

Post Survival of SGBV Victims: Three Case Studies in the Batticaloa District, Sri Lanka

Jeevaretnam Kennedy

Professor in English, Department of Languages, Eastern University, Sri Lanka.

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ABSTRACT

SGVB is a prolonged crime that has not ended since the beginning of this beautiful globe, though attempts were taken to eradicate it. The socioeconomic background of the victims does not allow them to live peacefully, specifically in the South Asian context, in comparison with the Western context. These three case studies are taken from the Batticaloa District of Sri Lanka from different demographic, age groups, financial and educational backgrounds who were treated by governmental and non-governmental organizations. It is very hard to see that their survival became a question after they were sent back to their society. The system of the society must be changed. Policies and laws do not change the “trends” of the society unless they change by themselves. This study was done by individual interviews of the victims, parents, and related officials. The study is purely a qualitative one.

Keywords: Sexual and Gender – Based Violence, society, socio-economic-politico background, treatments, and victims

INTRODUCTION

It is evident that many women and children are being affected by Sexual and Gender-Based violence. In many cases, most of the victims are being identified by various means such as direct complaints to the police and other government resources by the victim herself, or sometimes the victims are being identified through various sources by people, officers, NGOs, and INGOs. However, there is always a doubt that how the victims are being treated after their immediate legal and medical treatment, which is a big question. Since the survivors do not feel discomfort either at their own home or public places or among their friends and relatives or in their working places. Sri Lankan social system is far different from the so called Western world, and such survivors of SGBV are treated differently in the Sri Lankan society, especially in the conservative places such as Batticaloa District which is in the Eastern part of Sri Lanka. These case studies were taken from the Batticaloa District which is in the Eastern part of Sri Lanka, known for its rich and long cultural values.

The Daily Mirror, Sri Lanka on 12th February 2024 reports the followings:

“The National Child Protection Authority (NCPA) has received 7523 complaints in the first eight months of 2023, more than 4,000 complaints related to crimes against children related to children in need of care, compulsory education, and cruelty.” 1657 children are in need of care and protection, 1481 children are being affected by cruelty, 1206 children need compulsory education, 309 children are affected sexual harassment, and 273 children are being affected by grave sexual abuse(<https://www.dailymirror.lk/caption->

story/More-children-are-being-abused-or-neglected/110-270168).

This report indicates not only the children need help it could be extended women in common need such support, if not compulsory education This also makes us have a question whether all those abused children are safe after they are being treated by the respective authority.

Sexual and Gender Based Violence is very much prevalent in the globe and Sri Lanka is no exception for this. Kalpani Gunathilaka (2023) reports, quoting WHO (2021), “approximately one out of three women (30%) worldwide encountered instances of physical and sexual violence from either a partner or non-partner in their lifetime. The government and non-government organizations take this matter very seriously and take some steps to minimize rather eradicate it as this type of violence cannot be eradicated at the present context of the country. Further, it must be noted that the treatments of such organizations and how the victims are being served during and after treatments. This is an important one since the ethno-socio-economic-cultural context of Sri Lanka is far different from the Western thought/context/culture.

Then what about the scenario in Sri Lanka? Is it different from the so-called Western World or similar to that? Is Sri Lanka going towards the Western thought and philosophy of violence against women or does it select a way on its own? Further, are the ‘Western violence against women’ different from ‘Sri Lankan violence against women?’ These are some of the basic questions arise when we look at the history of preventions taken by the Sri Lankan organizations as whole.

Demographic and Health Survey of 2016 which was adopted by the Department of Census of Sri Lanka reports: “Prevalence of domestic violence by an intimate partner increases with the age of the women. Urban residents also reported the highest percentage of domestic violence (20 percent). Kilinochchi and Batticaloa districts have the highest level of domestic violence (50 percent). Ever-married women who belong to the lowest wealth quintile and those with primary education reported the highest percentages in domestic violence (28 and, 30 percent respectively).” This shows how women are affected by their intimate partners in Sri Lanka.

The government of Sri Lanka has appointed different officials throughout the country to check, deal, and monitor SGBV cases, such as Child Rights Probation Officers, Probation Officers, Women Development Officers, Counsellors, and Social Service Officers. However, none of them make serious efforts in monitoring the status of the survivors after they get treatment in the system. Post survival does not confine the financial stability (of course many of the NGOs and INGOs support) but also their mental stability while they continue to survive in the same society.

In addition, domestic violence is defined in Sri Lanka Prevention of Domestic Violence Act No. 34 of 2005 as “an act which constitutes an offence specified in Schedule I; any emotional abuse, committed or caused by a relevant person within the environment of the home or outside and arising out of the personal relationship between the aggrieved person and the relevant person”.

LITERATURE REVIEW

The UN and other such organizations (not the government organizations) follow some Western patterns and conventions taken abroad, which may not be suitable for Sri Lanka. For instance, the UN Convention on Gender Based Violence “Declaration on the Elimination of Violence against Women” by the General Assembly Resolution 48/104, adopted 20th December 1993 was mainly drafted to the Western world, whereas Sri Lanka (to aptly say the South Asian World) was not even unaware of this threat. In 2006, the UN addressed “all forms and manifestations of violence against women gained new momentum with the launching of the Secretary General’s study on all forms of violence against women and the adaptation by the General Assembly on 19 /December 2006 ...” as of A/RES/61/143. This is an important resolution that the

UN took on this Gender-Based Violence, in particular violence against women. Mohd (2016) is of another opinion that though violence is a common phenomenon irrespective of male and female, both the gender involves in violence in general. However, when we see the GBV, it is looked at the female point of view, ignoring the violence against men by the women.

Solomons (2021) indicates: “Violence against women has effects spanning many areas of a woman’s life. While the consequences can be physical, psychological, and social, health consequences in the areas of physical, sexual, reproductive, and psychological health can be intense.”

Balachendran (2022) quotes Shyamika Jayasundara-Smiths “It was in 2018 that Sri Lanka conducted its first official survey on women’s well-being. It found that one in four Sri Lankan women (24.9 %) had experienced physical and sexual violence by a partner or a non-partner, and that two in every five women (40 per cent) had suffered physical, sexual, emotional and economic violence including controlling behaviour by a partner.”

The above statistics and the brief literary survey indicate that sexual and gender-based violence in Sri Lanka is prevalent and the government and society need to move forward to eradicate it.

Further, Sri Lanka Medical Association, the Second Edition of the “Review of Research Evidence on Gender Based Violence (GBV) in Sri Lanka (2011)” quotes Samarasinghe (1991) that most of the victims convinced that they feel inferior in the society that they live. Also, the article quotes Konradsen *et all* (2006) “Issues related to ‘love affairs’, arranged marriages and physical, sexual or psychological abuse in the domestic environment were referred to by many self-harmers or their relatives as provoking ingestion of poison. Domestic violence and abuse were seen as major self-harm among 12% of the affected. (pg. 9 – 10)” This shows how the victims are feeling even after their so-called treatments, both physical and psychological, in the eyes of the society that they live. The scenario in the Western world is absolutely different from the Sri Lankan based victims since the socio-economic scenario is entirely different from the Western world.

The recommendation of the A Study on Identifying Gaps in Access and Service Delivery for GBV in Batticaloa District (2018) conducted by Eastern Social Development Foundation states “A government institution should be responsible for the setting up of a permanent safe house service for female GBV survivors in the Batticaloa district which would include psychosocial support, counselling, gender equality training, leadership, etc.(78)”

National Child Protection Authority (NCPA) of Sri Lanka reports (Daily Mirror, 12 Feb. 2024) that 7523 complaints have been received in the first eight months in 2023 against children, and out of which 309 were sexual harassments and 273 were “grave sexual abuses” and child rape was accounted 39 out of 632 reported cases. This shows the need for protection for girl children in the Sri Lankan society.

MAERIALS AND METHODS

In-depth interviews with the victims. Only three victims have been selected as this is a sample case study. The interview extracts are being used to check the nature of the victims after their survival and treatments – both physical in the hospitals and psychological by the government and non-governmental organizations.

The following three cases are taken:

Case – 1: three 13-year-old Grade 8 victims from the rural setup in the Batticaloa District,

Case – 2: a 15-year-old Grade 10 schoolgirl in an urban area in the Batticaloa District, and

Case – 3: a 24-year-old working women in the urban area who lives in a foreign country after the treatment.

Case – 1:

Name: Ms. A, Ms. B, and Ms. C

Age: all 13-year-old Grade 8 School girls

Gender: Female

Place: From a rural village in the Batticaloa District

Education: Grade 8

The Case:

All are studying in Grade 8 in a rural village school in the same class in the Batticaloa district. They all are from the same village, and they were very friendly from their childhood. Ms. A studies well and one her teachers is very friendly with her. Ms. A studied well than the other two girls.

A construction was done at the school for about three months. Ms. B and Ms. C became friendly with two labourers who came to work at the building site. Later these girls fell in love with those two boys. After the construction work was over, those two boys went to their village which is about 40 KM away from the school. After some days, those two boys called the two girls Ms. B and Ms. C to come to their place. Then these two girls called Ms. A to go to the place and said to her that they would return that day. So Ms. A also joined her. They all came with the school uniforms and went to one of their relative's homes to change their uniforms. One of their relatives asked them where they were going, and Ms. B and Ms. C said that they were going to see their schoolteacher who was good with Ms. A, and the relative believed them.

They took a bus to the boys' village. Once they reached there, they found out that there was another boy was with the two boys. They all six went to a nearby beach and had their bath. Whilst Ms. A was a bit fear and told her friends that she wanted to go home since it became late afternoon. Her two other friends sent her with the third boy. He took her to one home in order to change her dress and wore her uniform. He told her that the house was her grandmothers' home, but there were no one at the house. He dragged the time and finally said that it was late to get bus to go to her village. By that time other girls and boys came to the house and the boys said that there were no buses at that time, and they could stay at that house and the following morning they could get bus.

Then the three girls decided to stay at that house. Ms. B and Ms. C were staying in two rooms with their respective boyfriends whereas Ms. A was in the hall with the third boy. The boy. The boy said that he loved her, but she denied it. Whilst the other boys and girls were inside their respective rooms.

By the same time the parents of the girls found that the girls were missing and with the help of a CCTV footage they found out that the girls got into a bus that went to the boys' village. Then they informed it to the police and searching for them.

The following morning the girls came to the bus stand and one of the girl's fathers found them and took them to the police station with the three boys. The police arrested the boys. The girls were taken to the nearest hospital for checking and treatment, found out that the two girls who were with their boyfriends in

the room did not have any sexual intercourse, but hugged and kissed. Then the girls were allowed to go to their homes with the parents.

Post-scenario

The village Rural Development Society (RDA) informed the parents of the girls not to send them to the schools as other girls also would follow them. Also, the school principal told that he would not admit the girls again to the school. However, with the aid of the government and non-government organizations and told the RDA and the principal that denying education is a crime. With that warning, they all agreed to follow their studies at the same school.

However, none of the girls in the school spoke with those three girls and when any parent saw their child spoke with any of the three girls, they scolded that affected girl, not their child. Even the treatments of the teachers were different.

Then Ms. A dropped out from the school. Ms. B tried to commit suicide but saved and continued her studies at the school. Both Ms. B and Ms. C would drop out from the school soon.

Cases – 2:

Name: Ms. X

Age: 15-year-old Grade 10 School girl

Gender: Female

Place: In the suburb of Batticaloa town

Education: Grade 10

The Case:

Ms. X is a fifteen-year-old school going girl in a leading school in the Batticaloa town. Her parents are well educated. Her father was working in a foreign country and her mother is a housewife. Ms. X travelled to school by bus. Ms. X had wheezing difficulties. Her school teachers and classmates knew about her difficulties.

One day when she got into a private bus after school to go home. While in the bus, she got breathing difficulties and slept inside the bus. Suddenly she woke up saw that her bus stop had passed and told the conductor to stop the bus. But he said that they were about to reach the terminus and immediately they would return to Batticaloa town. She sat in the bus, and it reached the terminus and after all the passengers got out of the bus, the conductor closed the door. The driver took the bus to a lonely place and stopped it. Then the driver and the conductor raped Ms. X inside the bus in the bus and left her near the terminus and left.

She went to home and talked about this to her mother and the mother said her not to tell anyone. Ms. X wanted to complain about this to the police, but her father too advised her not to go to the police station since they had another girl child of age 6. The sister also studied at the same school.

Ms. X had been taken to the hospital for treatment and she was treated in the maternity ward in the Batticaloa Teaching Hospital with other patients.

Once she recovered, she went to the school again. The treatment of most of the teachers were different, but not her classmates. Female teacher told other girls not to move freely with Ms. X. One day Ms. X's sister (who was only 6 years old, in Grade 1) was beaten by her teacher with an electric wire which was reported by her to her mother. When the mother complained about this to the principal, the teacher said that her behaviour is bad as her elder sister.

Post-scenario

Ms. X said once to one of the counsellors that she wanted to kill the driver and the conductor who still work in the same capacity. Later in one occasion she said that she wanted to become a lawyer to punish the driver and the conductor. This shows that she is still unable to recover from her shock. But the treatments of the school (both to Ms. X and her sister) is not friendly but cruelly. Also, the same driver and the conductor work in the same bus.

Cases – 3:

Name: Ms. Z

Age: 24-year-old

Gender: Female

Place: From a urban area in the Batticaloa District

Education: GCE (A/L)

Job: Beautician

The Case:

Ms. Z was running a beauty parlour in the Batticaloa town. She was doing this business for the past three years. One day a man about 27 to 30 years came and told her that his sister was going to get married, and he wanted to book Ms. Z for makeup. Also, he gave some advance money for the work. After two day he came and took Ms. Z in a two-wheeler and took her to a lonely place and raped her. Ms. Z told this to her mother and she was taken to a government hospital (not informing the police) where she was treated in the maternity ward. This news was spread by one of the patients who too was admitted in the same hospital. After about one-month Ms. Z returned to her work. She then got constant phone calls from various males, calling her for prostitution. Knowing this issue, her mother had sent Ms Z abroad.

Post-scenario

Since Ms. Z is financially sound and lived in the urban area and able to leave the country and does not have any aftereffects (by the society), now married (a diaspora from India) and settled in a European country. Though she does not want to show her identity directly, as it would affect her personal life, she was able to share her experience very clearly. Also, she indicates that her present life is always in threaten and she fears that there are no guarantee of her past experiences would be known to her husband or children in future.

RESULTS AND DISCUSSION

The above three cases clearly indicate that the females who had been affected by sexual and gender-based violences do get better treatments both by the government and private organizations immediately after the

time of incident.

Case – 1 clearly indicates the attitude of the society where the rural setup does not want to change their age-old customs and tradition. Even the same village has many modern facilities, the people do not want to go along with the so-called urban set-ups or to the modern global trends. They still want to segregate women a separate entity that must follow the old customs.

Case – 2 indicates the psychology of the parents and the teachers. Though the school teachers supposed to sooth the wounds, they in-turn try to punish the victim and their relatives, which has to be stopped immediately by the authority with severe punishments. The reason for such punishments might at least teach a lesson too other teachers as well. Further, frequent counselling training programmes must be conducted by the government authorities, especially to the primary and secondary teachers.

Case – 3 gives a clear picture that financially privileged victims could relieve themselves irrespective of the social setups and customs. The support of the parents plays a vital role in shaping the future of the victims rather the society gives support. However, the background of the victims that she grew still gives a kind of fearfulness throughout her life, when she gets into a family life with the same South Asian culture. Had she married to a Western person, she may not have such “life-long fear” in her life.

However, those who are financially underprivileged suffer during and after the treatments given by the government medical care centres such as government hospitals.

The attitude of the society, most particularly the parents, must consider the victims are case sensitive which will have long-term effects on the life of the victims, such as Ms. X in this case.

Solomons “In addition to those economic factors appear to have a strong influence in precipitating and perpetuating GBV and related issues. Therefore, economic interventions to counter GBV are of utmost importance.”

CONCLUSION

The above three cases clearly show that there is no safety to the sexually abused victims even after their proper treatment by the government and other entities. Further it is noted that financial background is one of the major factors that decides the future of such victims, when we closely look at Case – 3. Adding to that, it is notable that the ideology of the society does not change concerning such cases, whereas some other societies, such as the Western societies, accept such victims and let them live like others. But, the Sri Lankan society, especially the rural setups, do not allow the victims to live peacefully, though the victims carry their painful scar lifelong.

RECOMMENDATION

1. The government must take care of the victims at the time of treating them at the government hospitals, that is, treat them in a separate place without the knowledge of other patients and visitors.
2. The government must have a strong setup about monitoring the SGBV survivors at least for three to five years after the victim received proper treatment.
3. The non-governmental organizations must make the cases private and confidential.
4. The government and the non-governmental organizations must educate the society to safeguard the victims rather accuse or punish them further.
5. We all must grow a soft and protective attitude towards the victims that they too are part of us and treat them equal or rather more than equal.

6. Parents must make their children's welfare, not merely giving them education, but to ensure their future, seeing psychologically.

REFERENCES

Authors

1. Balachendran, P. K (2022). "Roots of Gender-baes Violence and Discrimination in Lanka." <https://ceylontoday.lk/2022/11/21/roots-of-gender-based-violence-and-discrimination-in-lanka/>
2. Mohd, S. (2016). Gender Based Violence: A Paradoxical Analysis. Journal Of Humanities and Social Science.
3. Solomons, T, H (2021). "Current Issues Pertaining Gender-Based Violence in Sri Lanka." https://www.researchgate.net/publication/354075373_CURRENT_ISSUES_PERTAINING_GENDER-BASED_VIOLENCE_IN_SRI_LANKA

Web References

4. A Study on Identifying Gaps in Access and Service Delivery for GBV in Batticaloa District (2018). Eastern Social Development Foundation. <chrome-extension://efaidnbmnnnibpcajpcglclefindmkaj/http://gbvforum.lk/r-library/document/GBV%20Research%20Study%20-%20ENGLISH%20Publication%20-%20Final%20PDF.pdf>
5. <http://www.statistics.gov.lk/Resource/en/Health/DemographicAndHealthSurveyReport-2016-Chapter13.pdf>
6. <https://www.dailymirror.lk/caption-story/More-children-are-being-abused-or-neglected/110-270168>
7. <https://www.dailymirror.lk/caption-story/More-children-are-being-abused-or-neglected/110-270168>
8. https://www.defence.lk/Article/view_article/27532
9. <https://www.ohchr.org/en/instruments-mechanisms/instruments/declaration-elimination-violence-against-women>
10. https://www.researchgate.net/publication/256198565_Review_of_Research_Evidence_on_Gender_Base_d_Vio
11. <https://www.un.org/womenwatch/daw/vaw/v-overview.htm>