

War Babies: the question of national honour¹

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In his famous meditation of history, Nietzsche wrote ‘Since we are the outcome of earlier generations, we are also the outcome of their aberrations, passions and errors, and indeed of their crimes; it is not possible wholly to free oneself from this chain.’ To value history, he observed, is ‘to understand the meaning of the phrase *it was*.’ Yet the historical consciousness is complicated, he cautioned, for ‘the unhistorical and the historical are necessary in equal measure for the health of an individual, of a people, and of a culture.’ So it was that Nietzsche found value in forgetting too, for it is only when man forgets that he escapes the bonds of the past and dares to begin again, to imagine and create, ‘...to perceive as he has never perceived before.’ It is possible, he reminds us, to live without memory; all too many of us do. But it is altogether impossible to live at all without forgetting.

In these thicket of apparent paradoxes lies Bangladesh’s challenge. It must remember as best as it can both as a nation-state and as a community. Yet Bangladesh must also learn to forget. It must grasp a final irony that the freedom to forget begins in the act of remembrance.

That terrible stunning violence and then silencing curtain that plunged like a shroud around it have always just hovered at the edges of history; the story of 1971, while one of the attainment of independence, is also a gendered narrative of displacement and dispossession, of large scale and widespread violence, and of the realignment of family and national identity as people were enforced to accommodate the radically altered reality that now prevailed (Butalia, 1998; Feldman, 1999; Menon and Bhasin, 1998).

The question is how to include in history (or in official narrative) those excluded? If we collect memories of women and other subaltern group in order to contribute to the construction of a different narrative, will the 1971 story become complete? Will it be

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possible for Bangladesh finally to heal and leave the past behind? If a *new* national narrative is written will it finally lead to a collective act of forgetting?

Historically the use of rape in war as a genocide strategy that aimed at destroying the racial distinctiveness of a community is located in many other regional examples, including the Bangladesh case. Women (and their bodies) had been occupied as the medium through which men concretised the pact of violence, but, because they were not simply the things to be looted and plundered, but also subjects, they retained the memory of this rape and depredation (Menon and Bhasin, 1998). In this sense, the meaning of *Birangona* emerges through a very significant shift (but not new) as the object of, as well as the witness to violence. A complex combination of religion, culture, identity, manipulation of history and memory play a significant part in exploiting the powerless, in this instance, marginalised women. Even with women's obvious importance in the national image-making, women's exclusion from the official history is apparent. They also allegorise the necessity of a new critical approach within the gendered analysis of nation-building discourse.

With this in mind, for my research project I started my interviews, collecting stories: of *muktijodhya* (freedom-fighters), social workers, *Birangona* (rape survivors) themselves and so on. In this paper I include two of the interviews and refer to a few more. However, before moving on to the interviews let me give a brief context of the traditional norms followed by Bengalis.

Bengali women were used to traditional norms of purdah and a separate private space that isolated them from men. However, the concept of purdah was never as strict as it was in West Pakistan. Bengali women were also raised in a vibrant and rich Bengali culture that allowed them a life full of music, literature and so on. Therefore, the similarities with Pakistanis stopped in a shared religious heritage. In general, Punjabis were taller, lighter-skinned compared to darker and shorter Bengalis. This 'racial' difference added significant anguish to those Bengali women who found themselves pregnant after their physical trauma (Brownmiller, 1975: 81) as children of rapes might show different physical characteristics.

And this was a very real concern because unwanted pregnancies posed a serious crisis for the state in the aftermath of the war. Accurate statistics are not available but the general accepted figure is that 25,000 women found themselves pregnant after that war (Brownmiller, 1975: 84). In a country like Bangladesh where virginity is the ‘virtue of chaste women’, the issue of rape sparked the whole debate of honour, shame and pollution. Prime Minister Sheikh Mujibur Rahman in public meetings repeatedly called the *Birangona* women his daughters and asked the nation to welcome them back into the community and the family. However, at the same time, he also declared that ‘none of the *bastard* (my emphasis) babies, who carry the blood of the Pakistanis will be allowed to remain in Bangladesh’ (ASK interview, 1997, unpublished; D’Costa, interview, 1999). The First Five-Year Plan² of the country identified women’s needs only in terms of motherhood (Jahan, 1995: 95). The Bangladeshi State, which controlled women’s motherhood strongly assumed a paternal role and encouraged the women to have abortion. Babies were graphic reminders of how national events took shape over through the bodies of women. In 1972, the New York Times reported:

Bangladesh government, at instigation of US social workers, is setting up a legal machinery for international adoption of child victims of occupation and war, including unwanted offspring of women raped by Pakistani soldiers; This step is considered a significant precedent in Bangladesh, where adoption of children by strangers is an unknown concept; International Social Service American Branch General Director W C Klein says the service has suggested adoption as an alternative to prevailing practice of abortion, infanticide and selling of unwanted children to beggars, who use them to elicit sympathy (*The New York Times*, May 29, 1972).

International Planned Parenthood, International Abortion Research and Training Center, and other local clinics through state-sponsored programs helped women to have abortions. International Planned Parenthood set up clinics with the help of the newly created Bangladesh Central Organisation for Women’s Rehabilitation in Dhaka and seventeen outlying areas to cope with unwanted pregnancies. Although in his interview with me he was unable to remember the figure, Dr. Davis was cited earlier as remarking that nearly five

² GoB’s Five Year Plans provide the longer term policy framework and guidelines on national economic development, which is then reflected in the Annual Development Programs (ADP) as well as in the revenue budget.

thousand women had managed to abort their babies by various medically unsafe methods (Brownmiller, 1975: 84).

The Catholic Convent of Mother Teresa, in Calcutta offered shelter for the unwanted babies from women who were willing to give them up (D'Costa, interview, 1999). The women's families in many cases also discouraged them to keep the babies. Some families with money were able to send their daughters secretly to Calcutta, India to have abortion (D'Costa, interviews, 1999, 2002).

Ibrahim mentioned that the rehabilitation center's first policy was of abortion. With a secondary policy of the government deciding the fate of the 'bastard children' (ASK interview, unpublished, 1997). She said,

We decided that if any of the foreign countries offered to take the babies, we'd give them up for adoption...Many girls cried and didn't want to give their babies away. We even had to use sedatives to make the women sleep and then take the babies...

One girl was only fourteen. Therefore, her opinion was...A bit more older women realised that there will be no space to take the babies. But the teenagers were very emotional...(ASK interview, unpublished, 1997).

Ibrahim's recounts highlighted that women were not provided with any choice about the future of the babies. The social workers involved obviously wanted to help women, but at the end the trauma and distress suffered by the women were virtually ignored as the 'purity' of the state was the highest priority. Maleka Khan, who worked with the women confirmed that in the aftermath of the war, the government responded in two. First, abortion and second, the enactment of adoption laws. However, she could not give any figures of how many women had undergone abortion or how many gave up their babies for adoption (ASK interview, unpublished, 1997).

Ibrahim mentioned that the Mullahs (the Muslim Clerics) initially protested the adoption policies because the babies were being sent to Christian countries of the west (ASK interview, unpublished, 1997; D'Costa, interview, 1999).

While talking about women's rejection by their families, Khan noted,

For example, there was this girl who gave birth. She said before the delivery that she wanted to give her baby for adoption. However, when the time came she had been crying so much! No one offered to help...no one said 'let us take care of the baby and the mother'. I have not seen any such thing! (ASK interview, unpublished, 1997)

While discussing her interview with Tara, Ibrahim mentioned one significant issue. When she met Mujib about the fate of the war babies, he said,

No Apa (a respectful term meaning sister). Please send away the children who do not have their father's identity. They should be raised as human beings with honor. Besides, I do not want to keep those *polluted* (my emphasis) blood in this country (Ibrahim, 1998: 18).

As mentioned earlier, Dr. Geoffrey Davis visited Bangladesh in 1972 to help the women survivors. That year, a Bengali daily³ published a detailed report on his work. The report mentioned that in his opinion a large number of the survivors would never be able to have children. He further suggested that before the official abortion program had started most of the survivors had abortions with the assistance of the local/village dai (midwives) or untrained local doctors. According to him, almost 150,000 to 170,000 women had abortions before the abortion program was started by the government. He accused the government of providing wrong information concerning the number of women subjected to sexual violence during nine months of army operation. There were 480 thanas (local administrative sectors in East Pakistan, now Bangladesh). During his interview with me, Dr. Davis reiterated the lack of proper documentation. However, he also pointed out that involved social workers and government officials were genuinely concerned for the well-being of the women.

Respondent A was heavily involved in the adoption program of the Bangladesh government at that time. She lives in Calcutta, India and in the aftermath of the war worked closely with Mother Teresa. At the end of December 1971, Mother Teresa visited some of the rape camps in Bangladesh. My respondent says, 'She [Mother Teresa] didn't find any girls there. Only their hair, petticoat and some other things. Their hair was cut because they [Pakistani army] were afraid that they'd commit suicide...' (D'Costa, interview, 1999). These are the respondent's words. What she is suggesting here needs some explanation for the readers. Bengali women have quite long hair and some of them attempted to commit suicide by tying their hair to the ceiling fan while in the rape camps. My respondent indicated to the forced impregnation of the women restrained in the camps but did not wish to elaborate on the topic.

Respondent A went to Bangladesh on the request of Mother Teresa on January 21, 1972. She arranged for the adoption of war-babies. Most of these babies were adopted by families in Canada, though some were also sent to France and Sweden. She remembered

³ The Daily Bangla. February 16, 1972.

one of the girls, ‘...this one girl, whose father was an engineer, she was quite a pretty girl. Her baby went for adoption’ (D’Costa, interview, 1999). She suggested:

I have a feeling that babies of Pak[Pakistani] army were all aborted in different clinics. Otherwise parents could not take these women home. And they wouldn’t tell anybody who was violated, who was not. When they realised their daughter was pregnant they quickly got her aborted. So, it was not so very open thing (D’Costa, interview, 1999).

It would appear from her statement that norms of honour in the orders of family and state were mutually supportive. However, I argue that by creating a new term ‘war-babies’ the state brought women under its authoritarian powers. There was an alliance forged between social workers and medical professionals with the state in its patriarchal role.

In her previous conversation with me she casually told me about a particular rape camp that was administered in Dhaka Cantonment area. When I asked her during the official interview about more information on the camp, she informed me that she had not seen the camp herself but heard the description from Mother Teresa. She said,

We went with big noise that we’d work with girls who have been violated by the Pak army but when we actually arrived we found almost no one. But we did find lots of babies. A lot of children have been adopted. We have records in Dhaka.

We asked the nursing homes when the babies are aborted, or born, do not throw them in the dustbin. Bring them to us if they are alive. They didn’t care. They were interested in the mothers only. Babies were put into the dustbin (D’Costa, interview, 1999).

This contradicts Dr. Davis’ statement. He denied respondent A’s allegation and claimed that babies were never thrown out under any circumstances (D’Costa, interview, 2002).

Both Dr. Davis and Respondent A however stated that women from the very beginning were silent about their trauma and ordeal. Both justified it as ‘natural’ response of the timid and shy Bengali women to be silent on such experiences of shame and dishonour. I asked Respondent A if any of the women she encountered herself have spoken of the actual rape. She answered,

No. And we also didn’t ask. There was a wound. We tried to rehabilitate them, tried to accept the situation they were in. And we’d never write names, neither address. Stigma would remain if people knew (D’Costa, interview, 1999).

Dr. Davis recalled:

No, no body wanted to talk about it. You could ask questions and get an answer. Quite often it would be that they couldn't remember. And the men didn't want to talk about it at all! Because according to them the women had been *defiled* (my emphasis). And women's status in Bangladesh was pretty low anyway. If they had been defiled they had no status at all. They might as well be dead. And men killed them. I couldn't believe it. That is so alien to a western society! It's so alien! (D'Costa, interview, 2002).

We clearly witness here the alliance of the state with social work. This alliance silenced the survivors with an abstract concern for just response but a very real interest of maintaining the nation-state's honour. From the interviews, I can trace a coercive practice of the Bangladeshi state that was most evident in the case of war babies. They were 'undesirable' to the family, through the practices of the state. The state did not embrace the children as its citizens who have rights but rather insisted that they were not absorbed by the families. In this sense, neither the women nor the babies were protected by the state.

Nationalist interpretations of rape and forced impregnation of women saw these experiences as being less about women themselves than about the challenge to Bengali nationalist and masculine identity. In addition, while in the Pakistani context 'purity' meant creating a 'proper' Muslim identity that would fit the Muslim Pakistani imagination, in the context of Bangladesh, it meant 'purging' the state of the Pakistani blood. Children were vivid reminders of the attack on a 'pure' Bengali identity. Therefore, the Bangladeshi state responded to the issue of wartime pregnancy in the way it perceived it to be legitimate. The state exercised its authority on women's body and maternal role through abortion and adoption programs. Women's need was insignificant in this nationalist construction of identity. Clinics, international adoption agencies and religious organisations acted as surface mechanisms for the state. The power of the state often also acted against the wishes of the women, thereby making them victims for a second time which was evident from both Khan and Ibrahim's interviews. As far as Bangladesh was concerned the task of flushing out Pakistani 'impure' blood was necessary in terms of the honour of the new nation.

