In the U.N. Programme of Action on small arms (2001), the devastating effects of small arms conflict on women merit only the briefest mention:

"[g]ravelly concerned about [the] devastating consequences [of small arms proliferation] on children, many of whom are victims of armed conflict or are forced to become child soldiers, as well as the negative impact on women and the elderly."

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