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Rape as a Weapon of Genocide

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Sexual violence against women during war and genocide is a pressing problem. Rape is used as a tactic of war and genocide because of its physical and psychosocial consequences for individuals, families, and communities. The physical and emotional sequelae of individual assaults are magnified when rape is committed on a mass scale, as in Bosnia-Herzegovina (1992–1996), Rwanda (1994), and Darfur, Sudan (2003–present). The victimization of raped women affects the community through the collective responses of survivors and their families, friends, and neighbors. Forced intercourse and impregnation represent a symbolic conquest of the woman by the rapist. This conquest becomes generalized to the whole population as survivors, witnesses, families, and communities internalize rape as an assault on their collective consciousness.

Keywords: rape, genocide, violence against women, sexual violence

Sexual violence against women is abhorrently prevalent in the modern world, and the incidence of rape increases during active conflicts. Within this context, sexual violence may be defined as sexual activity that manifests aggression or causes physical or psychological damage. Rape is a particular type of sexual violence: a penetrative sexual assault. Penetration may occur using an object or a human body part, and it is not limited to vaginal copulation (oral and oral penetration may also be categorized as rape). Men or women can be raped; men or women can be rapists. This analysis focuses on sexual violence and rape against women and girls during armed conflict and genocide.

Within the scope of this article, the term “mass rape” refers to the military strategy of widespread, systematic sexual violence and rape perpetrated intentionally against civilians. Although rape and sexual violence may be perpetrated against any member of the population, including men and children, discussion in this article is limited to the impact of sexual violence against women and girls. This focus on female rape survivors allows the space needed to present a particular set of problems unique to rape of women and girls, such as reproductive control through forced pregnancy. In this analysis, living women who have been raped are referred to as survivors, while those who died are referred to as victims.

Rape has characterized every contemporary and historical war: “rape, pillage, and burn” is a familiar phrase in the modern and ancient vernacular. Common terminology used to discuss sexuality, rape, and war belies the cultural connections between the concept of sexual violence against women and the concept of war. Symbolic conquests are made in the bedroom and the boardroom, while on the battlefield brutal military invasions may be described as rapes. The rules or norms of practice during wartime vary across time and place, but the soldiers’ prerogative to rape conquered women has traditionally been an accepted rule of war. To the victor go the spoils can mean that the victor has “the right to exert violence against women . . . during campaigns of conquest or in the immediate post-war period.”

Aside from the privilege offered to conquering soldiers, it is often assumed that rape occurring in times of war is attributable to the wild abandon experienced by men in the midst of societal collapse. While it is undoubtedly true that some men rape during war or ethnic conflict for non-strategic reasons, including the general breakdown of societal norms for appropriate behavior, rape is intentionally used to pursue military, territorial, social, and political gains during war. Sexual violence is increasingly employed as a tactic in violent conflict because of its destructive effects on individuals, families, and communities.\(^4\)

Feminists and other scholars assert that the act of rape regulates power through sexual means. The rapist’s sexuality is not an end in itself but merely an instrument to inflict damage through sexual means: rapists speak of the experience as an aggressive act of dominance, associated with power, rather than as a particularly sexual act. Because of this dynamic, rape and other forms of sexual violence may be used to regulate power relations between genders, classes, or groups. Sexual mutilation and torture during armed conflict plays a role in regulating social norms and behavior. Sexual violence and rape are powerful social weapons that have been used by government agents and other social movements in the perpetration of genocide and territorial war. The sexual nature of the violence increases its impact because of the cultural and social context in which the rape occurs.

### Rape and Genocide

Sexual violence is often a cornerstone of genocidal campaigns because of its devastating effects on women, families, and communities. Genocide is defined by the United Nations as “acts committed with intent to destroy, in whole or in part, a national, ethnical, racial or religious group.”\(^5\) These acts may include killing, causing serious bodily or mental harm, deliberately inflicting conditions of life calculated to bring about the group's physical destruction, imposing measures intended to prevent births, or forcibly removing children from the group. Rape is a forced sexual penetration that can cause death, lead to serious bodily and mental harm, bring about the physical destruction of the group, and impede births. Thus rape can be considered an act of genocide, and it has been recognized as such by international criminal courts. Patricia Sellers, legal advisor for gender-related crimes at the International Criminal Tribunal for the Former Yugoslavia (ICTY) has stated, “now we can say rape is a crime, a crime against humanity, or a war crime, a constituent part of genocide.”\(^6\) These landmark prosecutions paved the way for future perpetrators of genocidal rape to be held accountable for their actions. The recent UN Security Council resolution on “Women and Peace and Security” (Resolution 1820) draws on the precedents set by previous ad hoc tribunals, statutes, and resolutions on the protection of women from sexual violence during and after armed conflict. This resolution, which was unanimously signed, draws attention to the fact that women and girls are “particularly targeted by the use of sexual violence, including as a tactic of war to humiliate, dominate, instill fear in, disperse and/or forcibly relocate civilian members of a community or ethnic group.”\(^7\) It categorically condemn “in the strongest terms all sexual violence committed against civilians in armed conflicts, in particular women and children,” and refers to previous documents, such as the Rome Statute of the International Criminal Court, that echo this condemnation.\(^8\)

In addition to addressing the obvious consequences for individual women and girls who are raped, the resolution calls attention to the important and often overlooked fact
that sexual violence against civilian populations “can significantly effect situations of armed conflict and may impede the restoration of international peace and security.”

Because ending sexual violence against women and girls contributes to “the maintenance of international peace and security,” the resolution contains a demand for the “immediate and complete cessation by all parties to armed conflict of all acts of sexual violence against civilians with immediate effect.”

Security Council Resolution 1820 clarifies in no uncertain terms that rape and other forms of sexual violence “can constitute a war crime, a crime against humanity, or a constitutive act with respect to genocide.” Sexual violence and mass rape in particular are used as a strategy of genocide because they can bring about physical destruction of the group through the desecration of individuals. Mass rape prevents births within the target group through damage to the reproductive capacities or the social fitness of women; in-group births may be prevented through forced impregnation. Children born of rape are seen by the mother’s community as a soiling the group’s bloodlines, while the perpetrators may consider the woman and the child to have been “ethnically cleansed” through the assault. Many communities believe that the survivor has been penetrated and thus tainted by “the enemy”: a child born of rape is generally considered an enemy or a pariah in the community.

Rape and sexual violence may be particularly destructive when they occur within the context of ethnic cleansing or genocide, and it is necessary to attend to factors that amplify the significance ascribed to these acts. Rape can be a strategy of war, ethnic cleansing, and genocide because it reduces the civilian population through a variety of practical means while instilling fear, submission, compliance, and flight from areas of contested territory. During the Rwandan Genocide, there appear to have been “no specific orders for rape”; however, “innuendo, jokes, and propaganda were interpreted as intended” and provided a license for Hutu men to rape Tutsi women.

The word *kubohoza* (“to liberate”) was used to refer to rape; this word was also heavily associated with the political rhetoric of the extremist Hutu Power movement, indicating the relationship between rape and the social control of Hutus over Tutsis during the Rwandan Genocide.

* Médecins Sans Frontières* (Doctors Without Borders) describes rape as a “weapon used to destabilize or even break a particular ethnic, national, or religious group or to ‘ethnically cleanse’ a whole society.” Survivors, family members, and witnesses tend to avoid traumatic reminders such as the location of the rape: brutal and public rapes remove the desire to return to the areas where the traumatic events took place for large numbers of people at once. When rapes are committed in a widespread and systematic fashion, these assaults on individual women come to represent an assault on the community.

In the context of ethnic cleansing and genocide, the trauma of rape may be intentionally maximized by the perpetrator(s) to cause damage or death and to send a message. Physical abuse or torture, repeated assaults or gang rapes over a period of days or weeks, forced pregnancy and childbirth, the combination of rape with the murder or torture of the survivor’s loved ones, public humiliation of the survivor and her family, and verbal abuse of the survivor and her community contribute to the devastation. Mass rapes are combined with organized slaughter, looting, burning, pillaging, and starvation for exponential impact.

Rape has always been committed during the wars of known history, and it continues to be a pressing problem in modern genocides as its use becomes more widespread and systematic. But women are more than just the spoils of war or the
passive victims of genocide: civilian women are the material that war is waged with, and women may be used in a variety of strategic ways. Many more civilians than soldiers perish in modern wars, and women are “tactical targets of particular significance” because of their role within the family and social structure. Women are singled out as principal targets for the most effective destruction of a culture because of the centrality of their social roles in the family and community.

In military conflicts, physical and sexual abuse of women is part of male communication: displays of machismo are enacted through violence against women who are associated with the target males. The rape of women carries a man-to-man message, showing that the targeted men are not able to protect their women. This male communication is especially salient in cultures that consider women to be the property or the social responsibility of their husbands or fathers. Men may interpret the sexual assault of “their” women as a direct attack on their manhood and their own integrity. In this way, “women are used as political pawns, as symbols of the potency of the men to whom they belong.”

“Memories of wartime atrocities, like all memories, are local; they are embedded in the psyche of individual survivors and witnesses and, through the process of retelling and memorialization, they are deposited in the collective memory of the community.” Rape survivors and the children born of rape evoke these memories for the community, and the community’s desire to avoid or exclude survivors may be partially an attempt to shield itself from the reminder of the cultural defeat and the internalization of the assault of its members as an assault on the community. The experiences of individual women are magnified and become applicable to the whole population through these processes of collective memory, deterioration of family and social structures, and the internalization of the assault against the community by its members.

The Scope of the Problem

It is a challenge to obtain an accurate census of any kind during armed conflict or genocide, and collecting data about sexual violence is fraught with difficulties even under “normal” circumstances. Thus, we do not know exactly how many women are at risk for wartime rape; however, estimates reveal alarming trends for women’s health and mental health in the context of global violence. In contemporary wars and genocides, mass rape is used as a strategy to leave vast numbers of severely traumatized survivors in their wake.

Sexual violence and rape occurred during World War I and were prevalent during World War II. The Nazis are reported to have branded some women with the inscription “Whore for Hitler’s troops,” and it was common for persecuted women to be raped or sexually assaulted in concentration camps and elsewhere. The Tokyo Tribunal stated that the Japanese Army raped between 20,000 and 80,000 women during the “Rape of Nanking” in 1937 and enslaved 100,000 to 200,000 “comfort women” who were forcibly imprisoned and raped to serve soldiers’ sexual needs during the war. Soviet soldiers reportedly raped more than 2 million German women during the final stages of World War II, and hospital statistics indicate that between 95,000 and 130,000 women were raped in Berlin alone. Other modern conflicts have featured mass rape, but it is difficult to obtain credible statistics documenting these atrocities. One well-documented crisis of mass rape occurred in 1971 in Bangledesh, where it is reported that 200,000 women were raped during conflicts that erupted that year.

An estimated 25,000 to 50,000 women were systematically raped during the Balkan Wars of the 1990s; it has been reported that up to 20,000 of these women were
forcibly impregnated and that more than 5,000 “bad memory babies” were abandoned on hillsides or killed in the aftermath. The 1994 Rwandan Genocide left an estimated 250,000 to 500,000 rape survivors in a single summer; more than 2,500 infants were born the following spring and abandoned. This continues to be a pressing issue, as mass rape and genocide have recently been reported in the Darfur region of the Sudan and in the Democratic Republic of the Congo (DRC). Reputable organizations such as Human Rights Watch, Amnesty International, and UNICEF have been describing the dire situation for women in these conflicts for several years, yet both conflicts continue to claim women’s lives.

Rape has been recognized as a war crime, as a crime against humanity, and as an act of genocide because of its use in conflicts including the collapse of the former Yugoslavia (1991–1999), the Rwandan Genocide (1994), and the current situations in Darfur, Sudan (2003–present), and the DRC (1996–present). These cases are highlighted here because they are well-documented, contemporary ethnic conflicts with a particularly sexualized method of perpetration. In all cases, perpetrators used mass rape, forced impregnation, and sexual torture as strategies of cultural control over ethnically different populations.

Rape during Genocide and Armed Conflict
Rape does not have constant functions over time and in all societies, because sexual violence is highly contextualized by individual, situational, social, and cultural factors. It is important to contextualize the meaning of rape in terms of these social and cultural realities, as well as in terms of the individual and situational factors that mediate the function of sexual violence. Most feminist discourse on rape has focused on macro-system factors such as patriarchy and misogyny, but it is important to investigate, describe, and discuss the impact of other factors. The social systems and structures that form the framework of society influence all aspects of human behavior: factors such as poverty, low socioeconomic status, unemployment, and isolation of women and families have been linked to increased prevalence of sexual violence against women. A nested, ecological model conceptualizes rape as a multifaceted phenomenon grounded in the interplay among personal, situational, and sociocultural elements.

Underpinning every community or group is a broad set of cultural values and beliefs that “permeate and inform the other three layers of the social ecology,” operating through their influence on the other levels. A cultural ethic of solving problems with violence predisposes communities to high levels of violence against women, and particularly of sexual assault. The context and history of war can provide a cultural framework in which the primary strategy used to resolve conflicts is violent or aggressive behavior, and civilian women become targets for sexual violence in accordance with this cultural principle of violent problem solving. Active genocide can be considered a period during which the cultural value of violent problem solving is most strongly enacted and reinforced.

Sexual violence on the scale of mass rape could not be explained without some accounting for the anger and hate directed against the women who are targeted for these attacks. Theorists have asserted that the rape of women by men is made possible by the undercurrent of anger, aggression, and hostility toward women that is part of the cultural landscape. Rigid gender roles have been linked to a high incidence of rape in a culture or community; similarly, low levels of rape are related to a lack of strongly defined gender roles. A sense of male entitlement or ownership of women is another
predictor of high levels of violence against women. Culturally ingrained norms regarding male dominance over women allow men to rape without social consequences. In cultures that generally approve of physical punishment for women (in many societies, it is perfectly acceptable for a man to hit a woman for trespasses ranging from forgetting a meal to committing adultery), the prevalence of rape and sexual assault is correspondingly elevated.

Wartime rape has been strongly linked to constructions of masculinity offered to soldiers and combatants. Social constructions of masculinity are essential to any discussion of sexual violence against women, and constructions of masculinity during wartime are particularly salient. Military service functions as a rite of passage for many young men, through which they attain an adult male status and identity. A military sociologist cited by Ruth Seifert describes how the values associated with the ideal of sexual virility in the exclusively masculine surroundings of the army become primary for the soldier’s conceptions of himself, as well as for his social status.31

The social context also provides soldiers with norms that maintain perceived masculine status by the other soldiers. These social values and ideals define the identity of soldiers, and create inner tensions because the soldier is constantly confronted with threats to masculinity (such as emotionality, empathy, horror, fear) and must preserve the construction of masculinity in the face of these “non-masculine” experiences. These cultural conceptions of masculinity as sexually aggressive may increase the likelihood of violence against women because of the normalizing of male dominance and aggression, and the desire to be accepted by other sexually aggressive males. It has been shown that males with sexually aggressive peers are more likely to report having raped or sexually coerced a woman.32

Sexual violence includes attributes associated with hyper-masculinity (strength, power, forcefulness, domination, and toughness), so the act of rape may be considered a behavior that supports and validates this conception of masculinity. In some social groups, particularly in the context of war and ethnic conflict, rape can also function as a ritualized validation of a soldier’s male status and identity. The hyper-masculinized version of appropriate behavior for men links power and sexuality with violence; these linkages can have dangerous consequences for women, who may be the targets of “masculine” displays of sexual violence and domination. Relating masculinity to dominance or toughness (which are usually important constructions of a soldier’s masculinity) is associated with cultures in which peacetime rape is prevalent. It stands to reason that this value of hyper-masculinity could become exaggerated during an active conflict and could increase rates of sexual violence against women. Social pressure may function to spur on men’s hyper-masculinized acts of sexual violence in an attempt to prove their manhood or to obtain the group’s esteem. Analysis of gang rapes provides further corroboration of the role of peer pressure and social norms of masculinity in the etiology of rape. The main purpose of gang rape appears to be proving one’s masculinity to the group through the display of sexual violence.33

Attachment to other male peers who encourage abuse or violence against women is a predictive factor for males who abuse women sexually, physically, and psychologically. In this way, the macro-system value of male dominance and the situational factor of peer pressure (among peers who have all been exposed to the same violent cultural construction of manhood) have a combined influence on individual men’s choices about whether or not to participate in sexual violence. This provides a strong rationale for the concept that men rape during war because of peer pressure or social
norms relating to violence against women, and sexual violence in particular is a way to demonstrate masculine power to the group.

Acknowledging the influence of situational factors or personal history in no way exculpates the perpetrators of violence, nor does it reduce the salience of macro-level factors such as cultural notions of masculinity and male dominance over women. A comprehensive analysis of sexual violence must recognize the primacy of culturally constructed messages about masculinity/femininity and gender/power roles while also accounting for social, situational, and individual factors. Those who have experienced abuse, witnessed violence, and experienced previous trauma during childhood are both more likely to perpetrate sexual violence and more likely to be victims of sexual violence. Individual factors such as upbringing, family of origin, genetics, and previous experiences have been linked to levels of resilience and of post-traumatic stress.

**Effects of Rape**
The simplest and most direct way in which rape exerts control over communities is through its impact on population demographics: mass rape directly decreases population because many women are raped and beaten to death. It is common for a woman to lose consciousness and die during or shortly after rape. Survivors abandoned in varying levels of consciousness and distress may die of exposure, dehydration, or starvation or from animal attacks. Many are beaten to death or shot after being sexually assaulted; some victims even beg their abusers to kill them. Many survivors of genocidal rape commit suicide following their ordeal; those who become pregnant often die in an attempt to abort the fetus. It is also common in some cultures for a woman to be killed by her own family or community after experiencing rape, because of the shame the assault brings on the family and the community.

Many cultures consider rape worse than death, because the survivor lives through the experience, causing further trauma and suffering to the individual. Many societies consider a woman to be destroyed after a rape has occurred, so women are not encouraged to heal or to consider that their lives can continue after such an assault. Rape is used during genocide because it accomplishes two goals at once: the woman is effectively “killed,” or loses the will to live, yet goes on living among her people as a constant reminder of their downfall.

**Infection and Illness**
Infections and illnesses such as HIV, hepatitis, and syphilis are common in survivors of wartime sexual assault. Survivors are also more likely to experience acute and chronic health problems such as diabetes, asthma, and arthritis. Somatic complaints, especially unexplained abdominal pain, are common among survivors of sexual assault. Sexually transmitted diseases take on a particular salience during ethnic conflict and genocide. Transmission of HIV through mass rape may be used as a strategy of population reduction, and unintentional spreading of HIV is also facilitated by mass rape. The virus may be transmitted at elevated levels when violent sexual attacks involving heightened contact with blood and other bodily fluids occur on a large scale. In Rwanda, an estimated 70 to 90% of rape survivors have contracted HIV/AIDS. Given that more than 500,000 women were raped, the health crisis created by this epidemic is staggering. Advocacy groups argue that the 1994 genocide never ended: it is still claiming victims today.

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Injuries
Sexual violence can have numerous medical consequences, including internal bleeding, fistulas, incontinence, and life-threatening injuries. Survivors’ health and reproductive capacity may be damaged by physical injuries received during rape, including torn vaginal walls that result in chronic fecal or urinary incontinence through the vaginal canal. In all the contexts discussed here, extreme forms of genital mutilation were a common feature of rape; their purpose was to cause pain and suffering as well as to create permanent sexual scarring that would make the women unacceptable as wives in their own communities. Breasts were often cut or severed (this practice was particularly prevalent in Rwanda), and many women were gutted after their assault. These sexualized scars made it impossible for survivors to hide the fact that they had been raped. Some of these women survived, but there is little opportunity for proper medical treatment or reconstruction. In areas where sanitation is questionable, such injuries increase survivors’ vulnerability to infections. These physical consequences of rape and sexual torture are painful, embarrassing, and stigmatizing. Often survivors’ future reproductive capacity is affected by violent physical injuries received during their rape, which has significant consequences for the community’s ability to repopulate.

Pregnancy
Children of rape and the mothers who bear them are stigmatized and socially punished within their own communities. The children are rejected because they are viewed as the “enemy,” thanks to their paternity and the circumstances of their conception. Women and their communities reject babies born of rape because they represent the humiliation of the mother and of the culture itself. Sometimes communities will re-accept a raped woman if she aborts, abandons, or destroys her baby.

An estimated 5,000 infants were abandoned or killed in the aftermath of genocidal rape in the Balkans. An estimated 2,500 “bad memory babies” were born following the 1994 Rwandan Genocide, and many were abandoned. Many pregnant survivors seek abortions, but obtaining an abortion is difficult in times of war and in conservative, religious countries. Rape resulting in pregnancy during war exposes women to potentially unsafe abortions and to traumatic, complicated childbirths in areas without adequate medical care.

Pregnancy may be an unintended consequence of rape, but forced impregnation may also be used as a strategy of cultural control. The intention of forced pregnancy is “to alienate women’s reproductive as well as productive rights [through] rape to impregnate, making women bear children for the ‘enemy’ community” and making them unfit or unable to bear children of their own ethnicity. Symbolically, forced pregnancy represents the conquest of the woman’s body by “enemy sperm.” Impregnated women cannot help delivering the raping culture’s message of conquest, as they cannot help delivering the children of rape, and they are condemned for both.

Forced pregnancy was a central strategy of the Serb forces during the genocide in Bosnia-Herzegovina (1991–1995), with detention camps established for the purpose of sexually assaulting women. Bosnian rape survivors frequently reported Serbian rapists “triumphantly jeering after reaching orgasm that the woman was now carrying ‘Serb seed’ and would produce a ‘Serb baby.’” Pregnant Muslims were freed from rape camps with the announcement, “‘You’re going to have a Serb baby’… Buses filled with women in the sixth, seventh, or later month of pregnancy [were] sent back over enemy lines, usually with cynical inscriptions on the vehicles regarding the children about to
be born.” These forcibly impregnated women were living symbols of the conquest: beaten and raped, barely alive, their abdomens swollen with so-called Serb babies, they stumbled home only to be discarded, shunned, or killed.

Rape with intent to impregnate is a strategy used by the Janjaweed and military officers perpetrating mass rape in Darfur. Sudanese children’s ethnicity is derived solely from their fathers; it is believed that an Arab father produces an Arab baby. This symbolic and cultural information becomes a weapon of genocide when applied in this manner. As one aid worker in Darfur has stated, “Everyone knows how the father carries the lineage in the culture. They want more Arab babies to take the land.”

One survivor reported that the Janjaweed said to her, “Black girl, you are too dark. You are like a dog. We want to make a light baby... You get out of this area and leave the child when it’s made.”

Psychosocial Problems
Sexual assault can affect long-term physical, psychological, and relational health, and further inquiry will continue to elucidate the relationships between resilience, vulnerability, and contextual factors in the development of the traumatic response. Mass rape causes psychological and social problems for women and their families, but it is difficult to assess the true level of devastation left in the wake of these brutal campaigns. Assessment or intervention services may not be available to women in war zones, refugee camps, or internally displaced persons camps.

Mass rape survivors have been exposed to “interactive traumatic stressors” such as detention in rape camps, forced pregnancy, death of loved ones, threats to survival, torture, war-related illnesses or injuries, “loss of home and community,” “stresses of migration and dislocation, cultural shock, lack of familiar support systems, and fear of deportation.” The survivor’s sense of structure and safety may be shattered by the compound traumas she has experienced. Rapes may be combined with physical abuse and torture, starvation, verbal abuse, and other forms of domination and humiliation in order to maximize the trauma to the survivor. Weapons such as guns, axes, and whips have commonly been used to intimidate and threaten women in Darfur, while machetes and AK-47s were wielded in Rwanda.

The survivor’s psychological response may be influenced by the context and level of brutality of the assault. Rapists often use dehumanizing epithets featuring racialized or gendered slurs directed at the raped woman and her community. In Darfur, “slave” and “black slave” are common ways the perpetrators refer to African women from the Fur, Masalit, and Zaghawa ethnic groups; in Bosnia-Herzegovina, Muslims women were commonly called “Turks” and Croats were called “Ustasha whores.” This form of ethnically oriented verbal abuse increases the suffering of the raped woman and is considered a message to others of her group who may be forced to witness the assault.

The degree to which survivors’ mental health is affected by the trauma of sexual assault varies by severity, type, frequency, and degree of physical injury and perceived threat to life, as well as varying based on whether the survivor received medical or mental-health intervention. The biological outcome of rape may influence the severity of psychological symptoms: rape without impregnation, rape resulting in pregnancy, and pregnancy followed by abortion or by childbirth result in differing levels of emotional trauma for survivors. Pregnancy followed by childbirth is associated with the most severe levels of distress.

Increasingly severe levels of impairment may develop from the combination of sexual assault and a “lifetime history of multiple traumas.” The intersections of
gender, class, ethnicity, and previous victimization history, combined with exposure to a "pervasive toxic culture" that condones violence against women, may increase the traumatic response. Individual and contextual factors such as genetics, resilience, and social support may mediate the development of psychological problems following exposure to trauma.

Dissociation, psychotic symptoms, sexual dysfunction, and self-harming behaviors are commonly reported by survivors. Sexual abuse has been associated with the development of borderline personality disorder or complex PTSD. Elevated levels of substance abuse, depression, eating disorders, and anxiety have been noted. Survivors are also likely to experience other types of psychosocial distress, including isolation; difficulty relating to others; low self-esteem or self-worth; and feelings of objectification, guilt, and self-blame.

Post-traumatic Stress
The diagnosis of post-traumatic stress disorder (PTSD) was adopted in 1980 to describe the condition of Vietnam veterans who reported great psychosocial distress long after the traumatic events causing distress had ceased. The most essential feature of post-traumatic stress is exposure to a traumatic event in which the "person experienced, witnessed, or was confronted with an event or events that involved actual or threatened death or serious injury, or a threat to the physical integrity of self or others." This traumatic stressor is generally outside the range of typical human experiences. Although the sequels of sexual assault are influenced by the social and cultural context in which the assault occurs, one of the persistent characteristics of rape survivors is the development of these re-experiencing, avoidant, and arousal responses to post-traumatic reminders of the event.

Survivors of sexual assault constitute the largest group of people currently diagnosed with PTSD, and rape is among the most salient PTSD risk factors. The American Psychiatric Association notes that "survivors of rape, military combat and captivity, and ethnically or politically motivated internment and genocide" have been found to have the highest rates of post-traumatic stress disorder. People who endure repeated, prolonged trauma or imprisonment are particularly vulnerable to the development of intrusive symptoms that may linger for decades after the experiences, as has been demonstrated among groups of Korean War prisoners and survivors of Nazi concentration camps.

Witnesses to rape and torture may also develop post-traumatic symptoms or PTSD, particularly if they have a relationship with the survivor/victim or the perpetrator. The terrorizing effects of rape are often exploited when perpetrators force family members or others to witness acts of sexual violence and torture. A person diagnosed with PTSD may have "witnessed or been confronted by a traumatic event," without directly experiencing a threat to him- or herself.

Public rape was regularly used in Bosnia-Herzegovina as an act of community intimidation, because "the psychiatric consequences in [witnesses] can be very pronounced, sometimes even greater than in primary victims" of rape. Rape committed in front of the survivor's immediate family results in severe trauma for both survivor and witnesses; public violence and practices of sexual mutilation exert extreme social pressure on local populations. Family and community members may have varying responses to witnessing rape, and they often reject rape survivors and children born of rape because of their power to remind witnesses of the collective trauma.
Traumatic Reminders Causing Flight

One of the hallmark features of PTSD is the sufferer’s tendency to avoid reminders of the traumatic event, including places, people, and things that are associated with the trauma. Survivors and witnesses of rape have a tendency to avoid the location where the rape occurred. The perpetrators of these rapes use the common knowledge that people tend to avoid places where terrible things have happened to them to encourage flight from areas of contested territory. In this way, rape can be used “as an instrument of forced exile” to drive the population from certain areas. Perpetrators of wartime rape may deliberately maximize the level of trauma to survivors and witnesses in order to disperse the civilian population.

Rape causes survivors, witnesses, and other community or family members to leave their homelands. Bosnian women were raped in public in order to “spread fear and induce the flight” of non-Serb inhabitants of contested lands: it was common for the Serb-controlled Yugoslav National Army (JNA) to enter a village and rape every girl and woman in succession, from the youngest child to the oldest grandmother. Survivors and witnesses do not wish to return to the scene of the crime, so public displays of sexual violence initiate mass exodus from contested territory. After the genocides in Bosnia and Rwanda, some perpetrators have continued to brutalize their past victims, and many survivors are simply too afraid to return to their homes because of what they experienced or witnessed there. Others have relocated to the areas where the crimes occurred, and a large number report frequent traumatic reminders.

Public rapes are common in Darfur, with family members or the wider community witnessing the rape and torture. Anyone who intervenes may be beaten, stabbed, or killed. The rape survivor may feel betrayed by the witnesses who failed to protect her; those who witnessed and did not defend the raped woman may feel shame, which they may express as aversion, anger, or even hatred toward the survivor. Exposing the community and family to the rape of women magnifies the intensity and complexity of the traumatic response while exponentially increasing the number of survivors who may be psychosocially affected by these events.

Social Problems Associated with Post-traumatic Stress

Survivors of sexual assault often experience social problems, which may be related to the psychological trauma of rape. Some of the symptoms of PTSD have an impact on the survivor’s ability to relate socially. Among the symptoms listed as criteria for a PTSD diagnosis are “feelings of detachment or estrangement from others,” “markedly diminished interest or participation in significant activities,” “restricted affect,” “a sense of foreshortened future,” “irritability or outbursts of anger,” and “hypervigilance.”

Survivors may experience dramatic mood swings or changes in personality because of the profound sense of loss and grief that they experience; these changes can be very upsetting for family members and friends, who may withdraw from the survivor in the aftermath of these difficult mood swings or negative encounters. Sometimes the survivor’s family members, friends, or neighbors do not comprehend the magnitude of the assault’s impact on the survivor. This lack of understanding or awareness of the traumatic response on the part of friends and family can make survivors feel isolated and misunderstood. Because of the impact of these symptoms on their social functioning and the reactions of others to their changed behaviors, survivors with
PTSD may have difficulty in reestablishing relationships, and particularly intimate relationships, after the violence.

Sexual assault is associated with “increased difficulties across several domains of interpersonal functioning.” Survivors tend to report smaller support networks, more social isolation, and less emotional support than other women. Survivors often report difficulty establishing and maintaining trusting relationships after the rape, and this difficulty with trust may manifest itself in social isolation or self-harming behaviors.

Within the realm of romantic and sexual relationships, this lack of trust can be particularly problematic. Clinicians have reported that female survivors of male-perpetrated rape may identify all males with torturers and rapists. Sexuality may be perceived as a threatening reminder of a brutal victimization, and the survivor may be unwilling or unable to have sex with her husband or partner. One survivor, whose perspective echoes those of many others, reported that “for me there’s no such thing as sex anymore; that’s all in my past.”

PTSD symptoms may decrease or eliminate interest and participation in sex, which can cause difficulties in intimate relationships. Sexual trauma, in particular, may lead to an aversion to sexuality in both survivors and witnesses of rape. Because aversion to sexuality is not a desired characteristic for wives in most cultures, this may place survivors at risk for rejection by current or prospective spouses. Decreased interest and participation in sex also reduces the likelihood that a woman will give birth to children within her community.

Mass rapes may be designed to maximize trauma to survivors, witnesses, and the targeted community as a whole. Sexual violence perpetrated in public or on a large scale is “intended to disable an enemy by destroying the bonds of family and society” through the perpetration of trauma and stigma. Through these social means, the psychosocial consequences of rape can have practical and long-term effects on the community and its members.

Consequences for the Community
During genocide and ethnic conflict, women become “prime targets because of their cultural position and their importance in the family structure.” The trauma of rape may prevent the survivor from assimilating back into her previous roles in her family or society, which changes the community on the micro, meso, and macro levels. “Women hold communities together, and attacking them contributes to the defeat and disintegration [of the community] in a number of ways”—including the collapse of basic societal structures, beginning with the family unit.

The Stigma of Rape
Sexual violence is considered shameful in many cultures, and survivors are often shunned or punished for being raped. A woman’s sexual virtue is highly valued by the community as a marker of the purity and prestige of her family. When a woman is raped, the cultural meaning behind that experience indicates that she has been “spoiled,” which reflects poorly upon her and on her family. As one survivor said, “After rape, you don’t have value in the community.”

To avoid the stigma associated with rape, survivors may attempt to conceal their assault from others. Three adolescent survivors in Darfur reported attempting to conceal their rapes by telling neighbors about the Janjaweed attack without mentioning the sexual assaults. Assumptions and gossip spread. It was clear that
neighbors knew the girls had been raped, because they changed their treatment of the girls. One of the survivors told a journalist that when people discover a woman has been raped, “They scorn you. They laugh at you … They look at you as if you are strange, as if they haven’t seen you before.”

The perpetrators of genocidal rape use their knowledge of the social consequences of sexual assault to maximize damage to the target population. Rapes are conducted in such a way that they are difficult for survivors to conceal—for example, publicly, in broad daylight. Women who become visibly pregnant after rape have no chance to hide what happened to them, and this is one of the intentions of forced pregnancy: to compel the woman to suffer the stigma her community deems appropriate for a rape survivor.

Survivors and children of rape remind their families and communities of their collective defeat, which can be both demoralizing and terrifying. The family or community may cast the woman or child out, abuse them further, or even kill them—causing deeper emotional damage to all involved and tearing at the fabric that holds families and the community together. Perpetrators of mass rape maximize population-reducing effects over time by taking advantage of the social stigma of rape. The consequences of this stigma against rape survivors effectively render a generation of women unlikely to bear children within their own community.

In many cultures, particularly those espousing a patriarchal value system, survivors of rape are not considered acceptable wives. Survivors may be cast out if they are married at the time of the assault, especially if their injuries affect their reproductive capacity. Care of the children and the household is the sole responsibility of women in these cultures, and injured or traumatized women are considered less valuable as wives. One survivor from Darfur described how excited she had been about her engagement until she was raped; her fiancé then said he would not marry her, because she was “disgraced and spoilt…. It is the wors[t] thing.”

The stigma of rape is a crushing burden because of the associated social and economic disadvantages. Unmarried women do not have the financial and physical protection that married women do in Darfur, Rwanda, the DRC, and Bosnia-Herzegovina, as well as in many other areas; this vulnerability is exacerbated by active conflict and genocide. In Darfur, because of the widespread sexual assaults of young women and girls, families worry that they cannot protect their young women’s sexual virtue, upon which their basic safety depends. As a result, parents attempt to marry off their daughters early in order to preserve the family honor. The “bride price” in the IDP camps has decreased to the point that families will marry their daughters to anyone who can scrape together minimal compensation for the family. This exposes young women and girls to potentially abusive spouses, early sexual intercourse (with their husbands), and early marriages with few choices. Since marriage is technically no protection against rape, the early marriage of daughters may not ultimately protect the family’s honor if those daughters are raped after marriage and subsequently abandoned by their husbands, which is common.

Mass rape during genocide draws upon existing gender dynamics and cultural factors to increase the damaging effects of the assault. In patriarchal cultures, women are considered “symbols of the potency of the men to whom they belong.” The act of rape robs the husband of his control over his wife’s sexuality during the rape, but it also robs him of the ability to sexually enjoy his wife afterward, because she may be injured, traumatized, or pregnant. In this way, the male “is emasculated (and therefore dehumanized, rendered powerless) by being denied sole access to
his woman.” This has been described as “the final symbolic expression of the humiliation of the male opponent.”

During the Bosnian genocide, Serb forces made use of cultural information about women’s roles to maximize the impact of the psychosocial trauma of rape. It was known that a Bosnian husband would divorce his wife if she was raped, and that an unmarried woman who was raped would not be considered eligible for marriage. Regardless of the women’s utter lack of complicity in their sexual victimization, “wartime rape victims’ husbands held their wives responsible for the deed or ended their relationships because of the rape”: a Muslim physician in Bosnia reported that “if a man has even the slightest suspicion that his wife may have cooperated voluntarily, the marriage is over.” These social rejections of rape survivors have long-term reductive effects on population.

Deterioration of Family and Societal Structures
Sexual violence is perpetrated against women during ethnic conflict because women “keep the civilian population functioning” through their roles as mothers, wives, and caretakers. The suffering inflicted may cause permanent psychological symptoms or have social consequences that affect women’s ability to relate, work, or care for their children. Because large numbers of individual women experience the deterioration of the familial structures in their lives, the social structures of the community crumble as more and more individual women become traumatized. Thus the collapse of community structures begins with individual and familial collapse.

In these ways, rape leads directly to the destruction of family and community structures that is the ultimate goal of territorial war. Survivors of rape broadcast a message of defeat to their families and communities, which can both demoralize and terrify them. Family members may cast the survivor out or abuse her further, causing deeper emotional trauma and tearing at the fabric that holds the family and the community together.

During war and ethnic conflict, rape acquires a deeper meaning: rapes committed in war may be intended to destroy the raped woman’s culture or community. The deconstruction of culture—and not necessarily the defeat of an army—can be considered one of the primary goals of rape warfare. Individual rapes translate into an assault on the community through the social emphasis placed on women’s sexual virtue: the shame of the rape humiliates all those associated with the survivor. Combatants who rape during war often explicitly link their acts of sexual violence to this broader social degradation through their words and actions.

When a woman is raped in the context of war, ethnic conflict, or genocide, the symbolic message to the woman’s community is one of territorial conquest. The culture has been symbolically “penetrated” by the enemy, and this is demonstrated through the physical penetration of its individual female representatives. The humiliation of a culture through the systematic violation of women is the primary goal of mass rape during ethnic conflict.

The female body functions as a symbolic representation of the community: sexual violence inflicted on women damages the “physical and personal integrity of the group.” The “rape of the women in a community can be regarded as a rape of the body of that community,” and this symbolic assault is very much an intended consequence of genocidal rape. It has been argued that men rape during war and genocide “because the acquisition of the female body means a piece of territory conquered” in symbolic terms: forced sexual penetration (especially when combined with ejaculation and
insemination) represents conquest of the woman by the rapist and, by symbolic extension, dominance of the raping culture over the raped culture.\textsuperscript{81}

Mass rape furthers the goals of genocide because this kind of violence can destroy a group “in whole or in part.”\textsuperscript{82} Acts of mass rape are “deliberately calculated” to bring about destruction and death, to impede in-group births, to undermine family structures, and to severely traumatize the target population. Rape causes serious bodily harm, often permanently disabling survivors or destroying their reproductive capacities. The recent UN Security Council Resolution on “Women and Peace and Security” explicitly links sexual violence to the goals of armed conflict and genocide and publicly acknowledges of the role of rape in war.

Mass rape exists in the modern world: women and girls are being raped, tortured, and killed today in Darfur, in the DRC, and elsewhere. Because we are aware that people are suffering and dying, we must respond quickly and forcefully to protect their human rights. It is imperative that we, as genocide scholars and as human beings, work to protect these women from further harm and help to restore their lives, their human rights, and their dignity.

Notes
3. Ibid.
8. Ibid., 2.
9. Ibid.
10. Ibid.
11. Ibid. 3.
16. MacDonald, “Hate Rape.”
30. Ibid., 277.
31. Seifert, “War and Rape.”
32. Ibid.
33. Ibid.


38. Cahill, *Rethinking Rape*.


42. Boose, “Crossing the River Drina,” 72.


45. Ibid.


54. Ibid.


57. Stover, *Witnesses*.

58. Boose, “Crossing the River Drina”; Swiss and Giller, “Rape as a Crime of War.”


61. MacKinnon, “Rape, Genocide, and Women’s Human Rights.”


63. Stover, *Witnesses*.

64. APA, *DSM-IV-TR*, 467.


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68. Swiss and Giller, “Rape as a Crime of War,” 613.


70. MacDonald, “Hate Rape,” 12.


72. Ibid.

73. Amnesty International, *Darfur*.


75. Cahill, *Rethinking Rape*, 18–19.


78. Copelon, “Surfacing Gender,” 207. See also Amnesty International, *Darfur*; MacDonald, “Hate Rape.”


80. Ibid., 64.
