

The challenges of post-conflict reconstruction; a case study of women victims living in Kibera and Kariobangi: Nairobi-Kenya

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Abstract: *In 2007 in Kenya, after the general elections, violence started between supporters of the two main presidential candidates. This resulted in destruction of property, forced circumcision, rape, sexual assault, defilement and domestic violence. The violence came to an end after the two main presidential candidates came to an agreement. This post-poll violence left many victims.*

The study therefore seeks to find out why this is happening by highlighting the challenges women victims of PEV living in Kibera and Kariobangi: Nairobi-Kenya are facing. The study results will help create awareness about the plight of these victims socially, economically, culturally, emotionally and politically. The study will also help build the capacity of these women and therefore be capable of reconstructing their lives fully in the society since GBV especially sexual violence such as rape is difficult to manage due to its long term consequences where children may have been born out of such encounter.

The study will use Mugenda and Mugenda 2005 formula to determine sample size from 83% of those who were raped and sexually assaulted. The research design is a specific plan used in studying the research problem. The design will use Show Balling on convenience to collect data from respondents (victims) and questionnaires and interview schedule to collect data from service providers such as hospitals visited, faith-based organizations, Non Governmental Organizations and Government.

Theme: *The role and experiences of women in post-conflict and conflict situations.*

I. Introduction

Kenya is one of the countries in the Great Lakes region. It has 42 tribes speaking forty two different languages. The Kenyan society is patriarchal in nature. Before the 27th December 2007 General elections, the 42 tribes had organized themselves into two major political parties to participate in the general election namely Party of National Unity (PNU) and Orange Democratic Movement (ODM). When ODM presidential candidate failed to clinch the seat, violence broke across the country. According to the Kenya National Commission on Human Rights (KNCHR) report 2008, the violence was characterized by widespread and systematic ethnically targeted killings of people and destruction of property of communities allied with PNU by ODM supporters and counter attacks similarly intended on killing people and destroying property of people aligned with ODM by PNU supporters. Apart from destruction of property there was forced circumcision, rape, sexual assault, defilement and domestic violence.

1.1 Background

December, 27th 2007 was a historic day in Kenya when Kenyans turned out in large numbers baring long queues to vote for president, members of Parliament and counsellors. The voting went on peacefully. Unfortunately prior to and after the announcement of the election results by the Electoral Commission chairman, there were allegations by various supporters of Political parties that the Presidential election had been rigged leading to eruption of violence in various parts of the country; property (houses, animals, vehicles etc.), people killed and businesses looted. Over 1000 people died and 500,000 were displaced as they fled violence and searched for safety. During the violence, women, children and men were systematically sexually and physically assaulted by perpetrators or supporters of the winning and losing political parties.

In Nairobi alone 524 (80%) of men, women and children were raped/defiled, 22 (3%) were sexually assaulted, 42 (7%) physically assaulted and 65 (10%) were domestic violence cases according to Quarterly report by Gender Violence Recovery Centre (GVRC) 2008.

This proposal seeks to find out the challenges women who were raped, sexually assaulted and suffered domestic violence and other forms of Gender based violence are facing socially, culturally, economically and politically.

1.2 Statement of the problem

Kenya is one of the countries that have signed many treaties which aim at stopping Gender Based Violence (GBV) and domestic violence drawn by organizations such as United Nations (UN). Recently Kenya has put in place Sexual Offences Act and Children Act and other policies to stop GBV. Despite all these, cases

of GBV are still on the rise in Kenya some of which go unreported. A number of factors have contributed to this one of them being the Post Election Violence (PEV) in Kenya 2007/2008. The study therefore seeks to find out why this is happening by highlighting the challenges women victims of PEV living in Kibera and Kariobangi: Nairobi-Kenya are facing.

1.3 Justification of the study

The purpose of the study is to find out the challenges of post-election reconstruction by women living in Kibera and Kariobangi: Nairobi-Kenya. The study results will help create awareness about the plight of these victims socially, economically, culturally, emotionally and politically. The study will also help build the capacity of these women and therefore be capable of reconstructing their lives fully in the society since GBV especially sexual violence such as rape is difficult to manage due to its long term consequences where children may have been born out of such encounter.

1.4 Objectives of the study

1.4.1 General Objectives

The challenges of post-conflict reconstruction in Kibera and Kariobangi: Nairobi-Kenya.

1.4.2 Specific objectives

The study will be guided by the following specific objectives;

- i. To establish the individual level challenges of post-conflict reconstruction by women in Kibera and Kariobangi: Nairobi-Kenya
- ii. To determine the influence of Government intervention on the victims lives
- iii. To find out factors that inhibit victims from seeking help

1.5 Research questions

- i. What are the challenges individuals living in Kibera and Kariobangi face during the post conflict reconstruction
- ii. What are some of the factors that inhibit victims from seeking help
- iii. How has the Government intervened on the victims' lives

1.6 Scope of the study

The findings of this study will not be restricted to Kibera and Kariobangi alone since Gender Based Violence is still continuing due to conflicts within the country and with the neighbouring countries such as Somalia, Ethiopia and Southern Sudan as a result of terrorism and border conflicts.

1.7 Assumption of the study

- i. There will be cooperation from the victims (women) who suffered from GBV
- ii. The respondents will not expect payment in order to fully operate
- iii. All the targeted number of women will be available for the study

1.8 Limitations of the study

The researcher is likely to face the problem of displacement. It is more than five years since there was PEV therefore some women may have relocated to other estates or parts of the country.

1.9 Definition of terms

GBV:	Gender Based Violence
GBSV:	Gender Based Sexual Violence
GVRC:	Gender Violence Recovery Centre
KNCHR:	Kenya National Commission on Human Rights
ODM:	Orange Democratic Movement
PEV:	Post Election Violence
PNU:	Party of National Unity
UN:	United Nations

II. Literature Review

2.1 Introduction

This chapter reviews literature related to this study. It focuses on gender issues related to GBV. It will also examine ecological model of factors associated with GBV.

2.2 Gender Based Violence and Society

Violence against women is a global problem. It becomes worse when there is conflict like the one which took place in Kenya 2007/2008 as a result of disputed election results. Whenever there is conflict, women, children and the disabled are usually the immediate victims of gender violence. The consequences of gender violence extend beyond the victim to the society as a whole. Gender violence threatens family structures. Children suffer emotional damage when they watch their mothers and sisters suffer various forms of violence, two parent homes may break up leaving the new female heads of household to struggle against increased poverty and negative social repercussions.

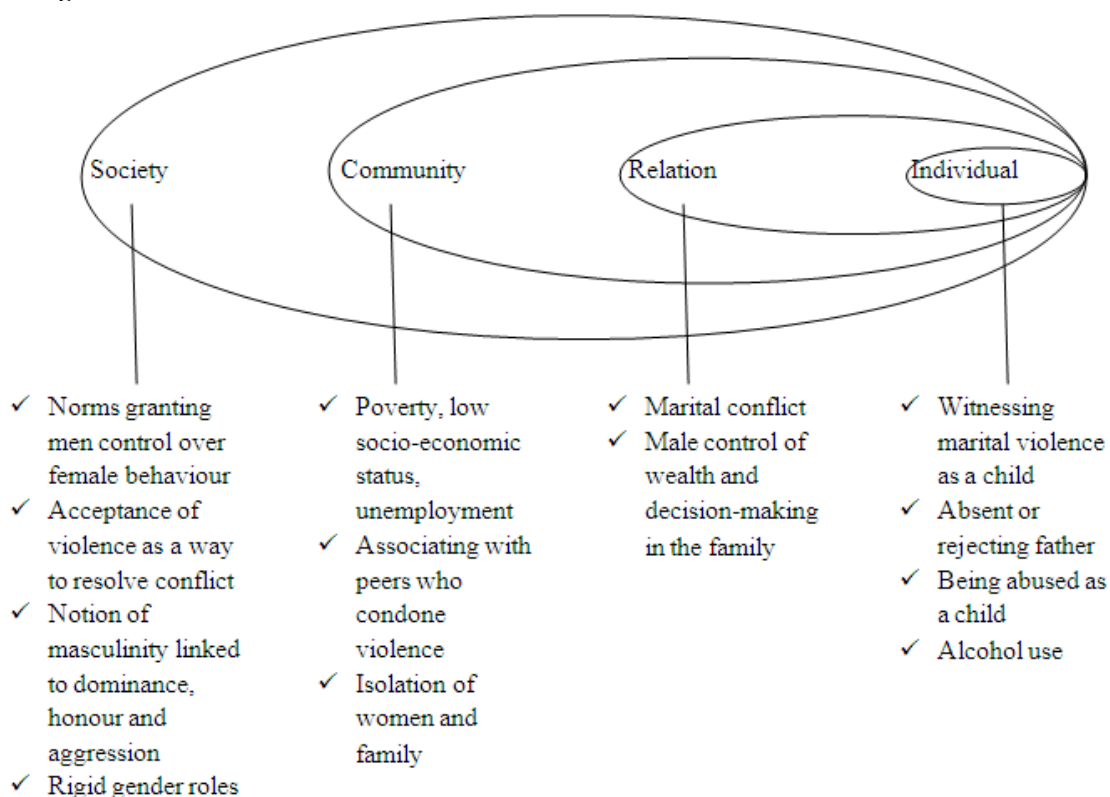
Psychological scars often impede the establishment of healthy and rewarding relationships in the future. Victims of gender violence may vent their frustrations on their children and others thereby transmitting and intensifying the negative experiences of those around them. Children on the other hand, may come to accept violence as an alternative means of communication. It is in these ways that violence is reproduced and perpetuated.

2.3 Social responses to GBV

Over the last few decades, GBV has been recognized and discussed as a public rather than private problem. As a result, a multitude of potential responses has been identified within the state and civil society. There is a variety of approaches to GBV (i.e. human rights, health and development) and that they are being integrated to address the problem. Through participation of multi-sectors and entire communities in addressing GBV, it is possible to achieve effective prevention and create social networks to ensure that victims of GBV receive the care and protection they need.

The Pan American Health Organization (PAHO) and Gender Violence Recovery Centre (GVRC) points out that creating these networks involves integrating GBV prevention and care into existing systems and services as well as designing new responses. Social responses to GBV fall under several categories namely health care services, victim assistance services, working with perpetrators, exploring masculinities, media information and awareness, education, legal responses, community intervention, faith-based programs and international conferences and conventions.

2.4 Ecological Model of Factors Associated with GBV



III. Research Methodology

3.1 Introduction

This chapter discusses the methods that the researcher will employ to collect data. This will include study area, research design, target population, sample size and sampling procedure, instrumentation and data collection procedure and analysis.

The study will be conducted in Kibera and Kariobangi area in Nairobi. The study will focus on the challenges of the post-conflict reconstruction. The two areas are densely populated since they are slums thus housing many people in semi structured houses.

3.2 Research Design

The research design was a specific plan used in studying the research problem. The design used Show Balling on convenience to collect data from respondents (victims) and questionnaires and interview schedule to collect data from service providers such as hospitals visited, faith-based organizations, Non Governmental Organizations and Government.

3.3 Target Population

The study used Mugenda and Mugenda 2005 formula to determine sample size from 83% of those who were raped and sexually assaulted

3.4 Sampling Procedure and Sample size

The study used purposive sampling technique. This was because only those who were victims or were in touch with the victims in one way or the other could be considered for the study

3.5 Instrumentation

Two instruments namely a questionnaire and an interview schedule were be used to collect data besides a tape recorder for the case studies.

3.6 Data collection procedure

The researcher sought a permit from the National Council of Service and Technology (NCST). Protecting of instruments was done.

3.7 Data analysis

The researcher filled questionnaires, code data, edited and analyzed after collection and cleaning. The data from the tape recorder was listened to, transcribed and then recorded.

3.8 Introduction

This chapter discusses reports from the only hospital in Nairobi which dealt with most cases of PEV victims (Gender Violence Recovery Centre) and case studies.

3.9 Report on activities and results of PEV as received by GVRC – Nairobi

The hospital received referrals from other health care centres, police, NGOs among others. There were also those who visited or taken to hospital by relatives or well wishers. Below is a list of tables of numbers received and the nature of violence they experienced.

A total of 653 survivors received comprehensive medical examination and treatment. A total of 186 cases were admitted in the wards; 71 were children while 115 were adult survivors.

Out of 653 survivors, 524 (80%) were rape/defilement cases, 65 (10%) were domestic violent cases, 42 (7%) were physical assault cases and 22 (2%) were sexual assault as shown in table 1 below.

Table 1: Presentation of number of survivors of post election violence

Complaint	Number	Percentage
Rape/Defilement	524	80%
Domestic Violence	65	10%
Physical Assault	42	7%
Sexual Assault	22	3%
Total	653	100%

Children survivors of defilement

A total of 227 survivors of defilement received comprehensive medical examination and treatment. Out of 227 survivors, 190 (84%) were girls and 37 (16%) were boys.

Table 2: Presentation of children survivors of defilement by sex

	January	February	March	Total	%
Female	73	56	61	190	84%
Male	10	10	17	37	16%
Total	83	64	78	227	100%

Adult survivors of rape

A total of 297 adult survivors of rape received comprehensive medical examination and treatment. Out of 297 survivors, 275 (93%) were women and 22 (77%) were men.

Table 3: Presentation of adult survivors of rape by sex

	January	February	March	Total	%
Female	96	97	82	275	93%
Male	6	8	8	22	7%
Total	102	105	90	297	100%

Children survivors of sexual assault

A total of 16 children survivors of sexual assault received comprehensive medical examination and treatment. Out of 16 survivors, 13 (81%) were girls and 3 (19%) were boys.

Table 4: Presentation of children survivors of sexual assault by sex

	January	February	March	Total	%
Female	4	6	3	13	81%
Male	1	2	0	3	19%
Total	13	8	3	16	100%

Adult survivors of sexual assault

A total of 6 adult survivors of sexual assault received comprehensive medical examination and treatment. Out of 6 survivors, 4 (67%) were women and 2 (33%) were men.

Table 5: Presentation of adult survivors of sexual assault by sex

	January	February	March	Total	%
Female	2	1	1	4	67%
Male	1	1	0	2	33%
Total	3	2	1	6	100%

Children survivors of physical assault

A total of 11 children survivors of physical assault received comprehensive medical examination and treatment. Out of 11 survivors, 7 (64%) were girls and 4 (36%) were boys.

Table 6: Presentation of children survivors of physical assault by sex

	January	February	March	Total	%
Female	3	4	0	7	64%
Male	2	2	0	4	36%
Total	5	6	0	11	100%

Adult survivors of physical assault

A total of 31 adult survivors of physical assault received comprehensive medical examination and treatment. Out of 31 survivors, 14 (45%) were women and 17 (55%) were men.

Table 7: Presentation of adult survivors of physical assault by sex

	January	February	March	Total	%
Female	8	4	2	14	45%
Male	7	10	0	17	55%
Total	15	14	2	31	100%

Children survivors of domestic violence

A total of 21 children survivors of domestic violence received comprehensive medical examination and treatment. Out of 21 survivors, 11 (52%) were girls and 10 (48%) were boys.

Table 8: Presentation of children survivors of domestic violence by sex

	January	February	March	Total	%
Female	4	4	3	11	52%
Male	3	4	3	10	48%
Total	7	8	6	21	100%

Adult survivors of domestic violence

A total of 44 adult survivors of domestic violence received comprehensive medical examination and treatment. All the 44 survivors were female adults as shown in table 9 below.

Table 9: Presentation of adult survivors of domestic violence by sex

	January	February	March	Total	%
Female	6	8	30	44	100%
Male	0	0	0	0	0%
Total	6	8	30	44	100%

Findings about perpetrators of post election violence and circumstances surrounding the incidence

As reported by the survivors, perpetrators of the violence included gangs of unknown young men ranging between 2 to 11 young men who chanted supporting different political parties. Thugs also broke into houses, robbed off the survivors' belongings and assets and physically attacked the survivors using knives, and pangas. In other cases, the survivors were carjacked by unknown people taken to segregated places and robbed off their belongings then sexually violated.

3.10 Case Studies

i. Case study one

Mercy Ndege (27 years old)

Mercy had just given birth two weeks before the violence broke. The birth was through caesarean section. People familiar to her broke the door of her house and went straight to her, she was raped, the wound opened up and she see her intestines popping out. She later sought refuge in a nearby clinic. To date she still gets traumatized. No structured help has come her way apart from that of good Samaritans.

ii. Case study two

My brother owned a hotel, he was our bread winner he was murdered by his own customers people we knew.

We reported them to the police but justice has never been done to date. We lost hope. I wish the government can follow up cases of people who lost their loved ones and let justice be done.

iii. Case study three

Jane Anyango (32 years old)

It was at around 11.00 o'clock in the night when I heard a knock at the door. The children had gone to sleep. I peeped through the window and saw a close friend of neighbour from the opposing community at the door in desperation. Since he was a frequent visitor to the neighbourhood, I opened the door for him for I thought he was in danger, since it was the height of PEV. He came in sat down then after exchanging greetings he turned on me and three me on the sofa-set where he raped me repeatedly then left. That time the children were deep asleep in the bedroom and I did not want to make noise fearing this would wake them up an expose my first born daughter too who was by then thirteen years old. From the ordeal, I got HIV/AIDS virus and pregnant. Being a widow I decided to look for ways and means of aborting. I tried three times and failed. Meanwhile the baby was growing. I then decided to keep the pregnancy and on condition that upon birth, I would give her for adoption immediately without setting eyes on the baby. Arrangements was made by children's home. At the onset of labour, I called the Home so that we meet in hospital but to my disappointment, to date they have never come. I had no option but to keep the baby. It happens that she is the most beautiful of all mu babies although with different complexion. The church has since expelled me for giving birth yet I am a widow. I did not disclose to them the source of the pregnancy. My children too especially the first born has lost trust in me for betraying their late father. A cannot disclose to them either. From where I used to collect ARVs and attend counselling we formed a network of women who got raped or infected and are meeting monthly to share our experiences and map way forward for our families although it is not easy.

iv. Case study four

Jacinta Njeri (29 years)

At the height of PEV on my way home from the kiosk, I get waylaid by some men whom I had never met in my life. They spoke a different language from mine. They led me to an empty room within slums where I was staying and raped me in turns. To them they were teaching a lesson for having stolen their election. I now have a baby girl whom I chose to give a surname from that community. At first I was hostile to her, tried to starve her but all these stopped when I joined a network of women who suffered from similar problems like me. The name still remains.

v. Case study five

Agnes Wera (28 years old)

During the PEV, I hardly left the house for fear of being killed outside. In the house, I was living with my brother-in-law and my children. My husband was working in a nearby town and because of the situation; he could not join us for fear of being killed besides there was no means of transport. My brother-in-law took advantage of the situation one night when the children had gone to bed and raped me. I became pregnant as a result but up to now I have never disclosed this to my husband even though it is haunting me. I could not abort since abortion is illegal in Kenya besides I married and this would have exposed me.

vi. Case study six

Orpah Jambi (22 years old)

Orpah Jambi was gang raped by eight men though she cannot remember if they all raped her since she passed out in the process. Before she lost consciousness she heard them say that she should be burnt. She woke up and found herself near the sewage. She dragged herself to the nearest house to ask for help. They were kind to her and gave her water to take a bath then she went to the only Recovery Hospital in the country for assistance. She was referred to the police station. The policemen told her she had already that she has already interfered with the evidence and if she wants to proceed with the case, she can as well go and look for the men to rape her in order to get evidence. They retorted by further telling her that she was not even a virgin and seemed to enjoy every bit of it. She left the station only later to discover she was pregnant. She was bitter but later when she gave birth to a handsome baby boy she forgave but has not forgotten. She has lost trust in life since peace without justice is no peace.

vii. Case study seven

Catherine Njagi

Catherine lost property worth 9.4 million and two children. She was also beaten and left for dead. When she gained consciousness she found herself at the police station together with others who had taken refuge. Catherine is a bitter woman since she has not been compensated for the loss yet she knows the looters and those who destroyed her property. She feels like an outcast; she feels like relocating to another country because of bitterness in her heart.

viii. Case study eight

One fine morning three young women arrived in their rural homes carrying a few belongings and heads of their husbands in baskets. They had been ferried by a good Samaritan. They were welcomed home but up to now they have not yet healed.

IV. Introduction

This chapter discusses the challenges faced by care givers, victims of PEV and the researcher and conclusion and recommendation.

4.1 Challenges faced by care givers

Post election violence cases were horrific hence most counsellors had to take frequent breaks to debrief.

Though a blessing to have several Kenyans volunteering to assist, it was a challenge to coordinate the increased numbers of volunteers in the field.

It was difficult to mainstream concerns of people living with disability such as the deaf, physically and mentally challenged and the concerns of people living with HIV/AIDS.

Challenge of dealing with chronic diseases that needed special attention for example cases of diabetes, high blood pressure, cancer and asthma.

4.2 Challenges faced by victims of PEV

Post election violence just like in any war in the past decades has heightened awareness of non-combatants in civil strife.

Women have been particular targets since 524 (80%) suffered rape/defilement and yet they are never included in any UN sponsored mediations.

Concern for women's issues is often missing from peace settlements thus hampering reconstruction and reconciliation processes.

Women experiences in PEV have been little understood. Their exclusion from peace processes does not only delineate who sits at the negotiating table but also reflects the lack of access to resources (including information and knowledge), political participation, legal rights and status (land and property ownership, legal documents, due process and representation), and economic rights and status (employment and income).

Women who get babies out of rape have had difficulties explaining to their families how they got such children. It has been difficult especially for women who sired children with relatives or close family friends or those from the opposing side to come to terms with the reality or disclose the perpetrators.

Those raped, defiled or sodomised and ended up being infected with HIV/AIDS virus are facing a lot of stigmatization within the family and community. Some have refused to take ARVs. Some have since died leaving their young ones without a parent.

Many children are orphans as a result of PEV. The burden has increased to the caretakers. Some have developed negative attitude towards elections. Some children still suffer from trauma especially the children who witnessed their parents being killed.

General challenge faced by many is lack of psychosocial support, economic empowerment, shelter and resettlement where one finds himself or herself in a new place.

4.3 Challenges faced by the researcher

Collection of sex disaggregated data by all players (recruited counsellors, doctors, police etc) was not easy.

It was difficult to cover both Kariobangi and Kibera effectively since they are located in different parts of the city.

Some of the PEV either moved to other parts of the city or migrated to rural homes making follow up difficult.

4.4 Conclusion

One of the essential questions regarding gender and conflict is how men and women are differently affected by conflict because of their roles, needs, priorities, status and access to power or legal structures which are determined by society.

Gender inequalities are heightened during conflict and can persist once hostilities end. Redefinition of roles by both genders as bitterness from violence may lead to an increase in gender and domestic violence.

Election Gender Based Violence (EGBV) must be understood as part of a continuum of high levels of gender-based violence and discrimination in Kenya.

4.5 Recommendation

The focus should be on strengthening systems and institutions working to, respond to, and prevent, gender-based violence at all times, including during future elections.

It should be noted that violence affect men and women differently economically and therefore reconstruction plans should consider this especially where many women are left as widows, unwanted children and homeless.

Women as well as other marginalized groups in society should be included in peace processes to help in unearthing underlying causes of violence and the structural impediments to peace.

The government should make sure that gender considerations are built into reconstruction and stabilization plans once peace accords are signed in order to address gender issues that have the potential to create an enabling environment for conflict.

A gendered approach to the distribution of any support need to take into account that women and men have different needs related to infrastructure thus policies should be gender neutral.

References

- [1]. Branch, D & Cheesman, N (2008), Democratization, Sequencing, and State Failure in East Africa: Lessons from Kenya, *African Affairs*, 108(430):1-26
- [2]. Browning, M.D. et al, (2008) "Listen to experience, Looking Towards Flourishing: Ethnography as a global Feminist Theo/ethical Praxis" *Practical Matters, A Transdisciplinary Multimedia Journal of Religious Practices and Practical Theology*, Issue 3 Spring, 2010
- [3]. Centre for Development and Enterprise (CDE) (2008). *Dormant Capital: Pentecostalism in South Africa and its Potential Social Economic Role*, Johannesburg.
- [4]. Cheesman, N. (2008) "The Kenyan Elections of 2007: An introduction," *Journal of East African Studies*, 2(2):166-84.
- [5]. Kenya National Commission on Human Rights (2008) *On the Brink of the Precipice: A Human Rights Account of Kenya's post-2007 Election Violence*
- [6]. Murunga, G.R (2009). *The Kenyan General Elections: Troubling Political Propaganda in an Intellectual Garb*, CODESRIA Bulletin, No 1& 2, p.16
- [7]. Ndegwa, A. (2011) 'Why elction violence was not the only cause of the 2008 violence,' *The Standard*, Thursday April 7, 2011
- [8]. Nowrojee, B. (2008). *Sexual Violence, Gender Roles, and Displacements In Hollenbach, D, (2008) Refugee Rights: Ethics, Advocacy and Africa*, Georgetown University Press, Washington DC, p125-136
- [9]. Wanyeki, M. (2010). 'Lessons from Kenya: Women and the Post-election Violence. *Standpoint, Feminist Africa*, 91