

Historical note on the impact of conflict on women in Timor-Leste

Timor-Leste, previously known as East Timor, is a small nation state in Southeast Asia with a population of approximately 1.2 million people.¹ Timorese people have experienced a highly turbulent and often violent political past. The territory was occupied by Indonesia from 1975 until 1999 when a United Nations sponsored referendum paved the way to independence in 2002. During the 24-year occupation the Timorese were subject to widespread acts of repression including torture, extra-judicial incarceration and murders. Women experienced and rape and other forms of sexual abuse, chemical sterilization, forced marriages and the removal of children.²⁻⁴ The vote on independence in 1998 was followed by a humanitarian emergency in which pro-Indonesia militias destroyed 80% of the built infrastructure of the country, disrupting most primary health care services, and displacing the majority of the population.⁵ A fragile peace following independence was undermined by internal tensions which intensified in 2006 when warring factions destroyed infrastructure and forcibly displaced many of the residents of the Dili District, the site of the present study.⁶ The combination of conflict and under-development has resulted in high levels of poverty in Timor-Leste which remains one of the poorest nations in the world; one quarter of the population estimated to face food insecurity.¹

Widespread destruction of infrastructure and property in Timor-Leste left many families experiencing prolonged periods of financial duress. In a qualitative study, Timorese women reported that their levels of ongoing distress were strongly related to the dual responsibilities of caring for children and assuming a major role in generating household income, most commonly from labour-intensive small-scale farming.^{7,8} In addition, tensions in families have arisen in the post-conflict period for a range of reasons. There have been disputes over land and home ownership when family members have returned from exile to

find their dwellings occupied in the interim. Changes in values during the period of rapid modernization following the conflict have also led to tensions regarding traditional customs such as the payment of the bride price, adding to family conflict.^{9,10} In relation to primary health care, progress has been made in rebuilding and staffing clinics destroyed in the humanitarian emergency, but gaps in access to comprehensive services remain. This factor, and ongoing conditions of food insecurity, endemic communicable diseases and other environmental factors continue to impact adversely on the general health of women and children which in turn may influence their mental health.

Timorese society remains rooted in a traditional agrarian culture in which gender roles remain entrenched, with significant consequences for the roles, status, health, independence and opportunities (work, education) for women.¹¹ For instance, women continue to experience higher rates of malnutrition, and lower levels of literacy and numeracy, than men.¹² Women – particularly during the reproductive phase of life – also appear to experience a higher risk of many mental health disorders associated with functional impairment.¹³ These include risks of explosive anger¹⁴, trauma including post-traumatic stress disorder, generalized distress, and depression (as reported in this body of this paper). Moreover, many factors that can compound the severity of these risks are also gendered, for example, Timorese women are subject to high risk of intimate partner violence.¹³ As such, special attention is warranted to identifying and responding to the mental health of women in this age range.

- 1 National Statistics Directorate (NSD) [Timor-Leste] M of F [Timor-L. Timor-Leste Demographic and Health Survey 2009-10. Dili, Timor Leste, 2010.
- 2 Rees S. East Timorese asylum seekers in Australia - extrapolating a case for resettlement. *Aust Soc Work* 2004; **57**: 259–72.
- 3 Rees S, Silove D. Rights and advocacy in research with East Timorese asylum seekers in Australia: A comparative analysis of two studies. *J Immigr Refug Serv* 2006; **4**: 49–68.

- 4 Winters R. *Buibere: Voice of East Timorese Women*. Darwin: East Timor International Support Centre, 1999.
- 5 Zwi A, Silove D. Hearing the voices: Mental health services in East Timor. *The Lancet* 2002; **360**.
- 6 Dunn J. Genocide in East Timor. In: Totten S, Parsons W, eds. *Century of Genocide: Critical Essays and Eyewitness Accounts*. New York: Routledge, 2009: 265–295.
- 7 Goodman LA, Smyth KF, Borges AM, Singer R. When crises collide: How intimate partner violence and poverty intersect to shape women’s mental health and coping? *Trauma Violence Abuse* 2009; **10**: 306–329.
- 8 Rees S, Thorpe R, Tol W, Fonseca M, Silove D. Testing a cycle of family violence model in conflict-affected, low-income countries: a qualitative study from Timor-Leste. *Soc Sci Med* 2015; **130**: 284–91.
- 9 Rees S, Mohsin M, Tay AK, *et al*. Associations between bride price stress and intimate partner violence amongst pregnant women in Timor-Leste. *Glob Health* 2017; **13**: 66.
- 10 Rees S, Mohsin M, Tay AK, *et al*. Associations between bride price obligations and women’s anger, symptoms of mental distress, poverty, spouse and family conflict and preoccupations with injustice in conflict-affected Timor-Leste. *BMJ Glob Health* 2016; **1**: e000025.
- 11 Wigglesworth A, Niner S, Arunachalam D, dos Santos AB, Tilman M. Attitudes and perceptions of young men towards gender equality and violence in Timor-Leste. *J Int Womens Stud* 2015; **16**: 312.
- 12 United Nations. *Global Millennium Goals*. Geneva: UN, 2010.
- 13 Rees S, Silove D, Chey T, *et al*. Lifetime prevalence of gender-based violence in women and the relationship with mental disorders and psychosocial function. *JAMA* 2011; **306**: 513–21.
- 14 Rees S, Silove D, Verdial T, *et al*. Intermittent explosive disorder amongst women in conflict affected Timor-Leste: associations with human rights trauma, ongoing violence, poverty, and injustice. *PLoS One* 2013; **8**: e69207.