



The spectacle of the feminine Other: Reading migrant women's autobiographies about honour-based violence

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ABSTRACT

Autobiographies of migrant women about their experiences with honour-based violence (HBV) reach many readers and are used in policy debates on women's emancipation and immigrant integration. Migrant women's central position in this nationalistic debate stigmatises them as passive victims, their husbands as violent and their culture as oppressive. We read 16 autobiographies by female authors to analyse how the spectacle of the other is represented in their stories. Despite their victimisation, most authors present themselves as strong women. Nevertheless, the image of an exceptional woman who breaks off all contact with her family, still stigmatises migrant communities as oppressive. We found a few stories of women who describe their ongoing struggle to make their own life choices within their communities. These stories deserve more attention because they may be useful for addressing honour conflicts. To end HBV, we need to move beyond spectacle and consider how we can learn from these women.

Introduction

'My daughter is dead, murdered by her father. (...) The eldest of my four daughters died because she wanted to be like her German classmates. She wanted to hang out with friends, to go dancing and to wear fashionable clothes. And she loved a boy that wasn't Albanese enough according to her father's standards.' (Gashi, 2006: 9).

'It was the first day of her marriage and she already learned to stare at the wall and suppress an upcoming scream.' (Darznik, 2011: 71).

Honour-based violence (HBV) has attracted a great deal of attention in recent years, both in the public and in the academic debate (for an overview, see Korteweg & Yurdakul, 2010, Kromhout, 2008, Mazher Idriss & Abbas, 2010, Welchman & Hossain, 2005). It is the topic of many bestselling biographies by migrant women in western countries, such as the Netherlands. The quotes above are from biographies about women's experiences with HBV and strict cultural rules set by their families and communities. This sort of violence is committed by (extended) family members who wish to restore or prevent damage to family honour. HBV is a complex phenomenon that should be treated as an intersectional phenomenon, combining culture, gender and migration. It is influenced by cultural practices that are regarded as traditional but are actually changing through the process of migration and

immigrant integration. It is a sensitive topic that has become boundary marker in the public debate on immigrant integration (Korteweg & Yurdakul, 2009; Pratt Ewing, 2008). HBV is used in a polarising nationalist discourse where two sides are involved in the reification of culture, with migrant women at centre stage; as "...women are often the ones who are given the social role of intergenerational transmitters of cultural traditions, customs, songs, cuisine, and, of course, the mother tongue (sic!). The actual behaviour of women can also signify ethnic and cultural boundaries, as often the distinction between one ethnic group and another is constituted centrally by sexual behaviour of women" (Yuval-Davis, 1993: 627). Constructions of manhood and womanhood, and gendered relations of power are sites where difference between 'us' and 'them' are constituted (Yuval-Davis & Stoezler, 2002). There are those who see HBV as a barbaric cultural practice that marks the boundary between "us" modern westerners and "them" (mostly Muslim) migrants. They feel that migrant behaviour is entirely determined by culture and that the only way to eradicate HBV is for members of such communities to completely discard their culture. Opponents regard this as a discriminatory perspective. Then there are those who see HBV as purely patriarchal violence against women that is present in all societies, regardless of culture (Korteweg & Yurdakul, 2010). In public discourse on immigrant integration biographies by female victims of HBV play an important role (Carbin, 2014). They are read by a wide audience and they can help politicians to frame policies

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to tackle HBV. Some policy makers try to use the voices of victimised immigrant women as a tool to emancipate them (Carbin, 2014). But this means that the voices of migrant women are mostly heard through these narratives of violence (Carbin, 2014; Janssen & Sanberg, 2010b; Meetoo & Mirza, 2011). The question is whether this will lead to the emancipation of these women or to their stigmatisation? In order to tackle this question we will analyse the narrative of HBV in 16 biographies that are at present popular in the Netherlands. We will take into account concepts such as culture, stigma, gender, ethnicity and postcolonial identity. Firstly we will provide a brief impression of HBV in a Dutch context. In the second paragraph we will look into the main questions and research methodology. Then follows an empirical exploration of the contents of the biographies followed by a paragraph on the reception and authenticity of these works. Finally, we will formulate conclusions and share points for further discussion.

HBV in the Dutch context

Different perspectives on HBV

HBV has been defined in many different ways; as a strictly cultural practice as well as purely patriarchal violence of men against women. The construct of honour is then regarded as an excuse for male perpetrators to oppress women (Welchman & Hossain, 2005). Some authors have a nuanced view and for example take into account that men too can fall victim to HBV, and argue for a human rights perspective on this violence and to prevent discriminatory practices (Meetoo & Mirza, 2011). Current Dutch policy with regard to HBV is focused on the context of families and in terms of relationships between men and women (Janssen & Sanberg, 2013). This means governmental institutions working on HBV focus on cases of family conflict and moral aspects regarding sexuality and parenthood. The Dutch police have a centre of expertise on HBV that deals with HBV cases and carries out research into the backgrounds of this sort of violence and effective policing practices. The cases treated at this centre show that honour conflicts often revolve around resisting strict (gender) rules, partner choice, sexuality and (illegitimate) pregnancies and parenthood (Janssen & Sanberg, 2010a).

At the Dutch centre of expertise on HBV, police files show that despite the fact that more women seem to suffer from HBV, there are cases with female offenders and male victims (Janssen & Sanberg, 2013). Women seldom pull the trigger, but they can put considerable pressure on their husbands or male family members to do something about a damaged family honour (Janssen & Sanberg, 2013). Honour is strongly connected to ideas about the proper behaviour of women and men. Honour conflicts often start when women misbehave according to gendered rules in the community, such as having sex before marriage (Janssen & Sanberg, 2010a). Male family members are expected to act upon this and restore the family honour. Nevertheless, men too can become victims of HBV. In cases where they are pressured to commit violence to restore the family honour, or when they have a relationship with a married woman, they can fall victim to violence from that woman's husband or family. Men can also be victimised for being openly gay if their families consider homosexuality to be a violation of honour. For more examples of male victimisation, see Thapar-Björkert (2011). Therefore, we think it is a good thing that Dutch policy on HBV defines it in a gender-neutral way (Brenninkmeijer, Geerse, & Roggeband, 2009). HBV should be understood as more than just men hurting women. Like Mohanty (1988), who argues that the equally harmful cultural practice of female genital mutilation should not exclusively be understood as male to female violence, we think the specific cultural components of HBV should be accounted for. When the focus is on men as "subjects-who-perpetrate-violence" versus women as "objects-who-defend-themselves" you will not fully grasp this particular form of violence, which means it is impossible to undertake effective action against it (Mohanty, 1988: 67).

HBV and a postcolonial feminist perspective

Most of the cases of HBV in the Dutch context can be related to the Turkish (approximately 40% of the case load of the aforementioned national centre of expertise) and Moroccan (approximately 25% of the case load) context (reference). People from these ethnic groups are descendants of migrant workers who came to the Netherlands in the 1960s and 1970s. Another, smaller ethnic group in the Netherlands for which HBV plays an important role is the Hindustani community. They originate from the Dutch former colony of Suriname. Their forebears came to Suriname from India as indentured labourers in the nineteenth century and a large number of them migrated to the Netherlands in the second half of the 20th century. During the last few years there has been an influx of honour cases in communities of refugees and their offspring from countries such as Afghanistan, Syria and Iraq as well as from countries in eastern Africa such as Somalia and Eritrea. Such migratory movements are the result of changing political dependency relationships, combined with a persistence of power structures from colonial times. A postcolonial perspective offers insight in the way these power structures still influence not only current relations between the western world and other less privileged parts of the globe, but also the treatment of migrants who come to live in western countries. Spivak (1993), Moallem (2005), Mohanty (1988) and Abu Lughod (2002), for example, have elaborated a post-colonial feminist perspective and illustrated how feminism in the western world builds on two polarised images: the stereotypical image of the emancipated, White, western woman versus the Absolute Other, the 'Third World Woman', a victim of patriarchal oppression. The image of aggressive migrant men versus oppressed, passive migrant women who need to be rescued by enlightened western saviours is reproduced in all kinds of media, policy documents, both fiction and non-fiction (Pratt Ewing, 2006). Migrant women are perceived to have no voice. In the earliest Dutch policy documents on immigrant integration, their needs are largely invisible. This changed from the 1990s when politicians criticize integration policy and attention shifts from economic to include cultural integration of immigrants. The debate is highly gendered, and implicitly views migrant men as the problem and migrant women as victims of their oppressive culture, who will obviously benefit from integration (Prins & Saharso, 2008, Ghorashi, 2010). Even though the Dutch debate on HBV includes the voices of immigrant communities through engaging their own organizations in policy responses (Korteweg & Yurdakul, 2013), the placement of women's emancipation within a nationalist discourse can lead to the stigmatisation of immigrant communities (Carbin, 2014; Ghorashi, 2010). In the last decades, following the 9/11 terrorist attacks, the subsequent war on terror (Abu Lughod, 2002; Moallem, 2005) and fuelled more recently by violence committed by IS, immigrant women find themselves in the centre of the debate on immigration and on integration of immigrants. Following Moallem (2005) the feminine Other is at center stage and she is crucial in containing the modern crisis of the nation-state by the renationalization of the states." (Moallem, 2005: 160). This central role is bestowed upon them because women are seen as the cultural signifiers and transmitters of the nation or any imagined community (Yuval-Davis, 1993) and cultural differences are often located in the domain of gender relations (Yuval-Davis & Stoezler, 2002). The focus on migrant women could be considered as beneficial to their social position but it has negative side effects. It obstructs the actual emancipation of these women because they are stigmatised as helpless victims and their families and communities as violent and oppressive (Carbin, 2014, Ghorashi, 2010, Pratt Ewing, 2006, Razack, 2004, Prins & Saharso, 2008), and they are framed as in need of outside help (Abu Lughod, 2002). "The tropes of the Muslim woman in general (...) as the ultimate victims of a timeless patriarchy defined by the barbarism of Islamic religion and in need of civilizing have become very important components of Western regimes of power and knowledge." (Moallem, 2005: 160).

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