

1

MAURITANIA: MIDWIVES CALL ATTENTION TO THE PROBLEM OF RAPE, AND IMAMS ENCOURAGE JUSTICE FOR ITS VICTIMS

Prior to 2003, survivors of rape in Mauritania were thrown in jail while the perpetrators went free. Correcting that gross injustice—and getting society to recognize the problem of rape at all—began with the grass-roots efforts of four Mauritanian midwives, who could no longer ignore the stories they were hearing from their clients. With UNFPA support, the first statistics on sexual violence in Mauritania were collected, and a centre was established to respond to the multiple needs of survivors. Breaking the taboos surrounding the discussion of rape was the first step in addressing the problem. Local imams lent their support to the effort, convincing government officials, judges, the police and members of the community that protecting women and easing the suffering of those most vulnerable was a religious obligation.

THE CONTEXT

Mauritania, in West Africa, occupies an area of about one million square kilometres, three quarters of which is desert. In 2005, the country ranked 152 out of 177 countries on the Human Development Index.¹ It has been moving towards democracy since 1991, the year a pluralistic political system was first introduced.

Mauritania has a population of 2.8 million inhabitants,² 46 per cent of whom live below the poverty line, according to the results of a Continuous Survey on Living Conditions and Households for 2000. The population, which is growing at 2.9 per cent a year, is multi-cultural, with a dual Saharan and Sahelian heritage. The Moor, Soninke, Peul and Wolof peoples co-exist and have achieved a certain social cohesion within the Islamic religion, which is practised by virtually the entire population. Nearly half the country's people are under the age of 15.³

The rates of maternal, infant and child mortality in Mauritania are very high. No fewer than 747 women die in childbirth for every 100,000 live births, and out of 1,000 children born alive, 74 die before their first birthday.

On average, Mauritanian women marry for the first time at the age of 17 and men at the age of 26.5, though in urban areas especially there is a trend towards later

marriage. The role of the family in the choice of spouse is important, and 43 per cent of marriages are arranged. Kinship marriages are widespread, and less than a third of women marry a man who is unrelated to them.

The standard of education among Mauritanians is very low, and 54 per cent of women and 39 per cent of men have never attended school.⁴ The substantial gap between the schooling of women and men implies that there is still gender discrimination with regard to access to education.

MAURITANIA AND CEDAW

Mauritania has participated in a number of international conventions and conferences and is a signatory to the Programme of Action of the 1994 International Conference on Population and Development (ICPD), the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW). To support the implementation of these international commitments, the Government established a State Secretariat for Women's Affairs in 1992 as well as a Multisectoral Gender Monitoring Group in 2000, which addresses relevant issues in policy, practice and law for improving the lives of women and children.

To carry out the recommendations of CEDAW, which came into force in Mauritania in 2001, the Mauritanian

¹ *Human Development Report 2005*. Published for the United Nations Development Programme.

² Population projections for 2001-2015, National Statistics Office.

³ Population and Health Survey for Mauritania, 2000-2001.

⁴ General Population and Habitat Census, National Statistics Office, 2000.

Government passed the Personal Status Code, which deals with all matters related to marriage, divorce, family and inheritance issues. To date, however, the law has not been enforced due to the failure to pass a decree detailing how it should be implemented.

Mauritania has adopted policy guidelines to mainstream the promotion of social, economic and cultural rights of Mauritanian women. It adopted laws and regulations in favour of women, the family and children that include: the National Strategy for Advancement of Women in 1995, the Population Policy in 1995, the Family Policy in 1998, the National Council for Children in 1999 and the Personal Status Code in 2001.

THE UNFPA COUNTRY PROGRAMME

The Fifth UNFPA Country Programme for Mauritania (2003-2008) has a budget of \$6 million. However, in the first three years alone, the Country Office mobilized approximately \$6.3 million in multilateral and bilateral funds.

With technical support from UNFPA, the Mauritanian Government has prepared a new strategy for the promotion of women for 2005-2008. The strategy takes stock of government actions for the advancement of women to date and defines priorities for the years to come in areas including basic social services and women's rights and participation.

The major achievements of the UNFPA Country Office for 2004 in the areas of gender and gender-based violence include the following:⁵

- *Obstetric fistula.* As part of a global campaign for the elimination of obstetric fistula launched by UNFPA and its partners, a survey in Mauritania (involving three out of 13 regions) was carried out. A national strategy to fight obstetric fistula is being prepared, with support from a recently established technical committee.
- *Gender.* Integrating gender into government policies, including the strategic framework for the fight against poverty, has become a priority, and substantial progress is being achieved.
- *Violence against women.* Through advocacy efforts directed at the country's ministers and parliamentarians, UNFPA facilitated discussion of rape and female genital mutilation/cutting (FGM/C) in public fora. The Mauritania Country Office coordinated the first official campaign in the fight against FGM/C,

and an integrated programme to address it is being developed.

THE PROJECT

'Combating Sexual Violence against Women' is a UNFPA-funded project that encompasses preventive, remedial, judicial and rehabilitative aspects of sexual violence in Mauritania. It started as a grass-roots initiative in 2000, carried out in collaboration with the Ministry of Health. With support from the Arab Gulf Program for United Nations Development Organizations (AGFUND) and UN agencies, a project was eventually developed for the period 2004-2005.

The project was implemented by the Mauritanian Association for Mother and Child Health (AMSME), a local non-governmental organization (NGO), and supported the efforts of the Ministry of Health and Social Affairs in implementing a national policy for women's promotion.

The project had four main objectives:

- Recognition of sexual abuse of women and related advocacy at all levels
- Strengthening of civil society organizations to ensure sustainable services to victims, including medical, psychosocial and legal assistance
- Training of public officials, including the police, magistrates and health workers, particularly midwives
- Sensitization through information, education and communication (IEC) materials and media promotion of the project's activities.

The origins of the project date back to 2001, when AMSME opened a care centre for survivors of sexual violence. Today, the centre employs two midwives on a full-time basis, a social worker responsible for health education, two programme assistants (dealing with adult literacy and skills-building), a secretary, logistics officer, guard and driver. The centre also has a medical doctor who works on a part-time basis and offers free medical consultations. A senior psychiatrist is on standby call and a senior gynaecologist, the only one in the country, visits the centre once a week to offer free consultations. The centre also benefits from the expertise of a specialist in child protection, who is called upon every time a new client comes in. To ensure proper oversight, the centre has a board of governors comprising seven professionals (five females and two males) and a general assembly of 170 people.

⁵ UNFPA Mauritania Country Office Annual Report 2004, Programme Performance Analysis, available at https://itrack.unfpa.org/app_ars/index.cfm?fuseaction=SearchResults

To provide expertise on legal matters, AMSME entered into partnership with another civil society organization, the National Forum for Promotion of Women's Rights.

Through the centre, the project offered the following services:

- First aid care to rape victims, while preserving all traces of evidence
- Counselling and psychosocial support, including psychiatric treatment and care
- Pregnancy prevention, by offering the 'morning-after' pill to rape victims who report to the centre within 72 hours after an incident has occurred
- Testing for HIV and other sexually transmitted infections
- Follow-up visits on a regular basis to monitor the healing and coping processes
- Community sensitization aimed at creating awareness in the host community of the harm caused by rape and other forms of sexual violence and the availability of support services at the centre
- Counselling for the victim's parents and relatives to promote reconciliation between the victim and her family
- Reproductive health education and sensitization on other health issues, including HIV and AIDS
- Literacy classes
- Skills and vocational training, which aims to empower survivors of rape through life skills that enhance their self-reliance and self-esteem
- Advocacy among government officials and staff of other relevant institutions and the lobbying of decision makers
- Training of professionals, particularly magistrates, police and health workers
- Training of staff at the centre in proper care of clients
- Legal support and follow up.

A typical legal intervention involves the following steps: First, lawyers contact the victim as soon as they learn a

rape has occurred to ask whether she intends to bring the case to court. Adults, including older women, generally prefer not to press charges for fear of being socially shunned, imprisoned for fornication or retaliated against by the perpetrator and/or family members. Many adolescents, on the other hand, choose to sue their offenders,

since they tend to experience less stigmatization by the community. Free legal assistance is key since most of the victims come from poor families. The presence of lawyers early on ensures that the victim's rights are protected.

According to Mauritanian law, a statement produced by the police must be sent to the prosecutor explaining the details of the offence and the presence of evidence. The prosecutor has a number of choices: to reject the case for insufficient evidence; to require further evidence and refer the case to the magistrate for further investigation; or, if there is sufficient evidence, to order a court trial.

The third stage, when the offender stands trial and the victim is defended in court, is crucial. As far as possible, the lawyers try to ensure that justice is carried out.

"What matters for us is to be present wherever the file goes so that the victim's interests and rights are upheld. We make sure that we attend all sessions. We have realized that before we intervene, the victim is downcast and feels worthless. Our presence — and the assurance of having lawyers who are determined to defend her case — gives her new hope and status, since not many people can afford legal fees. Parents now encourage their daughters to report such cases because they know that someone will defend them and follow the case to a meaningful end."

— Secretary General for the National Forum for Promotion of Women's Rights

RESULTS

The project has yielded significant results, including a reduction in the incidence of rape, changing attitudes towards rape victims and the collection of data on sexual violence.

- Since 2002, AMSME has assisted 131 survivors of sexual violence. In 2000, no rape incidents were reported to the authorities. That percentage has risen each year, reaching 100 per cent of known cases by 2005. This is attributed to advocacy campaigns targeting judges, the police and other authorities, who now acknowledge the existence of violence against women and are demonstrating greater sensitivity to victims and their families.
- Rape victims used to be regarded as perpetrators who incited the act. Almost all of the women and girls who reported being raped were accused of fornication and ended up in jail. Since 2003, however, no rape victim has been sent to prison. As a result of training, the police are now more sympathetic to victims and communities are more

tolerant. Moreover, school authorities no longer discourage survivors of rape from coming to school. Parents tend to look at their daughters as victims of ruthless rapists and not as seductresses. As a result, they rarely send their daughters away from home after a rape has occurred; instead, they encourage them to enrol in school. Previously, a girl who had been raped would have little hope of ever getting married. This, too, is changing.

- According to the police chief in El Mina district, there has been an 85 per cent drop in the incidence of rape in his district since the project started. This is attributed to sensitization campaigns and related activities. As more and more perpetrators are apprehended, the general public is becoming ever more conscious of the risks involved.
- As a result of intensive advocacy, the project has gained the support of key political leaders. As a demonstration of this support, the secretary for women's affairs presided over the official opening of the AMSME care centre at El Mina in January 2005, which was attended by high-ranking officials from the police department as well as the ministries of justice, the interior and health. The Government also commemorated the International Day for the Elimination of Violence against Women for a second time on 25 November 2005. This support is attributed to UNFPA's continuous lobbying of government institutions.
- The project has served as an eye opener for other civil society organizations, which are becoming more conscious of the existence of sexual violence in the community. A number of local NGOs are requesting technical assistance from AMSME to build the capacity of their staff.
- Survivors of sexual violence have found a new sense of self-worth. Many of them have started small enterprises, thanks to the start-up capital and practical skills they acquired through the project, particularly in sewing and small business management. The project has also sponsored literacy classes that teach basic reading and writing in both Arabic and French, simple arithmetic and life skills.
- Rape is no longer looked upon as taboo and is being discussed in public places. Previously it was considered a private affair, and victims and their families suffered quietly. All of the cases were handled by the police, who encouraged families to settle out of court, and the victim's needs, including emotional support,

“Everybody in this city knows that the problem [sexual violence] existed, but there appeared to be a collective conspiracy to victimize the women who suffered from it.”

— A partner in the project and official at the Secretariat of Women's Affairs

were ignored. The victims would be psychologically shattered and socially shunned while, in some instances, their parents or guardians received financial compensation.

- The project has drawn the attention of government officials to the prevalence of sexual violence as well as the fact that the State had previously done little to assist survivors. One result is that the Ministry of Justice sought funding from the World Bank to fund local NGOs that have programme activities related to violence against women.
- Through the project, the first statistics on the sexual abuse of women and girls have been compiled. The information provided the foundation for ongoing advocacy efforts, including a series of workshops targeting top officials in the ministries of justice, health and social affairs, and the interior, along with the high commissioner for human rights, religious leaders and others. As a result of these workshops, every ministry has a component in their annual work plan to address sexual violence against women and children. The problem is being addressed in its own right, but also in coordination with a strategy to combat HIV/AIDS.
- The Government has made legal provisions and amended laws to safeguard the rights of women and to protect them from sexual and other forms of violence. According to an adviser to the Minister of Justice, the Government will provide legal and judicial support for women who want to sue their offenders but cannot afford legal fees. A new law has also been adopted that allows NGOs to sue a rapist regardless of whether the family or the community wants to press charges.
- The project has improved conditions for female prisoners in Nouakchott by providing recreational activities, including sports, music, dance and reading, along with vocational training. This will enable them to become economically independent once they are released from prison and reintegrate more easily back into the community. The project has also successfully advocated for the deployment of female prison wardens after proving that male wardens were sexually exploiting female inmates. Peer educators provided through the project are also working with female prisoners in the areas of human and child rights, the development of life skills, and HIV/AIDS awareness and treatment.
- The project has been able to build a system for tracking and following up on rape survivors—from the

time the rape takes place to the conclusion of the court case. The project has established contacts at police stations and health facilities that monitor the situation of rape victims and refer them to project staff.

IMPLEMENTATION PROCESSES

The Mauritanian Association for Mother and Child Health was formed by four female midwives who carried out a health education programme covering issues such as reproductive health, early marriage and pregnancy. During the sessions on reproductive health, the issue of rape repeatedly came up. According to Zeinebou Mint Taleb Moussa, the founder and president of AMSME, the issue at first scared her and her colleagues.

“We knew it was taboo to talk about rape and that we could not do much to solve the problem,” she says. “As a young NGO, we were more comfortable dealing with less controversial and sensitive issues. We had been working for the national radio for 16 years and were highly regarded among our peers. How could we all of a sudden start becoming controversial?”

“We did not want to imagine the challenge that was ahead of us,” says Zeinabou. Nevertheless, she and her colleagues began consultations on the rape problem with several ministries. At the time, the Ministry of Women’s Affairs denied that rape was an issue and advised the women to back away from it if they did not want to get into trouble.

“Frankly speaking, when we heard Zeinabou speak about the project, I thought that she had come from another planet,” says the director of women’s promotion (minister of state for women’s affairs). “The Government’s concern is to be popular, so government officials keep away from issues that are controversial and that are likely to undermine their legitimacy.”

The Ministry of Health and Social Affairs, on the other hand, acknowledged the problem and mentioned that pertinent statistics were available at some health facilities. In search of more information, the four midwives divided themselves into two groups. One group researched health facilities while the other went to the police. The group that went to the police were told that there are no such cases in Mauritania—only incidents of prostitutes who hitchhiked and ended up being raped. The group that visited health facilities found a rape sur-

vivor at one of them. The available records mentioned assault but made no mention of rape. Secretly, however, the nurses revealed horrendous stories of sexual violence, including the death of a three-year-old girl who had been defiled.

“When I went in to see the doctor [at one of the health facilities],” says Zeinabou, “he welcomed us. But as soon as I mentioned that I wanted some information on sexual violence, he locked the door and stared at me for a long time. He later said he knew that many cases were handled, but that the clinic could not record them. To him they were legal issues, not health matters, and he did not want to get into trouble with the authorities.”

At this stage, two of the four founders of the project quit, claiming that they would put their daughters and sisters at risk of rape if they continued with the project. “Out of the four midwives who started the project, only two of us are left,” explains Zeinabou.

“The other two feared reprisal from offenders, because at that particular time there were repeated incidents of gang rape, and it created a lot of fear.”

Based on the information gleaned from the health clinics, AMSME organized a workshop on sexual violence in 2001, which was funded by UNFPA and Caritas-Mauritania. The workshop was able to identify the needs of women who had been subjected to sexual abuse and provided a working basis for the preparation of a project document, which was later funded by UNFPA.

“Zeinabou had a strong conviction about what she wanted to do,” says the UNFPA representative in Mauritania. “For us, sexual violence was a priority area, but we did not know the magnitude of the problem. We agreed to support her, but we wanted her to first document the scope of the problem. We then used this data to lobby the Government and other UN agencies to support the project.” He continues: “For us, it was an opportunity to move beyond simple advocacy in our programme—to support practical actions to help protect women whose rights are being violated.... After one year, the Government was interested to see whether we were right, and now they are advocating that the project should benefit from local resources.”

“Thanks to our partner, UNFPA, a serious problem that had been ignored is now being addressed at the national level.... When victims go to the police, they are well received. This will encourage more victims to join the centre and talk about their problems, which will eventually scare off offenders.”

— The Deputy Director of Civil Protection,
Ministry of Interior

In late December 2001, with financial and technical support from UNFPA, AMSME opened a care centre in El Mina. The district, which lies on the outskirts of Nouakchott, is reported to have the highest number of rape cases in the country. The goal was to provide psychosocial and medical assistance to women and girl victims of rape. The centre includes a consultation area, a literacy room, documentation/resource centre, a workshop for skills-building and social rehabilitation and offices for the management and staff of the centre. In just the first year of operation, the centre received 32 cases.

MEDIATION AND NEGOTIATION

“In Mauritania, both tradition and legal institutions work against taking action on sexual violence. It is taboo to talk about sex, let alone sexual violence,” says a midwife who worked with the project. To overcome such resistance, a key strategy was soliciting the support of religious leaders, who are highly regarded in the community and are consulted on important issues. The project founders were mindful of this and cleverly targeted imams who were known to be progressive and flexible. Once those imams were convinced of the project’s merits, they helped rally communities by attending some of the sensitization sessions. They also lent their support to workshops organized for government officials. The imams justified the project by highlighting the fact that it was a humanitarian endeavour, aimed at helping those who are suffering and vulnerable.

PARTNERS

The project was implemented by the Mauritanian Association for Mother and Child Health, which provides psychosocial and health services for survivors of sexual violence. Through a partnership agreement, the National Forum for Promotion of Women’s Rights provides victims with legal services. The project was supervised by the Ministry of Health and Social Affairs through the Nouakchott Regional Directorate of Health and Social Protection.

Other ministries involved in the implementation of the project included the Secretariat of State for Women’s Affairs, Ministry of Justice and the Ministry of Interior, Posts and Telecommunications. The project also received major support from a number of United Nations organizations:

UNFPA

UNFPA coordinated the implementation of the project through planning and coordination meetings and dissemination of information. Other support included:

- Technical assistance: UNFPA provided a resident technical assistant who ensured the coordination and implementation of all project activities, from planning to management and evaluation
- Provision of office equipment and supplies
- Rental of premises that house the care centre and project office in El Mina
- Salaries for project staff in 2004 and 2005
- Facilitation of the design and printing of posters and brochures
- Provision of drugs and medical supplies
- Funding of a training workshop for doctors, legal experts and midwives on proper handling of rape survivors and a separate workshop for magistrates
- Funding for legal and judicial assistance provided by the National Forum for Promotion of Women’s Rights.

United Nations Children’s Fund

UNICEF has incorporated activities from this project in its six-year Special Protection Programme (2003-2008), which is addressing sexual abuse of women and girls. Specifically, UNICEF:

- Funded a sensitization workshop for the police
- Funded activities commemorating International Health Day, which included a football tournament for youth and a cultural and arts gala targeted to young people
- Sponsored a study tour to Jordan
- Donated sewing machines for vocational training and a computer
- Trained project staff in legal issues related to sexual abuse, psychosocial skills and methods to reintegrate rape victims back into the community
- Together with the World Health Organization, funded a workshop for sensitizing doctors.

United Nations Development Programme

UNDP provided funding in the earlier phases of the project and made a contribution in 2004 through its Protection and Promotion of Human Rights programme. Specifically, UNDP:

- Produced an audio cassette tape that included messages about sexual abuse and stigmatization of rape survivors
- Provided funding to hire a project accountant and purchased a reconditioned vehicle for the midwives

- Sponsored workshops for imams and for public officials representing various government ministries and departments.

World Health Organization

- Provided medical equipment and supplies (together with UNFPA)
- Co-funded a workshop for doctors.

LESSONS LEARNED

The project adopted a multifaceted approach in addressing the problem of sexual violence against women in Nouakchott. This included sensitizing decision- and policy makers in Mauritania; enlisting community support; building the capacity of NGO staff; providing skills training to victims; sponsoring peer education; and offering counselling and medical care for victims. This approach has been effective and yielded credible results, from which a number of lessons can be drawn:

The power of a single personality can go a long way towards helping a project succeed, especially in a conservative society. AMSME is successful in large part due to Zeinebou Mint Taleb Moussa, its president and founder. Her modesty, combined with her status as a professional and experienced midwife, helped her gain support not only from the local population but also government officials. According to the deputy director of civil protection in the Ministry of Interior: “[Zeinabou] elicits a lot of respect in the community. She gathered around her imams, other religious leaders, lawyers, magistrates, doctors, police officers, psychiatrists and midwives—people who would otherwise be difficult to bring together. But they all came because of her personality and were later convinced that a problem existed.”

According to Zeinabou herself, the secret to her success was knowing the community and garnering its trust: “When you want to understand certain issues in a given society, you need to be strong, know your target and what you want to achieve, and listen to the community. It is crucial that you make yourself understood, know the culture you are working in and establish personal relations in the community. But most importantly, you need to gain their confidence.”

The influence of religious and other leaders can sway public opinion on culturally sensitive matters. A key factor in the project’s success was the support it received from religious leaders. Initially the project was viewed with suspicion and was resisted by both government officials and the local population. Much of this resistance was overcome by local imams, who provided

a religious rationale for project activities such as counselling and providing medical care to rape survivors. According to the imam of the central mosque in Nouakchott, “We gathered evidence from the Koran and presented it to the police, magistrates and the general population to support what the project was doing. We pointed out that these activities were in line with Islamic teaching. We are continuing with the campaign because we are convinced of the message. It is our message and no longer that of AMSME.” Such support from religious authorities generated a good deal of interest on the part of the community and played a large part in changing attitudes towards the project.

Oftentimes, sensitive community problems can be most effectively addressed by civil society or NGOs.

The NGO that managed the project was able to get its message across by talking to community members individually, rather than addressing them in a large group, the method normally employed by government officials. They visit victims’ homes and engage in discussions with family members, helping to reduce the stigma that victims of sexual violence are often subjected to, even among their own relatives. “We have been able to talk to people about highly sensitive issues,” says a medical doctor working with the project. “We have established close ties with the population and gained their confidence. They now talk openly to us about sensitive personal issues they cannot even share with their families.”

The commitment of NGO staff and its members is crucial. An unshakable commitment to the goals and objectives of a project is important in helping to avoid ‘burnout’ on the part of project staff. In the case of this project, the staff worked far beyond what was expected of them to ease the pain and improve the lives of those who suffered sexual violence. “We are blessed with a committed staff who ... know nothing else except being here and helping women who have experienced sexual violence,” says a medical doctor working with the centre. “Many times they are called in the middle of the night to attend to victims.”

Violence against women involves multiple social, economic, psychological and environmental factors.

Evidence suggests that violence against women in Mauritania is associated with issues related to poverty, including low levels of education and, in many areas, poor housing, unstable marriages or female-headed households. The project has therefore concentrated on poor, heavily populated neighbourhoods of Nouakchott (including El Mina, Sebkha, Arafat and Ryadh), where there is a high incidence of rape. The project addresses the issue of poverty in addition to sexual violence by

equipping victims with vocational skills they need to become economically self-reliant.

Technical assistance is important in building the capacity of a young NGO. UNFPA provided the project with a resident technical assistant who ensured the coordination of all projects activities, including planning, management and evaluation. She was in contact with project staff and managers on a daily basis and helped with report writing and the preparation of IEC materials.

Equipping rape survivors with the skills and capital to start up small businesses makes them productive and self-reliant members of a community, which tends to diminish the stigma they might otherwise face. Sexual violence places women in a socially precarious situation, since most of them lose hope of ever getting married, which is seen as source of pride to the family and financial support to women. In response, AMSME has been able to provide its clients with a range of skills that give women from poor, illiterate families the head start they need to succeed in life. "Equipping them with skills gives them an advantage over their peers in the community. The project is creating a difference in their lives and is giving them new hope," says a child-rights expert working with the centre.

Returning to school is a step forward for rape survivors, but parents and school authorities frequently need to be convinced of its appropriateness. In any society, the opportunities available to young women are determined partly by their education. Attendance in school promotes greater self-esteem and motivation in young women who have fallen victim to rape. Conversely, lack of education or vocational training can sometimes lead to alcohol and drug abuse, depression, despair and further violence.

Study tours to countries carrying out similar programmes can generate new ideas and enthusiasm. Senior project managers, together with government officials and representatives of UN agencies, participated in a study tour to Jordan to visit projects carrying out similar work. This gave them new ideas on ways to combat violence against women and the encouragement to move ahead. As a result, they are putting together a funding proposal for establishing income-generating ventures at the care centre in El Mina, which would reduce the need for outside financial support.

PRACTICES THAT WORK

Ensuring that all interventions are based on a firm understanding of a country's culture, tradition and religion. Right from the start, project staff sought the

support of local imams, so that what they were doing or had planned could be justified in terms of Islamic teachings. This is crucial in a society that is highly religious. UNFPA also asked religious leaders to discourage violence against women, particularly rape and female genital mutilation/cutting, during Friday prayers. The imams agreed to work with project staff in community sensitization sessions and in visiting families of victims, which won the hearts of the local population. Says an imam and key supporter of the project: "We believe that caring for people and protecting those who are weak is our fundamental obligation."

Enlisting the support of high-profile individuals. The project staff sought support from influential members of society, including magistrates, the police, medical professionals, religious leaders, ministers, UN officials and others to lobby the Government to acknowledge sexual violence and to introduce strategies to combat it. Support from these individuals also encouraged communities to embrace the project. "We realized that people with whom we work respect doctors," says Zeinabou. "To win the respect of community members, we gained the support of a popular psychiatrist, who justified the project not only in terms of the effect of sexual violence on a victim's health, but on its implications for the entire community."

Involving families, guardians and the community when attempting to reintegrate rape survivors back into society. The interventions in this area that were most successful were those that involved people closest to the victim. In fact, trying to enhance a victim's self-worth and emotional stability without the support of parents and caretakers is contrary to most developing world traditions. To elicit such support, project staff reach out to survivors in their homes. They follow up, counsel and closely observe how they are coping. They counsel family members as well and encourage them to support the victims to ensure quick recovery, including by returning to school. The project also holds community sensitization meetings to inform the population about rape and its consequences. They explain how they can fight it and how they can extend help to unfortunate members of their community who have fallen victim to sexual violence. This has helped reduce the stigma usually associated with sexual violence.

Preserving the confidentiality of rape survivors seeking help. This is essential if trust is to be established between clients and service providers. In a practical sense, this means that lawyers come to the centre instead of the victims going to them. The centre is also open to other community members seeking treatment for simple ailments. This tends to reduce the stigma

that would otherwise be associated with the centre if it were dealing with rape victims exclusively.

Taking a holistic approach in combating violence against women. Success in combating violence against women requires a multisectoral approach. Medical care, legal representation, psychosocial services, advocacy, community mobilization and skills-building are all essential in promoting the well-being of the survivor. In Mauritania, attention is being focused on how victims can be empowered within a society that regards them as outcasts and how the attitudes of the community can be changed. The project offered counselling and psychosocial support that included psychiatric treatment to help a woman deal with the trauma she has experienced as well as the social stigmatization. It prepared her to face the world with a positive attitude and self-esteem. The acquisition of practical skills enabled her to become more self-reliant. This was supplemented by literacy classes that offered the basics in reading, writing and arithmetic. She was equipped with life skills to help her avoid victimization in the future. Free legal representation was also extended, which was especially important if she chose to sue her offender(s). Ensuring that each component of the project promotes a woman's general well-being is key.

Participating in international events promoting women's rights as a form of advocacy. With UNFPA support, project staff joined other NGOs and government institutions in commemorating various international days, including World Population Day (11 July), World Health Day (7 April), International Day for the Elimination of Violence against Women (25 November) and International Women's Day (8 March). In addition to raising awareness and serving as a form of advocacy, such events offer an opportunity to promote project goals. On International Women's Day, for example, AMSME took part in a series of workshops on violence against women that were

organized and funded by UNFPA. UNFPA also supported an exhibition that was officiated by the First Lady of Mauritania, who was accompanied by a host of ministers. The First Lady, in particular, was interested in the IEC materials that the project had developed and asked if she could distribute them. The materials, which include brochures and posters, convey messages about the consequences of rape. The posters not only sensitized the community about the dangers of rape, but also made project activities better known.

Using evidence-based research to generate support for a project and encourage others to follow suit. A six-month, UNFPA-funded research project identified available data on sexual violence in Mauritania and presented strategies to combat it. The research findings brought new light to a problem that had previously gone unnoticed and provided the justification that was needed to develop the project. Without this basic evidence, it would have been difficult to convince anyone that a problem even existed. The research report, *Combating Sexual Violence Against Women in Nouakchott—Current Situation and Outlook, March 2005* has been condensed into an attractive handbook and is prominently displayed in a number of ministries.

Using music and other forms of popular culture to reach a wide audience. The project recorded music on an audio cassette that includes the message that sexual violence is a barbaric act. It also calls for greater acceptance of rape victims. The recording has gained in popularity and is used at all community sensitization meetings. The project also initiated an annual music festival that attracts both young people and adults. Music has proved to be an effective way of communicating messages on a sensitive subject to a wide audience, while at the same time giving youth an opportunity to develop their talents.