

# Tracking the war on women in Darfur

Boston doctors detail accounts of rape, assault

By [James F. Smith](#)  
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Seated on a woven mat in a refugee camp in eastern Chad, Dr. Sondra Crosby of the Boston Medical Center listened with mounting distress as the women of Darfur came forward, one by one over 12 days, to tell her their stories of rape, beatings, hunger, and humiliation.

Their suffering had begun in the ravaged villages of their native Darfur in western Sudan after war broke out in 2003, but it didn't stop when they fled across the border into what they hoped would be the safety of refugee camps in eastern Chad. It goes on still, leaving thousands of women facing the specter of sexual assault each time they leave camp to collect firewood or visit the local market.

It is an endlessly unfolding tragedy the world hasn't summoned the will to do much about. Crosby and her colleagues suspected that six years into the conflict, no one had yet fully grasped the extent of the crisis of sexual crimes, and the relentless toll it is inflicting on its victims.

And so she and three other Boston-area medical specialists interviewed 88 women in November in eastern Chad. This morning they released the results in a report that offers unprecedented and disturbing details on the long-term effects of the assaults - as well as fresh evidence of the continuing violence against the women of Darfur, years after they fled the battlefield.

The study was issued by the Cambridge-based Physicians for Human Rights, partnering with the Harvard Humanitarian Initiative, two organizations with long track records in investigating rights abuses in conflict areas. While the use of rape as a weapon of war in Darfur has been noted throughout the conflict, the new report provides comprehensive evidence from detailed, structured interviews as well as physical examinations of the victims.

The 88 women interviewed reported suffering 32 rapes. Of those, 17 occurred in Darfur and 15 in Chad. Seven women reported being the

victim of gang rape in Darfur, and three women reported being raped more than once. For two of them, rape in Darfur was followed by rape in Chad.

"What is striking is the extent of rape and fear of rape in Chad itself," said Susannah Sirkin, deputy director of Physicians for Human Rights. "So it's a two-fold revelation of real horror and shame and sorrow, and really of failure."

The story of one woman, in particular, transfixed Crosby, who lives in Dedham with her five adopted children and has made it her calling to investigate cases of torture and abuse.

"The woman told me . . . she was beaten on her arms so badly that she couldn't use them, and she was raped by four to six men," Crosby recalled. "She witnessed the same thing happen to others who were hiding with her. She was eight months pregnant at the time. She described giving birth to a dead baby, and how painful it was. After the rape her husband divorced her."

Later, she was raped again, and had a child by the rapist. And yet she has not given in to despair.

"Incredibly, she is resilient, strong, and proud despite everything that has happened to her," Crosby said.

In addition to conducting individual interviews lasting 90 minutes to two hours, the researchers carried out physical examinations of 21 of the women who reported assaults. Those exams followed the guidelines of the international "Istanbul Protocol" to assess the veracity of abuse claims, and the findings corroborated all 21 women's accounts, the report said.

Farchana Camp, where the interviews were conducted, is home to about 20,000 people, more than double its intended capacity. The camp, about 30 miles from the Sudan border, is one of 12 refugee centers in arid eastern Chad. It is unfenced, and only a couple of miles from Farchana village, so female refugees are vulnerable to assaults by local men - and also by Chadian soldiers who are based near the camp, the report says.

More than 260,000 refugees from Darfur live in camps in Chad, a bitterly poor, landlocked country where the weak government is under threat from rebels said to be backed by the Sudanese government. The report says that while the government of Chad has not done enough to protect the women or prosecute those responsible, it is finally deploying more resources to protect the women.

Many officials still, however, remain blind or indifferent to the crisis. The study quotes a local official as saying that women who say they were raped are usually trying to explain away consensual sex.

Deteriorating security in eastern Chad makes it extremely difficult for UN officials and aid groups to operate, and the situation is worsening quickly as thousands more refugees flee into Chad to escape unrest in the Central African Republic.

Crosby, who adopted two of her children from Sierra Leone in West Africa after the brutal civil war there, understands the trauma of sexual violence. She is medical director of the Boston Center for Refugee Health and Human Rights at the Boston Medical Center, which sees more than 500 patients a year from 60 countries, many of whom have suffered abuse or torture.

But the Chad trip was draining even for her. She was away for three weeks, her longest trip away from her husband, Alan, and her children. The Boston team flew to Paris, then to Chad's capital, N'Djamena, and took a UN flight to the eastern regional town of Abeche. From there, the doctors had planned to join an armed UN convoy for the several-hour drive to Farchana because of the risk of hijackers and bandits. But after just a few minutes, the impatient convoy sped away from the Boston group, leaving them to travel alone in two cars through the bush for hours. But the findings justified the effort, and hazards.

"What was very striking is that for many women this was the first time that they have been able to tell their story. It's our sense that sexual violence is extremely underreported," Crosby said. "And it has torn apart whole communities."

The report, titled "Nowhere to Turn," notes that the data cannot be

used to make a quantitative projection of the prevalence of sexual violence. Rather, the goal was to understand in-depth the experiences of women who were raped or otherwise assaulted, and the long-term impact of living in continuing danger. Officials at the camp let it be known that visiting doctors were available to discuss assaults or other issues, and the women came to tell their stories. For many, depression was as serious a problem as the lingering physical after-effects of the assaults. And the women all reported that their families are constantly hungry.

"It was not easy to be detached," Crosby said. "It was a difficult experience for me, certainly, just to see the profound amount of ongoing suffering. As a doctor, at least when I see patients here who experience torture I can help them with the healing process. In the camp, these women have been traumatized again, and they have all these psychological and physical pains, and you feel helpless. We can't help them with the healing process, aside from listening to their stories, respecting them, validating their pain."

The interviewing was laborious. Most of the women spoke only their tribal language, Masalit, so their words had to be translated into Arabic and then into English.

The four health specialists were supported by six translators, drivers, and support staff.

Dr. Linda Piwowarczyk, Crosby's colleague at the Boston Medical Center, who is the long-time director and co-founder of the refugee center, and Dr. Julia VanRooyen, a gynecologic surgeon from the Harvard project, also worked in the field, along with Karen Hirschfeld, a public health specialist who was director of Physicians for Human Rights' Sudan program at the time. She also did fieldwork and was the lead author of the report.

"I think the most surprising and distressing part of this for me was to find out that their nightmare is still going on in Chad," Crosby said. "It didn't end in Darfur. It's not as if they're now waiting it out in a safe place in Chad. Their trauma has been compounded. . . . It's just been an ongoing nightmare for them. It doesn't stop, it goes on every day."

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