

Masculinity, Spirituality, and Male Wartime Sexual Trauma.

R.Ruard Ganzevoort & Srdjan Sremac

In: Y. Ataria, D. Gurevitz, H. Pedaya & Y. Neria (eds.) *Interdisciplinary Handbook of Trauma and Culture*. New York: Springer, 2016, 339-352.

Abstract

This chapter examines the relationships between male wartime sexual trauma, masculinity, and post-traumatic spirituality. To understand the occurrence and aftermath of wartime sexual trauma, the authors suggest that we have to look at the cultural and religious meanings attributed to gender, sexuality, and violence. This research focuses on male victims in order to understand how masculinities may be involved in the process. Four forces in the heuristic model are identified: cultural gender messages, traumatization messages, coping messages, and religious messages. The outcome of this force-field is different for men and women. This chapter will therefore explore the following: 1) the relationship between trauma and male wartime sexual trauma and its impact on psychological well-being; 2) the roles of cultural (and often also religious) gender norms in sexual traumatization, and 3) the connections between masculinity and post-traumatic growth and spirituality.

Keywords: Masculinity, Sexual Trauma, CRSV, Spirituality, the Yugoslav war

Religion itself faces a trauma, a shock which dissolves the link between truth and meaning, a truth so traumatic that it resists being integrated into the universe of meaning.

Žižek & Gunjević
2012, p. 155

1 Introduction

In wartime sexual and gender-based violence is widespread and fueled by ethnic, religious, and political hatred (Leatherman 2011; Roth and Rittner 2012; Eriksson-Baaz and Stern 2013; Smith 2005). Sexual violence includes any violence, physical or psychological, carried out through sexual means. It can include rape, various unwanted sexual and paraphylic acts, genital mutilation, total and partial castration, injuries to the testes with blunt objects, and harassment or degrading treatments like forced public wearing of the other gender's underwear (Human Rights Watch 2003). In order to understand Conflict Related Sexual Violence (CRSV) we need to be aware of the social, religious, and gender realities that underlie this type of violence. Sexual violence is not simply the act of one individual against another, but is embedded in group-based performances aiming at the disempowerment of the enemy. In conflict zones, different nations use militarized masculine norms to elucidate national (and religious) superiority, whilst simultaneously ascribing subordinate characteristics of the masculinities (e.g., effeminate, homosexual) to the other ethnic groups (Trošt –Pavasović and Sloomaeckers 2015). In this way, the de-masculinization and homosexualization of the ethnic other is used as a political strategy or war technique. The primary inducement of wartime violence is ethnicity, and the particular forms of sexual violence are intersectionally informed by religion and culture, gender (or more specifically masculinity), and heteronormativity (Žarkov 2011, p. 109). This chapter examines the relationships between CRSV, masculinity, and meaning. To understand the occurrence and aftermath of CRSV, we need to look at the cultural and religious meanings attributed to gender, sexuality, and violence. This chapter will therefore explore the following: 1) the relationship between trauma and CRSV and its impact on psychological well-being; 2) the roles of cultural (often religiously bolstered) gender norms in sexual traumatization, and 3) the connections between masculinity and post-traumatic growth and spirituality (we use the term 'religious' for the socio-cultural traditions referring to the sacred and 'spiritual' for the personal experiences, meanings, and practices). Recommendations and implications for reconciliation processes in post-conflict societies and effective interventions for traumatized male survivors/victims will be discussed.

Available data suggest that CRSV is not uncommon. In many armed conflicts acts of sexual violence are used to humiliate and de-humanize the enemy. During the conflict in Bosnia and Herzegovina (1992-1995) for example, an

estimated 20,000 women and girls were raped in the period of three years, in the four months of the 1994 genocide in Rwanda between 250,000 to 500,000 Tutsi women and girls were raped, and in the Sierra Leone civil war 64,000 women became victims of sexual violence between 1991-2001 (cited in Brouwer 2005, p. 9). Although conflict-related sexual violence (CRSV) has typically been defined as a subject affecting women and girls, there are also reports of substantial sexual violence against men and boys. Throughout the armed conflict in Yugoslavia, for example, 6000 cases of male victimization have been reported including rape, mass sterilization, and genital mutilation (Lewis 2009). In the Congo conflict 23.6% of men reported being sexually abused (Johnson et al. 2010) while in El Salvador 76% of political prisoners reported being subjected to at least one form of sexual torture (Agger 1989). Similar numbers can be found in other Latin American countries that experienced armed conflicts between 1987-2007: Colombia, Guatemala, Nicaragua, Argentina, and Peru. This indicates that CRSV against men and boys may commonly be underreported or may vary in frequency from one context to another.

Because many conflicts and wars concern ethnic and cultural group boundaries, CRSV functions as a military and political strategy that targets the ethnic or cultural Other. The direct purpose is to destroy the individual's dignity through his or her body and mind. Ultimately however, it serves to annihilate, demoralize, terrorize, dehumanize, and eventually humiliate the entire population (Kaitesi 2014, p. 17). Scarry (1985) describes how torture uses the body in pain to establish a power relation and turn the body into an enemy of the victim by making it speak the language of the oppressor. Cooley (1994) clarifies how the body is both a 'site' of power conflicts and a 'sign' of contested cultural and religious meanings. Olujić (1998) rightly points out that in wartime, individual bodies become the metaphoric representatives of the ethnic and/or religious body, and raping a body symbolizes seizing and overpowering the victim's ethnic and/or religious group. CRSV thus ethnicizes the human body and defines the body as a national, cultural, and possibly religious territory (Drezgić 2010, p. 958).

In the case of CRSV against men and boys, the impact of sexualized violence is intensified by the cultural and religious taboos on (homo)sexuality. In many cultural systems only the receptive role in sexual activity between males counts as homosexual, effeminate, and weak, which leaves the victim of male to male sexual violence with the stigma of a sexually polluted and depersonalized body. The perpetrator then acquires masculine power by sexually overpowering another man, while the victim is culturally emasculated. When masculinity and heterosexuality are considered to be intrinsically connected and culturally and religiously sanctioned, the stigma of sexual victimization becomes unbearable.

This stigma serves to keep the trauma hidden and reduce the chances of intervictim solidarity because every victim survives in shame. The Human

Rights Watch report *We'll Kill You If You Cry* (2003, p. 42), for example, notes that “[d]ue to the stigma attached to [receptive] homosexuality in Sierra Leone, male victims of rape feared they would be perceived as homosexuals and therefore few boys were willing to report it.” Some researchers even speculate that societal pressure can produce denial of rape or may even hinder encoding, storage, or retrieval of such memories (Elzinga and Bremner 2002). In addition, one of the major reasons for the failure to identify male survivors of sexual torture is internalization of traditional gender role stereotypes (males as perpetrators, females as victims) that further leads to nonresponsive service provision (Donnelly and Kenyon 1996). The problem of male sexual violence in conflict zones for those reasons remains a public secret, “hidden topic” (Sivakumaran 2013, p. 81) and the “forgotten method of torture” (UNOCHA 2008, p. 1).

Although admittedly the line between these motives may be thin, CRSV is not primarily an expression of sexual lust or erotic interest. Rather, it must be understood as an exertion of power, violence, and aggression (Zawati 2007, p. 33). It is motivated by violent intentions to disempower and humiliate others, often based on race and/or ethnicity. CRSV is therefore regarded as an element of the crime of torture and considered to be a crime against personal dignity. Recent debates claim that wartime rape and sexual torture are the ultimate humiliation of the victim and must be regarded as one of the most serious crimes against humanity (cited in Hirschauer 2014). For victims, it is an ontological crisis in which the person is forced to negotiate the contamination of self-narrative in the face of severe psychological, somatic, and social consequences. It completely overshadows the victims’ lives and calls into question their individuality, sexuality, social acceptance, and identity. Its main characteristics of hopelessness, emptiness, loss of meaning in life, often perceived feelings of being abandoned by others and ultimately by God, lack of self-esteem and worth, stigma, and shame, all indicate a level of distress that clearly has ontological and spiritual connotations. The traumatic event destroys the person’s faith in a metaphysical order and destabilizes the symbolic order the person dwells in (Janoff-Bulman 1992). As Žižek (2014, p. 120) puts it, the traumatic encounter of extreme violence destabilizes our entire horizon of meaning. Trauma casts us into a state of ontological and/or existential crisis. CRSV as a terror tactic thus touches on fundamental aspects of identity, sexuality, spirituality, and culture. This existential dimension may be further triggered by complex physical consequences; many victims of sexual violence contract sexually transmitted diseases, including HIV/AIDS, hepatitis C, and suffered genital and anal mutilation or enforced sterilization (including castration).

2 Trauma and Conflict-Related Sexual Violence against Males

Before we explore the intersections of masculinity and sexual trauma in more depth, we introduce several cases of male sexual brutality during the civil war

in Bosnia and Herzegovina. These cases will provide examples of the ideas introduced later in the essay. Narratives provide unique and deeply disturbing insights into the ethical deadlock of male sexual violence in armed conflicts. Some of these testimonies have been accessed via the website of the International Criminal Tribunals for the Former Yugoslavia (ICTY). The ICTY was the first tribunal to prosecute wartime rape.

The examples come from the Čelebići and Omarska Detention Camps during the Bosnian War. These camps were used to detain prisoners of war arrested during military operations. Prisoners were subjected to extreme forms of human cruelty and brutality such as torture, sex-based atrocities, forced homosexual contact with other prisoners, beatings, killings and other physical and psychological abuse. In the Mucić *et al.* “Čelebići Camp” case witness *S.G.* testified about two detained brothers who were forced to perform fellatio on each other. The perpetrators did not engage in the sexual activities themselves, but used forced sexual contact for the purpose of humiliation:

Sometime in mid-July they brought in two young men, whom I knew very well, because I was their teacher in Bradina. They were two brothers. They were singled out by Zenga for torture. He beat them and then they had to slap each other’s face, for instance, and if the slaps were not strong enough, then he would show them how it’s really done. One day they had to suck each other’s penis. (Mucić *et al.* IT-96-21; Trial Transcripts pp. 1450-1451)

A second example from one of the eyewitnesses in the Omarska Prison Camp testifies to the genital violence and mutilation that took place. He recalled that one day a member of the Serbian forces ordered *G.* and *H.* to lick *F.H.’s* buttocks and genitals and then to sexually mutilate him. *H.* covered *F.H.’s* mouth to silence his screams and *G.* bit off one of his testicles:

I saw when *H.* was holding, I cannot quite say whether it was *E.K.* or somebody else, by the hands, when he was holding him by the hands, *G.* had to bow down in his crutch and it was ordered to him that he must bite the genital. When I looked up the second time, in those moments there were screams. When the second time I looked, *G.* got up with his mouth full. (Persecutor vs. Dusko Tadić, Trial Transcript, IT-94-1-T, p. 3986)

Several narratives give evidence of cultural or religious dimensions in these cases of sexual violence, especially in how the body and person of the Other are defined. One victim remembered his experience in the Omarska Camp with these words:

They were hitting me, as well as others, in the testicles, using metal hampers, metal bars, kicking with the boots. My testicles were swollen, the size of oranges. The number of tortures varies from one [or] two to twenty or more... They were deliberately aiming their beatings at our

testicles saying, 'you'll never make Muslim children again.' (*Instituting Proceedings* 1993)

In her book, *The Body of War*, Žarkov (2007, p. 159) refers to the testimony of a Catholic priest who was sexually assaulted by the Serbian soldiers: "I was covered in blood. They took off all my clothes and poured cold water on me. They were suffocating me with water, mocking my nakedness and continuing to beat me with whatever they had around." In their empirical research among 60 male rape survivors from the Yugoslav civil war, Lončar and colleagues (2010, p. 197) report how cases of semi-castration were performed either by cutting the victim's scrotum or penis or by tying up the penis with rope or wire, followed by pulling the rope by hand. The Croatian research team further revealed how the perpetrators were placing different objects such as glass bottles in the victims' anuses and then forcing the victims to sit on these objects (Lončar et al. 2010, p. 198).

There is much evidence of the potential psychosocial harm of sexual violence, especially in the more brutal shapes of rape or sexual torture. Several studies have confirmed major similarities between male and female survivors of rape as described in the rape trauma syndrome (RTS). Rape trauma syndrome has been described as a complex posttraumatic stress disorder (PTSD) that manifests itself in the somatic, emotional, cognitive, and interpersonal behavior of the rape victim. Kessler (1995) and others argue that rape is among the traumatic experiences most highly correlated with the development of PTSD. The feelings of shame, guilt, loss of trust, lack of self-esteem and worth, the loss of honor, feeling of isolation and estrangement, self-harming behaviors (including suicidal tendencies and substance abuse), sexual dysfunction, vulnerability, and embarrassment indicate a level of existential distress that verges on spiritual crises. However, the connection between men's psychological health and sexual violence they experienced often remains hidden.

A number of studies suggest that it is not the rape itself but the social exclusion and stigmatization in the aftermath that constitutes the deepest trauma (cited in Sivakumaran 2013; Johnson et al. 2010). This aftermath is influenced by the cultural meanings attached to the event and by the response from the victim's social context. Recognition or the lack thereof, stigmatization, and ostracization are powerful factors. The common view of men as sexually inviolable and the 'myth of male invulnerability' is a case in point. Scholars of male sexual victimization, therefore, have paid close attention to rape's function in the victim's construction of masculinity, femininity and (homo)sexuality (Ganzevoort 2002). Due to culturally embedded and often religiously fortified patriarchal stereotypes, male-by-male rape is experienced as indicative of homosexuality, not only because both victim and perpetrator are usually male, but more so because of the notion of feminization or emasculation. These cultural stereotypes are clearly gendered: through penetration the raped male

body becomes a feminized body: weakened, subordinated and homosexualized. The rapist on the other hand, underscores his masculinity through this act. According to Butler (2008, p. 17) we have to understand sexual torture as “the actions of a homophobic institution against a population that is both constructed and targeted for its own shame about homosexuality...” All this makes it less likely for male rape victims to seek counseling and increases the risk of more severe psychological consequences. As Fuchs notes (2004, p. 94), “society is reluctant to accept the idea that a ‘real man’ could be reduced to such a sexually passive role, and when a man attempts to report his assault, he is often ridiculed.”

3 Masculinities and Sexual Traumatization

Given these powerful social discourses and internalized norms, Sivakumaran (2005) argues that male rape victims’ suffering includes being made weak and effeminate. This subordinates the victim’s status, making him inferior as a man by social norms that are present mostly in the male-dominated and homophobic societies (which seems to be the case in many war dominated countries). At the same time, the acts of sexual violence bolster the sense of masculinity in the perpetrator: when the Other is made weak and powerless, the perpetrator gains hypermasculinity. In many contexts, to overpower another man sexually does not invoke notions of homosexual desire but of strong masculinity; it is only the victim that becomes stigmatized as homosexual. In this respect Wood (2013, p. 145) refers to societies in war that develop norms that instill aggressive “militarized masculinity”. In this way, a ‘cult of masculinity’ functions as sociopolitical supremacy in order to masculinize and *empower* the perpetrator and feminize and *disempower* the victim. In other words, the cultural meanings of violence are produced through dominant discursive structures of masculinity, power, and heteronormativity. Referring to castration in the Balkan context, Žarkov argues that dominant notions of manhood (or masculinity) in patriarchal societies are inseparable from norms of heterosexuality. She claims that:

[t]he embodiment of that dominance is the penis, and its symbolic equivalent is the phallus. In that light, castration and the cutting of a man’s penis are acts of physical as much as symbolic emasculation, because the lack of a penis symbolizes the lack of phallic power. Žarkov (2007, p. 165)

According to Žarkov, sexual torture like genital mutilation or rape uses homosexualization and feminization of the victim in a struggle for power, social control, humiliation, and dehumanization of the ethnic and/or religious Other. For Žarkov (1997, p. 144) this phallic aggression against men is “making a man into a non-man. It is not in itself an act of a perverted homosexual desire; it is an act of perverted desire for power [...] A victimized man is not a man.” Therefore, to rape a man is to symbolically emasculate and feminize him in order to humiliate his physical, moral, and social integrity (MacKinnon 1997).

The sexual violation victims have experienced is, thus, much more than a violation of the body; it implies a fundamental threat to core ideas about masculinity and therefore challenges one's legitimate position in society. The objectified body is rendered passive and vulnerable and is used as a means to dehumanize and emasculate the person. At the same time, the sexual torture or penetration of the body – either sexually or as physical harm – undermines the self-evident boundary between the self and the other. The double meaning of objectified powerlessness and forced loss of boundaries makes the traumatic experience the ultimate denial of masculinity that it is construed as in many cultural contexts.

One of the more frequent responses to traumatization in males, then, is to aim at a restoration of the old paradigms of masculinity or even hypermasculinity. This sometimes results in “acting out,” because traumatized males may engage in self-destructive and aggressive behaviors like substance abuse or violence. Our previous research on the role of spiritual transformation in the religious therapeutic outcomes among recovering drug addicts has shown that male sexual childhood trauma can be an important factor contributing to drug abuse (Sremac and Ganzevoort 2013; Sremac 2013). Many of these participants disclosed a history of sexual or physical abuse. This kind of traumatic experience had a long-term and profound impact on the participants' sense of self and identity. The participants frequently reported powerful long-term effects of sexual trauma, engendering self-destructive behavior, aggression, depression, anxiety, and a sexual identity crisis later in their lives. For many of them substance use functioned as a coping mechanism for their trauma by anesthetizing the painful memories of early sexual abuses and the agonizing emotions that resulted.

Notwithstanding individual variation, sexually traumatized men tend to be more prone to acting out, whereas traumatized women tend towards developing depression (Solomon et al. 2005; Stewart & Harmon 2004). Even though there are certainly more factors involved, one of the reasons for this difference may be found in the different gender messages men and women encounter. For men, the threat to masculinity inherent to the traumatic experience may compel them to develop compensatory behavior, which includes intimacy avoidance, emotional distancing, and power restoration.

Psychological conditions of male survivors of rape are further complicated by the refusal of men to disclose rape trauma due to the cultural stigma they feel they might endure. The shame and humiliation that flows from societies' responses can thereby increase psychological harm and bring about a multitude of individual losses such as loss of identity and self-esteem. This can further isolate male victims from the real world and potentially intensify the effects of their traumas. Some male victims said that the horrors they experienced were more than they could endure, noting that they had no words to describe and articulate the residual trauma (cited in Andersen 2008). Franke

(1998) explains how male victims during the Bosnian conflict were not able to conceptualize and verbalize their sexual assaults at the tribunal in The Hague. Significantly, the majority of testimonies about sexual violence against men at the ICTY came from witnesses and not from the direct victims. It was only after rape was reconsidered as a weapon of war and a form of torture – instead of an individualized sexual act – that male victims were able to articulate their deeply disturbing traumatic experiences of sexual torture. The reframing of rape as an instrument of war may serve as a preventative and/or coping mechanism. This reminds us of how Judith Butler (1997, p. 36) refers to the encoded traumatic memory that “lives in language and is carried in language.”

The sexual dimension of these acts of violence includes issues regarding the possible experience of involuntary erections or ejaculations within the context of nonconsensual sex (cited in Bullock and Beckson 2011; Lewis 2009). Although these are direct biological responses that do not indicate sexual pleasure, they may lead the victim to question his sexual orientation (Sivakumaran 2005, pp. 1290-1291). In homophobic societies with a strong cultural and religious bias against homosexuality, this leaves the male victim betrayed by his own body and vulnerable to further stigmatization and shame.

4 Masculinities, Trauma and Culture

The exploration above already indicates how masculinity plays a central role in defining the relationship between CRSV and cultural and religious meaning. The term ‘masculinity’ is not taken here in an essentialist sense as referring to certain innate qualities of male-bodied individuals, but in a constructionist sense as the messages and meanings that are projected onto a person because of his male body (and in an indirect sense onto female-bodied persons, which represent a negative model). The masculine identity is constructed out of individual experiences and longings, idiosyncratic models and contexts, and the (sub)cultural meanings attributed to this complex, resulting in prescriptions of what it is to be a man. This is for every person a specific configuration of meanings. Masculinity consists of the ‘messages men hear’ (Harris 1995). The central question we are exploring is which messages are conveyed to men in the context of trauma (more specifically CRSV), recovery, and religion.

We will describe these messages in a heuristic model – admittedly broadly overgeneralizing – as mathematical vectors in an interplay of forces. The matrix in which we describe these forces consists of two axes. The vertical axis is about power and powerlessness, the horizontal axis about isolation and boundlessness (Ganzevoort & Veerman 2000). On both axes, the ideal point is in the middle. Too much power can be just as problematic as too little power, because both distort the relation of the person to significant others as well as to the vicissitudes of life that are fundamentally beyond our control. If a person lives his or her life with too much power, an illusion of complete autonomy is confirmed that jeopardizes the person’s openness to the uncontrollable

exterior world (Winnicott's illusion of omnipotence). In the case of powerlessness, the person develops too little autonomy and becomes a plaything of others and of external forces. On the horizontal axis, too much isolation is negative, because it leaves the person deprived of significant relations and closes him or her in. Too much openness, as is the case in boundlessness, means that the person has no choice whether or not to admit others to his or her private life. Boundless people are unable to protect their individual space. Ideally, at the center of the matrix, the person has adequate control over her or his own life and is able to acknowledge external influences. He or she is able to relate to other people and to protect the hidden sphere of their personal identity. This ideal center point, however, is difficult to realize because of the various forces at play in the case of sexual traumatization. The force lines our model describes are the influences that move the person away from the ideal center.

The first vector or force line regards implicit and explicit gender messages. It is a vector that distinguishes between men and women and offers them opposite criteria or values by which to order their lives. Generally, it is about domination versus submission, rationality versus emotion, hard versus soft, sexually active versus sexually receptive, and so on. Especially in patriarchal contexts, men are expected to be strong, self-sufficient, and autonomous. In our matrix they will score high on both power and isolation. Accounting for subcultural and individual differences, specific norms of masculinity may be found according to different patterns, like the standard bearer, the worker, the lover, the boss, or the rugged individual (Harris 1995). In these patterns, the axes of power and isolation are represented differently, but the general image remains that men should be strong and self-sufficient, and even if they connect to others they do so from their position of power, caring for others or fighting with them. In various ways, then, this message of power and isolation is a powerful aspect of masculinity, a standard that men need to try to live by, so that they will be recognized by others and by themselves as 'real men'. Contexts of war and violence often intensify these hypermasculine gender messages, especially in patriarchal cultures that cherish machismo.

The second vector is the impact of sexual traumatization. The message inherent in this traumatization is one of loss of autonomy and forced boundlessness. As a result, many victims experience a damaged capacity to guard the borders of their identity and as a result have difficulty negotiating this border in encounters with others. This can result in either too much or too little openness. Although this vector of meanings is basically the same for men and women, the combination with the gender-messages results in a different kind of conflict. One could say – more or less cynically – that sexual traumatization is a radical endorsement of patriarchal notions of femininity and an equally radical denial of masculinity. Victimization is not something that fits in the canonical stories of masculinity, leaving the victim with a serious threat to his gender-identity: 'If men aren't to be victims, then victims aren't men' (Lew 1988). To own up to

experiences of sexual traumatization, then, activates fundamental gender ambivalences: to object to the patriarchal gender system present in the acts of sexual violence is to place oneself outside the cultural system; to accept the gender system is to validate the violence. In both cases the victim fails to meet the ideals of masculinity and is thus culturally emasculated. When sexual traumatization occurs in the hypermasculine context of war, the impact may be even more focused on gender issues. CRSV then is very threatening to the messages that many men hear in western societies, if not in all societies with a patriarchal inheritance.

The third vector regards the aftermath of sexual violence, including the cultural meanings, social responses, and individual coping strategies. Survival strategies include a tendency to withdraw from others out of shame, protection, and/or fear of intimacy (Fischer & Good 1997), which strengthens the sense of isolation. Gender differences are especially relevant on the axis of power. Men more often seem to develop survival strategies that restore their power and autonomy, sometimes in dysfunctional or self-destructive ways. Women seem to tend towards strategies that involve less power and consequently more servitude. In their own ways, both incorporate the presumed gender messages in their own coping strategies. For men, these coping strategies are consonant with the gender messages. In fact, one could argue that the primary purpose of these strategies is to restore masculinity. Thus, the interaction between coping and gender sometimes leads to dysfunctional hypermasculinities that reiterate the violence.

The final vector describes the impact of religious messages. The general message of the dominant religious traditions in patriarchal contexts summons the believer to surrender him or herself to God. This means abandoning one's autonomy and instead opening up and surrendering. For women, this message can be associated with gender messages that tell them to be subservient, but for men it is contradictory to gender messages telling them to be autonomous and powerful. Here C.S. Lewis' (1946, p. 316) dictum – 'What is above and beyond all things is so masculine that we are all feminine in relation to it' – is indicative of the contradictions in religious gender messages. In more traditional religious groups, this threat to masculinity is countered by the power that is unequally delegated to men, especially in ecclesial office. For victims of CRSV who face the threats of emasculation and feminization, this empowerment may be less accessible, leaving religious messages on the side of the messages of traumatization. At least in some shapes, religious messages deprive the person of an affirmed masculinity. The messages of religion carry at least some degree of feminization, leaving little room for self-affirmation, strength, and pride. Of course, this may be a healthy counterbalance to damaging messages of hypermasculinity, but in the case of victims of CRSV, it may strip these men of their last suggestion of masculinity. In sum, religious gender messages in a patriarchal context bolster the position of those in positions of power and

undermines the position of the powerless. This masculinizes the perpetrators and further emasculates the victims.

If we apply this heuristic model to the concrete context of the war in former Yugoslavia, from which we drew our examples, we see that conflict related sexual violence reflects the patriarchal gender system that is supported by social, religious, ethnic, and cultural power relationship (the vertical axis). In such a context, and especially after traumatization, a victim fails to meet the ideals of masculinity and is thus culturally emasculated (the horizontal axis). Žarkov (2007, p. 167) shows, in her analysis of sexual violence against men in the Balkans war, that the tortured male bodies are defined as the multiple Other – “through race, religion, and culture as much as through masculinity and sexuality.” The body of the male other becomes a national, cultural, and possibly religious territory as well as a site of violence.

As we stated earlier, the coping mechanism of male victims depends on dominant notions of masculinity and the norms of heterosexuality in a particular cultural, religious, and political space. Consequently, we cannot fully comprehend the intersection of religion and coping without understanding its relationship to masculinity and heteronormativity. However, solid empirical investigations of religious coping and sexual torture among male victims are rare. In a framework where masculinity is inseparable from norms of control and power, it seems that religion has less potential to function in coping and transformation. We will address this issue later in the chapter.

5 Post-Traumatic Growth and Spirituality

The relation between religion or spirituality and trauma is complex. There is convincing research to date that shows that traumatization is not always detrimental to spirituality but may even enhance the person’s spiritual engagement and growth. Some of these studies focus on post-traumatic growth among war survivors. Başoğlu and colleagues (2005) found that war survivors in the former Yugoslavia had a stronger faith in God compared with the control group. Carmil and Breznitz (1991) investigated long-term consequences of the Holocaust and found that survivors and survivors’ offspring expressed greater belief in God and greater belief in a better future. Other studies have shown that survivors of torture had more posttraumatic growth and practice their religion more than survivors of ‘general trauma’ (Kira et al. 2006).

The concept of post-traumatic growth (PTG) has emerged in the last two decades to account for the observation of positive life changes as a result of a trauma or life crisis (Linley & Joseph 2004). According to Christopher (2004), growth instead of pathology is in fact the normal outcome of traumatic stress. Congenial to ‘positive psychology’, researchers into post-traumatic growth are interested in health promoting factors that may be called upon in coping with traumatizing events, in order to support coping efforts and resilience (Wilson

2006). According to Ai and Park (2005), mental health research into trauma and related fields would benefit from the complementary approaches of stress-related growth, positive psychology, and the recognition of the role of spirituality and religion. Fontana and Rosenheck (2004) found that guilt and weakened religious faith are central to the prolonged use of mental health services and concluded that questions of meaning and spirituality deserve more attention in the treatment of PTSD. Summarizing these insights, Linley (2003) notes three dimensions of 'wisdom' that support posttraumatic growth: the recognition and management of uncertainty, the integration of affect and cognition, and the recognition and acceptance of human limitation.

The observations that led to the development of concepts like post-traumatic growth or post-traumatic spirituality are not that new. Especially when it comes to the intersection with meaning, spirituality or religion, there is a long tradition of writing and research that explores something like spiritual growth following negative life events (Howe 1988; Shandor Miles & Brown Crandall 1986). Boisen (1970) noted that crisis periods may be times of new interpretations because people tend to focus their mental activities on what is immediately necessary, they will tend to contemplate the meanings of life only when they are challenged. That does not mean that every individual will show a change in terms of the importance or meaning of religion to them (Croog & Levine 1972; Ganzevoort 1994), but it stresses the fact that these meanings may be considered more in times of stress, crisis, or trauma. This points to the inherent relationship between religion and coping with crisis, which is evident in the theoretical framework of Pargament's (1997) psychology of religion and coping. He describes coping as a search for significance in times of stress and religion as a search for significance in ways related to the sacred. The shared notion of a search for significance supports the view that crises or traumatic events may give way to semantic innovation and thus growth.

6 Masculinities and Spirituality

As we near the end of this chapter we explore one approach towards posttraumatic growth at the intersection of masculinity and spirituality (Krondorfer 1996). A seminal text in this field has been James Nelson's (1992) *Male Sexuality, Masculine Spirituality*, in which he describes two types of masculine spirituality, both offering a positive view of body and sexuality grounded in theological notions of incarnation and resurrection. The first, often associated with traditional masculinity, can be termed 'phallic'. It is symbolized by the erect male organ and can carry meanings of power, dominance, and penetration. Nelson notes, however, that the male organ is erect only from time to time, separated by much longer periods of flaccidity. This symbolizes the second type of masculine spirituality that Nelson calls 'penile'. Penile masculinity is like the theological *Via Negativa* characterized by receptivity rather than penetration, creating space for others rather than dominating them.

In penile masculinity, touch, passivity, and intimacy are welcomed, while it is highly ambivalent in phallic masculinity.

Nelson's distinction directly relates to the issues discussed earlier in this chapter. The ambivalences about male sexuality are intensified by the context of war and violent traumatization. The psychological impact of sexual torture can be interpreted in light of a forced passivity that could fit well within a penile masculinity but is unacceptable in a phallic masculinity. The context of war and violence itself, however, is defined by hyperphallic masculinities and it is precisely for that reason that CRSV carries the meaning of emasculation. Penile masculinity, when forced upon a person through violence and oppression then becomes a threat rather than a possible source of new meaning.

In coping with the aftermath of sexual traumatization, many men tend towards withdrawal, touch avoidance, and restoration of phallic masculinity, but it comes at the price of foreclosing intimacy and connectedness with others and with one's own body. This defensive response buys into traditional notions of phallic masculinity that were more or less destructive from the beginning. Instead of critiquing these notions, they are bolstered as if they are part of the solution. The response of receptive or penile masculinity seems counterintuitive for many, because it allows the destruction of precisely the type of masculinity that is threatened. This seems like accepting the message that one does not live up to the criteria for masculinity, that one is not a real man. This is clearly a paradoxical outcome: the natural attempt to restore phallic masculinity leads to foreclosure, whereas the acceptance of receptive, penile masculinity seems unmasculine but creates space for a new way of living.

It is not too strong to call this a posttraumatic spiritual transformation. Ganzevoort (2008) uses the metaphors of scars and stigmata when addressing the interaction between trauma and identity. The former recognizes trauma as an 'alien' intrusion that calls for resistance. The latter recognizes trauma as integral to identity development. The harmful and painful touch that figures in the wounds or scars inflicted on the body can be transformed into stigmata that carry spiritual significance. This suggests a need for a dialectical response. If one only stresses the touch avoidant response to trauma, phallic masculinity is preserved and the wounds remain alien to the self. If one only stresses the receptive response to trauma, the phallic masculine self is given up and penile suffering is accepted uncritically. Spiritual transformation of scars into stigmata comes from the audacious effort to refuse either extreme (Ganzevoort 2008) and keep the phallic and penile dimensions together in a dialectical connection. It is a fragile balance, but it results in a deconstruction and not just destruction of masculinity. For spiritual caregivers it is necessary to resist the temptation to succumb to and restore hegemonic notions of masculinity, but also the escape of explaining away the menace to masculinity. Keeping open the area between these two positions can support spiritual transformation.

In the interplay of trauma and spirituality, coping and gender are important factors. Posttraumatic spirituality belongs to the realm of coping strategies and coping outcomes. Posttraumatic spirituality can be either functional and support a satisfying life, or it can be dysfunctional and contribute to self-harm or violence. The gender messages for men are contradicted by both traumatization and religion, which makes it more difficult to integrate them in a posttraumatic spiritual identity. Spiritual counseling of male victims of CRSV should therefore address the issues of masculinity much more explicitly.

7 Recreating Victimized Identity

One of the major problems in the treatment of CRSV has been the lack of sufficient caregivers qualified and willing to attend to survivors' stories of atrocities. Medical caregivers and recovery-oriented practitioners are often emotionally unprepared to listen to the horrifying experiences of survivors of sexual violence (Goldfeld et al. 1988). Consistent with a narrative approach, a primary path to recovery is through the telling of the trauma stories to an empathic audience. Caregivers should take seriously the narrative features of psychological functioning of male rape trauma survivors to help them to develop a new narrative identity, foster spiritual growth and address significant concerns. Ganzevoort (2010) identifies three conditions to do this: 1) the person should be viewed as a potential author of narratives; someone with stories to tell; 2) the work of pastoral 'intervention' should be sensitive to the power of narrative in religious traditions in the accomplishment of its aims, and 3) pastoral counseling and care should be enhanced by the understanding that its activity consists of the negotiation of mutual meanings through joint or cooperative story-making. For Ganzevoort two distinct dimensions are at stake here: the first is the construction of a meaningful story, the second is the exchange of stories between a narrator and her or his audience. In other words, the first is about the *narrative product* and the second is about the *narrating process* (Ganzevoort 2010, p. 332). Religious traditions can play a role here in offering symbols, language, images, stories and supportive environments that may evoke a transformation of meaning. This supportive environment helps the individual to create a new story and to find an audience where they can perform a new narrative identity. In this way, the care seeker is "taken seriously as a unique narrator with the right and capacity to find new meanings in old stories and with an audience that accepts, invites and challenges" (Ganzevoort 2010, p. 339). The spiritual caregiver facilitates the creation of a space in which a trauma survivor's story intersects with the story of a supportive community. In this regard, an empathic audience, to whom trauma stories are told and re-told, will have deep influence on the reaffirmation of narrative identity and the removal of stigma attached to (homo)sexual victimization.

In a similar vein, Mollica (2006) notes that people who have been (sexually) tortured do not want to be treated primarily as torture survivors. Instead, they prefer a holistic approach that addresses their current reality in a culturally

sensitive way. For Mollica (2006) the “trauma story” has four elements: 1) a factual recounting of the traumatic experience; 2) the cultural meaning of the trauma; 3) an opportunity to make distance (‘put the past behind them’) from the intensity of the trauma; and 4) a sharing of the story to an enthusiastically listener who is willing to learn from the storyteller. Furthermore, Mollica (1988, p. 312) argues that the significance of the trauma changes over time: “The new story that emerges is no longer a story about powerlessness ... no longer about shame and humiliation – it becomes a story about human dignity and virtue.”

It would be helpful to victims of CRSV if post-conflict societies would address male sexual victimization more explicitly in order to foster healing, rebuild lives and create positive legacies to pass on to future generations. Facing the past is a painful process in which culture, spirituality, and wartime trauma play an important role. It is a journey of reconciliation, justice, peace, and healing. As Tombs (2014) points out: the omission and taboos of CRSV remains a significant obstacle for any individual that seeks to reconcile with and face a painful, traumatic past.

Acknowledgements

Parts of this chapter were presented by R. Ruard Ganzevoort at the international colloquium on Christian Religious Education in Coping with Sexual Abuse, Montreal, Canada (2006) and at the conference *Noli me tangere*, Leuven, Belgium (2009). Other parts were presented by Srdjan Sremac at the international conference Religion, Reconciliation and Transitional Justice, Sarajevo, Bosnia and Herzegovina (2013).

References

- Agger, I. (1989). Sexual torture of political prisoners: An overview. *Journal of Traumatic Stress, 2*, 305-318.
- Ai, A. L. & Park, C. L. (2005). Possibilities of the positive following violence and trauma: Informing the coming decade of research. *Journal of Interpersonal Violence, 20*(2), 242-250.
- Andersen, T. H. (2008). Speaking about unspeakable: Sexually abused men striving toward language. *American Journal of Men's Health, 2*(1), 25-36.
- Başoğlu, M., Livanou, M., Crnobarčić, M., Francisković, T., Suljić, E., Durić, D., and Vranesić, M. (2005). Psychiatric and cognitive effects of war in former Yugoslavia. *The Journal of the American Medical Association, 294*(5), 580-590.

- Boisen, A. T. (1970). Crises in personality development. In Sadler, W.A. (Ed.), *Personality and Religion* (pp. 191-205). New York: Harper & Row.
- Bullock, M. C & Beckson, M. (2011). Male victims of sexual assault: Phenomenology, psychology, physiology. *The Journal of the American Academy of Psychiatry and the Law*, 39, 197-205.
- Butler, J. (1997). *Excitable speech*. London: Routledge.
- Butler, J. (2008). Sexual politics, torture, and secular time. *The British Journal of Sociology*, 59(1), 1-23.
- Brouwer, A-M. (2005). *Supranational criminal prosecution of sexual violence*. Antwerpen: Intersentia.
- Carmil, D. & Breznitz, S. (1991). Personal trauma and world view: Are extremely stressful experiences related to political attitudes, religious beliefs, and future orientation?. *Journal of Traumatic Stress*, 4(3), 393-405.
- Christopher, M. (2004). A broader view of trauma: A biopsychosocial-evolutionary view of the role of the traumatic stress response in the emergence of pathology and/or growth. *Clinical Psychology Review*, 24(1), 75-98.
- Cooley, P. M. (1994). *Religious imagination and the body: A feminist analysis*. Oxford: Oxford University Press.
- Croog, S. H. & Levine, S. (1972). Religious identity and response to serious illness: A report on heart patients. *Social Science and Medicine*, 6, 17-32.
- Donnelly, D. A. & Kenyon, S. (1996). Honey, we don't do men: Gender stereotypes and the provision of services to sexually assaulted males. *Journal of Interpersonal Violence*, 11, 441-448.
- Drezgić, R. (2010). Religion and gender in the context of nation-state formation: The case of Serbia. *Third World Quarterly* 31(6), 955-970.
- Elzinga, B. M & Bremner, J. D. (2002). Are the neural substrates of memory the final common pathway in posttraumatic stress disorder (PTSD)? *Journal of Affective Disorders*, 70(1), 1-17.
- Eriksson-Baaz, M., & Stern, M. (2013). *Sexual violence as a weapon of war? Perceptions, prescriptions, problems in the Congo and beyond (Africa now)*. London: Zed Books.
- Fischer, A. R. & Good, G. E. (1997). Men and psychotherapy: An investigation of alexithymia, intimacy, and masculine gender roles. *Psychotherapy*, 34(2), 160-170.
- Fontana, A. & Rosenheck, R. (2004). Trauma, change in strength of religious faith, and mental health service use among veterans treated for PTSD. *Journal of Nervous and Mental Disease*, 192(9), 579-584.

- Fuchs, F. S. (2004). Male sexual assault: Issues of arousal and consent. *Cleveland State Law Review*, 51(1), 93-121.
- Franke, M. K. (1998). Constructing heterosexuality: Putting sex to work. *Denver University Law Review*. 75(4), 1139-1180.
- Ganzevoort, R. R. (1994). *Een cruciaal moment. Functie en verandering van geloof in een crisis*. Zoetermeer: Boekencentrum.
- Ganzevoort, R. R. (2002). Common themes and structures in male victims' stories of religion and sexual abuse. *Mental Health, Religion & Culture*, 5(3), 313-325.
- Ganzevoort, R. R. (2008). Scars and stigmata: Trauma, identity, and theology. *Practical Theology*. 1(1), 19-31.
- Ganzevoort, R. R. (2010). Minding the wisdom of ages: Narrative approaches in pastoral care for the elderly. *Practical Theology* 3(3), 331-340.
- Ganzevoort, R. R. & Veerman, A. L. (2000). *Geschonden lichaam: Pastorale gids voor gemeenten die geconfronteerd worden met seksueel geweld*. Zoetermeer: Boekencentrum.
- Goldfeld, B. H., Mollica, R. F., Pesavento, B. H. & Faraone, S. V. (1988). The physical and psychological sequelae of torture: Symptomatology and diagnosis. *American Medical Association Current*, 259(18), 2725-2729.
- Harris, I. M. (1995). *Messages men hear: Constructing masculinities*. London: Taylor & Francis.
- Hirschauer, S. (2014). *The securitization of rape: Women, war and sexual violence*. New York: Palgrave Macmillan.
- Howe, L. T. (1988). Crises and spiritual growth. *Pastoral Psychology*, 36(4), 230-238.
- Human Rights Watch. (2003). *We'll kill you if you cry*. New York: Human Rights Watch.
- Instituting Proceedings*. (1993). Application of the Convention of the Prevention and Punishment of the crime of Genocide (Bosnia and Herzegovina v. Yugoslavia (Serbia and Montenegro), General List No. 91. <http://www.icj-cij.org/docket/files/91/7199.pdf>.
- Janoff-Bulman, R. (1992). *Shattered assumptions: Towards a new psychology of trauma*. New York: Free Press.
- Johnson, K., Scott, J., Rughita, B., Kisielewski, M., Asher, J., Ong, R. & Lawry, L. (2010). Association of sexual violence and human rights violations with physical and mental health in territories of Eastern Democratic Republic of Congo. *Journal of American Medical Association*, 304(5), 553-562.

- Kaitesi, U. (2014). *Genocidal and sexual violence*. Antwerpen: Intersentia.
- Kessler, R. C., Sonnega, A., Bromet, E., Hughes, M., & Nelson, C. B. (1995). Posttraumatic stress disorder in the National Comorbidity Survey. *Archives of General Psychiatry*, 52, 1048-1060.
- Kira, I. A., Templin., Lewandowski, L., Clifford, D., Wiencek, P., Hammad, A., Jamal, M. & Al-Haidar, A. (2006). The effects of torture: Two community studies. *Peace and Conflict: Journal of Peace Psychology*, 12(3), 205-228.
- Krondorfer, B. (1996 Ed.). *Men's bodies, men's gods: Male identities in a (post-) Christian culture*. New York: New York University Press.
- Leatherman, L. J. (2011). *Sexual violence and armed conflict*. Cambridge: Polity.
- Lew, M. (1988). *Victims no longer: Men recovering from incest and other sexual abuse*. New York: Nevraumont.
- Lewis, C.S. (1946). *That hideous strength*. New York: MacMillan.
- Lewis, D. (2009). Unrecognized victims: Sexual violence against men in conflict settings under international law. *Wisconsin International Law Journal*, 27(1), 1-49.
- Linley, P. A. (2003). Positive adaptation to trauma: Wisdom as both process and outcome. *Journal of Traumatic Stress*, 16(6), 601-610.
- Linley, P.A., & Joseph, S. (2004). Positive change following trauma and adversity: A review. *Journal of Traumatic Stress*, 17(1), 11-21.
- Loncar, M., Henigsberg, N. & Hrabac, P. (2010). Mental health consequences in men exposed to sexual abuse during the war in Croatia and Bosnia. *Journal of Interpersonal Violence*, 25(2), 191-203.
- MacKinnon, A. C. (1997). *Oncale v. Sundowner Offshore Services Inc.*, 96-568, *Amici Curiae* brief in support of petitioner. *UCLA Women's Law Journal*, 8(1), 9-46.
- Mollica, R. F. (1988). The trauma story: The psychiatric care of refugee survivors of violence and torture. In Ochberg, F. (Ed.). *Post-traumatic therapy and victims of violence* (pp. 295-314). New York: Bruner/Mazel.
- Mollica, R. F. (2006). *Healing invisible wounds: Paths to hope and recovery in a violent world*. Orlando: Harcourt.
- Mucić et al. (IT-96-21) "Čelebići Camp". Witness: Witness F & Mr. Stevan Glogorevic, Trial Transcripts pp. 1450-1451. <http://www.icty.org/x/cases/mucic/trans/en/970327ed.htm>
- Nelson, J. B. (1992). *The intimate connection: Male sexuality, masculine spirituality*. London: SPCK.

- Olujić, B. M. (1998). Embodiment of terror: Gendered violence in peacetime and wartime in Croatia and Bosnia and Herzegovina. *Medical Anthropology Quarterly*, 12(1), 31-50.
- Pargament, K. I. (1997). *The psychology of religion and coping: Theory, research, practice*. New York: The Guilford Press.
- Persecutor vs. Dusko Tadić, Omarska, Trial Transcript, IT-94-1-T. Witness: Mehmed Alić, p. 32986.
- Roth, K. J. and Rittner, C. (eds.) (2012). *Rape: Weapon of war and genocide*. Minnesota: Paragon House.
- Scarry, E. (1985). *The body in pain: The making and unmaking of the world*. New York: Oxford University Press.
- Shandor Miles, M. & Brown Crandall, E. K. (1986). The search for meaning and its potential for affecting growth in bereaved parents. In: Moos, R. H. (Ed.), *Coping with life crises: An integrated approach* (pp. 235-243). New York: Plenum.
- Sivakumaran, S. (2005). Male/male rape and the “taint” of homosexuality. *Human Rights Quarterly*, 27, 1274-1306.
- Sivakumaran, S. (2013). Prosecuting sexual violence against men and boys. In Brouwer, A-M., Ku, C., Römkens, R., & van den Herik, L. (Eds.), *Sexual violence as an international crime: Interdisciplinary approaches* (pp. 79-97). Antwerpen: Intersentia.
- Smith, A. (2005). *Sexual violence and American Indian genocide*. New York: South End Press.
- Solomon, Z., et al. (2005) Is terror gender-blind? Gender differences in reaction to terror events. *Social Psychiatry and Psychiatric Epidemiology*, 40(12), 947-954.
- Stewart, D. & Harmon, K. (2004). Mental health services responding to men and their anger. *International Journal of Mental Health Nursing*, 13(4), 249-254.
- Sremac, S. (2013). *Addiction and spiritual transformation*. Münster: LIT Verlag.
- Sremac, S. & Ganzevoort, R. R. (2013). Addiction and spiritual transformation: An empirical study on narratives of recovering addicts’ conversion testimonies in Dutch and Serbian contexts. *Archive for the Psychology of Religion*, 35(3), 399-435.
- Tombs, D. (2014). News media, conflicted-related sexual violence and reconciliation in the Balkans. In Valić-Nedeljković, D., Sremac, S., Knežević, N., & Gruhonjić, D. (Eds.), *The role of media in normalizing relations in the Western Balkans* (pp. 31-47). Novi Sad: University of Novi Sad Press, 31-47.

- Trošt-Pavasović, T. & Sloomaeckers, K. (2015). Religion, homosexuality and nationalism: The role of religious institutions in defining the nation. In Sremac, S. & Ganzevoort, R.R. (Eds.), *Religious and Sexual Nationalisms in Central and Eastern Europe: Gods, Gays, and Governments* (pp. 154-180). Leiden/Boston: Brill.
- UNOCHA (2008). The nature, scope and motivation for sexual violence against men and boys in armed conflict. *Use of sexual violence in armed conflict: Identifying gaps in research to inform effective interventions* (pp. 1-13). Brussels: Unocha.
- Wilson, J. P. (2006 Ed.). *The posttraumatic self: Restoring meaning and wholeness to personality*. London: Routledge.
- Wood, J. E. (2013). Multiple perpetrator rape during war. In Horvath, M. & Woodhams, J. (Eds.), *Handbook on the study of multiple perpetrator rape: A multidisciplinary response to an international problem* (pp. 132-159). London: Routledge.
- Zawati, H. M. (2007). Impunity or immunity: Wartime male rape and sexual torture as a crime against humanity. *Torture Volume*, 17(1), 27-48.
- Žarkov, D. (1997). War rapes in Bosnia: On masculinity, femininity, and power of the rape victim identity. *Tijdschrift voor Criminologie*, 29(2), 140-151.
- Žarkov, D. (2007). The body of the other man. In Žarkov, D. (Ed.). *The body of war: Media, ethnicity and gender in the break-up of Yugoslavia* (pp. 155-169). Durham: Duke University Press.
- Žarkov, D. (2011). Exposures and invisibilities: Media, masculinities and the narratives of wars in an intersectional perspective. In Lutz, H., Herrera Vivar, M.T. & Supik, L. (Eds.), *Framing intersectionality* (pp. 105-120). Farnham: Ashgate.
- Žižek, S., & Gunjević, B. (2012). *God in pain: Inversions of apocalypse*. New York: Seven Stories Press.
- Žižek, S. (2014). *Event*. London: Penguin Books.