Ending the Cycle of Social Stigma in Post-Conflict Situations

The role of the ICC Trust Fund for Victims in removing social stigma against victim survivors of sexual violence

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Master of Science in International Relations and Diplomacy

Master Thesis

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S1331701

10 June 2015

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Word Count: 15,679

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List of Acronyms

DDR	Disarmament, Demobilization, Reintegration
ICC	International Criminal Court
ICRW	International Center for Research on Women
ICTR	International Criminal Tribunal for Rwanda
ICTY	International Criminal Tribunal for the former Yugoslavia
JRP	Justice Reconciliation Project
LRA	Lord's Resistance Army
MENA	Middle East and Northern Africa
SGBV	Sexual and Gender-Based Violence
TFV	Trust Fund for Victims
UK PSVI	United Kingdom Preventing Sexual Violence Initiative
UN	United Nations
WAN	Women's Advocacy Network

CHAPTER 1: INTRODUCTION AND BACKGROUND

Introduction

Rape and other forms of sexual violence have been present in conflict since wars have been documented. Until recently, the lack of recognition of the effect of these crimes has led to the overarching belief that sexual violence is a factor of conflict, and has led to rape being used as a 'weapon of war' targeted at punishing communities and also as a form of ethnic cleansing (United Kingdom Preventing Sexual Violence in Conflict Initiative[1], 2014, p.15).

What is most overlooked in conflict situations is the long-term affects of sexual violence. Once the conflict has ended and peace is restored, the impact of sexual violence remains. Long-term effects of sexual violence include psychological and social consequences, marginalization, and social stigma (UK PSVI, 2014, p.15). This paper explores the effect of social stigma against victims of sexual violence in conflict situations and its role in elongating cycles of violence and risking long-term peace and stability.

Social stigmas are community-based norms regarding the victims of sexual violence (Calude et al., 2013, p.1.) Most communities experiencing conflict today, central Africa and the Middle East and northern Africa (MENA) region, have engrained gender roles that teach aggressive sexual behavior, and in fact applaud it, within boys from a young age (De Brower, 2007, p.211). Correspondingly, the community has the pre-existing norm that labels victims of rape and other forms of sexual violence, such as sexual enslavement and forced pregnancy, as outcasts (Claude et al., 2013, p.1). Many women returning to their communities after time in captivity of a rebel group are no longer allowed into their community, or if they are, they are no longer able to remain in the same position within the community that they once held. More so, they are engrained with a sense of self-blame for the crimes committed against them, feeling as if they are not worthy of inclusion. Women who return with children, many of which are born as an effect of rape, are highly stigmatized and their children are seen as

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[1] Citation hereafter (UK PSVI, 2014, p.#)
[2] Citation hereafter (TFV, 2012, p.)
[3] Citation will hereafter be referred to as (ICRC &TFV, 2013, p.)
[4] 2,048 at Caritas, Gulu and 3,118 at GUSCO, Gulu (Pader et al., 2007, p.8)

the children of rebel groups and are denounced and ostracized from their community (UK PSVI, 2014, p.16).

This, in turn, leads to serious long-term and short-term effects on the community as a whole. Stigma creates a cycle of violence at an individual and community level and begins a cycle of violence that can deteriorate any efforts towards peace and security in the situation.

In 2002, with the ratification of the Rome Statute and creation of the International Criminal Court (ICC)[2], the Trust Fund for Victims (TFV) was created (TFV, 2012, p.5). The TFV is the first institution of its kind with the main goal and objective to assist victims of ICC situations directly (TFV, 2012, p.5). Since 2008, the TFV has launched three field missions aimed at assisting victim survivors head on (TFV, 2012, p.5). The field missions set in Northern Uganda and DRC have 3 programmes aimed at addressing the effects of sexual violence (TFV, 2012, p.5).

In 2014, the Trust Fund experienced a relatively unprecedented influx in voluntary donations, 5 million euros as of November 2014, from State Parties to the Rome Statute. It is through these donations that the TFV is able to fund its field operations. With over 50% of these funds specifically earmarked to address the harm suffered by victims of Sexual and Gender Based Violence (SGBV), the TFV is experiencing a period where action is possible (TFV, 2014(b), p.8). Which begs the question, what to do with these funds? Where should they be used? What is the best way to address the long-term effects of SGBV?

This thesis will assess which of these programmes is the best approach for the TFV to utilize in its field mission in northern Uganda based on the programmes already set in place on the ground, and supported by the past successes of the programmes implemented by the TFV and other implementing organizations. Through exploring the previous academic work on the subject, a framework of individual and community level approaches will be utilized throughout. A comparative case study of Kitgum and Gulu districts in northern Uganda will be set-up and analyzed from the perspective of three TFV approaches and their ability to remove social stigma. This analysis will be supported by primary

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[2] Citation hereafter (TFV, 2012, p.)

sources including reports published bi-annually from the TFV, as well as four interviews with experts in the field. The thesis will conclude by discussing the analysis and offering the best programming approach utilized by the TFV thus far in northern Uganda as a practical recommendation on how the TFV should move forward with the allocation of earmarked funds.

Research Question

What is the best Programme response of TFV in utilizing its assistance mandate to remove social stigma against victims of SGBV in conflict affected regions in northern Uganda in the years since 2008 and why?

Background

In the last decade, the world has made key steps in recognizing and upholding international justice and impunity through the creation of the International Criminal Court (ICC). In 2002, with the ratification of the Rome Statute, new precedent was set in the world of international justice by holding the most heinous crimes accountable on a global scale, and by setting a new commitment to the assistance and reparations of victims affected on the ground (ICC, "About the Court"). The ICC, the first international justice institution that has the potential of universal jurisdiction, was created and with it, the Trust Fund for Victims (TFV) (TFV, "About us").

The TFV has the ability to provide assistance to victims of crimes under investigation by the ICC through physical rehabilitation, psychological rehabilitation, and material support, as well as reparations to victims following a guilty verdict at the ICC (TFV, "What we do"). For this thesis, the assistance mandate is relevant as the TFV has been active on the ground since 2008 under such jurisdiction, reparations have not yet been implemented by the TFV. Since 2008, the TFV has been active in three field operations in the Democratic Republic of the Congo (DRC), Central African Republic (CAR), and Northern Uganda (TFV, "What we do").

Within the assistance mandate utilized by the Trust Fund on the ground in these programme countries, a specific programme based on 'Healing,

Empowerment, and Reconciliation: Support to Victim Survivors of Sexual and Gender Based Violence (SGBV)' has been in place since the launch of field missions in 2008 (TFV, 2014(c), p.7). This Programme has been implemented in the DRC and northern Uganda; the CAR programme is currently suspended due to the security situation on the ground (TFV, 2014(c), p.7).

The TFV utilizes three key approaches in their field programmes, referred to hereafter as TFV approaches or programmes, in the DRC and northern Uganda aimed at reducing the long-term affects of sexual violence, including social stigma.

1. **Physical Rehabilitation** including reconstructive and general surgery, referrals to medical services for victims of sexual violence, and other individual physical assistance programmes in order to assist victim survivors recover and resume their roles within their community (TFV, 2014 (b), p.2).

2. **Psychological Rehabilitation** including individual and group-based trauma counseling, community-led healing of memories initiatives, and community sensitization and education around the rights of victims to promote reconciliation. These programmes address the psychological trauma and other consequences from conflict, and sexual violence to promote healing at an individual and community level to create a greater sense of trust, shared responsibility, and peaceful coexistence (TFV, 2014 (b), p.2).

3. **Material Support** including access to safe shelter, vocational training, reintegration programmes, support for village savings and loans, educations grants, and classes in accelerated literacy is provided to improve economic status of victim survivors through education, economic development, and employment opportunities (TFV, 2014 (b), p.2).

Physical and Psychological rehabilitation programmes continue to be implemented in northern Uganda today. Material support programmes were transitioned to implementation by international, regional, and local NGOs in 2013. This transition was implemented due to the assessment of the TFV Board that

material support was no longer needed by the TFV because governmental and local capacity was able to support the role the TFV was previously serving in this regard (Kalla, 2015). However, material support is included within the assessment of TFV programmes due to its relativity in respects to stigma and TFV approaches until 2013.

Since 2009, the TFV has implemented the programmes operating from the 2009-2012 Strategic Plan informing the programme framework, which was later extended to lead programmes until the end of 2013 (International Center for Research on Women and Trust Fund for Victims, 2013, p.12)[3]. The strategic plan included key cross-cutting themes to be addressed in the implementation of TFV physical and psychological rehabilitation and material support programmes. (ICRC & TFV, 2013, p.12) These cross-cutting themes are as follows:

- Promoting community reconciliation, acceptance, and rebuilding community safety nets (ICRC & TFV, 2013, p.12)
- Mainstreaming gender to include addressing impact of gender-based violence and other sexual violence of women, men and children in line with UN Security Council Resolution 1325 (ICRC & TFV, 2013, p.12)
- Integrating and rehabilitating child soldiers and abductees into communities, including support of intergenerational responses (ICRC & TFV, 2013, p.13)
- Addressing issues of victims' stigma, discrimination and /or trauma (ICRC & TFV, 2013, p.13)

These approaches have been in place since the programme was launched in 2008. The Winter Progress Report 2014, 'A Road to Recovery: Healing, Empowerment and Reconciliation- Programme Progress Report Winter 2014' assess the direct progress of each of these approaches on communities affected by sexual violence. However, the report (and all other reports produced by the TFV) does not show the influence of each approach on the individual long-term effects of sexual violence separately. Instead, each report provides a summary of the overall implementation the programme has had on all effects of sexual

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[3] Citation will hereafter be referred to as (ICRC &TFV, 2013, p.)

violence as a whole. In order to properly assess the TFV's work in this regard as well as their programming influence on social stigma, these programmes must be assessed separately in regards to the removal of stigma.

With the TFV looking to implement a number of new programmes with the steep increase of programme funds, now is the time to fill this gap- to assess what approach is best in addressing stigma, one of the most overarching factors risking long-term peace and security.

CHAPTER 2: EXISTING ACADEMIC WORK

Literature Review

The TFV is a relatively new phenomenon in post-conflict reconstruction and international justice. As a part of an entirely new institution with the ICC, the TFV is the first international organization that serves victims of war crimes directly as part of a criminal tribunal or court. Since the Trust Fund has only been active on the ground for 8 years, the theory around its assistance mandate is slightly lacking. Therefore, for this thesis the literature review and theoretical framework section will be merged to provide a contextual background of academic work surrounding sexual violence in post-conflict situations, as well as competing theories regarding the implementation of assistance programmes to victims of sexual and gender based violence (SGBV).

Feminist Approaches to Post-Conflict Reconstruction

The field surrounding post-conflict mechanisms, reconstruction, and reconciliation has been built on addressing the needs of the general population. Scholars argue that most of these approaches have focused mostly on the male perspective and have catered to addressing the impact of conflict on men. Some scholars come to this conclusion because social norms dictate that men are the sole breadwinners and the leaders of patriarchal societies, and therefore draw the most priority in post-conflict programmes. Other scholars argue that a lack of a female perspective is due to a lack of women in leadership roles, and female perspectives in peace negotiations and political processes.

Nevertheless, the argument stands that in order for post-conflict reconstruction to be successful and stable long-term, a gender-perspective must be implemented. Both the needs of men and women must be addressed through programming to ensure that both sexes are able to recover and reconcile to ensure that conflict does not persist. Currently, the feminist gender perspective is lacking, and thus most post-conflict programmes have failed to acknowledge the harm experienced by women in conflict and the ways that it differs from men. Therefore, current programmes have failed to adequately ensure that all victim

survivors in a post-conflict situation are assisted in healing. Such a gender perspective can be seen in TFV activities targeting women, and more specifically crimes committed against women.

A general framework of approaching post-conflict reconstruction through a feminist lens is presented by Aolain (2009) in *Exploring a Feminist Theory of Harm in the Context of Conflict and Post-Conflict Societies.* The author argues that women experience conflict different, even if they exhibit the same roles as men do, because women process experiences differently (Aolain, 2009, p.223). This argument is important for the general context of this thesis as it provides the framework for understanding why a separate approach to victim survivors of sexual and gender-based crimes is needed (Aolain, 2009, p.224). The current approaches and theories in post-conflict are over-arching and fail to present and respond to the needs of women and take into account the different needs based on different experiences by each gender.

The arguments presented by Aolain are key in understanding the importance of the TFV's different programmes in response to SGBV. The TFV has effectively filled the gap explained by Aoilan, by developing programming that specifically targets and responds to the victim survivors of SGBV. In order to understand the role of this feminist approach and the importance of the TFV in utilizing such approaches in the implementation of their programmes, it is beneficial to understand some of Aolain's key points.

The author argues that women play a key role in keeping the community together. Therefore, women are targeted specifically as a group as a means of hindering the operations of the community as a whole both at a social and physical level (Aolain, 2009, p.243). This leads to a breakdown of traditional community alliances, an element that must be addressed in order to make space for long-term peace (Aolain, 2009, p.243). Therefore implementing a feminist framework on an international level is the first step in ensuring long-term peace and the full rebuilding of communities (Aolian, 2009, p. 244).

The Trust Fund has recognized the importance of addressing the different effects that conflict and SGBV has on women by developing an approach targeted

at women and their specific needs. The importance of highlighting these differences in present in a number of key publications, especially the Winter 2014 Progress Report (TFV, 2014(b)) and the Strategic Report (TFV, 2014(a)) and has shown the commitment and understanding of the TFV in acknowledging and addressing the different effects conflict has on women.

Sexual Violence and the need for a gender-perspective

Building upon the importance of post-conflict programmes including a gender perspective, a need exists for programmes to also specifically address sexual crimes committed against women solely. As explained in the background section of this thesis, for many years sexual violence in conflict was not necessarily considered a crime and was therefore not targeted in post-conflict recovery. With the understanding that a gender-perspective is needed for long-term success and stability following conflict, comes the further need to ensure that sexual crimes are also addressed. These crimes have long been underreported, under addressed, and looked over. However, scholars find that addressing these crimes are at the root of reconciliation of both individuals and communities after conflict. Sexual violence has a different impact on communities than other violence that occurs in war. In addition to physical injury, psychological injury is at the forefront of long-term effects of SGBV. Women are targeted as a means to break down communities, and the crimes that are used against them are often within the SGBV category. Therefore, in order to foster a system of reconciliation and rebuilding after conflict, not only does a gender-lens need to be implemented in the formulation of programmes, but the specific crimes committed against women, especially SGBV, need to be taken into account.

Furthermore, healing for SGBV crimes must be conducted at an individual level as well as a community in order to ensure that a gender perspective is included, and so that victim survivors are getting the help they need as well as a general healing of the community through a more collective approach. The TFV has recognized this notion in their programming targeted at assisting women (and men) who are victim survivors of SGBV.

Following Aolain's feminist framework, a relevant next step is to look into research surrounding sexual violence in post-conflict situations. Bastick et al. (2007) and Durbach & Chappel (2014) both present research and analysis in this regard.

Bastick et al.'s argument in in *Sexual Violence in Armed Conflict: Global Overview and Implications for the Security Sector* argues for the need for post-conflict programmes to target women in order to provide for long-term peace. This argument adds to Aolain's conclusion that a feminist approach is needed. Bastick et al. explicitly state that not only is an approach that properly addresses the needs of women as well as the crimes that have been committed against them needed, this element is key for long-term peace (Bastick et al., 2007, p.155).

The authors conduct a global assessment of sexual violence used in different conflicts across the globe. In their assessment of Uganda, they include an overview of the crimes committed against girls who were abducted from their villages by the LRA, including forced marriage, rape, and forced pregnancy (Bastick et al., 2007, p.65). This overview of crimes adds to the crimes as noted by the Trust Fund, and contextualizes an understanding of the crimes committed against women in the region, illustrating how SGBV is specifically targeted at women. Crimes such as faced marriage and forced pregnancy are crimes specific to women and are used as a was to systematically undermine the community make-up during and after conflict. Such crimes do not disappear after war, children are a part of a woman's life after war and forced marriages are seen within the community as legitimate. Therefore, women who have experienced SGBV in these ways must carry these crimes with them, and are currently not assisted in overcoming the effects of this realization.

Most relevant for this thesis is the author's argument for addressing conflict-related sexual violence in Disarmament, Demobilization and Reintegration (DDR) processes, and civil society responses to sexual violence in armed conflict (Bastick et al., 2007, p.181). In exploring sexual violence in DDR processes, the authors argue and support the inclusion of female combatants in programmes as well as female supporters and associates of armed forces (Bastick et al., 2007, p.182). Currently, only direct combatants, only 30% of women

involved in conflict, are targeted for DDR and post-conflict programmes, and therefore a large population of females that are affected and involved in conflict are left out of the long-term peace processes (Bastick et al., 2007, p.181).

The authors further this argument by noting the exclusion of female victim survivors of sexual violence in the demobilization and reintegration assistance programmes in the region (Bastick et al., 2007, p.182). By fostering and allowing a systematic exclusion of those affected by conflict, social isolation is further engrained in the community and thus, perpetuates a cycle of sexual violence (Bastick et al., 2007, p.183). A cycle of sexual violence is created through the risk of prostitution, trafficking, and rape in communities where women have nowhere else to turn (Bastick et al., 2007, p.183). This cycle of sexual violence continues a cycle of violence within a community and threatens the building of long-term peace within a post-conflict situation (Bastick et al., 2007, p.183).

Bastick et al. have an additional contribution to make to the field in their analysis of findings. Following the conclusions of their research arguing that women need clear involvement in post-conflict processes, the authors also analyze the civil society approaches to victim survivors of sexual violence as a means of rebuilding post-conflict (Bastick et al., 2007, p.182). The authors lay out key programmes that should involve women in a means of rebuilding such as: psychological and medical assistance, documentation of crimes, and women's courts that provide a safe place for women to share the stories of the trauma that they have experienced (Bastick et al., 2007, p.191-193). Bastick et al. conclude that the approaches taken by civil society are key in observing what assists victims of sexual violence post-conflict. They argue that in order for external programmes to be successful, civil society and the voices on the ground are most important in targeting what is needed by victim survivors and what will work in different communities (Bastick et al., 2007, p.195).

Understanding Bastick et al.'s conclusion assists in understanding the programmes put forward by the TFV in addressing the issues of victim survivors of SGBV. The programmes that Bastick et al. find effective through their assessment of civil society and post-conflict situations represent the underlying approach offered by the TFV. The authors explain that programmes such as

psychological and medical assistance, documentation of crimes, and truth telling mechanisms are what have been proven effective in their line of research (Bastick et al., 2007, p.195). The programmes presented by the authors are clear in psychological rehabilitation and material support offered by the TFV to victims of SGBV. Bastick et al. present a necessary understanding and support for a number of the TFV programmes and assist in building theoretical support and legitimacy.

Durbach & Chappell (2014) in *Leaving Behind the Age of Impunity* build upon Bastick et al. in the argument that sexual violence and the failure to properly address its effects in post-conflict rebuilding programmes perpetuates a cycle of violence. Their research is relevant to this thesis as it shows how failure to properly address the harm specifically associated with SGBV in post-conflict can create long-term instability. Long term effects of SGBV such as social stigma, breakdown of communities, and loss of trust are associated with continuation of conflict. Therefore in order to assure that these effects do not plague communities, programming must ensure that both victim survivors and those that surround them in the community are properly assisted in overcoming these feats.

Durbach & Chappell focus their research primarily on the reparations mandate of the TFV and the involvement of the ICC in assisting victims post-conflict (Durbach & Chappell, 2014, p. 543). While they do not explicitly touch on the assistance mandate, a large portion of their argument focuses on the ICC's reparative role as whole, and thus is relevant to the research proposed within this thesis (Durbach & Chappell, 2014, p. 543).

Durbach & Chappel argue that a gender perspective is needed in order for the ICC to properly assess the effect SGBV has on victim survivors in communities. For example, a great deal of emphasis is placed on building political foundations, however men are usually at the negotiation table in these meetings, and further perpetuate the traditional cultural norms that reject and stigmatize women and the hardships they face in conflict (Durbach & Chappel, 2014, p.553). The authors explore and emphasize the importance of women being involved directly in peace negotiations and rebuilding processes and conclude that their ostracizim from the negotiation table further negates the crimes

committed against women, and increases the long-term effects of SGBV crimes (Durbach & Chappell, 2014, p. 553).

This is directly reflected in the TFV's approach of involving the community in its assistance programmes. Durbach &Chappel's research assists in understanding programmes aimed at involving the entire community and start the process of breaking down norms that hinder victim survivors in overcoming their trauma and re-entering the community.

Through community- based programmes, all members of the community are involved in rebuilding activities that involve social interaction and relationship building. Training for community and group leaders is the next step to this involvement, and targets specific members of the community in order to make change. It is the understanding that with addressing the leaders, a further approach of inclusion and change can be fostered within the community.

Durbach & Chappel support the importance of the TFV's involvement in situation countries through creating stable environments and lasting peace through recognition- starting first with recognition and understanding in communities, placing emphasis on removing social stigma (Durbach and Chappel, 2014, p.553).

Social Stigma and its Impact on the Community

There are a number of long-term effects of SGBV prevalent in communities following conflict, including breakdown of trust, relationships, and community ties, physical injury, pregnancy and children from rape, and widespread psychological trauma. All of these effects are intertwined and depend on assistance following conflict to overcome these hurdles and to offer long-term stability in a community plagued by reminders of the past. An issue at the core of this is social stigma, a cultural norm that defines sexual activity by a woman, even forced sexual activity such as rape and other forms of sexual violence, as wrong. These norms label victim survivors of sexual violence as those outside of the accepted social norms of the community and can lead to rejection by family and friends, and ostracism by the community as a whole.

Claude et al. assist in illustrating this problem and setting a definition of social stigma. They conduct an extensive study that defines the causes of social stigma against victims of SGB and find that social norms in communities in central Africa are inherently traditional (Claude et al., 2013, p.1). Within that tradition, norms have been implemented putting patriarchy at the focus of the community and thus, important emphasis is put on men marrying women who are virgins (Claude et al., 2013, p.1). As an effect, the community as a whole rejects any sort of sexual activity before marriage, weather the woman/man has consented to it or not (Claude et al., 2013, p.2).

When women return from conflict with children, or who have reported acts of rape and sexual violence, they are labeled within their community for life as a woman who had sexual relations outside of wedlock (Claude et al., 2013, p.2). This leads to a system of shame and denunciation of the victim from their family. Families are ashamed and humiliated that their daughter, sister, cousin, etc is labeled as unfit for marriage (Claude et al., 2013, p.2). This is magnified when a woman abductee already had a husband in the community and returns after being raped. This is seen not only as an act of adultery but can also create further tensions within a family when such a crime leads to the loss of a dowry and a key source of income for the family (Claude et al., 2013, p.2). As an effect, victims of sexual violence are rejected from their families, and from their communities as a whole. Any children that these victims may bring home from conflict are also shunned and rejected, leaving the victim and any possible children with no place in the community and nowhere to turn (Claude et al., 2013, p.3).

Social stigma breaks down community make-ups and creates a divide amongst victim survivors and their close family and friends as well as the community as a whole. This divide effectively causes de-stabilization in the community structure and base through a systematic lack of trust on both sides that continues long after conflict ends. The problem even spans throughout generations as the victim survivors are labeled through stigma, as well as their children. For years, these issues plagues communities, and in cases this de-stabilization can fuel further violence and conflict within war-torn regions.

Programme Approaches addressing Sexual and Gender Based Crimes

Taking into account the explicit need for a gender-based approach with SGBV and the long-term effect of social stigma associated with these crimes, the next step is to discuss programmes that have been implemented successfully on the ground that meet these inherent needs. With the expansion of the field and recognition of SGBV and it's long term affects, a number of post-conflict programmes have been implemented attempting to fill this gap. Successful programmes include assisting the community as a whole, as well as programming on an individual level. For example, programmes that offer a collective approach so that all victim survivors and others affected by conflict can be assisted instead of a formal targeting procedure. Specific individual programmes include targeting women specifically to ensure that they are integrated back into the community, or to change social norms in order to make that happen. Examples include allowing women to enter the workforce, streamlining motherhood and fostering acceptance of women with children born in conflict, and programmes that address both physical and psychological trauma in order to expedite the healing process. Motivations behind specific programming are explained below, through discussion of De Brower and the Feinstein Center.

De Brouwer in *Reparation to Victims of Sexual Violence: Possibilities at the International Criminal Court and at the Trust Fund for Victims and Their Families,* utilize the case of Rwanda and sexual violence to assess the long term effects of social stigma on the communities (De Brouwer, 2007, p.208). She uses this case to assess what approach, collective reparations, should be implemented through a strategic plan for the TFV in current conflicts, applying the use of the assistance mandate to the ICTR's approach to sexual violence victims (De Brouwer, 2007, p.214). She points out the gaps that the ICTR leaves in addressing the needs of victims as a lessons learned approach and argues where the TFV programmes may build upon the failed programmes by the ICTR in helping in communities in the recovery process (De Brouwer, 2007, p.216-218).

This research assists in the analysis of the TFV as it supplements the current assistance utilized by the Trust Fund through the 'lessons learned' in the lack of assistance given to victims in Rwanda (De Brouwer, 2007, p.217). Furthermore, it

legitimizes the Trust Fund's approach to collective action in communities (De Brouwer, 2007, p.219).

De Brower concludes that victim survivors of sexual violence should be issued collective reparation, as opposed to individual reparation, so that the programmes can reach unidentified victims who cannot come forward due to social situations (fear of being rejected by the community, shame of the family, etc) (De Brouwer, 2007, p.236). This approach is at the heart of current programming approaches by the Trust Fund, aiming at assisting the community as a whole in order to reach a greater number of victims, but also to relieve the social pressures that come with identifying an individual.

The Feinstein Center in cooperation with Isis Women's International Cross Cultural Exchange, conducted a key study titled *Making Gender-Just Remedy and Reparation Possible: Upholding the Rights of Women and Girls in the Greater North of Uganda.* Their research leads the way in understanding programming that has been implemented in northern Uganda addressing SGBV and why it has been successful.

The study focuses on the precedent and treaty law that gives women the right to reparations and assistance, an un-precedent act in the eyes of many in Uganda, as men are usually the head of the family and thus collect the assistance for the entire family. The research further explores the ways in which child soldiers and other abductees experience conflict and trauma, and how girl soldiers will process these experience different then boys (Feinstein Center, 2013, p.19).

This research is relevant as it offers an explicit gender perspective as to how girls experienced time in captivity with the LRA differently than boys. The study focuses on the needs for victim survivors of SGBV returning from the bust and how programming can address the effects of crimes including forced marriage, rape, forced pregnancy, and child bearing (Feinstein Center, 2013, p.21). Further explanation is offered as to why victims do not come forward following the crime, with the understanding that sexual violence is a taboo topic in

northern Uganda that comes with stigmatization and risk of rejection by their families (Feinstein Center, 2013, p.21).

The study argues that social stigma is a key consideration as to why many victim survivors do not come forward and report the crimes committed against them. To effectively programme, the role of social stigma in this regard must be taken into account in any rebuilding efforts. The center offers strategies that have been successful in northern Uganda thus far in assisting women while being sensitive to the risks they face when coming forward (Feinstein Center, 2013, p.24).

The study offers recommendations for a number of approaches. First, targeting Mothering through the understanding that women who had children in camps were often mutilated and beaten as they begged for the release of their children. Therefore, mothers and their children, have a great deal of physical and psychological trauma that should be addressed in order to sustain long-term peace (Feinstein Center, 2013, p.27). Additionally, allowing women to enter the work force and to own property, as this is systematically prohibited in the conservative and traditional values of Northern Ugandan districts (Feinstein Center, 2013, p.28-29). Another approach includes building upon the social capital that women serve in their communities through their central role of developing the household (Feinstein Center, 2013, p.29). The center has also found that addressing the harsh toll in the make-up of these communities through removing women and degrading their ability to serve their key role through limiting mobility (physical trauma) and reducing the ability to adapt and maintain key social networks within the community (psychological trauma). Therefore, trust amongst families, neighbors, and communities needs to be rebuilt through assistance and reparation in order to ensure stability within a community through understanding and group healing (Feinstein Center, 2013, p.29). Finally, understanding the gender multipliers of violence through a gender-sensitive approach to reparations and assistance through fostering an understanding of the need for different approaches of men and women (Feinstein Center, 2013, p.29-30).

By allowing the community to learn and understand that men and women experience conflict, and its side effects, differently the community can move towards a rebuilding approach that addresses the long-term affects for women and men, thus leading to a stable, long-term post-conflict situation (Feinstein Center, 2013, p.32).

The recommendations and conclusions from the study reflect the three programmes that the TFV implements, with the undertone and key motivator of the importance of gender-sensitive approaches. The TFV has similar programmes to those of the Feinstein Center (2013), especially those along the lines of building social capital of women, maintaining key social networks, and understanding gender multipliers. De Brower's recommendation of collective approaches is also taken into account by the TFV. The three over-arching programmes aim to address the long-term effects of conflict overall, at both the community and individual level. Both the Feinstein Center as well as De Brower have shown the importance of including both approaches in a successful programme to ensure that victim survivors are not only involved in the process but those who are close to them are also offered assistance and healing.

Overview of Best Practices

Assessing the current literature and theory in the field is essential in understanding the best practices currently employed in post-conflict situations and programmes aimed at addressing and building long-term peace. In order to understand the TFV's programmes and motivating undertones, it is necessary to build from the literature in determining what has worked in similar types of programmes utilized in post-conflict previously, and what makes programmes addressing sexual violence successful. As noted above, both community and individual responses are needed in order for successful programming. Further research in the field supports this notion, and explicitly states the importance of including both approaches in programming.

Research by Spangaro et al. laid the framework for approaches of successful programmes implemented in post-conflict situations, with support from the authors included in the literature review. The authors conducted a systematic

review of numerous post-conflict programmes implemented in their article *What Evidence Exists for Initiatives to Reduce Risk and Incidence of Sexual Violence in Armed Conflict and Other Humanitarian Crises?* (Spangaro et al., 2013, p. 3).   Their work is especially relevant for this thesis as it lays out a number of approaches utilized in addressing sexual violence in conflict and provides a summary of key approaches as implemented by UN programmes, international NGOs, and involvement of other international institutions such as the International Criminal Tribunal for the former Yugoslavia (ICTY) and the International Criminal Tribunal for Rwanda (ICTR) (Spangaro et al., 2013, p. 3).

The approaches defined by Spangaro et al. are summarized in three categories: Individual, Community, and Societal. These categories are set to address the three different types of sexual violence that they have defined in their research: Militarized sexual violence, opportunistic sexual violence, and sexual abuse and exploitation (Spangaro et al., 2013, p.3). The individual level strategies aim to address all three forms of sexual violence on individuals. The community strategies are in place to address all forms of sexual violence while engaging the entire community and moving towards healing and long-term support (Spangaro et al. p.3). The societal level primarily focuses on opportunistic sexual violence and sexual abuse and exploitation, and focuses on work at a higher level that will be implemented on the ground and on an institution level by international bodies such as the UN (Spangaro et al. p.3).

A table noting the key factors relevant for this thesis and further research of TFV programmes in individual and community level approaches is included below:

Table 1: Strategies for addressing sexual violence in conflict and crisis (Sparango et al., 2013, p. 3)

Category	Strategy and Examples
Individual	• Medical care • Psycho-social care • Forensic assessment of survivors and advocacy • Training and/or support to women in increase economic independence • Support for rehabilitation post sexual violence • DDR programmes targeting reducing sexual violence • Engagement with combat leaders

Community	• Promotion of reporting crimes of sexual violence
	• Education of rights in regard to sexuality (i.e criminalizing rape)
	• Increasing opportunities for women to participate in political processes, economic practices, and social activities (including peace processes)
	• Human rights education
	• Education targeted at males on human rights and gender equality
	• Sexual violence prevention measures

Source: Sparango, J., Adogu, C., Rammuthugala, G., Powell Davies, G., Steinacker, L., and Zwi, A.. 2013. "What Evidence Exists for Initiatives to Reduce Risk and Incidence of Sexual Violence in Armed Conflict and Other Humanitarian Crises? A Systematic Review". PLoS ONE, 8(5), 1-13.

For the research question and topic addressed in this thesis, the individual and community strategies as listed in Table 1 are relevant, as they are similar to those strategies implemented by the TFV in their programmes. In order to properly assess the TFV programmes in the methodology and execution of data collection further in this thesis, it is important to first understand and support the theoretical approaches within each programme. Utilizing the research and summary provided by Spangaro et al., and the existing academic literature discussed in the literature review, underlying themes that are present will be supported to show the rationale and motivation of each TFV programme, and will assist in defining objectives for expert interviews later in the methodology chapter of this thesis.

Individual Level

The individual approach presented by Spangaro et al. is also supported by the research and arguments presented by the Feinstein Center. Spangaro et al. include elements such as psycho-social care, medical assistance, and training for women to increase their economic standing (Spangaro et al. p.3). Similar approaches are defined by the Feinstein Center such as treating women and children for psychological trauma, allowing women to enter the workforce, and building upon the social capital of women in communities following conflict (Feinstein Center, p. 27-30).

It is clear that the individual approach is necessary to healing victim survivors of sexual violence. Spangaro et al. have presented extensive research that supports this claim. The Feinstein Center has supported this argument. The

center has worked to present their research in order for the field to be able to further ensure that post-conflict rebuilding programmes are stable and able to effectively address the needs of women. In doing so, they have illustrated the importance of assisting women in rebuilding on an individual basis, and that successful programmes must include this measure in order to be successful (Feinstein Center, p. 27-30).

Therefore, the conclusion can be drawn that a strong, effective programme aimed at addressing the struggle of victim survivors of sexual violence is necessary in ensuring that the programme is not only successful in the short-term but also effective in the long-term in maintaining peace and rebuilding communities. These elements are present in the undertone of the physical and psychological rehabilitation programmes of the TFV, some of which are implemented on the individual level.

Community Level

Within the community approach presented by Spangaro et al., the following key themes are presented: education of human rights for the entire population so that the community as a whole understands the rights available to them, education of sexual violence targeted at men and boys to assist in their understanding that it is a crime, involvement of women in political and peace processes, and the increase of reporting of sexual violence crimes (Spangaro et al. p.3).

De Brower supports these approaches, concluding that collective reparations are needed to effectively address victims in post-conflict situations (De Brower, p. 214). A community-based approach, as summarized by Spangaro et al., is inherently a collective approach as these programmes focus on assisting the community as a whole.

Bastick et al. and Durbach & Chappel further build upon the importance of community-based programmes as well as the motivation behind them. Durbach & Chappel stress the importance of women in the peace processes and political involvement after the rebuilding and restructuring following conflict (Durback & Chappel, p. 543). The authors state the importance of this involvement is so that a clear gender-perspective is included in future systems, and addresses the needs

of women in the community, instead of oppressing them (Durbach & Chappel, p.553). Including a gender-perspective and ensuring that women are allocated a prominent position in post-conflict reconciliation reduce long-term effects of crimes committed against them (Durbach & Chappel, p.553). This is because there is a greater understanding amongst the community, and community leaders, as to what women have been through, because these leaders become the women who have experienced such a situation themselves.

Community programming is further supported by the findings of Bastick et al.. The authors argue that programmes focusing on assistance, documentation, and truth telling have been proven most effective in the field as they allow for the most number of individuals to be addressed, through long-term stability within the community (Bastick et al., p.191-193). This argument illustrates that a community-based approach is the most effective in ensuring that all affected by SGBV in one way or another, a direct victim survivor, family and friends of victim survivors, and larger members of the community generally affected by the conflict itself, are reached and given the assistance they need.

Bastick at el. Further explain that programmes such as psychological and medical assistance, documentation of crimes, and truth telling mechanisms are what have been proven effective in their line of research (Bastick et al., p.191-193). Spangaro et al.'s summarizing of programmes shows that Bastick et al. are on to something in their argumentation. Most of the programmes presented by Spangaro et al. reflect the importance of education, sharing of stories, and community outreach, which is inherent in the suggestions made by Bastick et al.. This shows that even though set approaches may differ from case to case, the overall motivation and support for such programming remains the same. Community-based programmes are rooted in the same understanding that education, community dialog, and a sense of understanding are the largest factors that will reduce stigma against SGBV.

The body of research compiled by Batick et al., Durbach & Chappel, and Spangaro et al. assist in showing the importance and effectiveness of a community-based approach that includes psychological assistance programmes as implemented by the TFV.

Key elements of gender-sensitive post-conflict approaches

      Analyzing previous approaches and best practices are key in understanding the approaches utilized by the TFV in their programmes and what will be assessed in the methodology section of this thesis. The overview of best practices, and the literature review have shown that a mixed approach is best in ensuring that post-conflict programmes are implemented effectively and efficiently. An individual and community level approach is necessary to ensure that the needs of victims are properly addressed at the most basic level. In order for a community to heal and be stable long-term, a community-based approach is also key in the implementation of making change in understanding, mindset, and at the political level. These methods are apparent in the three programmes by the TFV, and the cross-cutting themes that support their implementation.

CHAPTER 3: RESEARCH DESIGN AND METHODS

Research Design: Comparative Case Study

The aim of this thesis is to bridge the gap between the progresses of the TFV's field programmes in long-term effects of sexual violence, and narrow down the best approach currently used by the TFV to address social stigma independently. This will be assessed through a comparative case study utilizing two cases in Northern Uganda.

Case Selection

Two cases in northern Uganda, Kitgum district and Gulu district, were selected for the comparative case study after comparison of their gender make-up, similar numbers of female and male returning abductees, and activity of TFV programmes in both districts.

The Database Project compiled by the Berkley-Tulane Initiative assisted in the compilation of figures for the case selection. The objective of the database project was to better document abduction of children by the LRA as well as to improve the analysis and understanding of the long-term impacts of child soldiers kept in captivity (Pham et al., 2007, p.2). As a result, their database has been able to identify children who were abducted by the LRA as they returned to their communities through eight reception centers in Northern Uganda including the districts of Gulu (3), Apac, Kitgum (2), Pader, and Lira (Pham et al. 2007, p.8). Relevant to the work of this thesis, is the retuning abductees who were girls abducted into the LRA and subjected to SGBV crimes during their time in captivity. The database explicitly states the number of girls returning, most of which return reporting one or more crimes of sexual violence have been committed against them (Pham et al. 2007, p.8).

Through their research, they were also able to define differences in long-term effects of abduction on different sub-groups. For example, females abducted by the LRA stayed longer than males who were abducted by the militia group (Pham et al., 2007, p.11). This is necessary in noting the difference of male and females in regards to the effect of conflict in the region.

The project was also able to delve into understanding why females stayed longer with the LRA than males, and the long-term impacts captivity had on females when they returned (Pham et al., 2007, p.12). Most notably, females were often given to militia leaders as wives, and thus many of them had children while in captivity (Pham et al., 2007, p.13). The presence of children made it more difficult for females to leave the LRA camp at a moment's notice, as most males escape during exchange of fire and in the midst of chaos (Pham et al., 2007, p.12). If a female is able to leave the camp, returning with children is difficult, as many are not welcomed back in their communities, as LRA militant leaders father the children (Pham et al., 2007, p.12). Thus, females most often arrive at the reception centers after a longer experience in captivity with nowhere to go (Pham et al., 2007, p.13).

Utilizing the database and the figures it presents regarding LRA returnees in a number of ditricts in northern Uganda, Gulu and Kitgum have been selected based on their similar make-up for the analysis of this thesis.

Photo Source: www.conflictandhealth.com

Figures within the database include the breakdown for the eight reception centers in Northern Uganda, including the northern districts of Gulu, Kitgum, Pader, Apac, and Lira, districts the TFV is also active in.

According to the database, the reception centers in Caitas, Gulu and GUSCO, Gulu have accepted a total of 5,116 LRA abductees from January 1998-

December 2005[4] (Pader et al.,2007, p.8). The reception centers in KICWA, Kitgum and CPA, Kitgum have accepted a total of 5,520 LRA abductees from February 1998 - March 2006[5] (Pader et al.,2007, p.8). Both districts reported an approximate 24% of abductees as being female (Pader et al.,2007, p.8). The close proximity in total number of abductees in these two districts, as well as the gender breakdown of females returning from captivity make these districts similar and relevant for a comparative case study analyzing the impact of TFV programmes (active in both districts) on removing social stigma against victims of sexual and gender based violence.

Is it important to note, however, that a key reception center in Gulu district was left out of this consideration, World Vision center in Gulu. This case was left out, as it was an extreme outlier in the number of cases, a total of 11,163 from June 1995 – April 2006 (Pader et al.,2007, p.8). This case was not considered as it was the first center established and was also the first to begin collecting data on the abductees three years before the second reception center in Caritas, Gulu[6] was founded and could begin collecting data.(Pader et al.,2007, p.8). Additionally, World Vision reception center in Gulu was the first point of contact for the UN involvement in the region and all abductees discovered by the UN in refugee and IND camps have been delivered to Gulu (Veale and Stavrou, 2003, p.36). On top of reintegrating abductees into their communities, as the other centers do, World Vision offers abductees an educational programme and psychological assistance. Because of this extra programming and added assistance, abductees identified by the UN and other international agencies are sent to World Vision Gulu, no matter their original district (Veale and Stavrou, 2003, p.36). Whereas, the other seven reception centers are the last center an abductee passes through on their way back to their original community and offer a genuine understanding of the abductees from that region (Pader et al.,2007, p.8). Therefore, World Vision, Gulu does not offer a clear picture as to the district make-up, but more so the make-up of child soldiers as a whole and is not taken into account for this comparative case study.

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[4] 2,048 at Caritas, Gulu and 3,118 at GUSCO, Gulu (Pader et al., 2007, p.8)
[5] 3,775 at KICWA, Kitgum and 1,745 at CPA, Kitgum (Pader et al., 2007, p.8)
[6] Caritas, Gulu began documenting arriving abductees in January 2008 (Pader et al.,2007, p.8)

Analysis of Comparative Case Study

For the analysis of these two cases, the thesis will explore the programmes of the TFV in Gulu and Kitgum, and their effect on the removal of social stigma.

The cases selected for analysis of the TFV Programmes have been defined and narrowed through a careful analysis of the TFV's programmes in northern Uganda and the selection of two communities, Kitgum and Gulu, with a similar breakdown of total abductees and gender-breakdown. This comparison is important in understanding the impacts of the TFV on the social stigma on the community as a whole, and correspondingly the impact of TFV programmes in reducing stigma over time. Similar community size and breakdown will allow for a clear understanding and analysis of the overall impact of the TFV.

In order to properly assess the effect of TFV programmes on removing social stigma, a clear definition of what this thesis will consider reduction of social stigma must be presented.

> **Social stigma:** The discrimination and exclusion of victims of SGBV due to social circumstances that label a victim and no longer welcome the victim survivor, nor children born as an effect of rape into the community

> **Removing social stigma**: The ability for a victim of SGBV, and any children they may bear, to be allowed into their family (or close social circle) upon returning to the community and to no longer be ostracized because of the crimes committed against them

The definition utilized for the removal of social stigma is assisted by the argumentation and illustration of social stigma in Claude et al.'s research. The definition takes into account the roots of stigma in the community and the most concrete means laid out for exploration of the impact of TFV programmes in removaing stigma. The definition will be used in exploring the data and presenting analysis in this thesis.

Social stigma is a social based theme engrained in the community, and is therefore something difficult to observe without proper data collection on the

ground. Therefore, this thesis will utilize primary sources published by the TFV as well as expert interviews in order to observe and analysis this impact indirectly and offer a conclusion and practical recommendations. This will be approached with a focus on the victims no longer being ostracized and rejected form their communities and a shift of community understanding of the crimes that they have endured and the suffering that comes with such crimes. This is the first step in accomplishing the goal of full acceptance by the community, a difficult task to bear. This research recognizes and places emphasis on those closest to the victim welcoming her and any children born out of wedlock (as an effect of rape and forced marriages) into their home. An inherent importance lies in the acceptance of victim survivors by those closest to them, and begins healing on the most basic community level.

TFV Programmes

The TFV utilizes three key programmes in the DRC and Northern Uganda aimed at removing the long-term affects of sexual violence, including stigma.

1. **Physical Rehabilitation** including reconstructive and general surgery, referrals to medical services for victims of sexual violence, and other individual physical assistance programmes. (Trust Fund for Victims, 2013, p.12)

2. **Psychological Rehabilitation** including individual and group-based trauma counseling, community-led healing of memories initiatives, and community sensitization and education around the rights of victims to promote reconciliation. (Trust Fund for Victims, 2013, p.12)

3. **Material Support** including access to safe shelter, vocational training, reintegration programmes, and support for village savings and loans, educations grants, and classes in accelerated literacy. (Trust Fund for Victims, 2013, p.12)

The thesis will assess two key approaches that are currently implemented in Gulu and Kitgum today, Physical Rehabilitation and Psychological Rehabilitation. Each programme will be assessed independently on the effect of removing social

stigma in Gulu and Kitgum. Throughout the data collection and analysis of the thesis, each programme will be assessed separately. Therefore, when conducting expert interviews, questions will be involved to ensure that there is an objective for each programme to be assessed with each interviewer. Furthermore, in the assessment of the primary sources, special attention will be drawn to the implementation and description of each programme. This information will be utilized to support the findings of the expert interviews.

Data

The data utilized in this thesis will come from two primary components, primary sources from the TFV and expert interviews.

Primary Sources published by the Trust Fund for Victims

A number of primary sources directly published by the TFV will be utilized in this research as the first point of reference in regards to the implementation of TFV programmes. The TFV has published bi-annual progress reports since the programme's induction in 2008. Each report assesses the Trust Fund's progress in its programme countries, Uganda and DRC, and will be utilized in assessing key successes and barriers that the programmes have faced. The most recent report, the Progress Report for Winter 2014, focuses on stigma of sexual and gender based crimes directly. This report and the Strategic Plan lay out the actions by the TFV in assisting victims of rape and sexual violence, the plans already in place, and what the next three years will hold for field projects. (ICRC &TFV, 2013, p.3)

Earlier reports focus on the implementation of earmarked funds for removing social stigma and other long-term effects of SGBV. This will be especially key in assessing how the TFV has used earmarked funds in the past, and how they may be able to address the large amount of earmarked funds given to the fund to handle sexual and gender-based crimes. This publication provides a useful analysis tool that not only guides the TFV in their programme approaches, but also shows insight into what programmes have been successful thus far in reducing the long-term effects of SGBV. (Trust Fund for Victims, 2012, p.4) Another key publication from the Trust Fund that will be utilized is the Strategic Plan 2014-2017, which lays out the key strategies the Trust Fund will implement in

the coming years (ICRC &TFV, 2013, p.3). This publication is essential as it recognizes the need for stronger programming areas in SGBV and notes the importance of support in these areas (ICRC &TFV, 2013, p.3). The strategic plans lays out the three programme areas and how the TFV plans to improve these programmes for victims of SGBV as a whole (ICRC &TFV, 2013, p.3).

These reports will provide a basic outline of the approaches, and a timeline for changes that have been implemented. This will be key to the analysis of this thesis as it will show the development of the programmes thus far, and may support the findings of this thesis, if one programme is overarching in each year. Nevertheless, these reports will be utilized in understanding the TFV and why programmes work, further supporting the research question.

Expert Interviews

A number of expert interviews will be the main source of data for this thesis. Utilizing Leech (2002) and his article *Asking Questions: Techniques for Semi structured Interviews,* interviews will be conducted in a way that clearly addresses the research questions and TFV programmes under scrutiny (Leech, 2002, p.665). Leech provides guidelines on how to conduct interviews for qualitative research, and will thus be utilized in drafting the protocol and for the analysis of the interviews (Leech, 2002, p. 665-668).

Interviews will be conducted with the following four experts in the field

1. **Kristin Kalla**- Deputy Director and Senior Programme Officer, ICC Trust Fund for Victims

   Kristin Kalla spearheaded the TFV's programme for victims of SGBV and oversaw its implementation in her time as Director of the Trust Fund. She offers a first hand account of the project's barriers and successes, as well as an expert opinion on the correct approach. Ms. Kalla also has first-hand experience in the implementation, review, assessment, and adjustment of the programme and is therefore considered the top expert in gender programming as well as the key stakeholder with the Trust Fund. She will

offer an insider perspective on the Trust Fund's current programme and an informed perspective on the best programme for removing social stigma.

2. **Judith Acana**- Uganda Programme Officer, Women's Initiatives for Gender Justice

   Judith Acana oversees the implementation of programmes in northern Uganda by the Women's Initiatives for Gender Justice. This organization implements similar programmes as the Trust Fund, and Ms. Acana can therefore offer a non-biased perspective on the success of implementation of programmes and their impact on removing social stigma. Ms. Acana regularly visits and implements programmes in Gulu and Kitgum and therefore has an on the ground perspective regarding the comparison of these two communities.

3. **Evelyn Amony**- Programme Assistant, Justice and Reconciliation Project, Chairlady and Co-Founder of Women's Advocacy Network

   Evelyn Amony is a founding member of the Women's Advocacy Network (WAN) and is an advocate in the field of gender justice. Ms. Amony was abducted at the age of 11 by the LRA and spent 11 years in captivity before she was able to escape. She ahs experienced stigma first hand within her community, a sub-district of Gulu, and has been rejected by her community for returning with a number of children born from a forced marriage with an LRA leader.

4. **Nancy Apoyio**- Gender Programme Officer, Justice and Reconciliation Project

   Nancy Apoyio is a gender-justice advocate who works with the Justice Reconciliation Project, and is also a member of WAN. She has extensive experience in the field of stigma and post-conflict reconciliation in her two advocacy roles. Since Nancy is located in Gulu, and has lived in Gulu during the conflict with the LRA, she offers a first hand account of the effect of sexual violence on women in her community. She also has insight and direct experience with effective programming in assisting victim survivors of SGBV.

Objective of Expert Interviews

  Each interview will be approached with a number of key objectives. As laid out in the 'Overview of Best Practices' section of this thesis, key themes are present in the programmes implemented by the TFV. Understanding that each programme is motivated by a key theme, precedence, and theory of post-conflict reconciliation and approaches to addressing sexual violence in conflict, these motivations will be taken into account in each interview and it's key objectives.

  The objective of each interview is to gain an understanding and point of view from an expert involved in the implementation of the TFV programmes directly, or similar programmes in place. Within this understanding, key themes and objectives are prevalent and will be addressed within the interview and interview protocol.

Management of Bias

  Taking into account the need to assure that the data will be free of bias, the selection of expert interviews aims to manage this issue. Key experts from the TFV have been identified as important experts to interview. However, in order to avoid a one-sided, bias, analysis solely influenced by the TFV, experts outside of the TFV have been selected. The interviews with staff members of the Women's Initiatives for Gender Justice and JRP is an example of this. The Women's Initiatives and JRP implement similar programmes to that of the TFV, and have independent views of what works best. They also have independent motivators for their programme implementation, which can help support the 'why' portion of the research question. Furthermore, an expert was chosen can offer a third perspective in the implementation and approaches of the TFV programmes, as well as the need of victims from a first hand account as a survivor of SGBV. With a variation of four experts offering different viewpoints, bias will be effectively managed.

CHAPTER 4: DATA AND ANALYSIS

Analysis of each programme implemented by the TFV will be presented (physical rehabilitation, psychological rehabilitation, and material support) with a discussion on the similarities and differences of each programme in the case of Gulu and Kitgum. Findings from a review of the TFV Reports and expert interviews will be utilized to support the analysis. The conclusion within the analysis will analyze the best programming approach and the support offered to that approach by the expert interviews, review of primary TFV resources, and the theory presented within the literature review

Physical Rehabilitation

Physical rehabilitation programmes have been implemented in both Kitgum and Gulu in northern Uganda and have been successful in assisting women to heal physically and to remove the stigma attached to women who bear the physical evidence of SGBV. The programmes aim to address the care and rehabilitation of victims who suffered physical injury in order to recover and resume their role within their community (ICRC & TFV, 2013, p.24). According to Judith Acana, Uganda Programme Officer with the Women's Initiatives for Gender Justice, physical rehabilitation in Kitgum and Gulu districts rely heavily upon medical referrals of SGBV related-injuries to medical facilities in other districts that are more capable in handling such injury (Acana, 2015). The most common injury associated with SGBV is fistula repair, a tear in the perineum between the vagina and anus torn during rape or penetration of other objects (Kalla, 2015).

The medical referrals are very important for the women within the community. Kristin Kalla, the Deputy Director and Senior Programme Officer of the TFV, discussed the stigma attached to women with gynecological and SGBV-related injuries, especially those requiring fistula repair (Kalla, 2015). Women with this type of injury are not able to walk normally, are usually sick and weak, and, if left to fester, the wounds smell (Kalla, 2015). This makes it quite easy to be labeled as a victim survivor of SGBV and directly labels a woman in one of the worst ways, associating them and SGBV victim survivors as dirty, sickly, and weak

after sexual violence is committed against them (Kalla, 2015). Such labels further engrain the stigma around such crimes and the misconception that women who have undergone sexual violence are dirty and are no longer an accepted member of society (Kalla, 2015).

Ms. Amony, Gender Programme Officer of JRP and former LRA abductee, was able to provide a first hand account of needing such assistance when she returned to Gulu after 11 years of captivity. "Gynecological problems and other health problems related to a lack of medical attention is the most pressing factor against women returning from the bush. Many can not begin to heal mentally until they are able to function physically," (Amony, 2015).

In order to assess the impact of physical rehabilitation programmes, the programmes will be explored on their impact in each district (Kitum and Gulu).

Kitgum

The physical rehabilitation programme has been successful in addressing the needs of women in Kitgum, and effectively reducing the stigma around women with physical wounds. The TFV programme in this way has erased any signs of physical injury of SGBV, meaning that members of the community are not able to look at a woman and know that she is a victim survivor. This has assisted in reducing social stigma at the community level through removing an association of victim survivors as dirty and sickly, and has also assisted victims on an individual level so that they are able to live a healthy life (Apoyio, 2015).

Being able to assist in addressing these issues in Kitgum has been key to the overall health and welfare of the women who require such attention, and has also reduced the stigma that is attached to the women in this way (Acana, 2015). Before referrals were allowing for women in Kitgum district to receive this assistance, they would have to live with these conditions for the rest of their lives. They would be labeled as dirty and sick, and would be ostracized because they were accused of being sexually involved with LRA leaders, even if this was not the exact case (Acana, 2015). "Now, I have not seen a woman walking or smelling the way a SGBV victim survivor who needs attention in a very long time. The problem

has disappeared. Even if there are women who require such attention, they know where they can go to get it," (Acana, 2015).

Gulu

The impact of physical rehabilitation programmes implemented by the TFV is more visible in Gulu than in Kitgum. The TFV Physical Rehabilitation centers in Gulu have been able to address more victims numerically because of their two centers in Gulu, compared to the one center in Kitgum. Because of the existence of two centers, and their close proximity to town, the TFV has been able to address stigma on an individual level through offering services, and on a community level through raising awareness and understanding.

When women began to return from the bush, many within the community in Gulu did not understand the physical issues they were suffering from (Apoyio, 2015). The TFV centers in Gulu have served two purposes in reducing stigma in Gulu. The first is by directly treating the victims and offering them to help they need so that they can recover from their physical injury. The second is that the centers' existence has helped to raise awareness for the community and foster a means of understanding the needs of women who have suffered such crimes (Kalla, 2015). The TFV center is located within the city center of Gulu and therefore, many people pass on their way around town. It has become a part of their everyday life. Therefore, the topic of physical injury and a woman's need for treatment is not longer taboo. Instead, the community is more aware and understanding of the injuries related to SGBV (Apoyio, 2015).

Furthermore, more women were assisted with medical referrals in Gulu than in Kitgum from 2008-2014 (TFV, 2014 (c), p. 36). Over the course of the programme's implementation in northern Uganda, approximately 5,000 victim survivors of SGBV were referred in all districts where the TFV was active[7] (TFV, 2014 (c), p. 36). Two local NGO partners with the TFV offer physical rehabilitation in Gulu, one NGO partner offers physical rehabilitation in Kitgum (TFV, 2014 (c), p. 36).

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[7] The TFV only provides overall numbers of victims assisted, not numbers by district

Psychological Rehabilitation

Psychological rehabilitation programmes have been key in addressing the needs of women in Kitgum and Gulu on an individual basis and community level. In both districts, integrated trauma counseling programmes have been proven effective in assisting healing of trauma and psychological effects caused by the conflict for women victim survivors of SGBV (Kalla, 2015).

Ms. Kalla explained the most successful programme implemented by the TFV was in Pader, northern Uganda. Since Pader is not a district specifically targeted by this thesis' research, the programme implemented there with great success is an objective starting point for what the TFV has defined as successful. The programme in Pader focused on former girl child soldiers who returned to their community after their abduction with children born 'in the bush', usually due to forced marriages to high rebel LRA commanders (Kalla, 2015). The programme provided victim survivors with an in-depth psychological assistance programme that allowed for women to undergo trauma counseling, focus on relationship building with their children and (later) family, while also supporting their ability to go to school (Kalla, 2015). Surveys conducted by the TFV after the victim survivors' completion of the programme showed that within a few months, the victim survivors no longer blamed themselves for the crimes committed against them and began to accept the children they bore from their experiences in the bush (Kalla, 2015). TFV implementing partners reported that many girls began bringing their children with them to school as a sense of pride, instead of hiding them as a symbol of shame (Kalla, 2015). Reports also showed that family members began to reconcile and accept the victim survivor into their home and back into their life, creating a ripple effect throughout the community as more and more members were familiar with the programme, counseling, and a sense of understanding/acceptance (Kalla, 2015).

The importance of this programme shows how psychological rehabilitation can address stigma by assisting victim survivors on an individual basis, that can develop to a community-level approach.

Similar programmes are also implemented in Kitgum and Gulu. For example, individualized trauma counseling is provided in both Kitgum and Gulu districts (TFV, 2014(c), p.32). Over 3,000 victim survivors from SGBV have been treated in northern Uganda since 2008, and 90% of those assisted have reported a feeling of satisfaction with the programme (ICRW & TFV, 2013, p. 27). Many victim survivors report that these programmes have helped them to stop blaming themselves, to recreate a bond with their children (born from rape) and accept the crimes that have been committed against them (Kalla, 2015). Ms. Kalla explained that TFV has seen that these are crucial first steps in the recovery of a victim survivor, and for the healing process of the community (Kalla, 2015).

The individual counseling offered through psychological rehabilitation programmes has assisted women survivors to step out into their communities with heads held high, not ashamed of themselves or their children (Kalla, 2015). When the victims no longer blame themselves for the crimes committed against them, and can speak about their stories, the first step in community healing is taking place (Kalla, 2015). The next step is to share this story with the community, and start a process of healing with those surrounding the victim survivor, beginning with close family and friends and moving to the community as a whole (Apoyio, 2015). Experts on the ground in Kitgum and Gulu have indicated that both districts have moved from the individual level to the community level in past years.

Kitgum

In Kitgum district, focus is placed on community pressure on district leaders to make change in social norms and political policy to ensure that women are presented in DDR programmes and governmental post-conflict reconciliation projects (Acana, 2015). Ms. Acana advocates for a community understanding through group-based advocacy and story telling, and utilizes that motivation for the community to demand action from key decision-makers and leaders within the community (Acana, 2015).

 Tools utilized to increase advocacy and make it accessible to the community has been through conducting screenings of advocacy films that

document the crimes committed against women. Such advocacy films have reached over 5,000 people in Kitgum district since 2010 (Acana, 2015). The films target community members to create a sense of understanding and knowledge around SGBV crimes, women's stories, and the suffering that follows. The main strategy is that such screenings will mobilize the public to take action, to demand inclusion from their community leaders to assist women in their rehabilitation process, and to implement these needs in DDR processes and post-conflict recovery measures.

By taking this approach, women are included in governmental action, and are recognized on an institutional level (Acana, 2015). Such recognition leads to legitimization and thus, a reduction of social stigma (Acana, 2015).

Gulu

In Gulu, a different strategy is utilized with the overall objective of creating a critical mass around victims of SGBV and to spur victim survivors into advocates for change (Apoyio, 2015). This overall programme allows for the community to build networks, erase stigma, and discuss the conflict and its effects in an open dialog.

JRP utilizes story telling and advocacy to generate a community-dialog and foster understanding within the group (Apoyio, 2015). Through theater, JRP and WAN have made discussions around SGBV more accessible and less of a taboo in order for the community to have a clear and open dialogue around the crimes committed against women and their plight since (Apoyio, 2015).

Surveys conducted by JRP after the implementation of the programme with key leaders help to understand and assess the feeling of stigma. These surveys have indicated that community dialogs have created a space to engage the community with leaders, youth, and elders, and that after 6 months of regular dialogs community leaders have responded positively in regards to stigma and the community's response to such programmes (Apoyio, 2015).

Conclusion

Within psychological programming, there is a clear difference of approach and opinion. Ms. Kalla has placed emphasis on healing through trauma counseling first on an individual basis, moving to group counseling with those close to a victim survivor as being at the fore front of ending social stigma and ostracism of victim survivors of SGBV (Kalla, 2015). Ms. Acana and Ms. Apoyio have placed emphasis on community healing and dialoge as the most benefical way of ending social stigma through an approach of understanding. Both experts, Ms. Acana in Kitgum and Ms. Apoyio in Gulu, have employed different strategies of engaging the community. Ms. Acana has emphasized an approach that lays focus on community members pushing community leaders to act in a top-down approach. (Acana, 2015) The main strategy in Kitgum is to advocate change in social norms and political policy from community leaders, with an approach of 'lead by example'. If community leaders accept women victim survivors of SGBV, then the community will lead by their example, and accept the victim survivors into the community. (Acana, 2015) In Gulu, a different approach is used. Ms. Apoyio advocates for community-dialogue and understanding. (Apoyio, 2015) The overall goal of WAN and JRP is for transitional justice measures to be employed for women in northern Uganda, however the organizations place heavy emphasis on community cohesion and healing before these overall goals can be reached. (Apoyio, 2015)

The difference in approach and programming in both districts presents an interesting challenge in the analysis of the programmes and their effectiveness in each District. Ms. Kalla was not able to report on the success of programmes in Kitgum and Gulu district specifically, but on the success and challenges of the TFV as a whole in northern Uganda (and the DRC). Therefore, the analysis and understanding of the effectiveness in each case relies upon the information provided by Ms.Apoyio and Ms. Acana.

When discussing the success of programmes with each expert (Apoyio and Acana), a question was asked on how stigma had been reduced from the programme's implementation in the district to today and how this was measured.

Ms. Apoyio noted that in Gulu district, social stigma had been greatly reduced since implementation in 2009. (Apoyio, 2015) There was significant decrease in the amount of women requesting assistance from local and international NGOs to assist them and their children with basic needs (housing and food), showing that these women (victim survivors) were able to reintegrate into their communities. (Apoyio, 2015) This measure is important because the ability for victim to survivors to have basic food and shelter means there is a general acceptance by family and/or close neighbors and friends. (Apoyio, 2015) Communities are close knit in Gulu and surrounding villages, when victim survivors return from the bush, most are turned away from family and friends, or at least this was the case when Ms. Apoyio started programmes. (Apoyio, 2015) Then, these women would come to NGOs and beg for assistance. (Apoyio, 2015) In recent years, "we have seen this number go down and it has been important for the quanatative measure". (Apoyio, 2015) What has been key is also the success Ms. Apoyio has noticed in the community,

> "less people are demanding programmes to assist them in this regard. This is very important as it shows there is less of a demand. People, especially victim survivors, don't see social stigma as the pressing issue that requires involvement. It is still important, but not the most pressing issue as it was when we stated the programme". (Apoyio, 2015)

Unfortunately, programmes in Kitgum do not seem to echo this message. Ms. Acana spoke about the programme's involvement in Kitgum since 2006, noting that she has reached over 1,000 people at community advocacy events every year (Acana, 2015). Since importance is placed on advocating at the descion-maker and community leader level, Acana has placed importance on follow-up with these leaders in order to make change. Since 2006, changes have been in poltical policies, most notably the inclusion of women in the Ugandan government's Peace, Recovery, and Development Plan (PRDP) (Acana, 2015). However, only a handful of leaders (3 or 4) have spoken out against social stigma imposed on victim survivors of SGBV (Acana, 2015). Acana noted the importance that these leaders had stopped making statements allowing and furthering stigma, but also highlighted her disappointment that more had not made positive steps in combatting it through dialog with community members (Acana, 2015). Therefore,

Ms.Acana still sees an extreme need to combat social stigma in Kitgum district. The need has slightly reduced over the years, but stigma is very much present in Kitgum today and needs attention (Acana, 2015).

In assessing the implementation of psychological programmes in Kitgum and Gulu, it seems that trauma counseling has assisted very much on the individual level, so much that both experts on the ground were able to put so much emphasis on the community. However, the community psychological assistance programmes are in question and their importance as relates to the TFV is explicit as the TFV moves forward in implementing new individual and community-based approaches this year. Gulu district has seen a reduction in stigma through community dialogues facilitated through theater that allows for a sensitization to SGBV. Kitgum district has experienced a minor reduction in stigma when utilizing a leader-targeted approach in ending stigma.

CHAPTER 6: CONCLUSIONS AND RECOMMENDATIONS

Conclusions

This thesis began by asking the question of which TFV programme was most successful at reducing social stigma and why. Through the research of existing academic works, another question was posed- should these programmes target an individual or a community or both?

In the analysis of the TFV's programme, mixed results were presented in the expert interviews and the comparative case study. The TFV itself had found that the most successful programme they had implemented to date in reducing social stigma was an individualized approach that focuses on and psychological rehabilitation through first targeting a victim survivor for trauma counseling and then widening the scope to address the community surrounding the victim survivor, first with family and friends. This programming approach was supported by Durbach & Chapppel as well as Spangaro et al. and reflected the importance shown by these authors in ensuring that victim survivors are directly impacted in post-conflict reconstruction and reconciliation programmes. The individual approach, as explained by Ms. Kalla as the most successful programme the TFV has implemented, begins at the most basic level of healing and assists a victim survivor in no longer blaming themselves for the crimes committed against them. Then, with time, the victim survivor is re-introduced into every day through school and community involvement. The last step is to bring in the community directly surrounding the victim survivor, family and friends, to offer counseling and to foster a sense of understanding and acceptance within the victim survivor's close community.

Interviews with experts on the ground told a slightly different story. Evelyn Amony, a victim survivor herself, highlighted the importance of first addressing the physical needs of victims before the psychological needs. Ms. Amony argued that the stigma that was first attached to victim survivors with vaginal injuries, as it is an external injury that was easier to label than the psychological trauma that most SGBV victim survivors carry. Therefore, the first step in reducing stigma

should address the physical injuries a victim survivor faces through an individual physical rehabilitation approach. Spangaro et al. touch on the importance of physical healing as well, arguing that physical injuries are usually the largest hindrance to community based approaches. The authors, as well as Ms. Amony suggest that physical injury is the most external way to label a victim survivor and therefore the stigma attached to the physical injury are more prevalent and pressing to the victim survivor.

 Nancy Apoyio and Judith Acana both seem to follow the argument presented by Bastick at al., placing emphasis on the importance of community-based approaches that target the community as a whole. Ms. Apoyio argued that the most effective approach in this regard was community dialogue made easier through theater that allowed SGBV victim survivors to tell their stories in a safe space, to be understood and accepted. Ms. Acana presented yet another approach, arguing that targeting advocacy towards district leaders as the key change-makers in order for change in the community to made top-down by the example set by the leaders within the community.

With such different approaches, the question of 'which works best' begs to be answered. The best programme is explicit: a programme that is flexible and is able to address the needs of victims as they are presented in different communities. Even communities that have a similar gender make-up, population, economic structure, with the same amount of returning victim survivors retuning with children have different needs. Conflict does not always affect even the most similar communities in the same way, and therefore any post-conflict programme must be able to adjust in this regard.

As noted by Ms. Kalla, the best approach is one that includes both individual and community-based elements so that individuals themselves can overcome trauma, and the community as whole can work to rebuild trust and relationships. This seems best fit through the psychological rehabilitation programme offered by the TFV.

The body of this research noted in the overview of best practices section of this thesis presents a number of examples within the psychological rehabilitation

that exemplify a programme that involves the individual, and assists the community in one. Spangaro et al. conclude that post-conflict programming must include the two approaches, individual and community, to ensure longevity and success, further building on the opinion presented in the expert interviews.

Trauma counseling that offers all over healing, both mentally and physically is the most successful of these programmes. Noting the responses of both Ms. Kalla, Ms. Apoyio, and the first-hand account of Ms. Amony, trauma counseling is the best long-term programme that allows for healing on an individual and community level. The example provided by Ms. Kalla in regards to northern Uganda ties these responses together. The most success the TFV has experienced has been when an individual is assisted from their most basic needs, food, water, shelter, and mending to external injuries, to support in their psychological health. Not only have victim survivors reported after such programmes that they themselves feel as if they are not responsible for the crimes they have committed, through counseling targeted at the individual and their families, close relations to the victim survivor also are sensitized to the crimes committed against the SGBV victim survivor.

These family members are the change makers in society, along with the victim survivors themselves. They are able to take the lessons learned from the trauma counseling and advocate their message at the lowest grassroots level, through daily conversations and encounters with others in the community. Other programmes offered at the community-level, such as community dialogs and theater are made possible through the grassroots movements started by trauma counseling and build upon the framework of success.

Recommendations

The research presented in this thesis has shown that a great deal of work has been invested by the TFV and numerous other institutions and international/local NGOs on the ground to make a difference, to spark change. However, more work needs to be done in order to ensure a safe and secure world where victim survivors of SGBV are not stigmatized and ostracized by their own communities upon their return.

Beginning at the TFV level, some practical recommendations lie within the internal structure of the organization itself. Currently, the TFV relies upon implementing partners at the grassroots level to assist in the execution of the programmes. In the interview with Ms. Kalla, it became clear that these partners are strong stakeholders in the effectiveness of a programme, and key lessons learned by th TFV in previous years have revolved around this issue. (Kalla, 2015) The TFV can be more conscious in choosing partners, preferably opting for women's grassroots movements (such as WAN and JRP) to implement programmes instead of more politically driven partners. In the past, successful programmes, such as radio talk shows, were ended because the implementing partner was no longer broadcasting a message that the TFV could support. (Kalla. 2015) While problems like this will inevitably arise in a large institution operating from afar, a simple shift in strategy regarding the partners responsible for implementation could avoid some of these issues.

Furthermore, many of the programmes set to be implemented in 2015 are still waiting for approval of the ICC Registry. Simply put, the bureaucratic system in place with the TFV and the ICC make the progress of new programming slow, inefficient, and ineffective. The TFV is currently operating only two programmes in northern Uganda. While these programmes are successful, the TFV is willing and able to do more. However, due to a delay in the contractual agreements within the Registry of the ICC, these programmes are on hold. In order to ensure that the TFV is able to work as effectively as possible, a change should be made to move towards a more independent trust fund as opposed to an institution that relies on the beureatucratic system of an already slow institution.

Finally, some recommendations for further research. Scholars in this field are diligently involved in bringing the plight of victim survivors to light, especially with the silence around the crimes until recent years. What is needed now is testing theory in practice. A great deal of literature focuses on theory, small sample sizes, and expert interviews. The quantitative field work is lacking when looking at the implementation of programmes on the long-term, especially when it comes to stigma of SGBV. Future research on the topic could fill this void

and answer the questions that many have been asking for years – how can we solve the problem of stigma once and for on a long-term scale?

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APPENDIX 1: EXPERT INTERVIEWS

Krisin Kalla

Deputy Director and Senior Programme Officer, Trust Fund for Victims

Kristin Kalla spearheaded the TFV's programme for victims of SGBV and oversaw its implementation in her time as Director of the Trust Fund. She offers a first-hand account of the project's barriers and successes, as well as an expert opinion on the correct approach. Ms. Kalla also has first-hand experience in the implementation, review, assessment, and adjustment of the programme and is therefore considered the top expert in gender programming as well as the key stakeholder with the Trust Fund currently. She will offer and insider perspective on the Trust Fund's current programme and an informed perspective on the best programme for reducing stigma.

In the interview, Ms. Kalla spoke in detail about the current status of the TFV programmes in Uganda and the progress that has been made since the programme's inception to current status, as well as the current challenges faced by the TFV in implementation of new programming.

Currently, the TFV has two active programmes in Uganda. Other programming, as mentioned in the 2014 progress reports, has since ended due to a lack of funding and/or planned transitions taking into account the implementation of new programmes (as mentioned in the Winter 2014 progress report and TFV Strategic Plan 2014-2017). In 2015, one physical programme remains with a partnering local NGO, AVCI, providing physical referrals for prosthetics and physiotherapy for those who have experienced loss of limbs, as well as injuries related to the conflict. These injuries can include SGBV, and referrals within this programme are often offered. (Kalla, 2015)

A psychological rehabilitation programme is also being implemented in Kitgum, Pader, Gulu, and Lira and focuses on the training of counselors on the ground and building of capacity for the counselors to be able to address the needs of victim/survivors of abduction as well as SGBV. Material support is also (minimally) tied in, as the counselors are also conducting the building of small buildings called "healing huts" as a place for the community to meet together or

with the counselors individually to tell their stories and heal on both an individual and community level. (Kalla, 2015)

Ms. Kalla emphasized the success of the material support programmes before the programme's transition in 2013 and the importance of the truth telling and healing of memories involved with the material support. (Kalla, 2015) She emphasized the lessons learned through this approach, noting that it assisted the TFV in understanding the need for a safe space to share stories and for the community to heal as a whole. However, Ms. Kalla noted that this was successful as a complementary programme, not as a programme in itself. (Kalla, 2015) With the end of material support in northern Uganda in 2013, the healing of memories was transitioned to be included with the psychological rehabilitation in some programmes. (Kalla, 2015) While this programme was successful, the importance of healing of trauma, allowing for a victim/survivor of SGBV to accept herself and to have her close community (family, neighbors, etc) accept her and her children proved to be much more effective than a generalized community approach. (Kalla, 2015)

The TFV came to this conclusion after a continuation from the External Evaluation in 2013. (Kalla, 2015) Each programme is now implemented with a survey system and follow-up interviews done directly by the implementing partner NGO on the ground and reported back to the TFV. (Kalla, 2015) The responses within the interviews were clear that individuals who were treated on a case-to-case basis were much happier and more satisfied in their everyday life than victim/survivors in a community that had only generalized community-based approaches.

Ms. Kalla then explained what she, and the TFV, sees as the most successful programme in northern Uganda that reduces social stigma. A trial project in Pader district began in 2013 that focused on former girl child soldiers who returned to their community after their abduction with children born 'in the bush' (usually due to forced marriages to high rebel LRA commanders). (Kalla, 2015) DDR programmes in Uganda at the time did not take into account special programmes needed for girl child soldier's rehabilitation, and instead focused on male child soldiers. (Kalla, 2015)

Taking into account the need for a different approach for female and male returning former child soldiers, the TFV assisted in implementing a programme focusing on counseling for the victim survivor, and reconciliation between the mother and her child. (Kalla, 2015) Often, the mother (victim/survivor of SGBV) did not accept of the child because of the father, and neither the victim survivor nor the child was welcomed back into the community. (Kalla, 2015)

The programme provided a nursery for the children, and support for the victim survivor to go to school, learn life skills, and received trauma counseling. (Kalla, 2015) After a few months within this system, family members and those close to the victim were brought to the center and offered counseling and relationship building with the mother and the child. (Kalla, 2015)

Within a few months, the victim survivor no longer blamed herself, and became accepting of her children. (Kalla, 2015) Many victim survivors starting bringing their children with them to school as a sense of pride, instead of hiding them as a symbol of shame. (Kalla, 2015) Family members began to reconcile, accept the victim/survivor into their home and back into their life. (Kalla, 2015)

This kind of programming created a ripple effect and reeducated stigma from the inside out. The programme created a system where SGBV was no longer a taboo subject and was something that could be talked about amongst the community. (Kalla, 2015)

 Stigma itself was reduced when the victim survivor courageously come forward, confidently told their story and the community was able to see that numerous girls had experienced the same violence. (Kalla, 2015) Victim survivors were speaking out against SGBV, and a large number of the community (those who were close to the victim survivors) were supporting them. (Kalla, 2015) It was now more accepted to understand that SGBV is a crime and the women who experience are victims, than to ostracize a victim and label her negatively. (Kalla, 2015)

Noting the key successes of the TFV, Ms. Kalla explained that individual and community-based approaches are necessary for successful programming that assists women who face social stigma against SGBV.

> "I think that a mix of the two [individual and community approaches] is necessary in order for a community to truly heal. In order for a group of people to come together, be cohesive, and celebrate peace in the long-term there has to be healing on both ends. An individual needs to heal from trauma independently; the community needs to heal from trauma collectively in order to foster a situation of understanding and respect. Without one or the other, a programme will never be truly successful." (Kalla, 2015)

Nancy Apoyio
Gender Programme Officer, Justice and Reconciliation Project (JRP)

Nancy Apoyio is a strong gender-justice advocate who works with the Justice and Reconciliation Project, and is also a member of Women's Advocacy Network (WAN). She has extensive experience in the field of stigma and post-conflict reconciliation in her two advocacy roles. Since Nancy is located in Gulu, and has lived in Gulu during the conflict with the LRA, she offers a rare first-hand account of the effect of sexual-violence on women, as well as the need for effective programming in assisting women who are victim/survivors of such crimes.

Nancy touched upon the plight of victim/survivors in Gulu, noting that very often SGBV survivors are ostracized within their communities due to a culture of stigmatization stemming from a large misunderstanding of what a woman has experienced. (Apoyio, 2015)

> "In most African societies women are blamed for being raped. Victims of SGBV are called prostitutes and so on. One of the major challenges in reducing stigma is the socio-cultural norms. Sex is silent topic in our culture and not talked about. Talking about SGBV therefore become very difficult in our society. Negative cultural norms such as looking at a woman as a sex object makes it difficult for the communities to accept SGBV as a crime or even discuss it. Infact in Achioli there is no one word to mean rape, it is translated as *'butu tek tek* meaning sleeping with some forcefully'. Therefore engaging communities on such a sensitive topic is very difficult " (Apoyio, 2015)

In order to combat these misconceptions, Nancy is responsible for implementing community-based programmes in Gulu to engage the community, create awareness and to ensure that a positive attitude towards SGBV is adopted. (Apoyio, 2015) In order to fulfill this objective, the Justice and Reconciliation

Project (JRP) in association with the Women's Advocacy Network (WAN) have implemented a number of programmes to address SGBV and the community's feelings around it:

- Community dialogue sessions with WAN and local opinion shapers, religious leaders, and traditional leaders to develop positive attitude toward SGBV and so that WAN and women within communities can play a key role in influencing the community (Apoyio, 2015)
- WAN and women in communities hold community outreach meetings and radio talk shows to sensitize the community towards SGBV (Apoyio, 2015)
- Information, education and communication (IEC) materials (T-shirts, drawings, handouts, etc) are distributed within communities to raise awareness (Apoyio, 2015)
- Theatre activities (drama and songs) incorporated into community dialogs to ease the barrier of communication and make a sensitive topic such as SGBV relatable and easier for the community to discuss (Apoyio, 2015)

These programmes are implemented by WAN and JRP with the overall objective of ensuring transitional justice for victim survivors of conflict and to ultimately lead to a national level of accountability for widespread and systematic SGBV. (Apoyio, 2015) In order to do so, a critical mass around victims of SGBV must be created by spurring victim survivors into advocates for change, while also creating a space to engage the community with key leaders, youth, and elders. (Apoyio, 2015) This will allow for the community to build networks, erase stigma, and discuss the conflict and its effects. (Apoyio, 2015)

In order to assess the programmes, JRP and WAN carry out baseline surveys at the beginning and end of each project in order to assess the attitudes of victim survivors and how they feel within their community over time. (Apoyio, 2015) Surveys are also conducted with key local leaders in order to assess their feelings of stigma within the community from a leadership perspective. (Apoyio, 2015) Finally, those who are close to victim survivors such as neighbors, spouses, and siblings are targeted and surveyed in order to assess the success of a programme and it's impact on stigma over time. (Apoyio, 2015)

From the research and assessment done by JRP and WAN, targeting grassroots community members and individuals on a smaller scale has proven effective, especially in communities that have utilized theater and drama within community dialogue and outreach. (Apoyio, 2015) Grassroots communities, smaller sub-districts outside of Gulu with less than 1,000 community members, have shown that over a 6-month period and the implementation of monthly community dialogs, stigma is reported as reduced from all three key target areas (victim survivors, key leaders, and close relations to victim survivors). (Apoyio, 2015) Nancy explained:

> "This is because both the communities and the survivors have the platform to discuss and share views and reach a common understanding. Theatre helps in simplifying issues and making a sensitive issue become comic. Community members relax and find themselves coming up with solutions for the benefit of the women." (Apoyio, 2015)

Judith Acana
Uganda Programme Officer, Women's Initiatives for Gender Justice

Ms. Acana oversees the implementation of programmes in Northern Uganda by the Women's Initiatives for Gender Justice. Considering that the Women's Initiatives implements similar programmes as the Trust Fund, Judith Acana offers a non-biased perspective on the success of implementation of programmes and their impact on social stigma. Judith regularly visits and implements projects in Gulu and Kitgum and therefore has an on the ground perspective of these two communities and can compare the two. However, since Judith lives in a village in close proximity to Kitgum, she can offer first-hand experience of the implementation of TFV programmes, what is working, and it's effect on the community.

Ms. Acana described the key elements utilized by the Women's Initiatives for Gender Justice in a number of districts in northern Uganda (including Kitgum and Gulu).

- Strategic video screenings of a gender justice film "No Longer Silent" that features testimony of a number of victim/survivors of SGBV. The film is screened in a number of districts as a key advocacy tool to inform the

community of SGBV crimes committed against women and the long-term effects of such crimes. (Acana, 2015)

- Targeting key-decision makers to make changes in gender policy and post-conflict reconciliation programmes to reflect the struggle of women. This is done by lobbying the decision-makers to attend the strategic screenings, and by attending key meetings and advocating for the inclusion of a gender-sensitive approach. (Acana, 2015)

Ms. Acana emphasized the existence of stigma in Kitgum, even though the community has seen peace for a number of years, highlighting the importance of a community-based approach in the healing process and reduction of social stigma. (Acana, 2015) According to Ms. Acana's experience, the most effective programming technique in reducing stigma is creating an understanding in the community that is personified in action. (Acana, 2015)

> "The first step is making the members of the community understand what a woman has gone through. Making them see that she is a victim, she did not want this, she did not want to be the wife of these men. She was forced, it is painful for her. Once the community understands, they must speak to the leaders, make them hear their voices, hold them accountable to make change." (Acana, 2015)

Ms. Acana noted that through conducting screenings for over 5,000 people during her time with the Greater North Women's Voices for Peace Network[8] and with the Women's Initiatives, this is the most effective way of reducing stigma and ensuring that women are once again welcomed into their communities.

> "The people follow the leaders, and the leaders follow the people. In order to make change you have to make both of them hear the voices of the women. That is what we are here to do." (Acana, 2015)

Evelyn Amony
Chairlady of Women's Advocacy Network, Programme Associate with Justice Reconciliation project, and former LRA abductee and SGBV victim survivor

Evelyn Amony is a founding member of the Women's Advocacy Network (WAN) and is a key advocate in the field of gender justice. Ms. Amony was abducted at the age of 11 by the LRA and spent 11 years in captivity. She has

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[8] Partner organization of the Women's Initiatives for Gender Justice that assists in implementation of strategic screenings of gender justice films

experienced stigma first hand within her community, a sub-district of Gulu, and has been rejected by her community for returning with a number of children who have been fathered by a key LRA leader.

Ms. Amony is thus able to offer an important perspective into what life is like as a stigmatized woman. This experience has led her to create a network of young women (WAN) to reduce stigmatization, and sensitize communities to the plight of SGBV victim survivors. Her expertise and first-hand experience assists in understanding stigma, the needs of women, and why communities behave so aggressively towards women like her-who were abducted and finally returned home to find that they are no longer welcome.

With this first-hand experience, and extensive background as a key advocate who has planned and implemented the work of her own organization, Ms. Amony is a great asset in understanding the conflict and the programming approaches effective for women facing social stigma. Since Ms. Amony is also located in Gulu (with Nancy Apoyio), she will be considered an expert for the district of Gulu.

Ms. Amony has focused a great deal of her work around advocating for education and understanding of what women experience after conflict. In her home district of Gulu, the greatest challenge for Ms. Amony upon returning home from 11 years with the LRA was taking care of her three children, born from a forced marriage to a LRA leader, gynecological issues associated with un-assisted birth in the 'the bush', and living through the trauma of what she had experienced while in captivity. (Amony, 2015)

Even more surprising is that once Ms. Amony was able to leave the treatment center that nursed her back to health (she had been too weak and sick to leave a hospital center for 6 months upon her return), she found that her family no longer trusted her. (Amony, 2015) She and her children were feared and not accepted into the community they once called home.

> " There was a massacre [conducted by the LRA rebels] in the town where I come from. Many people were killed. I lost 70 people within my own family. The community thinks that I was involved in this massacre, and because of that they did not want me to return. They see my children as

[rebel leader] children and do not understand that these are my children, I saved them from the bush. I raised them, the LRA did not. I was forced to serve as a wife to [rebel leader], it was not my choice. The community does not understand." (Amony, 2015)

Eventually, Ms. Amony was able to reconcile with her family. Through trauma counseling that assisted in mutual trust rebuilding, she was able to come home with her children and begin readjusting to life outside of the LRA. Ms. Amony was treated at a center that focused on relationship building and trauma counseling. The trust and relationship building was necessary for Ms. Amony and her family. Her family and community members associated her with the LRA and massacres that killed a number of people within the community (Amony, 2015); especially since LRA abductees were known to be forced into killing their own families. (Trust Fund for Victims, 2014(a), p.13)

Through her treatment, Evelyn was able to learn that within the LRA, she had been misconstrued and brainwashed into thinking that her family was the reason she experienced such horrible acts. (Amony, 2015) Ms. Amony was offered counseling to understand that her family did not have a role in the crimes committed against her, as well as trauma counseling to overcome psychological effects such as flashbacks, nightmares, and extreme anxiety. (Amony, 2015) Her family also received counseling through this center to understand the crimes that were committed against Ms.Amony, and the effects such crimes have had on her psychologically. (Amony, 2015) She and her family were also offered an overall education and background into the conflict and the LRA to understand that Ms. Amony is a victim in a systematic use of such violence (SGBV). (Amony, 2015)

Once Ms. Amony was able to return to her community, be accepted, and to have her children accepted, she was propelled to assist women in her same situation. (Amony, 2015) She created the Women's Advocacy Network (WAN) to assist the voices of women in all areas affected by the war.

"I want to try and help women and the community understand that whatever happened in war, it is not our fault- we did not choose this." (Amony, 2015)

Through assistance with JRP, WAN has been able to implement a number of projects that assist in the voices of women being heard, to address the plight of women returning from captivity and those affected by the conflict to be able to

receive transitional justice measures, and overall peace (these programmes are laid out with Nancy's Apoyio's interview). (Amony, 2015)

With her first hand experience with stigma, and extensive work around it for the past 10 years, Ms. Amony is able to see the best programming approaches through an expert lens. (Amony, 2015)

> "Women must heal after war. They need to understand that the crimes committed against them are not their fault- they are not to blame. For true peace, the community also needs to know this. A woman returning home with children must be accepted by the community. She may have peace with herself, but will not be able to move on unless she is able to be welcomed and accepted back in the community with her children. It was difficult for me to overcome this, but once my children and I were welcomed into my family home, I was forever at peace. That is when I knew I needed to help other women I knew in the bush to find the same peace. This is what I work for everyday." (Amony, 2015)