OUR DAUGHTERS’ VOICES

Working in faith communities to heal the wounds of sexual violence in Myanmar
Acknowledgements

This is the first piece of research that Tearfund has commissioned in Asia, where we listened to the voices of survivors of sexual violence. We would like to thank the survivors who courageously shared their stories. Sexual violence is a hidden issue, and it would not have been possible without the bridging organisations that connected us to survivors and also to community and faith leaders, to enable us to understand more of the community/faith response.

We would also like to acknowledge our local research team who worked unceasingly over four months, spending many hours on buses, boats and motorbikes to meet and listen to survivors. The research was conducted in multiple languages and our translators played a key role in connecting us to the stories told. Finally, thanks to our international researcher for the enormous task of making sense of the data and producing this report.

Listening to the voices of survivors of sexual violence is essential in improving our understanding of the issue in order to develop appropriate responses. Our hope is that this will be a step in helping us to work together to support survivors of sexual violence to improve their lives, and to prevent sexual violence in the future.

Tearfund has done similar studies in conflict-affected countries in Africa including the Democratic Republic of Congo (DRC), Burundi, Rwanda, South Africa and Central African Republic (CAR). Access publications on Tearfund’s work at: http://tilz.tearfund.org/en/themes/sexual_violence/resources_and_publications

Cover design by Salai Thawng Hlaing Lung (Lailone): The cover design was developed in discussion with Tearfund’s Sexual Violence Coordinator in Myanmar, who was one of the local researchers for this report, and the Tearfund Myanmar team. The picture by Lailone represents the life of women in Myanmar as they struggle to balance many responsibilities (represented by the pots). The woman’s mouth is shut and her voice is not heard. She is shedding tears which are dropping into the ink pot, and the pen represents how this research is enabling women’s stories and voices to be heard.
OUR DAUGHTERS’ VOICES

Working with faith communities to heal the wounds of sexual violence in Myanmar

Lizle Loots

June 2016
FOREWORD

The church and Christian society, who believe in the eternal God, the Father, the Son and the Holy Spirit, have the responsibility to maintain all the things created by God. All believers know God created human beings in his own image. Also, Christians have the basic responsibility to protect, to value and to promote the dignity and safety of women, who are created by God in his own image.

Sexual violence is an unacceptable social crime in civil society, and by ignoring or disregarding those affected by it, we play a part in possibly increasing its incidence. For the purpose of helping the church to be aware of sexual violence, Tearfund conducted research in Kachin State, Bago, Tanintharyi and Ayeyarwady Regions.

I truly believe this research will help the readers and the churches to increase their awareness of sexual violence.

We all hope the church, after reading this research, can play a role in reducing sexual violence and assaults against women. We also hope the whole church can build a more respectful society in the future.

Unity in Christ’s service,

Rev Saw Shwe Lin
General Secretary
Myanmar Council of Churches
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EXECUTIVE SUMMARY

This study was conceptualised in early 2015 by Tearfund and local partners in Myanmar representing church women's departments, independent consultants and individuals working on gender issues within NGOs and donor organisations. The aim of this research was to explore the experiences of survivors of sexual violence, and the promising contribution of faith communities in addressing and responding to sexual and gender-based violence. With this study, Tearfund has started to build its knowledge base on faith and sexual violence and initiate a network of support for survivors in Myanmar. It is hoped this new knowledge will mobilise faith leaders to promote healthy families and communities which are free of sexual and gender-based violence – and in doing so – strengthen peace and reconciliation between communities across the country.

In-depth interviews were conducted in communities across four areas in Myanmar and included conflict, post-conflict and non-conflict settings (Bago Region, Ayeyarwady Region, Kachin State and Tanintharyi Region). Twenty survivors were interviewed (18 survivors of sexual violence; two mothers of young victims of sexual violence and murder); 27 faith leaders (11 female and 16 male); 11 community leaders (4 female and 7 male); and 9 community focus groups (102 women). A Grounded Theory approach using an inductive process of analysis underpinned this research.

For survivors, **shame, stigma, rejection and self-harm** determined much of their quality of life post-rape. Three women (15 per cent) detailed being **punished** by their faith communities and had to confess and ask for forgiveness for what is perceived as the survivor's 'sin'. Survivors generally struggled to articulate their experiences, and a clear sense of shame and betrayal was seen with three survivors (15 per cent) who had to leave their communities. One survivor married her perpetrator so she would be accepted by her faith community.

Very few women **accessed services** after experiencing sexual violence. Three survivors (15 per cent) accessed health care services. Five survivors (25 per cent) accessed the justice system but this was dependent on the involvement of either women's organisations, child protection services or women's departments within church conventions.

All survivors came from backgrounds marked by poverty, and stigma and shame made it difficult for women to go out into communities to find work. Survivors did not always have access to **financial means** to adequately care for their families and became dependent on others, keeping them vulnerable to further abuse.

Survivors were generally positive about faith involvement and 65 per cent of women (13) expressed interest in a **national network of survivors** to speak out and support each other. The women who did not want to be part of such a network felt, however, that other survivors of sexual and gender-based violence might benefit from support groups. It is recommended this network should be initiated by faith leaders and sustained by faith communities.

Working with faith communities can cut across the spectrum of primary, secondary and tertiary prevention, and can support survivors in crucial and sometimes life-saving ways. Faith communities and their faith leaders have the potential to transform harmful behaviours and norms; to address inequalities; to provide shelter and psychological support; to support survivors who decide to take legal action; to advocate for programmes to empower survivors financially; and to establish networks of support. Findings in this study show faith leaders and faith communities need to be empowered with knowledge and resources, and to have a desire for collaboration with other networks and service providers in addressing this issue. Although faith and community leaders displayed sympathy and interest in the lives of survivors, deeply ingrained attitudes and social norms/beliefs will need to be
unpacked and addressed to fully care and support survivors of sexual and gender-based violence. In essence, a cultural shift is needed towards positive social norms within communities who must demonstrate a commitment to change. Faith communities will need to build a safe and supportive environment where survivors are comfortable to speak out. This will be a long-term commitment and a long-term process which will require collaboration from all sectors in society.

Key recommendations were made as a call to action for faith leaders to:

1. Attend to the needs of survivors (e.g., through counselling, acceptance, linking to service providers, financial and skills support)
2. Provide emotional support to survivors to walk with them on their path to healing
3. Provide a safe space for survivors to speak out
4. Establish a sustainable support network for survivors
5. Improve their knowledge around sexual and gender-based violence and the local justice system, and to create awareness within faith communities
6. Actively work to break through social norms sustaining harmful masculinities and gender inequality
7. Collaborate with networks nationally, regionally and locally to build capacity to respond effectively to survivors
8. Rehabilitate perpetrators for long-term prevention of re-offending
INTRODUCTION

Sexual and gender-based violence

Sexual and gender-based violence (SGBV) is a profound violation of women’s health and human rights and impacts the lives of millions of women and girls across peace and conflict settings. Globally, partner violence affects one in three women, and one in fifteen women have experienced sexual violence (rape) from a non-intimate partner. SGBV is influenced by the interaction of personal, situational, and socio-cultural factors – including belief systems and societal norms. These factors are referred to as the ‘Ecological Model’ (Table 1) and interaction within and across this model bears on survivors’ ability to receive care, support and justice. To build an understanding of SGBV prevention and mechanisms for response, the socio-cultural context of a survivor plays an integral part in her health and well-being.

Table 1: Ecological Model

<table>
<thead>
<tr>
<th>Ecological level</th>
<th>Factors influencing care, support and justice</th>
</tr>
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</table>
| Society          | ■ Inequality based on race, gender and sexual orientation  
|                  | ■ Religious or cultural beliefs  
|                  | ■ Economic and social policies  |
| Community        | ■ Tolerance of sexual assault  
|                  | ■ Lack of support from police / judicial system  
|                  | ■ Poverty / lack of employment opportunities  
|                  | ■ Weak community sanctions against perpetrators  |
| Relationship     | ■ Association with sexually aggressive peers  
|                  | ■ Emotionally unsupportive family  
|                  | ■ Physically violent / strongly patriarchal  |
| Individual       | ■ Attitudes and beliefs supporting violence  
|                  | ■ Anti-social behaviour  
|                  | ■ Alcohol / drug abuse  
|                  | ■ Childhood experience of SV/ witnessing violence  |


Myanmar – Brief historical and religious context

With a 60-year history of internal armed conflict, Myanmar began a gradual transition to democracy in 2011. Although this was a historical step for the country, communal violence, conflict between armed groups, and violence related to the exploitation of resources have defined the past five years. In November 2015, citizens of Myanmar cast their ballots in national elections with a landmark victory for the National League for Democracy.
Myanmar has a pluralist and complex society with over 100 different ethnic groups. The majority of the population adhere to Theravada Buddhism, followed by Christianity (Roman Catholics, Anglicans, and other small Protestant denominations), Islam (mainly Sunni), Hinduism and animism.\textsuperscript{10-12}

It has been suggested that approximately 90 per cent of the population practices Buddhism, 4 per cent Christianity, and 4 per cent Islam.\textsuperscript{13,14} Christianity is highly influential among the Chin, Kachin, Kayah and Kayin ethnic nationalities. Approximately 90 per cent of the Chin and Kachin groups are estimated to be Christian, with the majority being Baptist. Christianity is also prevalent in some of the smaller ethnic
groups including the Naga. Christianity has had a significant impact on the lives of ethnic minorities and has become paramount in forming ethnic, cultural and political identity.\textsuperscript{15}

Religion plays a central role in the identity of many people around the globe, including the youth.\textsuperscript{16,17} In Myanmar, religion is deeply intertwined with the daily life of its people, and understandings of gender and violence have been shaped by years of conflict and also religious life. A recent study on gender equality revealed that inequitable gender relations between men and women in Myanmar are deeply embedded within religion and culture over generations, making it difficult for women to challenge them.\textsuperscript{18} Such challenges by women’s rights activists are often denied and trivialised.\textsuperscript{18} It is then necessary to explore the socio-cultural architecture in Myanmar to ascertain the potential role faith communities can serve in addressing and responding to sexual and gender-based violence.

**Sexual and gender-based violence in Myanmar**

In conflict and post-conflict settings, multiple forms of violence against women have been documented, particularly militarised SGBV. There is a growing recognition, however, that violence within the family and community (including domestic violence) is often perpetrated during times of conflict, displacement and natural disasters.\textsuperscript{19} Women’s experiences of violence in Myanmar have not been well documented and primarily focus on abuses in the midst of conflict and in post-conflict settings – but recent research is emerging showing that women experience many different forms of violence during times of relative peace as well.\textsuperscript{20-22} Violence is not only perpetrated by unknown offenders, but also by those closest to women, including their intimate partners. Violence by partners includes economic, emotional, physical and sexual intimate partner violence, while violence perpetrated by others includes sexual violence (including rape), harassment and sexual assault.\textsuperscript{20} In response to past and emerging evidence, and a call to action from women's groups and the international community, the Myanmar government initiated a process of drafting laws to prevent violence against women (VAW), a process still underway.\textsuperscript{23} Such laws and policies will impact significantly on women’s futures and will need to engage a range of key actors, including faith leaders and faith communities.\textsuperscript{24}

**STUDY OBJECTIVES**

This study was formative in nature and the first research done by Tearfund in Asia. Tearfund has done similar studies in conflict-affected countries in Africa including the Democratic Republic of Congo (DRC), Burundi, Rwanda, South Africa and Central African Republic (CAR).

The aim of this research was to explore the experiences of survivors of sexual violence, and the promising contribution of faith communities in addressing and responding to sexual and gender-based violence. With this study, Tearfund has started to build its knowledge base on faith and sexual violence and initiate a network of support for survivors in Myanmar. It is hoped this new knowledge will mobilise faith leaders to promote healthy families and communities which are free of sexual and gender-based violence – and in doing so – strengthen peace and reconciliation between communities across the country.
METHODOLOGY

Sample and location

A non-probability, purposive sampling method was used to identify participants with the assistance of local bridging organisations linked to faith institutions and faith-based organisations. Such a method in no way tries to generalise findings, but rather focuses on the individual views and experiences of those interviewed. Twenty survivors were interviewed who met the criteria for inclusion. Also interviewed were:

- 27 faith leaders (11 female and 16 male)
- 11 community leaders (4 female and 7 male)
- 9 community focus groups (102 women).

Local researchers from different states in Myanmar were trained in Yangon during the first week of July and research took place from 6 July to 17 September, 2015. Only local researchers interviewed survivors and other participants in the study. The lead researcher was available throughout the study to provide remote support via Skype or telephone.

In-depth interviews were conducted in communities across four areas in Myanmar and included conflict, post-conflict and non-conflict settings (Bago Region, Ayeyarwady Region, Kachin State and Tanintharyi Region). Many communities were affected by Cyclone Nargis or ongoing civil war. Bridging organisations identified communities and approached survivors, faith leaders and community members for their interest in participating.

Site 1: Bago Region

Bago Region, marked by its floodplains, is central to Myanmar’s rice production and is home to almost 10 per cent of the population. It lies in southern-central Myanmar, bordering seven states and regions and the Gulf of Martaban in the south. Bago Region has a largely rural population with the majority of inhabitants being Bamar Buddhist and also Kayin in its eastern part. The eastern part has experienced years of devastating conflict between armed groups, with ceasefires currently in place. This means two communities selected for the study in Bago Region are categorised as post-conflict settings.

Site 2: Ayeyarwady Region

The Ayeyarwady Region is found in southern Myanmar and was a traditionally intensive rice cultivation, fishing, and forestry area supported by mangrove swamps. The Ayeyarwady River feeds one of the two largest delta systems in South-East Asia and the Delta is home to a dense human population, due to agriculture. On 2 May, 2008, the catastrophic Cyclone Nargis hit the Ayeyarwady Delta leaving an estimated 84,500 dead and 53,800 missing. With massive displacement and over 2.4 million people affected, the Ayeyarwady Region is still reeling from the after-effects and aid is still being coordinated. Participants from two communities within this disaster-affected area were interviewed.
Site 3: Kachin State

Kachin State is located in the northern part of Myanmar and is bounded by India to the west and China to the north and east. South of Kachin lies Shan State and it is bordered on the west by Sagaing Region. Kachin State is rich in natural resources, but lives and livelihoods have been severely impacted by more than 30 years of armed conflict between the central government and the Kachin Independence Army. For this study, participants from two internally displaced camps were selected for interviews.

Site 4: Tanintharyi Region

Tanintharyi Region lies in south-east Myanmar, and is bordered by Mon State to the north, Thailand on its eastern and southern boundary and the Andaman Sea to the west. Although this region has not experienced frequent armed conflict, its people have endured years of displacement related to periods of violence between armed groups, land confiscation and projects investing in commercial resources in the area. Data on this region, as with Myanmar in general, is limited and estimates suggest 71,650 people are internally displaced within it and approximately 6,000 people from Tanintharyi, mostly from Dawei Township, are refugees in Thailand. Participants from two post-conflict communities were interviewed in Tanintharyi Region for this study.

Ethics

Training on ethical procedures in research was delivered to local researchers and international ethical protocols and codes were strictly adhered to during data collection and analysis. Ethical protocols and codes were grounded in five principles which governed the study:

1. Minimising the risk of harm
2. Obtaining informed consent
3. Protecting anonymity and confidentiality
4. Avoiding deceptive practices
5. Providing the right to withdraw

As this was a small, internal study with local Myanmar partners, with no intention of publishing data in peer-reviewed international journals, an International Review Board was not involved. The findings of the study will be used by Tearfund to help survivors in Myanmar heal memories and move forward with support from faith communities – following similar successful processes in the DRC, Burundi, Rwanda, South Africa and CAR. This support should be sensitive, caring and focused on the long term.

Ensuring the safety and confidentiality of survivors was central to the study. Research with survivors was held outside their communities in a safe and neutral space. Survivors were accompanied by representatives from bridging organisations and were reimbursed for travel. Survivors had the opportunity to end the interview at any time they wanted, but most expressed a deep sense of relief at being able to talk about their needs and experiences. A social worker was available by mobile phone should a survivor have felt the need for counselling immediately or in the long term. As research took place during monsoon season, survivors received an umbrella as a symbol of protection and gratitude for their participation.

Documentation adhered to: WHO Ethical standards and procedures for research with human beings; WHO Ethical and safety recommendations for researching, documenting and monitoring sexual violence in emergencies; WHO Putting women first: Ethical and safety recommendations for research on domestic violence against women.
Study design

The research was community-based and conducted qualitatively through in-depth interviews with survivors of sexual and gender-based violence, faith and community leaders, and focus group discussions with women in communities. The study aspired to include all religious affiliations. Participants from Buddhist, Christian and Islamic faiths agreed to participate. The study followed the interpretivist approach that meaning is fluid and socially constructed through cultures and social interaction. The voices of survivors and communities were prioritised, and researchers were trained to ‘bracket’ throughout the interview process, a method used to limit the researcher’s own preconceptions and opinions when interviewing participants.

During the research training in Yangon, research questionnaires were workshopped in consultation with the local researchers and adapted. This allowed for an inclusive process where the questionnaire could be adapted according to local understandings of SGBV within Myanmar communities. For contextual depth the researcher also met with various religious leaders, NGOs and UN agencies while in Yangon.

During interviews, local researchers used voice recorders and field notes to support the transcription process. Where individuals were uncomfortable with voice recordings, only field notes were taken. Consent was obtained from all individuals participating in the study and researchers signed on behalf of each person. Teams of three researchers conducted focus group discussions, with one interviewer, one note taker and a support person to assist in welcoming participants, obtaining consent and seeing to their comfort and ease. Researchers verified data for transcription after interviews took place. Translation of transcripts into English took place in-country and the transcripts were sent confidentially to the lead researcher via soft copy. A sample of the translations were re-translated by a second translator for validity purposes.

Researcher safety and well-being

Researcher safety and well-being was carefully considered throughout the research process. During training, researchers were introduced to vicarious trauma – a concept referring to the trauma we experience when listening to stories of pain and violence. Researchers were trained in techniques to mitigate vicarious trauma and burnout, and had access to a local social worker for debriefing and counselling.

Data analysis and storage

A Grounded Theory approach using an inductive process of analysis underpinned this research. This complex approach allows the researcher to explore participant understandings and meanings of their worlds and experiences, and also their internal conversations and social relationships. This is a particularly valuable approach as the lead researcher did not have in-depth knowledge of diverse contextual factors affecting each individual’s life.

Atlas T.I. data analysis software was used to guide this approach through coding and re-coding of the transcripts, and organising the text by categories and concepts to explain the findings. Data such as transcripts and audio recordings will be safely stored for up to two years by Tearfund.

Limitations and challenges

Challenges faced during this study contributed to the limitations that emerged throughout the research. This research is a small qualitative study and cannot be generalised to Myanmar society at large.
Practical challenges

The research yielded testing conditions for the field team. Researchers had to travel long distances by car and boat (in the Delta Region researchers were warned of rough water conditions and crocodiles). As much of Myanmar’s rural areas are rugged, researchers got lost in unknown areas for hours at a time.

Risky weather conditions and armed conflict were concerns as research was undertaken in monsoon season and researchers had to move through conflict-affected areas.

Researchers found it especially hard to find survivors as many move around between areas – often as a consequence of stigma and shame attached to their rape. Some survivors who wanted to speak out lost courage before the interview, which led to attrition in interviews.

Emotional challenges

Doing research in SGBV can alter one’s world view when experiencing secondary/vicarious trauma. Researchers reported feelings of fear for their own safety and feelings of vulnerability as they came to learn about the experiences of other women in their country.

Scientific challenges

The nature of this research and various sensitivities within the country as it emerges from decades of isolation had to be considered for it to stay true to ethical obligations and commitments. For this reason, great care had to be taken in developing the tools to interview survivors. Questions focused on needs, hopes for the future and their expectations from faith communities, rather than documenting their trauma and its aftermath. Many survivors, however, wanted to speak about what had happened to them. Researchers allowed them the space to talk and express their emotions (see Annex 1 for all Interview guides).

Translation of transcripts was a major challenge with some interviews translated multiple times, for example, from Kachin to Burmese to English. Verification processes proved to be time-consuming and costly.

Distance was another challenge as the lead researcher (international) could not move around with the local team. Support had to be provided remotely and continuous contact was not possible during fieldwork because of practical challenges.

Preliminary findings – feedback workshop

From 6 to 9 October, 2015, preliminary research findings were presented to key faith leaders, NGOs and other networks and individuals in workshops in Mandalay (with participants from upper Myanmar) and Yangon (with participants from lower Myanmar). The workshop explored ways in which comprehensive responses could be mobilised by different actors in Myanmar, especially faith leadership. The findings of the workshop report can be seen as supplementary, contributing to the depth and richness of the research findings. The outcomes of the workshops have not been included in the research findings as this was a separate process. The workshop report is available from Tearfund.
FINDINGS

Historically, faith-based organisations have played a remarkable role in promoting resilience of communities affected by Myanmar’s humanitarian crises, such as the civil war in the north and the devastation brought on by Cyclone Nargis.\textsuperscript{36,37} Ensuring faith-based organisations and faith leaders in Myanmar do more of the ‘right things’ can potentially transform the lives of individuals and whole communities for an end goal of achieving an equitable and just society.

Survivors

The interviews with survivors told of deep personal relationships with God. Women talked about turning to God for comfort and guidance even though they might not be actively involved with the church. Only two cases of the 20 interviews achieved justice, with the perpetrators being sent to prison for the rapes (one of whom received a life sentence). Most women and their family members were fearful of the justice system, afraid it would amplify their case and thus place them in a position where they could be re-victimised by the system and by communities.

‘I don’t really know what to do because I have never had this experience. Some women had been to the police station, and they are brave to speak. But, for me, I am not brave enough and don’t know how to talk.’

Women mainly shared their experiences with close friends although one in four of the women preferred to keep it to themselves and not talk about their experience of SGBV. Perpetrators were mostly known to survivors, which may have contributed to survivors’ silence.

Of the survivors, all lived in poverty, expressing financial needs, and few had the opportunity to complete school. The violence they experienced was perpetrated by:

- a known person/acquaintance/employer (50 per cent)
- armed groups (25 per cent)
- family members (15 per cent)
- unknown/not disclosed (15 per cent)

‘He asked my daughter to carry things. I trusted him like a grandpa. I let her go with him.’

Mother of survivor

Although these percentages are not representative of perpetrators in Myanmar, they largely support regional and international figures of perpetration of violence against women.\textsuperscript{38} Six of the twenty survivors (30 per cent) experienced extreme physical violence during their rape. Two young women were raped and murdered. These victims’ mothers were interviewed for this study. Survivors had different experiences with faith communities and faith leaders. A discussion of the main themes from the data follows:

1. Fear, shame and stigma
2. Punishment and expulsion from communities
3. Access to services
4. Stable livelihoods
5. Meaningful social relationships and belonging
6. Caring for children
7. Trauma related to conflict
8. Positive experiences with faith communities
9. Interest in a survivors’ network

1. Fear, shame and stigma

‘In my village, the pastor is a man. There is no female pastor in our village. We are not sure that we – as survivors – dare to express our feelings to a man without the support of others.’

For survivors, and even the mothers of children who have been killed after an act of sexual violence, shame, stigma, rejection and self-harm were mentioned as reasons not to leave their homes or not to engage in community activities. Survivors talked about being scolded and ‘persecuted’ by family members, faith leaders and their communities:

‘[The rape] is a black spot for my life. My neighbours use me as an example to force their children to behave so they don’t end up like me. Some said their children might become prostitutes… because I’m their neighbour.’

‘When things started happening to me, the church looked down on me. They rejected and condemned me. Even though our church pastor is a woman I am fearful of her so much. I don’t even dare to look at her. I couldn’t speak out about my feelings, I was expelled from my church… I feel so small and ashamed. I didn’t expect big help; even a little encouragement would have been a relief for me.’

Three survivors described how they either moved from their village or were asked to leave by their faith community, causing further isolation and vulnerability. One survivor talked about how she wanted to end her life:

‘I feel sad. I even tried to kill myself.’

More powerful quotes about survivors’ anguish include:

‘I am not angry but I cannot forget about it’

‘Sometimes I hate myself so much.’

2. Punishment and expulsion from communities

Punishment also emerged as a theme as three survivors described their experience of having to confess and ask for forgiveness. One survivor was asked to pay the community, only to fall into debt as result. Three survivors were asked to marry their perpetrator – one complied. Survivors struggled to articulate
their experiences as there was a sense of betrayal from their communities as result of their traumatic experiences:

‘Most of the religious leaders did not want to take any responsibility in these types of cases. They said that we were responsible. Religious leaders don’t stand on the right side.’
Translator of one of the survivors

‘The religious leaders issued a fine as a punishment... she had to pay one pig. The survivor experiences different levels of punishment: she was raped, got pregnant and had a baby. The leader from her church behaved like a Pharisee, according to her words. It is not right.’

3. Access to services

Services were limited with only three survivors mentioning they visited a health care facility. This could be because of inaccessibility, conflict and disaster areas making services difficult for survivors to reach. Five survivors accessed the justice system but this was dependent on the involvement of either women’s organisations, child protection services or women’s departments within church conventions. Two cases achieved justice with minimum sentencing. One perpetrator was sentenced to prison for just over three years.

Secondary re-victimisation was evident in one survivor’s case that was reported to the police and proceeded to court:

‘My case was only opened by the police the day after I reported. At court, I had to repeatedly give information about my case, from morning until evening. They said they had to take statements and I had to repeat my case.’

Three survivors fell pregnant from the rape and were left without much support from their communities to raise their children. One survivor spoke about being so ashamed she had to give birth secretly. Her baby died soon after.

4. Stable livelihoods

The majority of women called for financial support and capacity building; education or some form of livelihood building was also spoken about. Survivors did not always have access to financial means to adequately feed their families and one survivor mentioned she felt too belittled to go out and work. Women who participated in microfinance programmes had more access to resources but accumulated debt which placed them in pressured and vulnerable positions:

‘An organisation has implemented a microcredit programme here, and I have borrowed money from there. Now I have to struggle to pay back the loan so I can’t afford to send my children to school.’

Another survivor compared herself to ‘a fish stuck in a swamp’ as she had ambitions to study but her socio-economic conditions did not make this possible.
5 Meaningful social relationships and belonging

Scolding and gossip by communities were cited as reasons why survivors would rather keep silent, limiting many from expressing their feelings in safe spaces with people they trust.

‘Now, I am not depressed. But in 1996, I was depressed and I shared my feelings. Although I shared my feelings, no one was able to help me. So, I no longer share my feelings.’

‘I didn’t know who to open my heart and feelings to. I decided to marry the man who did this to me because he’s from a good family [Crying]. He was like violence itself, because he couldn’t control his mind. For me, whatever it is, I decided to face my life, so we got married and have been together until now.’

One survivor spoke about her resilience going back to live in her house after having lost her baby (conceived from rape) and being rejected by her community and family:

‘When I gave birth, I stayed in a small hut at the backyard. People were looking down on me at that time. My family didn’t listen to me as well. I had to live in that hut but now I live in this house. People condemn me but I came back here.’

6. Caring for children

Some survivors and family members also experienced anxiety at leaving their children at home, particularly after victimisation by a family member. For these women, having to take their children to work may place their earning potential at risk.

‘My life is hand to mouth. I have to bring my two children with me all the time even to my work. I am afraid that they might be in danger if I leave them at home.’

One survivor spoke of her fear of entering the community and the need for medical treatment for her child:

‘I didn’t dare to go to the community when this happened. I was afraid. But now, I am really worried about my daughter. She can’t bend her legs and she has to sit all the time. I’m worried about the future for both of us. My daughter will grow up day by day; we should not stay here and stay like this. I am thinking about looking for a job.’

7. Trauma related to conflict

Survivors caught in conflict (past and present) spoke of harrowing experiences of SGBV. One survivor was left untreated psychologically and showed intense emotions throughout the interview:
‘In 1996, armed groups came and arrested my husband. Then, they killed him. I had six children. A member of the armed group slapped me and kicked me. Then, as my hair was long, he pushed me to the ground by grabbing my hair and slapped me. My child was not able to drink my breast milk, so he put iron rod into the child’s mouth. My child just wanted to have my milk. Later, they dragged me to a tree, tied me and raped me. My experience was very bitter [Crying].’

8. Positive experiences with faith communities

Women whose children experienced SGBV and women/girls in active conflict seemed to have been received more openly and positively by faith communities and faith leaders than adult women in other areas. A better response in conflict areas could be because of the attention that certain conflict areas are drawing from the international community. There were, however, some statements of great support across all communities:

‘I usually go to the female pastor to get help. She organised a meeting with the elders. As I am young, I couldn’t solve the problems I faced. So I asked help from my female pastor. She prays for me. She mediates when problems occur.’

‘My church and community is a safe place for survivors. There was a woman who experienced this in my community. She got pregnant but the baby died. The church and community encourage her and help her.’

‘Yes, the faith leader visited regularly when it happened. He prayed for me and comforted me.’

Mother of young victim who was murdered

9. Interest in a survivors’ network

Thirteen women (65 per cent) were interested in getting involved in a network of support. All survivors agreed that such a network would be of tremendous value for those affected even though five survivors explicitly stated they did not want to get directly involved. Two interviewees did not indicate any interest.

‘If an association or network for women is established, it will be better for the women. No one will then abuse women. There will be no violence. I think it is necessary.’

‘I would like to encourage women. Women have to give advice to each other. We have to try to rise up again.’

‘Since I was young, I sympathise when I see vulnerable people. I would like to help more who are in the same situation as I am.’

‘In the beginning, I couldn’t console myself because I thought I was the only one who suffered from my daughter’s case at that time. Then I heard about the two Kachin teachers’ case, and I realised that this didn’t only happen to my daughter. We shared our feelings and experiences together, we console each other.’
The women who were resistant to being part of a support network spoke of being too ashamed to talk and one survivor explained limited time would make it difficult for her to attend a support group as she needs to work. Another cited her health and old age as reasons she would not want to get involved.

'I am not willing to share my stories with other survivors. I am ashamed to do so.'

Another said:

'I'm old so ask the younger people… I am not in good health. Sometimes my heart aches. I have hypertension. I cannot spend a long time riding on the motorcycle.'

'There is a Burmese Proverb that says women are like leaves. If the leaf falls on the thorn, it will have holes, and if the thorn falls on the leaf, the leaf will still have holes. Women are vulnerable in every way.'

Community leader

**Faith communities**

This section describes the findings of the interviews with faith and community leaders, and of the focus groups with women in communities. All community members and focus group discussions could name different acts of SGBV and had an understanding that this issue is a major concern in Myanmar and worldwide. Interestingly, participants (in particular, faith leaders) tended to deny cases within their own communities – blaming other communities, other religions, other ethnicities and other countries. As interviews progressed, however, participants started to reveal cases of SGBV they knew of in their areas.

From the analysis, the following major categories emerged:

1. Drivers of sexual and gender-based violence
2. Barriers to reporting
3. Remaining silent
5. Strengthening the faith-based response

1. **Drivers of sexual and gender-based violence**

Drivers of SGBV are the underlying structural conditions which may cause violence to happen. These may include legal, economic and social conditions within a particular society. Understanding of the definition of violence against women (including international instruments on women’s rights) and its drivers were higher where women’s groups were actively involved in communities. The following drivers were identified by faith communities:

- **Poverty and lack of employment:** Lack of opportunities in poor communities place women at risk – especially in areas of high crime and drug abuse.

  'Rape can happen while girls are going and working in another place because they live in difficult conditions and are poor. I think if parents are okay or if they don’t have to go and work at others' homes, it will be very good.'

  Community leader
'We have nothing in our community.'
Women’s discussion group

- **Unsafe spaces**: Lack of supervision or being away from home and family – working away from home, working in plantations, having been orphaned – posed significant challenges for women and children according to faith communities.

  ‘When a young girl goes somewhere alone, whether she’s going to the plantations or anywhere else, she is vulnerable. There are men, not only one but several men, who wait out on the street to rape these kinds of girls who are travelling alone.’
  Community leader

- **Substance abuse**: Many participants mentioned alcohol use as a driver of violence and many could talk about cases within their communities which were related to alcohol.

  ‘People cannot differentiate between right and wrong when they are high on drugs. There is a region in Myanmar where, due to drug usage, men have become sexually aroused and problems tend to occur.’
  Community leader

  ‘The husband drinks a lot. Every time, he comes back home when he is drunk he swears and yells at his wife. That’s a type of violence. So every woman in the community has been abused like that. So would you call that violence against women? [Laughter] I cannot take it, but we just have to stay silent. How do we solve that?’
  Women’s group discussion

- **Living in conflict and displacement**: The ongoing conflict and displacement of large numbers in the population were mentioned in interviews as a risk factor for women. In certain parts of Myanmar, women and children were taken from communities to serve as porters for armed groups. A community leader spoke of her experience witnessing extreme violence inflicted on porters.

  ‘They ordered the women to carry the burdens in the afternoon. They raped the women at night. The women were over 50 years old and refused the men. So the men burnt one of the older women’s genitalia. They burnt in front all of us. We saw that while I was studying in the highlands.’
  Community leader

- **Changing gender norms and roles triggered by political change and conflict**: In women’s focus group discussions, the changing gender roles were mentioned as women became protectors and breadwinners during times of conflict. For faith and community leaders, however, this was different. Leaders attributed women’s weakness, especially in times of insecurity, as a risk to their safety.

  ‘Because women are weak, sometimes they get raped when they go outside.’
  Community leader
'Because armed groups take the men, their wives have to protect them so they are not forced to work for armed groups.'

Women's group discussion

2. Barriers to reporting

- **Lack of knowledge on prevention, prevention policies, programmes and laws:** With laws and policies slowly underway, a lack of effective laws hinders social justice in the country. A faith leader emphasised the importance of church-level policies to address SGBV.

  'The church should draw up a plan. After drawing the plan, they will take action step by step. They do this as a part of their projects. They should work with other organisations to teach about this topic so that girls don’t get their sexual rights taken away. Giving everyone an education. Everyone will hear it including the ones who live in isolated places. Only then everything will be better. Another way is through documents and articles. Producing articles by yourself and distributing them. It is important to reach out to those who are living in rural areas. To put it in a simple way, we should broaden the knowledge of it.'

  Community leader

  'Laws are important to prevent this issue in the future. If there are laws, then these crimes will decrease.'

  Community leader

- **Ineffective judicial system:** A collective theme across interviews was the lack of an effective judicial system. This theme links in with the lack of laws and policies to protect women’s human rights. Interviews with survivors revealed a fear of re-victimisation, especially where the survivor was from a minority group.

  'Survivors are scared of the people from the court/office and they do not dare to go talk to them. If something happens, they depend only on God.'

  Community leader

- **Language barriers:** One women’s focus group spoke about minority survivors having trouble speaking the majority language. This was a significant barrier for women to advance their cases to judicial level.

  'We have difficulties in speaking Burmese. We are not good at speaking Burmese.'

  Women’s group discussion

- **Fear of stigma or developing a bad reputation:** This was mentioned by both women’s focus group discussions and by community leaders. Negative reactions to survivors were said to sometimes be a protection mechanism of a community to avoid stigma and victimisation from outside community members. One interview mentioned the fear of being investigated by the military; and a faith leader spoke about how parents of a violated child might also not want to talk about the issue – especially when the child is blamed for the incident.
‘Some are scared of becoming a victim by listening to the story.’

Women’s discussion group

A community leader discussed the suicide of a young victim’s mother: she could not stand the shame any longer and struggled to cope financially. This is a severe consequence of communities avoiding survivors and their families, despite seeing the suffering they go through.

Another community member spoke about people turning a blind eye as they were afraid of persecution.

‘We are afraid that we’ll be put on trial.’

- **Faith leaders are too conservative and judgmental:** Two community leaders had strong opinions of faith leaders and their institutions being too conservative or not having any understanding of SGBV and its causes.

  ‘If people do not support survivors it is because the church is in a really bad situation, and their spiritual strength is not complete in the church.’

  ‘Why… how can I say? I think it’s because their faith institution’s thinking is not very advanced.’

- **Cultural and traditional norms:** Despite a great energy to be involved in the fight against violence, most interviews contained frank descriptions of survivors through a lens of gender inequality and harmful social norms. Survivors were blamed for their experiences by various means, such as the way they dressed, being out alone at night, having boyfriends, or being ‘bad’ and ‘hard to control’.

  ‘We, the religious leaders need to control those who are out of control. It is a very dangerous world now. Don’t drink juice that others make for you, make your own, because you never know what kind of drugs they put in while making them. When we were young, our parents told girls to not even laugh but to only smile.’

  Faith leader

  ‘The religious leader should also help control. Now, kids are wearing very short shorts that look like they are not even wearing anything. This is also going against the Myanmar tradition… When we were young, there was a talk show on TV where Daw Yee Kyain talked about the morals for women. Now rape cases are occurring mainly because girls are wearing low-neck shirts, and shorts, which is like arousing the men around them.’

  Faith leader

- **‘Othering’ and denial:** Faith leaders, community leaders and women’s groups alike often spoke of only hearing about cases in other villages, or that it is rare in their own, despite seeing sexual violence as a key issue to be dealt with. In two interviews, faith leaders denied sexual violence within their own communities and then later became aware and talked about cases. ‘Othering’ places blame on those different to us, another ethnicity or religion, and was a thread woven throughout the research.
3. Remaining silent

A striking theme which emerged from interviews with faith communities was the notion that survivors cannot be helped if they refuse to speak out. Only if they speak out, can faith communities respond. However, survivors’ interviews showed that survivors were afraid to speak out and felt it was better to keep silent. Figure 1 was developed as this theme repeatedly surfaced and a cycle of reinforcing silence became evident.

Figure 1: Cycle of silence


Mixed responses were received from faith and community leaders and groups of women. Ten community leaders expressed great value in faith involvement in SGBV.

- **Care for survivors of SGBV**: Positive responses to survivors and a clear interest to care for them were evident in ten of the community leader interviews. In most of these interviews, however,
community leaders called for more training, knowledge and awareness around SGBV. Faith leaders felt they had a duty towards vulnerable women, although survivors were often blamed for what had happened to them.

'I will encourage them like my daughters, some like my sisters.'
Community leader

'We want them to get back their dignity as human beings. That is the first priority for us.'
Faith leader

**Encouraging marriage between perpetrator and survivor:** Conversations with faith communities pointed to a cultural practice where negotiations take place for survivor and perpetrator to get married. In survivor interviews, three women were asked to marry their perpetrators, of which one eventually agreed.

'We need to pray for them. After they speak out, we need to resolve for them. If the man is not going to take the responsibility, the church and the parents will have to take care of her. Or if the man is going to take the responsibility we should arrange an engagement for them. Isn't it?'
Faith leader

**Rules and principles of faith:** Faith and community leaders mentioned faith actors are bound by rules and principles, which were also used as justification for expelling survivors or sending them away.

'Yes, but we only know about it according to the church's rules. Because this is a mistake between the man and woman, we expel them.'
Faith leader

5. **Strengthening the faith-based response**

**Faith leaders and faith communities need to be empowered with knowledge and, where possible, resources:** A major obstacle identified by faith and community leaders was the lack of knowledge and resources (monetary). For the faith response to be strengthened, leaders will need training to increase their knowledge and understanding, and also find access to resources in order to assist survivors.

'To support the survivors, we need to educate people, money, power and counselling. Counselling is important and as we are faith leaders, what we can do most of is counselling.'
Faith leader

'Faith leaders are imperfect – imperfect in their livelihood. Sometimes, when there is a problem with the survivors, faith leaders want to help. But they do not have enough money to support them. So they can't support.'
Community leader
'Faith leaders have little knowledge or they are not open-minded. Knowledge is the most important. Just like a saying that “Instead of not having, not knowing is worse.” For us, if we look at sex traditionally, it is a very impure subject. For example, before, when a person has been through it, they will have to go around the village wearing a bamboo tray around their neck as a punishment. They were even kicked out of the village.'

Faith leader

- **More awareness-raising and networking**: Overall, all participants acknowledge the need for networking and more awareness within and across communities.

'**My suggestion – if there is more awareness about SGBV from organisations, women feel less inferior. Most women think that their role is in the kitchen. And they don’t have an income. Men also stereotype women as having to take care of the family and they cannot be equal to men. While pushing women, men should be given awareness too. Both sides should have mutual understanding.**'

Community leader and survivor

- **Faith communities need to accept survivors and be sensitive to their experience**: This was a crucial theme throughout the research analysis. Survivors have told of their experiences of being cast out by their faith communities and not being allowed to return until they approach their faith leader for a ‘confession of their sin’, in order to be forgiven and re-introduced to their community. Women’s experience of being labelled sinners in the face of extreme trauma hinders long-term healing and keeps women in a vulnerable position.

'**There is a tradition in a certain region where faith communities drive the women who experience violence out and don’t protect and care for them. They say it is embarrassing for the village. Not only for the faith leader but also for the community members – they do not accept survivors. They drive out the one who is in trouble.**'

Community leader

'A church’s goal is to help the vulnerable people. This girl was unfortunate. She is thrown into a life where she is rejected from society. We don’t have it. Survivors don’t live in towns or villages. And we discriminate against them. This shouldn’t happen.'

Community leader

- **Faith communities and faith institutions should provide a safe space for survivors**: Faith leaders spoke about the importance of taking in the vulnerable and that it is their calling to care for vulnerable people. Faith communities can contribute to nurturing survivors, and setting the scene for breaking the silence, through providing safe spaces where survivors feel emotionally free and physically safe. Six of the women’s focus group discussions indicated women were not safe in and around their communities. This is a good entry point for faith communities to start the conversation around SGBV and the right to live free of violence.
As we aspire to prevent SGBV, it is important to research the root causes of violence to better understand how different sectors and communities can work together. Planning prevention programmes, based on such research, should be supported by a theory of change to transform the lives of not only survivors, but of whole communities. This can be achieved through empowering women in communities, mobilising communities for social change, partnering and building capacity of local non-profit and civil society organisations and government departments, and ensuring safety in the physical spaces where women move and engage on a daily basis.

Prevention can take place on various levels and each level serves to strengthen the other in providing a comprehensive response to SGBV overall. Primary prevention refers to addressing the root causes of SGBV, which include social norms, gender inequality and harmful behaviours such as alcohol and drug abuse. Secondary prevention focuses on immediate responses and includes strengthening health care for survivors, support services such as ensuring safe spaces and providing counselling, and providing survivors with information and support to take legal cases forward. Tertiary prevention looks at the long-term response to SGBV and works to reduce harm already caused. This may include perpetrator rehabilitation, economic empowerment of survivors and establishing national support networks.

Religion can be powerful in the embodiment of human rights. As this research has shown, working with faith communities can cut across the spectrum of prevention and can support survivors in crucial and sometimes life-saving ways. Faith communities and their faith leaders have the potential to: transform harmful behaviours and norms; address inequalities; provide shelter and psychological support; support survivors who decide to take legal action; advocate for programmes to empower survivors financially; and establish networks of support. A good model of community-based care which could be applied to faith leaders and communities is illustrated in Figure 2.

**Figure 2: Communities Care: Transforming Lives and Preventing Violence Programme (UNICEF 2015)**

- **Community-based care**
  - Increase availability, accessibility and quality of services
  - Build survivor-centred knowledge and skills behaviours amongst service providers
  - Build service provider norms that encourage survivors to seek help

- **Adverse community responses**
  - Build positive norms
  - Foster collective public action to demonstrate commitment to change
  - Communicate new ideas and expectations
  - Create a supportive environment

Credit: Sophie Read-Hamilton and Mendy Marsh, Unicef
Furthermore, findings in this research support data by the Gender Equality Network (2014) on the influence and impact of social norms on women’s control over their own bodies and sexuality. It is especially important then that change takes place at this level where violence is an acceptable way of life. This study provides promising building blocks for whole faith communities to address harmful social norms, to start re-building the lives of survivors and to heal painful memories of whole communities.

Survivors were positive about faith involvement, with only one survivor being clearly resistant to any form of support from faith leaders – mainly because of the way her leaders and community ostracised her. Generally, survivors were positive about getting involved in a support network initiated by faith leaders and communities and believed others who had had similar experiences would benefit. A sense of standing together and rising up again was gathered through the interviews. Five survivors, however, felt too embarrassed and ashamed to take part in such a network.

It is worth noting that a key element missing from interviews was the role that men and boys should play in being accountable and preventing violence against women. The burden of responsibility was largely placed on survivors themselves. Although transforming masculinities was a key outcome identified by faith and community leaders in the Tearfund preliminary feedback workshop, this didn’t emerge from the data in the qualitative research. It is crucial, when working with faith leaders to prevent and respond to SGBV, that positive masculinities are addressed and championed.
RECOMMENDATIONS

Recommendations from survivors for support

1. Faith leaders attend to the needs of survivors’ mental health, for example through counselling
2. Faith leaders link with outside organisations for comprehensive service delivery
3. Faith leaders and communities improve their own knowledge around sexual violence to broaden their views and gain understanding to address stigma and shame
4. Faith leaders, communities and survivors gain knowledge of the law and punishment is ensured for perpetrators
5. Faith leaders provide a safe space for survivors to support each other to speak out
6. Survivors are empowered by their faith communities to gain skills and financial assistance

Recommendations for action for faith communities

1. Break through norms sustaining harmful masculinities and gender inequality
2. Have open and honest discussions about rape and sexual abuse within communities
3. Create support groups for survivors of violence
4. Be active in supporting survivors through prayer and giving them words of encouragement
5. Identify an authority figure to walk with survivors on their path to healing
6. Provide a safe space for survivors and ensure their identity and integrity is protected
7. Support survivors to speak out and not be fearful of the consequences when making their voices heard
8. Promote positive parenting in communities
9. Provide pastoral services to ensure survivors have adequate counselling
10. Explore pathways for access to services, for example to prevent HIV, STDs and pregnancy from rape
11. Explore pathways for access to justice without further victimisation – increase knowledge of what is available and promote better treatment of survivors who choose to go down the justice path
12. Collaborate with networks and build capacity of faith communities to effectively respond
13. Build capacity of survivors to create livelihoods
14. Rehabilitate perpetrators for long-term prevention of re-offending
CONCLUSION

Working with faith communities will be a long-term process. Although there was a sense of sympathy and interest in the lives of survivors, deeply ingrained attitudes and norms/beliefs will need to be unpacked and addressed to fully care and support survivors of SGBV. In essence, a cultural shift is needed towards positive norms within communities who must demonstrate a commitment to change. Faith communities will need to build a safe and supportive environment where survivors are comfortable to speak out.
REFERENCES


21. Women’s League of Burma (2014) *Same impunity, same patterns: sexual abuses by the Burma army will not stop until there is a genuine civilian government*


30. UNHCR South-East Myanmar Information Management Unit (2014) *Tanintharyi Region profile*

31. Sikwiyiya YM (2013) *Perceptions of participants and community members about research on gender based violence*. Department of Public Health Johannesburg, South Africa: University of Witwatersrand


38. WHO, LSHTM, SAMRC (2013) *Global and regional estimates of violence against women: prevalence and health effects of intimate partner violence and non-partner sexual violence*

39. UN Women (2011) *UN Women Safe Cities Free of Violence against Women and Girls Global Programme*

40. WHO/LSHTM (2010) *Preventing intimate partner and sexual violence against women: taking action and generating evidence*


ANNEX 1: INTERVIEW GUIDES

Interview guide: Community leaders

**Question 1**
*I would like to know about your understanding of violence against women. Can you give some examples of what you know or what you have heard of?*

**Info for researchers:**
Here we want to explore meaning and personal definitions of violence against women – see if they include examples of sexual violence. If not – ask if they understand sexual violence as a term.

**Question 2**
*Do you think faith leaders are aware of sexual violence as an issue and is there an interest in supporting and caring for survivors of sexual violence?*

**Info for researchers:**
This question is to see how open they think faith leaders are to the issue. Have they raised awareness in any way? Can they tell us about it?

**Question 3**
*Do you know of ways faith leaders or churches/temple/mosques have cared and supported survivors of sexual violence in your community?*

**Info for researchers:**
Here we want to get a feeling of whether they know what is happening in communities and if faith leaders are supportive of survivors.

**Question 4**
*Why do you think they have cared and supported survivors of sexual violence in the ways they do?*

**Info for researchers:**
This question asks about beliefs and practices – what are some of the beliefs and practices that have contributed to their level of support or non-support?

**Question 5**
*What in your opinion has contributed to support or the lack of support for survivors of sexual violence?*

**Info for researchers:**
Researchers can ask for examples – what are the reasons for faith leaders to keep silent or speak out?
Question 6
What kind of support do you think faith leaders and others in your community need to help them care/support for survivors of sexual violence sensitively and effectively?

Info for researchers:
Here we want to know in what ways they think the church/temple/mosque or faith leaders can help – what do they need to be able to help? How can they reach out to survivors?

Question 7
Are you aware of what has been done by faith leaders and others in your community to address sexual violence?

Info for researchers:
If so, what have been the successes and the lessons learned?

Question 8
Are there any champions within your church/temple/mosque keen to care for and support survivors of sexual violence?

Info for researchers:
Are they pastors/priests/monks/imams or people in the church/temple/mosque? What are they doing to support survivors?

Question 9
Do you think it is important for faith leaders and the church/temple/mosque to help prevent and support survivors of sexual violence?

Info for researchers:
Ask them why they think it is/is not important?

Question 10
Do you know of collaboration between faith leaders and other organisations to support survivors of sexual violence?

Info for researchers:
Ask leaders what they think has worked well and why. Or if it has not worked, why? What are the areas for improvement?

Question 11
How can we improve collaboration between faith leaders and other organisations?

Info for researchers:
Ask here what is needed and how it can be made possible.

Thank them for the interview and ask them if they have any questions.
Interview guide: Faith leaders

Question 1

I would like to know about your understanding of violence against women. Can you give some examples of what you know or what you have heard of?

Info for researchers:
Here we want to explore meaning and personal definitions of violence against women – see if they include examples of sexual violence. If not – ask if they understand sexual violence as a term.

Question 2

As a faith leader, are you aware of sexual violence as an issue and is there an interest in supporting and caring for survivors of sexual violence?

Info for researchers:
This question is to see how open faith leaders are to the issue. Have they raised awareness in any way? Can they tell us about it?

Question 3

How have you and your church/temple/mosque cared and supported survivors of sexual violence in your community? What have been the successes?

Info for researchers:
Here we want to get a feeling of whether they know what is happening in communities in terms of sexual violence taking place – whether they are approached about this issue and if they are supportive of survivors.

Question 4

Can you talk about why you have supported survivors in these particular ways?

Info for researchers:
This question asks about beliefs and practices – what are some of the beliefs and practices that have contributed to their level of support?

If not, ask them what the challenges are in supporting survivors.

Question 5

What kind of support do you need to sensitively and effectively care for and support survivors?

Info for researchers:
Here we want to know in what way they think the church/temple/mosque can help – what do they need to be able to help? How can they reach out to survivors?

Question 6

Do you know of any champions in your church/temple or mosque who may be keen to respond to this issue?

Info for researchers:
Are they pastors/priests/monks/imams or people in the church/temple/mosque? What are they doing to support survivors?
Question 7

Do you think it is important for faith leaders to be involved in preventing sexual violence and supporting survivors of sexual violence?

Info for researchers:
Ask them why they think it is important/not important?

Question 8

Do you collaborate with other organisations supporting survivors of sexual violence? What has worked well and why? What are the areas for improvement?

Info for researchers:
Ask leaders what they think has worked well and why. Or if it has not worked, why? What are the areas for improvement?

Question 9

How can we improve collaboration between faith leaders and other organisations?

Info for researchers:
Ask here what is needed and how it can be made possible.

Thank them for the interview and ask them if they have any questions.
Interview guide: Survivors

Question 1
What activities are happening in your community and how do you participate in them?

Info for researchers:
This question is to get the survivor to relax and talk about positive aspects of her community. You can prompt her for answers around community or church/temple/mosque activities.

Question 2
Can you tell me what you like about your community and living here?

Info for researchers:
This question is a follow-up from the one before and will be the bridge to the next question which will ask about faith.

Question 3
Do you like to attend church/temple/mosque regularly and do you have many friends who attend with you?

Info for researchers:
Here we want to get a feeling of women's involvement in faith and their support networks. How often do they go to worship, do they go together or do they go alone?

Question 4
If you have such a group of friends at church/temple/mosque, do you spend time together at church discussing life in general, your troubles and your joys?

Info for researchers:
This question asks about support more specifically. Can she tell you how much time she spends with friends talking? What kinds of conversations do they have? Do they support each other with advice on certain issues etc?

If she doesn’t have a group of friends – who does she generally speak to about life? If nobody, can she tell you about why she prefers not to discuss such issues?

Question 5
I would now like to ask you some questions related to your experience and why you are here today. If you want to tell me about it you are welcome, but I would like to ask about your needs rather than the experience itself.

Can you tell me who you turned to for help after your experience?

Info for researchers:
Researchers should make it clear that she doesn't need to explain the experience if she doesn’t want to. We are interested in her needs and wants right now in her life. We also want to know if she sought medical/psychological attention and who might have helped her to seek such attention.
Question 6
Do you think faith leaders or the church/temple/mosque will be able to help women who have had similar experiences to get the help they need?

Info for researchers:
Here we want to know in what ways she thinks the church/temple/mosque or faith leaders can help? How would she like to be reached out to by them?

If she doesn’t – why does she think they cannot help? Who then would she see as people to turn to?

Question 7
Do you think the church/temple/mosque can become a place to provide a safe space for healing and recovery from such experiences?

Info for researchers:
This question asks about the potential of the church/temple/mosque to be a safe space to speak out. Are there any obstacles to this she can describe? How does she think such obstacles can be overcome?

Question 8
Healing and recovering from violent experiences can be very difficult for women. How do you think faith leaders and their churches/temple/mosques can help women who have experienced sexual violence to heal?

Info for researchers:
This question will focus on the role of faith in supporting and caring for women. What are the suggestions from the group? Can they give some practical examples of how this can work?

Question 9
Would you be willing to talk openly to other women who have had a similar experience if a safe space were provided by the church/temple/mosque?

Info for researchers:
Here we want to know of their readiness to speak out if a safe space were provided. Is this possible? If no, what are her thoughts around this?

Question 10
Would you be part of a support network where survivors speak out and are supported by the church/temple/mosque?

Info for researchers:
Here we want her to tell us what she would like to see in a support network if she thinks she would be part of it. If not, can she tell us why she wouldn’t take part?

Question 11
What do you need to help you heal your memories? What do you need from your community and your church/temple/mosque to help this process?

Info for researchers:
Let her talk about her needs – any needs she may have in the healing process. Then ask about support of faith and communities. How can this happen?

Thank her again for the interview and ask her if she has questions. Inform her you can refer her to a counsellor if she has a need to debrief or if she needs more information on sexual violence.
Interview guide: Women's focus group discussions

Question 1
What activities are happening in your community and how do women participate in them?

Info for researchers:
This question is to get the women to relax and talk about positive aspects of their communities. You can prompt them for answers around community or church/temple/mosque activities.

Question 2
Can you tell me what you like about your community and living here?

Info for researchers:
This question is a follow-up from the one before and will be the bridge to the next question which will ask about safety, now they have told us about positive experiences.

Question 3
Would you say that women feel safe in the community? Why/why not?

Info for researchers:
Here we want to know why they think women feel safe or unsafe. Can they give you examples of times when they themselves felt unsafe?

Question 4
Do you think faith leaders or places of worship (for example, church, temples or mosques) in the community are supportive of women who have had experiences of violence?

Info for researchers:
This question asks about violence in general, so discussion about support can include any form of violence. Why do they think places of faith are supportive or not supportive? Do they know of incidents where faith leaders or the church/mosque/temple have been supportive/not supportive? Can they share this with the group?

Question 5
Can you tell me what you understand about gender-based violence/violence against women? What does it mean to you?

Info for researchers:
This question explores women's understanding of gender-based violence. We would like them to give us some examples. See if they talk about issues that include acts of sexual violence. If they don't mention sexual violence at all, please ask them if they are aware of the term sexual violence and what it means to them.
Question 6

Do you think women who have experienced sexual violence are more likely to remain silent? Why do/ don’t you think so?

Info for researchers:
Here we want you to explore issues of shame and stigma – without using those words as a lead. Ask them why women would remain silent. Do cultural factors or beliefs play a role?

If they think women in their community are speaking out, ask them about factors that enable women to do so.

If they say that sexual violence is not an issue in the community, talk about a news report of recent cases of sexual violence in Myanmar (as discussed in training). Ask them more generally why they think women are/are not speaking out.

Question 7

We hear of war happening across the world and around parts of Myanmar. I would like to know how you think war affects women’s lives in Myanmar?

Info for researchers:
This question asks about views around war and the violence women may experience – ask for examples of how war may impact on women, what do they think happens to women during times of war?

Question 8

Healing and recovering from violent experiences can be very difficult for women. How do you think faith leaders and their churches/temples/mosques can help women who have experienced sexual violence to heal?

Info for researchers:
This question will focus on the role of faith in supporting and caring for women. What are the suggestions from the group? Can they give some practical examples of how this can work?

Question 9

Do you think that a support network for women who have experienced sexual violence would be helpful and beneficial?

Info for researchers:
How do they suggest something like this can be established? Can this be established within the church/ temple/mosque? How? If no: Why? How can obstacles be overcome so we can establish such a network?

Ask the group if they have any questions.