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Demobilization and Reintegration Programs: Addressing Gender Issues

Why a gender issue?

Women have always participated to some extent in combat, but several recent wars have seen them fighting on the front lines. And while the roles of female ex-combatants vary widely, the women seem to share one unfortunate characteristic: limited access to benefits when peace and demobilization come. This is also true for girls abducted for sexual services and the families of ex-combatants in the receiving community.

These groups are often neglected during demobilization and reintegration; or at best, women, men, boys, and girls may receive equal benefits but are treated as a homogenous group, which prevents their specific needs from being addressed.

Some think that the first objective of a DRP (Demobilization and Reintegration Program) is to have a positive impact on the peace dividend. Another goal often mentioned is the reduction of military expenditures for budgetary reasons. However, others argue that the DRP objectives should be to assist vulnerable ex-combatants.

How does a gender dimension fit with these objectives? Gender has no direct impact on military expenditures, but addressing gender issues could help post-conflict recovery. Gender is also linked to vulnerability. Evidence suggests that female ex-combatants are generally more vulnerable than male ex-combatants as, in some contexts, families. This study therefore focuses on selected gender issues. Pilot projects were carried out in several countries including Eritrea and Guinea-Bissau to test and finalize the framework proposed here addressing gender issues in demobilization and reintegration programs. This work does not take a geographical perspective (region specificity); instead, it favors a culturally consistent approach.

How to introduce a gender dimension in DRPs

The study that was undertaken intends to ensure that female specific needs are identified and addressed in future DRPs. The study also identifies DRP strategies that minimize gender discrimination.

Targeting

A first step in a DRP is to proceed to the targeting, and in our case identify groups of female ex-combatants, abducted girls and ex-combatants' families.

A first issue is that actors may try to limit the number of women given ex-combatant status, arguing that their role during the struggle does not entitle them to that rank. Female ex-combatants often have to rely on men to confirm their grade or status. One solution is to choose selection criteria that do not discriminate against them. Clear selection criteria must be defined, allowing no room for personal interpretation. An advisory committee could be created to monitor gender discrimination.

So far, the majority of DRPs have treated families as secondary beneficiaries. This means that it is up to the soldier to share benefits with the household, even though the soldier might misuse these benefits. Giving some benefits

directly to families might solve this problem. This option however might be more expensive and difficult to implement because family members must be identified and registered. Another suggestion is to conduct an intra-household analysis to evaluate how benefits might be shared and also carry out an assessment of the male ex-combatant' acceptance in the case of benefits given directly to families. A strong sensitization campaign targeting ex-combatants and communities could trigger community pressure on the recipient of benefits to use them fairly and wisely. Government implementing DRPs should also be prepared to deal with issues such as polygamy, war widows and orphans.

It would be useful to define each group' socioeconomic profile in order to identify needs and opportunities. Gender-disaggregated information should be collected.

Demobilization

When demobilization starts, combatants are usually regrouped for a period of encampment. Having them assembled facilitates the gathering of information, the distribution of benefits, and the initiation of reinsertion and reintegration programs. All male and female soldiers being demobilized should be present during encampment and facilities should be able to meet specific female needs—for example, separate shelter and sanitation facilities. The transport home of ex-combatants from discharge centers should be coordinated with the transport of families.

Pre-discharge information given to female ex-combatants should correspond to their needs and cover the following topics: civic rights, access to credit, access to education and employment, how to start an income-generating project, HIV/AIDS prevention, preparation for difficult social acceptance in the community of settlement, and domestic violence.

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Abducted women should have the option of being registered separately from their partner. In situation where families are primary beneficiary, they should also receive ID cards.

Girl soldiers should be sent to recovery camps. In order to avoid further trauma, they should not be mixed with adults. Family tracing could be initiated simultaneously.

Reinsertion

The primary tool for the reinsertion of the ex-combatant is the set-up of a transitional safety net. This safety net is meant to help him/her after demobilization, covering basic needs for both the ex-combatant and his/her family. If the calculation of the TSN (Transitional Safety Net) depends on several criteria, it must be certain that these criteria are not resulting in gender discrimination. If women are among the beneficiaries, vulnerability criteria could be introduced, as the evidence shows that they are more vulnerable than male ex-combatants.

In many societies, housing is the principal geographical base for women's work — therefore, a housing allowance is critical for female ex-combatants.

Temporary medical care for ex-combatants may be an important element of reinsertion. Specific medical needs of female ex-combatants should be covered: reproductive health facilities, services for pregnancies, treatment of injuries resulting from sexual abuses, programs conceived to deal with sexual abuse traumas, treatment of sexually transmitted diseases, and drug addiction.

Reintegration

Reintegration programs usually conclude operations of demobilization. The primary objective is to facilitate the economic and social reintegration of the ex-combatant. Lacking skills, credit, and childcare facilities, women have few opportunities to generate an income. DRPs could combine educational programs with access to credit projects, and adapt them to the needs of female ex-combatants. In addition, because of low levels of education - or male hiring prejudices - female ex-combatants usually have poor access to employment. Sensitization campaigns, as well as incentives, could be directed at the private sector to encourage employers to hire women. In conjunction, women should be given access to labor-intensive programs. If ex-combatants are to receive land, DRPs should ensure that female and male ex-combatants are treated equally. Training and transfer of skills should be adapted to market needs and female opportunities. Childcare facilities and outreach programs would boost their participation.

Because their schooling was interrupted, the educational level of many abducted girls is low. This group needs a combination of remedial education, skills training, and apprenticeship.

Communities of settlement may reject female ex-combatants. Ex-combatants often leave the partner they met during the war and marry a local woman as a step toward community acceptance. Sadly, abducted girls can also be rejected because they are seen as impure

and therefore ineligible for marriage. DRPs could include sensitization programs for families and communities to reduce the risk that they add further trauma to the returning girl. Traditional purification rites have good results in giving girls a new start.

Female ex-combatants and ex-combatants' wives associations can help reintegration and, therefore, should be encouraged. Incentives for community projects where residents and ex-combatants work together should also be supported since they can play a major role in social reintegration and reconciliation.

The most vulnerable groups — female disabled ex-combatants and heads of households — need special attention. DRP planners should pay special attention to ensure that disabled female ex-combatants are not discriminated against when receiving pensions or participating in assistance programs for disabled people. Outreach and sensitization programs, as well as special participation quotas are recommended. Receiving a disability pension depends on a physician's examination and recommendation. Female disabled ex-combatants have reported being discriminated against in many cases. A recommended measure could be to ensure that female ex-combatants can go to female physicians for examination. Another concern is the unusually high percentage of heads of households among female ex-combatants partly because of social reintegration issues. Vulnerable cases could be prioritized to access reintegration programs.

Counseling and communicating are vital to help female ex-combatants achieve economic and

social reintegration. Women's participation in war redefines their traditional identities, generally expressing itself by their emancipation and rejection of patriarchal systems. Also, compared to men and boys, women and girls usually suffer from sexual abuse traumas. And this kind of trauma is linked to later prostitution and drug and alcohol abuse. Female staff alone should conduct the counseling programs, and bureaucratic procedures should be strictly limited in order to encourage victims to ask for help.

Impact of demobilization on women in the host communities

In several contexts, the social acceptance of women in typical male professions seems to be temporary and only because of war needs. During post-conflict periods, high male unemployment — resulting from increased competition because of the repatriation of refugees and demobilization, economic crisis, and restructuring — caused women to lose their jobs especially in the formal sector. DRP planners should carefully consider the potential negative consequences of DRPs on women's employment, and should favor an integrated approach.

Post-conflict countries often see a deterioration of law and order. Poverty coupled with the erosion of the authority of traditional institutions, lead to crime and delinquency and the increase of domestic and street violence affecting women and children. Strategies including sensitization campaigns, education programs and group therapy are recommended.

In some countries, sexually transmitted diseases rates are two to five times higher in the military than in the civilian population. Soldiers should be educated about the risks of HIV infection during pre-discharge orientation and information. Campaigns targeting women in host communities should be orchestrated.

Other issues to be addressed include the reconciliation process — quite relevant for the social reintegration of ex-combatants and families. Women peace organizations can play a significant role as mediators between clans or villages of enemy factions.

Finally, during the planning and the implementation of DRPs, one question keeps returning: To what extent should they include individuals among beneficiaries who are not directly related to demobilization? DRPs have a

primary mandate — the demobilization and reintegration of ex-combatants. They cannot be used to address every post-conflict issue. However, ex-combatants do have an impact on women in host communities and vice versa. Therefore, there should be the responsibility of DRPs to offer affected groups access to some services — or at least to ensure that other programs do.

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