

***No Hiding Place:
Politically Motivated
Rape of Women in
Zimbabwe***

**Report produced by the Research and
Advocacy Unit [RAU] and the
Zimbabwe Association of Doctors for
Human Rights [ZADHR]**

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EXECUTIVE SUMMARY

Politically motivated sexual violence against women in Zimbabwe takes many forms. These include extreme violence, gang rape and insertion of objects (bottles and sticks) into the women's genitalia. This report is the first coming out of Zimbabwe focusing particularly on politically motivated rape; the aim of the study was to provide a valid and reliable description of cases of politically motivated rape. Since this was a clinical rather than an epidemiological study, there was no attempt to determine either the prevalence of political rape or to establish how representative the sample was.

The sample was chosen from women members of a voluntary network set up to provide support for female victims of politically motivated rape. A total of 34 women were interviewed, but 7 were excluded from the study as they could not be traced on follow-up for medical examinations and finalizing and signing affidavits. Hence, the data is drawn from a final sample of 27 women.

Rapes were reported as occurring in 2001 [1], 2002 [1], 2003 [1], and 2008 [24]. Hence, most rapes [89%] occurred in 2008, but, of course, there is no suggestion that rape was actually more common in 2008 than in any other year.

There have been many reports about the use of "*bases*" as places where violations take place, but, for this sample, the rape was just as likely to have taken place at or near the victim's home [15] as at a base [12].

Most [21] were beaten prior to rape, some quite severely.

Over three-quarters [21] were victims of multiple rape, with an average of three rapists per incident. One woman reported a total of 13 perpetrators, and 14 women reported 3 or more perpetrators to their rape. One woman reported 3 separate rape incidences in June 2008 by a total of 13 perpetrators.

A distressingly high number of the rapes [11] took place in public, at or near the victim's home, and witnessed by the victim's family and children.

Ten women reported that their estimate of the number of perpetrators was only certain for a specific number, and that there could have been more than the number they specified as they had fallen unconscious, or had lost count as they seemed to be so many. They could be certain, however, of at least the number of perpetrators that they specified.

Most [23] did not report the rape to the authorities at all. Only 4 reported the rape..

Most of the women did not receive appropriate care for the trauma that they had experienced. Only one of the women reported having received therapeutic care for psychological consequences of the violence following the sexual assault. This is in contrast to the high proportion of study participants displaying symptoms of post traumatic stress disorder (PTSD) and the presence of some with symptoms suggesting psychotic depression.

Women in the study exhibited high levels of sleeplessness, nightmares, flashbacks, and hopelessness. A third of the women reported these symptoms, which are commonly associated with experiences of trauma. For some, flashbacks are triggered by large gatherings, particularly where political slogans were being chanted while others had recurring nightmares during which they relived the rapes. Traumatic memories may continue for extended periods of time.

Introduction

Women and girls hardly ever literally fight the world's wars, but they often suffer the most as both primary and secondary victims. It is the case that men too suffer, but women carry the differential burden of rape. In both ancient and modern times, rape has been used as a collective punishment for the defeated, but it has increasingly been used by countries not at war to cause terror and humiliation amongst the political dissenters; Zimbabwe is one of these countries.¹

Politically motivated sexual violence against women in Zimbabwe takes many forms. These include extreme violence, gang rape and insertion of objects (bottles and sticks) into the women's private parts. In some of the instances, the rape is committed at the instigation of a military leader or war veteran, showing that it is a strategy to intimidate political opponents. Often used during election periods or periods of national importance,² it is quite evident that the rape is used as a psychological weapon in order to humiliate the opposition and undermine their morale. Internationally, rape is recognised both as a crime against humanity and a war crime, and it has been said to be a crime of genocide when it is committed with the intent to destroy, in whole or in part, a targeted group³. The distinction between these three classifications of rape depends on the circumstances pertaining at the time: rape as a war crime would require a state of war, whilst rape as a crime against humanity or genocide could occur outside a state of obvious war. Politically motivated rape could occur short of any of these three situations, but this does not imply that it is any less serious.

The Global Political Agreement (GPA) acknowledges the fact that violence "dehumanises and engenders feelings of hatred." Violence against women should be addressed to ensure that there are no lingering feelings of hatred and anger in society which can be the cause of future conflict, especially in light of the fact that there is likely to be an election before the end of 2011. Talk of elections is gathering momentum with the latest utterances from President Mugabe that, "*We do not want to pass June 2011 without elections. We want acceleration of pace.*"⁴ Therefore Zimbabweans should anticipate violence as this is the norm during recent election campaign periods. It has been a successful tactic particularly in the 2008 Presidential election where thousands of women were subjected to all forms of atrocities in the name of politics⁵. None of the perpetrators have been called to account for the violence they committed.

In 2010, the Research and Advocacy Unit (RAU) conducted a study on politically motivated rape in collaboration with the Zimbabwe Association of Doctors for Human Rights (ZADHR) and the Doors of Hope Development Trust, a self-help organisation formed by and consisting of women survivors of politically motivated rape.

As a result of the continued use of women as weapons of war the United Nations (UN) Security Council promulgated Resolution 1325 in 2000, and followed this up with Resolutions 1820 and 1880 in 2008 and 2009, respectively, in recognition of women's treatment during conflict situations. Although Resolution 1325 has been in place for ten years, its implementation has been slow; only a small number of perpetrators of sexual violence against women have been convicted and jailed by international criminal tribunals for committing or commanding widespread sexual violence as a war crime.⁶ Since early 2010, the UN Special Representative to the Secretary-General on Sexual Violence in Conflict has set down a

¹ Moore J 'Confronting Rape as a War Crime'. CQ Global Researcher. 2010 Vol 4 page

² For example the MDC's Final Push in June 2003

³ Rome Statute International Criminal Court: UN Doc. A/CONF. 183/9; 37 ILM 1002 (1998); 2187 UNTS 90. Available http://www.icc-cpi.int/NR/rdonlyres/EA9AEFF7-5752-4F84-BE94-0A655EB30E16/0/Rome_Statute_English.pdf

⁴ ZANU(PF) Women's League Wants Mugabe To Rule Forever' <http://news.radiovop.com> (Accessed 18 October 2010)

⁵ CSVr (2009), *Subliminal Terror? Human rights violations and torture in Zimbabwe during 2008*. Report produced for the Centre for Violence and Reconciliation by Tony Reeler. June 2009. JOHANNESBURG: CSVr

⁶ *Prosecutor v. Anto Furundzija* - Trial Chamber II - Judgment - IT-95-17/1 [1998] ICTY 3 (10 December 1998); and *The Prosecutor v. Jean-Paul Akayesu*. Judgment - ICTR-96-4-T [1998] ICTR 2 (2 September 1998)

five-point agenda to reduce or eradicate gender-based violence. The agenda calls for an end to impunity for sexual crimes; the protection and empowerment of women and girls to enable them to contribute to peace initiatives; the strengthening of political commitments to ensure that violence against women is "not pigeon-holed as 'just a women's issue'"; and the realisation that "peace negotiations must address sexual violence early and fully to prevent war-time rape from becoming peacetime reality."⁷

The phenomenon of violations against women is not a new thing in Zimbabwean politics; it has been reported in the majority of human rights reports⁸ produced both locally and internationally since 2000 when the political landscape changed with the formation of the Movement for Democratic Change (MDC) posing a serious threat to the Zimbabwe African National Union–Patriotic Front (ZANU PF)'s power-base in the June 2000 parliamentary elections. Before 2000 there were reports of rape particularly during the liberation war and the Matabeleland massacres of the 1980s.⁹ There have been frequent assertions in Zimbabwe that rape has been used as a tool for repressing political opposition and winning elections. The reports mentioned above make these assertions, but no empirical study had been undertaken by Zimbabwean organisations¹⁰ until now.

This current study is based on 27 sworn legal affidavits and medical examinations of women who were raped because of their political activity or the activities of their husbands. The sexual assaults reported by this sample are ruthless, with horrific reports of gang rape. Some of the women were raped by numerous perpetrators until they lost consciousness. The medical examinations confirm genital trauma and other physical injuries consistent with rape as well as psychological damage.

The aim of this report is to raise the legal, social, medical, and psychological concerns surrounding the survivors of rape and how these can be addressed. Although justice was also on the survivors' agenda, assistance to move on with their lives was their top priority. The Ministry of Health and Child Welfare should have a programme catering specifically for victims of rape, and it is important to include the family as part of the healing process; involving the men as well as the children that may have witnessed the rape or those born as a result of rape. Sexual violence should be addressed from the perspective of the survivors¹¹ as it affects more than the survivors' physical wellbeing, but also impacts upon their psychological, economic and political status. Rape survivors need the co-operation of all sectors - government departments, civil society and development partners - to work together for proper healing to take place. It will also be important to ensure that national sexual violence laws are enforced and the culture of impunity is done away with in keeping with local, regional and international instruments¹², and that crimes against women will be investigated and prosecuted and the perpetrators brought to justice.

⁷ <http://www.irinnews.org/report.aspx?ReportID=90853> (Accessed on 27th October 2010).

⁸ Zimbabwe Human Rights NGO Forum *A Woman's Place is in the Home? Gender Based Violence and Opposition Politics in Zimbabwe*. (2006) page? Also see CSV (2006), *Women on the run: Women survivors of torture amongst refugees in South Africa*. Report produced for the Centre for the Study of Violence and Reconciliation and the Crisis in Zimbabwe Coalition (year) (vol) (page)

⁹ Catholic Commission for Justice and Peace (CCJP) and the Legal Resources Foundation (LRF) (2007) *Breaking the Silence : A Report on the Disturbances in Matabeleland and the Midlands* p. 13

¹⁰ Aids Free World was the first organization to specifically examine the issue of political rape in Zimbabwe. Aids Free World "Electing to rape: sexual violence terror in Mugabe's Zimbabwe" 2009 www.aidsfreeworld.org. (Accessed 09 September 2010). This report was supported by another report by the Medical Foundation in London. See Medical Foundation *Justice Denied: The experiences of 100 torture surviving women of seeking justice and rehabilitation* 2009 p 4.

¹¹ *The Nairobi Declaration on Women and Girls Right to Remedy and Reparation*. available http://www.womensrightscoalition.org/site/reparation/signature_en.php (Accessed 10 October 2010)

¹² The Southern African Development Community (SADC) Protocol on Gender and Development ,(2008) in articles 20-25 makes provision for the implementation of a variety of strategies aimed at eliminating all forms of gender based violence. There are specific stipulations for the provision of a comprehensive package of treatment and care for survivors of gender based violence. The protocol has specific targets to be achieved by 2015. Zimbabwe ratified the Protocol in October 2009. Also the African Charter on Human and People's Rights on the Rights of Women in Africa and the United Nations Security Council Resolutions 1325 and 1820.

Definition of Rape

In Zimbabwean law, rape may only be perpetrated by a male on a woman.

In terms of Zimbabwe's criminal statute¹³ any male person who knowingly has sexual intercourse or anal sexual intercourse with a female person, and, at the time of the intercourse, the female person has not consented to it, and he knows that she has not consented to it, or realises that there is a real risk or possibility that she may not have consented to it, is guilty of rape.

The absence of consent is a universal element of any definition of rape.¹⁴ However, the degree of coercion which should be considered sufficient to constitute a lack of consent is highly contested and difficult to define. At one extreme would be a requirement that the coercion consists of physical force which could not be resisted, whilst at the other end would be the situation where a man has sexual intercourse with his wife knowing that she feels obliged to allow this to keep the marriage intact due to financial necessity or for the well being of their children.

Whether this latter situation should constitute rape or not may depend on the circumstances of each particular case, and it is impossible to provide an all-encompassing definition. The solution of the legislature is to leave it to the judiciary to determine whether, in the particular circumstances, there was an absence of consent to sexual intercourse. The Zimbabwean definition is wide enough to allow the courts to take psychological and any other factors deemed to be coercive into account, thus conforming to the trend in international jurisprudence.

The establishment of a definition of rape under International Law came about in the International Criminal Tribunal of Yugoslavia Trial Chamber (ICTY) in *Prosecutor v. Kunarac*¹⁵ where a definition of rape was adopted as;

*...a form of aggression [whose] central elements cannot be captured in a mechanical description of objects and body parts... [and whose] variations may include acts which involve the insertion of objects and/or the use of bodily orifices not orifices not considered to be intrinsically sexual. [It is] a physical invasion of a sexual nature, committed on a person under circumstances, which are coercive. Sexual violence which includes rape is considered to be any act of a sexual nature which is committed on a person under circumstances which are coercive.*¹⁶

This definition emphasises a context of aggression and coercion, and it allows for the reformation of the standards of rape prosecution which may also 'assist in the creation of generally accepted international standards on the adjudication of sexual offenses.'

The Explanatory Note of the Rome Statute, which binds the International Criminal Court, identified incidences of rape as including where:

"The perpetrator invaded the body of a person by conduct resulting in penetration, however slight, of any part of the body of the victim or of the perpetrator with a sexual organ, or of the anal or genital opening of the victim with any object or any other part of the body." and "The invasion was committed by force, or by threat of force or coercion,

¹³ Section 64 of the Criminal Law (Codification and Reform) Act Chapter 09:23.

¹⁴ The lack of consent may, of course, arise through legal incapacity to consent.

¹⁵ See *Prosecutor v. Kunarac*, Judgment, and Nos. IT-96-23-T & IT-96-23/1-T (Int'l Trib. for the Prosecution of Pers. Responsible for Serious Violations of Int'l Humanitarian Law Committed in the Territory of the Former Yugoslavia since 1991 [hereinafter ICTY]), <http://www.un.org/icty/ind-e.htm>. (Accessed 9 October 2010).

¹⁶ See *Prosecutor v. Kunarac*, Judgment, No s. IT-96-23-T & IT-96-23/1-T

such as that caused by fear of violence, duress, detention, psychological oppression or abuse of power, against such person or another person, or by taking advantage of a coercive environment, or the invasion was committed against a person incapable of giving genuine consent”.

The international definition is understood to include situations where the victim may be incapable of giving genuine consent if affected by natural, induced or age-related incapacity.¹⁷ Prior to the Akayesu judgment of the International Criminal Tribunal Rwanda (ICTR), there was no commonly accepted definition of rape or sexual violence in international law. The definition given to these terms in the Akayesu case described rape as,

‘... a physical invasion of a sexual nature, committed on a person under circumstances which are coercive.’

And sexual violence which constitutes rape as

‘...any act of a sexual nature which is committed on a person under circumstances which are coercive...not limited to physical invasion of the human body and may include acts which do not involve penetration or even physical contact.’

Although there are international instruments prohibiting sexual violence during conflict, there have not been many successful prosecutions. Sexual violence continues to be systematic and merciless because of the failure to prevent and prosecute routine and widespread discrimination and violence against women during peace times. Women in Rwanda who were caught up in the vicious civil war in that country also experienced horrific acts of sexual violence.¹⁸ In Kenya, up to 3000 women were raped in the ethnic violence that erupted after the 2007 presidential elections.¹⁹ The examples above are only a few, and there are many more examples that can be cited²⁰.

There is anecdotal evidence that Zimbabwean women have been targeted and raped for voicing their political opinion by state agents and party supporters, as well as being targeted in order to coerce their male counterparts to stop their political activities. This is symptomatic of the very little respect for women’s rights in Zimbabwe evident in the legal discrimination and violence against women, as justified through cultural and religious arguments.²¹ This report is seeking to provide the empirical evidence of politically motivated rape.

2. Methodology

The aim of the study was to provide a valid and reliable description of cases of politically motivated rape in Zimbabwe. Since this was a clinical rather than an epidemiological study, there was no attempt to determine either the prevalence of political rape or to establish how representative the sample was.

The sample was chosen from women members of a voluntary network set up to provide support for female victims of politically motivated rape. A total of 34 women were interviewed, but 7 were excluded from the study as they could not be traced on follow-up for finalizing and signing affidavits. Hence, the data is drawn from a final sample of 27 women.

¹⁷ *Prosecutor v Akayesu*, Case No. ICTR-96-4-T.

¹⁸ Chinkin, C, *‘Rape and Sexual Abuse of Women in International Law,’* 1994, p334-336. Available at www.ejil.org. (Accessed 10 October 2010)

¹⁹ Alsop, Z, *‘Kenya’s Rape Probe Falters after Lawyers Drop Out,’* 2008 www.womensenews.org/story/rape/081214/kenyas-rape-probe-falters-after-lawyers-drop-out. (Accessed 24 October 2010)

²⁰ During the August 1990 invasion of Kuwait it is estimated that at least 5,000 Kuwaiti women were raped by Iraqi soldiers.²⁰ After the liberation large numbers of foreign domestic working women in Kuwait were attacked and subjected to sexual violence from subsequently returning Kuwaitis.

²¹ See Zimbabwe Human Rights NGO Forum , *‘A woman’s place is in the home?’ Gender based violence and Opposition Politics in Zimbabwe*, 2006, p15.

All the women were subjected to lengthy interviews, following a standardised format and procedure. The interviewers had received previous training in this methodology and all had good previous experience in conducting such interviews. All interviews were conducted by one of two teams, consisting of an experienced female lawyer and a scribe. The scribes were both university graduates and received training in the methodology of the interview. Each interview was conducted in private at the RAU offices.

Each interview was recorded by the scribe who took detailed notes of the interview, and, in some cases where the victim was willing, the interview was recorded on audiotape. Most of the victims were apprehensive about the interviews being electronically recorded, and it was felt that distractions and discomfort had to be minimised in dealing with this very sensitive issue. The interviewers kept very brief notes, and the core of the interview was captured by the scribe. On average, each interview took about 2 hours, with the longest interview taking two and a half hours.

Following the interview, a comprehensive statement, drawing on the detailed notes and the interviewer's brief notes, was compiled and the completed statement was examined by both members of the team. The final statement was then turned into affidavit form. Each victim was then contacted for a return visit in which the affidavit was then read to the victim, with any necessary corrections being made. The final affidavit was then presented to the victim and signed before a Commissioner of Oaths.

All victims were then referred to ZADHR, and appointments were made for them to undergo examination by an experienced doctor. The methodology and details of the medical examinations are provided below in Section 4.

Using both sets of information per case, the data was then carefully examined in order to ensure that each case was a clear case of politically motivated rape.

The data from the legal interviews was then entered on an excel spreadsheet, with a total of 73 distinct fields identified, comprising 20 separate variables. Since the sample is small, the data is reported very simply as an actual number of responses and no statistical analysis was carried out.

3. Results of Legal Interviews

3.1 Demographic information

The victims generally comprised mature women, with an average age of 38 years; the oldest was 64 years and the youngest was 22 years. Most were married [15] or had been married [24], with 3 only being single.

This was not a highly educated group, with half [13] having only Primary School education and most [26] having no more than Secondary schooling. Most [22] came from the rural areas, and none were employed in the formal sector, having jobs such as vending [13], farming [9], or being housewives [3].

Virtually all [25] were members of the MDC, with nearly half [12] holding some kind of office in the party. Three-quarters [21] had family members in the MDC. The sample came from 12 different areas in Zimbabwe, with a large percentage coming from Buhera. However, the spread does not suggest that rapes were localised, which is relevant in the light of previous research.²²

Table 1: Geographical distribution of sample

District of Residence	Number
Bikita	1
Birchenough Bridge	2
Buhera	10
Chikomba	1
Chitungwiza	1
Epworth	1
Gutu	1
Headlands	1
Honde Valley	1
Murehwa	1
Mutoko	3
Whitecliff	4

3.2 The Rapes

Rapes were reported as occurring in 2001 [1], 2002 [1], 2003 [1], and 2008 [24]. Hence, most rapes occurred in 2008, but, of course, there is no suggestion that rape was actually more common in 2008 than in any other year, nor that rape was more common in Buhera than in any other area of Zimbabwe: the study merely received more cases from Buhera, but nonetheless it does suggest that Buhera is a problem area.

²² See again Research and Advocacy Unit 'Preying on the "Weaker" Sex: Political Violence against Women in Zimbabwe.' 2010 page 16.

Above it was indicated that most of these women admitted to being members of the MDC, and many previous reports since 2000 had pointed out the serious risks to members and supporters of the MDC. Thus, it was possible that these women may have experienced a previous violation. In fact, 18 did report having experienced a violation prior to the rape, with 2 also having had a previous rape, and all having been threatened for their affiliation to the MDC. Most members of this group [14] reported a previous assault, and 15 reported that a member of their family had also experienced a violation, mostly of threats due to their support for the MDC.

One woman from Manicaland Province testified that, *"Sometime in 2000 a group of 4 men took my husband and I. They took us to a river bed that was close by. When we got there I was told to sit down and they told my husband to remove all his clothes. He was told to lie down on the hot sand. He was beaten using sjamboks and baton sticks. As they were beating him they said "How can you come to our area and start wearing your MDC t-shirts? Here we have one party, ZANU PF." I sat and watched as they beat my husband. They beat him thoroughly until they got tired and they said that his spirits had saved him as they decided to let him go. They said to me "take your husband and go." He got up and we walked back home but from that time he was unwell and he died a month later."*

Four reported that their families had experienced destruction of their property, mostly having arson attacks at their homesteads.

A woman from Mashonaland East Province testified that, *"On the 18th of June 2008 in the morning after we slept in the bush I went back home with my children. Our homestead was completely burnt down, there was nothing left as everything had been reduced to ashes. My husband also returned home that morning and I told him that I had been raped by five soldiers. He asked me if I knew any of the soldiers who had raped me and I said I did not. He comforted me, saying that there was nothing either of us could have done as it was a difficult time."*

There have been many reports about the use of "bases" as places where violations take place, but, for this sample, the rape was just as likely to have taken place at or near the victim's home [15] as at a base [12].

Most [21] were beaten prior to rape, some quite severely.

A woman from Manicaland Province testified that, *"On the 22nd of June 2002 at 1pm three men came to my homestead. They entered the kitchen where I was and stood by the door."*

The policeman said they had come for a final search for the gun. They started searching for the gun everywhere. They did not find anything. One of the men said, "let's burn the house. I pleaded with them not do so because my husband was away and I would not have anywhere to stay. Then one of the men covered my head with a cooking pot and told me not to remove it. Then they kept beating me with sticks me on my left leg around the hip area. I fell down and the pot fell off my face and they put it back and continued beating me. They said, "You refused to give us the information that your husband is hiding, so we are going to make you our wife."

However, very few were assaulted after the rape, presumably because most were in such a damaged condition.

A woman from Manicaland Province stated that, "When I woke up the following morning on the 26th of June 2008, they had put a skirt on me and a ZANU PF t-shirt, I had blood all over my skirt and my thighs were swollen. My vagina was full of semen; I had wounds and cracks from being raped continuously. I could not walk because my legs were swollen. At around 5 am 5 men came to me and told me I could go. They carried me and left me by the road near a primary school. Two of my friends found me lying down by the road. I told them to go and get my husband. My husband came back with a wheelbarrow and carried me home. I told him that I had been raped."

There were frequently large groups involved in the incident, but smaller numbers involved in the rapes.

A woman from Harare Province reported that, "four women came to my home, they were ZANU-PF supporters from my neighbourhood. One of the women told me that ZANU - PF youths were planning to come to take me and beat me so I should go with her and sleep over at her house because I would be protected since she was a ZANU-PF supporter. We walked for some distance and I noticed that they were taking me to a place which ZANU-PF was using as a base. We arrived at the base at about 10 pm. I was handed over to the war veteran in charge. He told me to go and sit behind the big boulder of stones that was a few metres from where I had been beaten. Five men followed me and 2 of the men raped me.

Over three-quarters [21] were victims of multiple rape, with an average of three rapists per incident. One woman reported a total of 13 perpetrators, and 14 women reported 3 or more perpetrators to their rape. One woman reported 3 separate rape incidences in June 2008 by a total of 13 perpetrators.

A woman from the Harare Province recalls that, *'While the second person was raping me I fainted and I do not know whether the other men raped me as well but the women who were also detained at the base told me when I woke up that I had been raped by about 10 youths after the commander of the base'.*

Ten women reported that their estimate of the number of perpetrators was only certain for a specific number, and that there could have been more than the number they specified as they had fallen unconscious, or had lost count as they seemed to be so many. They could be certain, however, of at least the number of perpetrators that they specified.

A woman from Manicaland Province stated that, *"In early June 2008 a group of about 8 ZANU PF youths, among them some of the youths... They were wearing ZANU PF t-shirts. They came to my homestead in the morning around 9 and told me that I was wanted at the base, which is close to the Shopping center. I went with them. When I got to the base I was told to sit in a secluded place. I sat there until late, when the 8 youths came back and told me to go with them. When we got to a secluded place the man in charge of the youth told the youths to stand at a distance and he told me to lie on the ground. I hesitated and he kicked me on the chest and I fell on my back. He told 4 youths to hold me down, two on my arms and two to open my legs. He raped me. After he was done I am not sure if any of the other youths raped me as I must have fallen unconscious. I only remember waking up and finding them gone."*

Members of the Zimbabwe National Army (ZNA) were implicated as rapists in 8 cases, with one senior officer being implicated in 5 of these rapes. Otherwise, the perpetrators were identified as ZANU PF Youth [14], ZANU PF supporters [14], and War Veterans [6], with ZANU PF supporters with leadership roles being identified in 14 cases. It is significant that both state agents and persons having local political leadership positions are alleged to have participated in the rapes as this implies that the rapes were organised and intentional.

A woman from Manicaland Province testified that, *"At the beginning of April 2008, at about midnight I heard some youths singing and playing drums in our yard. I was in my bedroom sleeping with my daughter. Suddenly the door was broken down and two people came into the room. They dragged me outside and when I was outside, I saw our yard was surrounded by ZANU-PF youths, about 12 or 13 of them. They then told me to follow them. We walked through a bushy area near our homestead and we crossed a River and we stopped by the boulder. About 10 minutes later, a top army official and one well known war veteran and another ZANU-PF supporter arrived. The army official then said, "Guys, hold her legs, we want to see her private parts. He began to*

rape me. He raped me in a violent way and while he was raping me, he was shouting, "You prostitute, do you know I fought for this country?" The well known war veteran was watching while I was being raped."

Virtually all [25] of these women reported being threatened for their adherence to the MDC during the rape. This clearly indicates the political nature of the rapes, and, in turn, implies the systematic nature of these, which is a condition of the definition of rape as a crime against humanity. This could be strongly argued in respect of the rapes in Buhera, and, furthermore, the widespread nature of the rapes would also be arguable as grounds for alleging a crime against humanity.

A woman from Manicaland Province testified that, "While he was raping me, he told me that he was having sex with me because I was an MDC prostitute who was selling out the country."

A woman from Manicaland Province stated that, "Whilst one of the ZANU-PF youths was raping me, he was saying "You don't want to support ZANU PF instead you want to support MDC so we are going to do as we like with you and since you have no husband, you won't go and report to anyone." He then got off me and the second one came but by that time I could not hear or feel anything. I do not know for a fact how many people raped me but I think all of them raped me as they had been given the go ahead by the well know war veteran."

A distressingly high number of the rapes [11] took place in public, at or near the victim's home, and witnessed by the victim's family and children.

A woman from Masvingo Province testified that "On the 24th of June 2008, around 6 pm, I was having supper with my children 15, 13 and 10 years old at the time; my husband was not home; he had run away from home on the 20th of December 2007 in the morning. About 10 ZANU-PF youths came into my yard. They were holding metal bars, fan belts and poles. Then they started demanding MDC radios, t-shirts and cards which they said we were keeping in the house. One of the youths kicked me and slapped me and he tore off my skirt. My eldest son threatened to throw stones at them and then one of the youths slapped him on the cheek and beat him on his buttocks with a pole. He fell on the ground and he cried. Five men raped me and my children were crying and watching as I was being raped."

The remainder [16] took place at either a base, or near a base, or in a place to which the victim was abducted.

A woman from Masvingo Province testified that *"The two young men who brought me to this base and another wearing an army camouflage uniform said, "You are wasting our time, let us go to the bridge." We walked about 500 metres and I saw a thatched little room with no roof and they told me to get inside that room. The young man wearing the army camouflage uniform told me to remove my clothes, he raped me."*

A woman from Manicaland Province stated that, *"Two men came to my homestead and told me that I was wanted at the base. I followed the two men and when we got outside our yard, I saw a group of 4 men and one woman waiting for us by the road outside our gate. When we arrived at the base, one of the men who was holding me pushed me and I fell on to the ground. He took my clothes off in front of everyone at the base. I was raped by all 5 men. I fainted when the fifth guy was raping me."*

3.3 The Aftermath of Rape

Most [18] did not bother to report the rape at all, and, of those that did report to the police, only 4 reported the rape, whilst the other 5 merely reported damage to their property or theft of property.

One woman from Masvingo Province stated *"The policemen at the reception told me that they were not attending political violence cases. He also told me that I deserved it and I should go back and beat my perpetrators. I left and never went back to report my case."*

A woman from Manicaland Province said *"The following morning at 10 am on the 27th of June 2008 my husband and I went to Headlands Police Station to report the rape. He wanted a report from the police so that I could go to the clinic to get treated and tested for HIV. The policeman said he could not help us."*

The fear of spousal abandonment after rape is one of the consequences of rape, 4 of the women were divorced because their husbands found out that they had been raped. They testified that they felt ashamed that they had been raped and as a result they were no longer married and their lives have been difficult since the abandonment by their spouses.

A woman from Harare province stated *"Then my husband took me to my parents around 3 pm. He told my parents that he could not live with me because I had been raped. He also told my parents that he had told me to leave politics but I did not listen. My mother told him to bring my children and he*

went back to fetch our children and brought them to my parents. I have never seen him ever since that day."

Fear of being left by their husbands was stated as one of the main reasons²³ why women do not report rape. They cannot tell their husbands and hence cannot make reports to the police or seek medical treatment.

A woman from Harare province stated "I did not tell him (husband) that I had been raped because I love him so much and I do not want to lose him. He also loves me and trusts me very much. So I found it very difficult to tell him and I still have not told him."

Obviously one of the most serious consequences of rape in a country such as Zimbabwe is the risk of HIV infection due to violent, unprotected sex. Although the women reported that some of the perpetrators used condoms, it was also the case in the multiple rapes that other perpetrators did not.

A woman from Manicaland Province testified that "My friend and I were taken by about 8 youths up the hill that was adjacent to the base. We walked for about a kilometre into a bushy area; it must have been around 11pm. They told us to remove our panties and lie on the ground. I hesitated, that's when one of the youths tripped me and I fell. He unzipped his trousers and dropped it to his knees. He then raped me, and he did not use a condom. After the third man raped me, I became weak and I could not really tell what happened afterwards but I know the rapes went on all night. They all did not use condoms."

A woman from Harare Province said, "The second one came, I saw him put on a condom, then he raped me."

Less than half had been previously tested for HIV, and none of these had shown positivity for the virus. After the rape, 15 underwent testing for HIV, with over half [8] testing positive. More seriously, of the 7 victims that had undergone testing both before and after the rape, all 7 were now possibly HIV positive as a consequence of the rape. This is perhaps unsurprising given the violent, multiple rape that these women experienced.

A woman from Harare Province stated that, "I only started getting treatment for my rape in February 2010 when I was referred to Counselling Services Unit. I told them about my rape and I was tested for HIV and I tested positive. I had been tested for HIV when I was pregnant with my first born son and I came out HIV negative."

A woman from Manicaland stated that, "After the rape, I went

²³ Havard Humanitarian Initiative & Oxfam America `Now, the World is Without Me. An Investigation of Sexual Violence in Eastern Democratic Republic of Congo' 2010 p 30.

for an HIV test at Murambinda Hospital and I was told that I was HIV positive. I had been tested twice for HIV in 2007 when I was pregnant with my child; and in January 2008 and I was found both times HIV negative. Right now I am taking Anti Retro Virals."

This strongly suggests that rape was the cause of the HIV infection confirmed on testing, and this is described in greater detail in the section on the medical examinations of these women.

4. The Clinical Examinations

4.1. Methods for medical examination of the victims

The medical evaluations were conducted to gauge the reliability of allegations of rape made by the 27 participants in the study. The medical evaluations of the women used internationally accepted standards to assess the extent to which the physical and psychological evidence was consistent with the narratives of the rapes given by the women.

Documentation consisted of taking a narrative of the incident, noting descriptions of the physical injuries in writing and sketching them on a human form diagram. Psychological assessment included taking a psychological history and classification of any past or current psychological symptoms and signs either reported by the respondent or observed by the medical practitioner, using the Self-Reporting Questionnaire 8 (SRQ-8)²⁴.

The examinations followed the following medical principles for examining torture victims:

Past medical history:

History of torture:

Physical

Psychological

Subjective complaints:

Physical

Psychological

Social

Sexual History:

Were you sexually active before the incident (penetrative sex)?

Was this sexual activity agreed upon or rape?

Have you had penetrative sexual activity after the incident?

What is your attitude to sex after the incident?

Menstrual cycle changes after the incident

Objective psychological findings:

Self-Reporting Questionnaire (SRQ8)

Objective physical findings:

Human form diagram

Local condition:

Genitalia

Speculum

Peri-anal region

Thighs

Conclusion:

Objective physical findings:

Not consistent

Consistent with

Highly consistent

Typical

²⁴ The Self-Reporting Questionnaire [SRQ-8] is an adaptation of the SRQ-20, a psychiatric screening instrument developed originally by the World Health Organisation, and widely used in Africa and the Third World. Both instruments have been widely used in Zimbabwe, and the SRQ-8 was specifically developed for the Zimbabwean setting. Here see Patel, V., & Todd, C. (1996), *The validity of the Shona version of the Self-Report Questionnaire (SRQ) and the development of the SRQ-8*, INT.J.METHODS IN PSYCHIAT.RES., 6, 153-160. The cut-off score for determining whether there is psychological disorder or not is any score of 4 or greater than 4.

*Diagnostic*²⁵

Subjective complaints (psychological):

Objective psychological findings:

SRQ8:

General statement of opinion

Severe pain and suffering?

physical

psychological

Produced intentionally?

For a purpose?

By a person acting for/with acquiescence of authorities?

Therefore a case of torture (involving raping of the victim)?

4.2 Physical findings

The physical examination of the women took place following extended periods of time after the incident, between nine and two years after the incidents. Eighteen of the women had developed scars which were consistent with the allegations of rape. These were documented by visual inspection by the medical practitioners who examined the women. There were 2 cases in which allegations were either unsupported or inconsistent with the physical and/or psychological evidence observed. The clinical evaluations indicate a very high level of reliability of allegations of rape amongst women in the study.

The following scars were observed on the genitalia of 16 women in the study:

Table 2: Findings on examination

1. Excoriated and scratch marks
2. Hypertrophic scar 1cm and linear and ragged
3. Torn right labia, healed scar from fourchet laterally to the right
4. Healed scar at 12 o'clock
5. Excoriated and scratch marks
6. Ragged scar on right edge vaginal wall
7. Healed scar at 6 o'clock
8. Marked scarring over introitus. healed scars linear and circular
9. 4cm linear scar on right vaginal fold
10. Linear scar extending from posterior aspect of buttock into right groin to about 8cm from upper border of symphysis pubis
11. Multiple healed lacerations, 2-3cm, @12 o'clock.
12. Linear and circular hypertrophic scar @ 6 o'clock
13. Hypertrophic scarring
14. Irregular scarring
15. Hypertrophic scarring 2cm *1 cm @ 6 o'clock
16. Healed scar @ 6 o'clock. 2cm long and healed scar 1-2cm on both sides of labia

²⁵ The history, which is subjective, and the physical findings, which are objective, are compared, and the correlation between the two establishes the level of consistency between the victim's narrative of events and the physical findings. The level of cogency applicable from 'not consistent' to 'diagnostic' is arrived at in this manner.

The majority of the rapes (24) were reportedly perpetrated by 2 or more males, with the remaining 3 participants in the study reporting rape by a single male. Two of the rapes resulted in a pregnancy, one ending in premature still birth at 7 months and the other with the live birth of a baby girl. One rape resulted in the miscarriage of a 4 month pregnancy.

Twenty women reported other forms of physical violence inflicted upon them at the time of the rapes. These included beating with sticks and open palms and being kicked. Scars related to these injuries were observed and documented for 18 of these women.

4.3 Psychological findings

For many of the women in the study, the psychological consequences of the rapes were severe. 18 of those in the study scored 6 or higher on the SRQ-8, which indicates that they have disorders severe enough to warrant the attention of a mental health professional. In addition, 14 were observed as having symptoms of Post Traumatic Stress Disorder [PTSD]. Two of the women evaluated were assessed as displaying symptoms of psychotic depression, and 13 as having depression. Ten had symptoms of both Depression and PTSD

Most of the women did not receive appropriate care for the trauma that they had experienced. Only one of the women reported having received therapeutic care for psychological consequences of the violence following the sexual assault. This is in contrast to the high proportion of study participants displaying symptoms of PTSD and the presence of some with symptoms suggesting psychotic depression.

Women in the study exhibited high levels of sleeplessness, nightmares, flashbacks, and hopelessness. A third of the women reported these symptoms, which are commonly associated with experiences of trauma. For some, flashbacks are triggered by large gatherings, particularly where political slogans were being chanted while others had recurring nightmares during which they relived the rapes. Traumatic memories may continue for extended periods of time. Two of the women exhibiting these symptoms were raped 8-10 years prior to the clinical evaluations.

Chronic sleeplessness may lead to chronic exhaustion. This combined with a sense of hopelessness leaves women suffering from these symptoms with reduced ability to carry out day to day activities. Nearly half [13] reported suicidal ideation on the SRQ-8 (*Has the thought of ending your life been on your mind?*) On interview, some experienced passive suicidal thoughts (wishing they were dead) while others reported having actively thought about ending their lives. A similar proportion reported feeling hopeless about their lives. There was also high reporting of auditory hallucinations, often being of similar sounds and voices associated with the trauma. Other common symptoms included forgetfulness, avoidance of places and activities related to the trauma and sadness.

Lesser reported symptoms included an increased startle response, poor concentration, intrusive thoughts, and a sense of a foreshortened future.

4.4 Subjective complaints

The subjective complaints reported included chronic headaches, backache, lower abdominal pain, and chest pain. These general body pains are consistent with the after-effects of severe physical and mental suffering.

Table 3: Physical consequences identified in the women in the study sample

Physical	Number
Physical scars on genitalia	16
Ongoing pain (subjective complaints)	17
Pregnancy	1
Miscarriage	1
Headaches	10
Sexual problems	20

It is worth noting the very high number that reported sexual problems after the alleged rape.

Whilst the physical consequences of rape are undoubtedly important, especially when untreated, it is the psychological consequences that are usually more long-lasting and likely to contribute to disability. A wide range of psychological consequences were reported by the sample. All the victims aches and pains, some of which were related to the physical abuse that they received at the same time as the rape, whilst others are more likely related to psychological trauma.²⁶ Many of these consequences are also consistent with the symptoms of PTSD and depression, and, when allied to the findings on the SRQ-8, indicate clear psychological impairment for many of these women, 25 to be exact.

4.5 Not seeking medical attention

It is recommended that victims of sexual violence seek medical care within the first 72 hours following the incident. This allows for effective administration of post exposure prophylaxis (PEP) for HIV, post coital contraceptives and prophylactic antibiotics for STI's. When women present for medical care very late, PEP for HIV and post coital contraceptives are no longer effective.

Only 5 of the women in the study tried to access medical treatment. Four of these sought and received treatment in private facilities or through non-governmental organisations. Two of these four did not report the rape and therefore did not receive specific care for sexual violence. The fifth woman sought treatment at a public health facility, but was turned away as she did not have a police report. She was afraid to go and report the rape to the police, and so was not able to return to the facility to access treatment.

Nine of the women self-treated for the sexual assault with salt baths and traditional herbs secured from elderly women in the areas they live in, or from traditional healers. Many of them seemed to believe that this was adequate treatment for any infections and would "*cleanse their wombs.*" In addition to being an infective means of managing possible consequences of rape such as HIV infection, sexually transmitted infection and unwanted pregnancies, this manner of self-treating may have long standing effects such as vaginal atrophy and cancer.

²⁶ Previous studies in Zimbabwe have noted the high number of "physical" complaints presented by persons suffering from psychological disorders, and, furthermore, have noted the strong association between reports of violence and psychological disorder. Here see See Reeler, A.P., Williams, H., & Todd, C.H. (1993), *Psychopathology in Primary Care patients: A four-year study in rural and urban settings*, CENT.AFR.J.MED., 39, 1-8.; *Report on Common Mental Disorders in Harare*, August 2006. Counselling Services Unit, University of Zimbabwe [Departments of Community Medicine & Psychiatry], City Health Department, & Ministry of Health and Child Welfare.

A woman from Manicaland Province stated : *"I never sought any medical help after the incident. I only bathed myself in warm salty water. I did not receive any formal treatment following what happened."*

Significantly, 22 of the women in the study did not seek medical attention following the rapes. This has several implications for the victim. It will not be possible to prevent a pregnancy resulting from the rape and it will not be possible to prevent possible HIV infection in women who are HIV negative at the time of the incident. The following two cases are illustrative of this:

A woman from Manicaland Province said: *"I was raped by several men while I was restrained. I lost consciousness while the rapes were continuing. I eventually woke up at around 2am and had been left alone... I did not seek medical treatment but I did receive some herbs from a friend and treated myself with those. I fell pregnant as a result of the rape. I delivered a baby girl on 16 March 2009. I do not know who the father is."*

A woman from Manicaland Province said: *"I was taken to the base at a Primary School. At the base I was taken to a bushy area where I was beaten and pushed to the ground. I was also kicked in the chest. Two of the men there held me down, tore off my panties and held my legs open. They proceeded to rape me. More men came and raped me but I am not sure how many. I passed out while it was happening. When I awoke I was alone. My private parts had sand in them. I crawled home and cleaned myself up. I did not seek any medical treatment. I later developed sores on my private parts and I went to see an elderly lady in our area who treated me. I went for an HIV test later in 2008 and tested positive. My previous test in 2007 had been negative."*

A further consequence of not seeking medical attention or not seeking care specific to sexual violence is that most of the women did not receive any counselling or psychological care for their trauma. As a result many are still impaired psychologically by the rapes, years after the incident. This is examined in further detail under *"psychological findings."*

4.6 Conclusions

Taken as a whole, the findings on physical examination, objective psychological assessment, and subjective complaints overlapped and supported each other. Hence, it was concluded that 25 could be described as showing a clinical picture that was either HIGHLY CONSISTENT [4] or CONSISTENT [21] with rape. Two had physical evidence that was NOT CONSISTENT with rape but the possibility of rape could not be ruled out. Furthermore, 25 presented a picture that was consistent with the definition of torture as described by the UN Convention against Torture.

5. Conclusions and Recommendations

The relationship between political violence and elections in Zimbabwe is important. Women are particularly vulnerable to violence, particularly rape, during elections, and this is regardless of their geographical location, age, or marital status. Almost all of the women in this sample were raped during an election period, the largest number during 2008. The women were not only subjected to rape, but also to a range of other violations including assault, torture, destruction of property, and arson. A clear pattern emerged when studying this sample: the women were supporters of the MDC, either directly or indirectly; there was verbal abuse of the women and the MDC; the perpetrators were largely youth supporters of ZANU PF, either in the company of war veterans or the military; the rapes took place at night at their homes, bases, or at discreet locations; the rape was more often than not gang rape, and extremely violent. Another common feature included the fact that the police and state medical facilities refused to attend to victims of politically motivated rape.

Human rights organisations have sought prosecution for the perpetrators of politically motivated rape, but there are a variety of challenges, ranging from the fact that the victims did not know the perpetrators, did not report the matter to the police at the time of the rape, and did not seek medical attention; hence, they did not receive the medical affidavits required by the courts. Before 2009, the victims had to present themselves to the police before attending medical facilities, and a rape investigation was not done without a police report. This however was changed through the Management of Sexual Violence Guidelines for Health Workers, produced in April 2009. There have been a small number²⁷ of cases that were taken to the courts, citing politically motivated rape, but even fewer perpetrators have been convicted. The aspect of fear and stigma is a major reason why the women do not come forward to report; they are embarrassed that their families and friends will know they were raped. Rape is a deeply humiliating crime and has far reaching consequences for women's relationships. The issue of spousal abandonment is another reason given for not reporting; many of the women stated that they fear that their husbands will leave them if they find out that they were raped. This is not an unreasonable fear, as some of the women were actually divorced upon telling their husbands that they had been raped. Being divorced has obvious socio- economic ramifications which the women are not prepared to face.

It is important for Zimbabwe to set up a multi-sectoral investigation into the claims made by these women, which should include the police, the judiciary, medical personnel, social services and non-governmental organizations. Rape has far reaching consequences for these women and their families, and for society as a whole; i.e. the danger of HIV/AIDS infection, children born as a result of the rape, and the physical injuries as well as the psychological trauma suffered by them and their families, particularly those that witnessed the attacks. Although the women in the sample talked about the need for justice, their main call is for immediate medical, social, and psychological support as they stated that their lives were shattered and required rebuilding. This inquiry should take place before the next elections to ensure that rape does not happen again; some of the women were victims of rape in more than one election period and are afraid that without addressing the past the chances of them being victims again are very high.

The Zimbabwean government has to ensure that national sexual violence laws are enforced and the culture of impunity is done away with in keeping with local, regional and international instruments. This has not been done in the past, and there has been little attempt to bring perpetrators to book, which is a failure in implementing the GPA. SADC as the guarantors of the agreement should raise this issue, having the added obligation to ensure that women are protected as members of SADC, including the women in Zimbabwe. Zimbabwe is party to the SADC Protocol on Gender and Development, in which it made commitments to "*ensure that perpetrators of gender based violence, including domestic violence, rape, femicide, sexual harassment, female genital mutilation and all other forms of gender-based violence are tried by a court of competent jurisdiction.*" Zimbabwe's Parliament ratified the Protocol in October 2009.

Recommendations

- *A multi-sectoral investigation into politically motivated rape, led by the Ministry of Health and Child Welfare, together with the Ministry of Women Affairs and Community Development, Ministry of Labour and Social Welfare, the Ministry of Home Affairs, and the Ministry of Justice and Legal Affairs, should be undertaken on a large scale countrywide;*
- *There should be no impunity for perpetrators of violence. Cases of rape should be investigated and prosecuted in keeping with the law;*

²⁷ Hove v Gumbo HH 7752/2002

- *The government of Zimbabwe should ensure that survivors of sexual violence are consulted in any programme of assistance, taking into account that the survivors do not live in a vacuum. Their families should be part of the healing process, including the men as well as the children;*
- *The government of Zimbabwe should domesticate and implement all signed regional and international instruments that protect women from violence;*
- *In light of the fact that elections are likely to be held in 2011, the government of Zimbabwe should ensure that women are protected and no reports of politically motivated violence, and in particular politically motivated rape, are received, before, during, and after the election period.*

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