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The Uses and Abuses of Culture:
Cultural Competence in Post-mass Crime Peacebuilding
in Cambodia

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This chapter examines the impact of mass crimes on social, cultural and spiritual connectedness in post-conflict Cambodia and suggests some ways to assist peacebuilding efforts to be culturally responsive. I want to set the scene for comparison with other settings of violent conflict and the transformation of social capital, such as Rwanda, Guatemala, and Somalia, and post-conflict peacebuilding and nation-building I suggest that Cambodia's rich religious and cultural traditions are at the same time victims of the war and offer some solutions to the consequences of war. I look at the ways in which the Khmer Rouge turned their insights into language and culture to more sinister ends. I ask whether traditional healers, with their "insider" view into the cause and cure of post-conflict illness and suffering, are being heeded and given a chance to assist in post-war rehabilitation. Traditional healers could perhaps function as human rights workers in post-conflict situations - helping to

alleviate pain and restore moral order and, as keen students of culture and mind, giving meaning to trauma and thus attending to both community and individual healing as Cambodia's situation demands.

The chapters in this book show how an understanding of the local forms and cultural logic are needed in order to respond to the needs of survivors of mass crimes. This chapter responds to this need by suggesting a framework to ensure that post conflict programs are culturally competent and a new field is opening up to provide the necessary evidence base, namely "cultural competence in international health." The chapter echoes a message put forward in the chapter in this volume by Roberto Beneduce, psychiatrist and medical anthropologist, where he challenges the hegemony of Western medical diagnoses such as "trauma" and Post-Traumatic Stress Disorder (PTSD) commonly applied by mental health workers in post-conflict settings. A survey of medical anthropology and public policy documents cast in post-conflict settings also point increasingly to the need for understanding the context of people's lives. Some governments already support pre-departure intercultural effectiveness training that hints at cultural competence for their development advisors, but in resource-poor countries themselves the concept of cultural competence in health care is generally unrecognized.

The chapter begins with an overview of the events in Cambodia surrounding the genocide during the Khmer Rouge regime, marked by the disconnection and destruction of many elements of traditional culture. By drawing upon the examples of their transformation of traditional language and the way they labelled people, I argue that the Khmer Rouge leadership used their mastery and understanding of the culture

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to manipulate and use it against itself. This is followed by an account of the fresh onslaughts on Cambodian culture brought in the 1980s during the post-Khmer Rouge decade, and continued during the 1990s with the outbreak of peace and the ravages of the Cambodian epidemic of HIV/AIDS as well as an upsurge in seemingly new forms of violence in domestic life. The chapter then analyses efforts at reconnection and reconstruction through the eyes of the traditional healers and Buddhist monks as they draw upon Buddhist and folk legends and traditional rituals in efforts to seek both to explain the suffering and violence and to offer solutions to it.

Method

The work reported in this chapter comes from clinical ethnography and arises from a finding in this book that ethnographic micro-level research is needed to make sense of the past in order to move on and rebuild the future. The method also gives voice to another theme of this book, that a transdisciplinary and holistic approach is needed in order to capture the many dimensions of the lives of the survivors of mass crime. In 1989 I was the first psychiatrist invited to visit Cambodia after the fall of the Khmer Rouge regime. I apprenticed myself to a traditional healer and became exposed to the general vocabulary of traditional healing, its pharmacopoeia and its codes of conduct. I started to meet a range of other healers. I observed the match, or mismatch, between what people believed caused domestic and community conflict, violence and suffering, and what they did about it – who they blamed within or outside their family, neighbourhood and world of spirits, who they sought in the local network for help, and what was the outcome of the various solutions offered. I traced the

terminologies and taxonomies of illness. I documented the methods used by monks, for example, as they focused on advice, calming anxieties, and encouraging acceptance. I detailed the ritual diagnostic and treatment methods of the *kruu*, the trained “vocational” healers, as they provided medication and magical rituals to help rid people of spells and spirits and, through the public performance of the ritual, to reintegrate the person into the local community. I sometimes participated in the ceremonies as mediums, mostly women, interceded with ancestors and in this way acted as re-moralizing counsellors for the women who could not face their future. I documented examples of structural violence, both the current manifestations and also some of the deeper cultural roots. And I listened as the traditional birth attendants helped families through the difficulties around childbirth and the puerperium that were compounded by the post-war poverty. In the sixteen years up to 2005, 1,211 healers and their communities were documented.

The chapters in this book exemplify the fact that culture is not static, not to be romanticized as an idyllic world to be restored post-conflict. A keystone to the method reported in this chapter is that the work is idiographic, with repeated observations over a decade and a half spanning the key political, psychological and cultural transformations of the society in the civil war and then emerging from it. Over the years I have continued to visit, witnessing the social and political constraints on the practice of traditional healing under the Khmer Rouge at first hand in one of their final strongholds at O Bai Tap. On subsequent visits during the 1990s I saw the attempts of traditional healers to adapt their explanatory models of disease, vocabulary and rituals to the “strange” new scourge of AIDS and to the new and dramatic incarnations of social violence. In various complementary institutional roles

in Cambodia (academic, government advisor, consultant to international organizations, co-designer of the Cambodian mental health program of the Transcultural Psychosocial Organization, and director of a research project at the Buddhist Institute) I have heard concerns expressed about the inadequacies of the helping professions to handle the new social disorders among the young, but also noted Buddhism's capacity to adapt to new social contexts and witnessed the success of culturally competent community health projects. A brief history of events follows to show what individuals and communities in Cambodia are struggling to comprehend.

Overview of events

R. J. Rummel has estimated that one 169 million people have been killed by their own governments during the twentieth century.¹ Witness Cambodia. Its history unfolds as a mosaic of picturesque peasant life and colourful ceremony and horrendous civil conflict and violence played out against cycles of international good intention and neglect. The most recent round of conflict began towards the end of the 1960s when the Vietnam war and internal power abuse drove the country into a civil war that produced heavy casualties and dislocation, but it was during the subsequent rule of the infamous Khmer Rouge from 1975-79 that violence took on the unprecedented dimensions termed by some the "Cambodian holocaust." Of those who died, 40 percent were executed and 36 percent starved to death. Very few casualties occurred on the battlefield. A third of the executed were city dwellers, the "new people" whose ways were earmarked for eradication by the Khmer Rouge in a radical social

engineering experiment aimed at restoring the country to a largely imaginary bygone pastoral ideal.

In what Henri Locard has termed a cultural ethnocide, the Khmer Rouge were at war with the attitude of the citizens rather than their race or nationality.² They attempted a complete remold of Cambodian society, disrupting every aspect of daily life. Monks were defrocked, cities emptied, and villages renamed. Ritual life was halted, Buddhism outlawed, and family life remodelled. The city dwellers were driven into the countryside and forced to share every aspect of life with the rural peasants. No escape was possible. Although Khmer Rouge executioners drew upon certain traditional codes of honour, many customary practices such as those associated with healing were banned. Traditional healers (they include the vocational *kruu*, Buddhist monks, mediums and traditional birth attendants) stood in the way of fundamentalist Stalinist and Maoist communism. They lost access to their important palm leaf manuscripts, which were burned if discovered. The one aspect of traditional healing retained was herbal medicine, such as tree bark for treatment of malaria. This was consistent with Khmer Rouge doctrine – no Western medicine, no superstitious magic, just use of natural resources such as plants for treatment.

After three years, eight months and twenty days of Khmer Rouge rule – all Cambodians can quote these figures – the traditionally reviled Vietnamese “liberated” Cambodia. The surviving population remained scattered over the countryside and in refugee camps and re-education centres and forced conscription continued as low intensity warfare smouldered on even after the brokered peace of 1991. Villages had “two faces” with government control by day and Khmer Rouge insurgency by night. The end of the Khmer Rouge regime had not put an end to the terror.

In 1992 the United Nations peace operations arrived to prepare the way for democratic elections. One and a half million Cambodians were repatriated after long exile in the Thai border camps and elections did eventuate. However, “normal” Khmer life continued to elude and the United Nations came to be seen by some as just another corrupting foreign presence. Notions of what constituted “Khmerness” were changing as Cambodians, struggling to heal, re-identified themselves using traditional forms in new ways. Into this post-war state of flux marched the Voice of Prophecy Bible Correspondence School, the new scourge of AIDS, further rounds of conflict as Khmer Rouge strongholds persisted and the elected coalition government blew apart, and a new and devastating outbreak of social violence. The latter has continued into the new millennium despite the period of relative political calm and reconstruction efforts since Pol Pot’s death in 1998. Against the sheer economic hardship that sees one third of Cambodians still under the basic poverty line, three major scourges hinder peacebuilding: the mental and spiritual consequences of the Khmer Rouge cultural ethnocide and subsequent further threats to tradition, the epidemic of infectious diseases, most notably AIDS, and the new incarnations of social upheaval that have marked the coming of age of youth born in the wake of the Khmer Rouge.

Disconnection and destruction

Perverting the culture with the Khmer Rouge – the late 1970s

With the fall of the Pol Pot regime in 1979 the surviving three-quarters of the population were scattered around the countryside or taking refuge in camps along the

Thai border where they remained until repatriation by the United Nations task force in the early 1990s. Some idea of the kinds of the trauma they had experienced began to emerge from relief workers based in the refugee camps and later through Western-trained physicians dispatched to Cambodia to re-establish basic mental health services. What was described amounted to what Alexander Hinton succinctly describes as the “Cambodian semiotics of violence.”³

Perhaps more insidious than if they had broken cleanly with tradition, Khmer Rouge cadres selectively leaned on tradition in their attempts to get their political ideology to “stick.” Part of this manipulation was a reconstruction of Cambodian explanatory models of illness and healer language to reflect fundamentalist ideas. For example, purges by execution echoed the ritual ejection of harmful elements that formed part of many traditional healing rites. Healers had traditionally distinguished between threats coming from outside and those from within. For the Khmer Rouge the external threat was foreign influence and modernity, and the internal one was the corrupted mentality of the Cambodians themselves who had been rendered indolent by Buddhism and immoral by exposure to Western influence. In order to eliminate this corruption, the Khmer Rouge set out to reconstruct the Cambodian mentality. Cadres would address an individual or a commune meeting with the phrase: “To be out of words to reconstruct [brainwash] you, to knock you off with the back of the axe head.” This translated as “Words have failed to do the job of reconstructing you so it is time to reconstruct you another way – by death.” The last phrase was a macabre play on words, the syllables being a rearrangement of words for “the back of the axe.”

Another example of Khmer Rouge manipulation that borrowed from traditional healing was the sinister diagnosis of a psychological condition described in

the old manuals as “thinking too much madness.” It was a term used to describe stress, loss, bereavement, social and economic deprivation and family disruption, all of which were believed to provoke mental hyperactivity resulting in slow destruction of the mind. For the Khmer Rouge the tag became an excuse to sentence workers to death. Those who were slacking at their toil, ill with malaria, hunger or feelings of loss, were said to have thinking too much madness and in being so labelled had taken their first step to execution. As a result of how the term was used to sentence workers to death, many Cambodians now avoid it or deny that it existed before Pol Pot, but the healers point to their ancient manuscripts where its diagnosis and treatment are fully detailed.

Thinking too much madness is interesting from the psychiatric point of view. Relief workers familiar with Cambodian refugees in the 1980s were so accustomed to hearing of the complaint called “thinking too much” that they were moved to label it “the Cambodian sickness.” “Thinking too much” has been interpreted as an idiom of Post Traumatic Stress Disorder and an expression of “cultural bereavement.” The syndrome continued to be found among former refugees for years after their resettlement, and was linked not only to the trauma of the Khmer Rouge regime, but also to their recollection (perhaps an example of “false memory”) of golden pre-revolutionary years. A similar condition to thinking too much, called “brain fag” syndrome or “overworking the head,” has been described among Ethiopian refugees in Israel.

Yet another example of manipulation of traditional healer language is found in the Khmer Rouge adaptation of the Pali term *selathoa*. It was originally used for the one hour a week of morality instruction in primary schools. The Khmer Rouge added

the prefix “wrong” to create the phrase “wrong morality” (*khooc selathoa*) and used it specifically to accuse the “new people,” meaning the bourgeois city dwellers, of having sex outside marriage. Use of the term came full circle when one young healer I spoke to after the fall of Pol Pot blamed a condition traditionally called ancestral madness, on moral misbehaviour in families (*pañhaa selathoa*). As a young teenager, he had worked in the Khmer Rouge Mobile Teams and incorporated their vocabulary.

Khmer Rouge mind games associated with traditional healing were the ones that I was most exposed to because of my ethnographic work with healers and my role in establishing community health programs, but they were by no means limited to this. One can witness their habit of replacing the old place names of districts and streets in an attempt to sever people’s association with their place of origin. Henri Locard notes that Communist exhortations were wrapped up in ancient Hindu myths and brutal Maoist-inspired formulas paraded as inverted Buddhist aphorisms in the revolutionary slogans that poured out of the Khmer Rouge propaganda machine.⁴ My informants described the use of the old Buddhist term “*pa?decca?sa?mopbaat*” when an official wanted to convey to the ordinary people that the regime had its “high” reasons for doing what it did, all the time in fact explaining nothing. *Pa?decca?sa?mopbaat* is a Pali-derived term for an inevitable result arising from an antecedent cause; the chain of causation is a well-known Buddhist formula which sums up, with tragic irony in the case of Khmer Rouge usage, the causes of suffering.

Thus did the Khmer Rouge create a logic for their killing crafted from their own culture and in doing so, they successfully unhinged a society.

Cambodia had long been a distinctly Theravadin Buddhist society and missionaries had noted the indifference of the people to their message. Now, in the aftermath of the civil war, there was a renewed crusade for the hearts and minds of Cambodian survivors. A series of 25 pamphlets was printed in easy-to-read Khmer by the Voice of Prophecy Bible Correspondence School. The pamphlets seemed to offer a more dazzling salvation than Buddhism. The appeal of the message was that a Cambodian survivor's rebirth is a simple matter of cutting loose from the past. The other attraction of this new religion was that Cambodians clutching fresh baptismal certificates were possibly going to please the foreign immigration interviewers and boost their chances of getting away.

One particularly poignant assault on the vulnerable was that of Mike Evans, *head* of Mike Evans Ministries Inc., a Euless, Texas-based group that organizes Christian crusades in developing countries and the "God Bless Cambodia" crusade. This group arrived in the Cambodian capital in November 1994, promising that the blind would see and the lame would walk. The poor from all over the country sold all they had to pay for the trip to Phnom Penh. Hoping for a miracle to restore the legs of their amputee relatives, they carried them to the stadium. I witnessed these disabled villagers hobbling up the stadium steps and a little later when the miracle failed to happen, the dismayed masses.

Western-style health messages have further undermined traditional healing beliefs. Apart from Christian missionary drives, post-Pol Pot traditional healers find themselves competing with government health education campaigns promoting new scientific ways to replace folk practices. During the Heng Samrin regime, World

Vision International, with the co-operation of the Cambodian Ministry of Health, produced a series of health education pamphlets in easy-to-read Khmer. One was entitled “Some Traditional Beliefs to be Discarded.” This “health education” continued the work of the Khmer Rouge in undercutting the cultural messages of the healers – its aim was to “reconstruct” young mothers by making them ashamed of the traditional code of conduct taught to them by their mothers. Its artfulness lay in its mode of presentation i.e. it was presented in the old garb and contributed to the women’s sense that their past was worthless and that they should not “feed” it to their infants.

Today there are dozens of Evangelical groups in Cambodia claiming to represent the one true God and tantalizing the confused masses with the promise of a quick fix, namely immediate rebirth in place of Buddhism’s extended cycle of reincarnation. In two weekends early in 2003, nearly 800 people were baptized. When Khmer villagers hear them, some are tempted to conclude that Buddhism is the cause of their misery. However, adopting Christianity does not spare them either for if they misbehave after conversion the missionaries blame their Buddhist backgrounds for their crime – an unwitting echo that feeds into the unconscious memories of similar accusations levelled by the Khmer Rouge. The Ministry of Cult and Religion laments the negative impact of such visitors and finally has banned Christian groups from door-to-door witnessing and handing out tracts.

As for the traditional healers, far from being given the chance to function as human rights workers, they were abused during the war, persecuted during the Vietnamese occupation, and squandered in the wake of post-conflict modernization. During the current post-conflict phase, non-governmental organizations have engaged

only a part of the healing sector, mainly the monks, and even they have been used only as counsellors and not given the chance to strengthen the “cultural competence” of peacebuilding programs. The government line on traditional healers has been one of derision. The healers are blamed for spreading superstition and accused of propagating false beliefs about AIDS and of causing ecological damage as they harvest forest ingredients for traditional medicines.

The new scourge of AIDS – the late 1990s and the new millennium

AIDS was first identified in Cambodia in 1991. AIDS-related diseases have killed about 90,000 people in this country of 12.5 million and a further 160,000 people are currently believed to be infected. Less than 500 AIDS patients receive free treatment from the government. News articles over the years depict AIDS as Cambodia’s new killing fields, a view echoed by Im Sethy, Secretary of State for Education and by UNFPA Goodwill Ambassador Chea Samnang.

The metaphor linking AIDS to the Khmer Rouge killing fields picks up on some interesting parallels. For the Khmer Rouge, Cambodians had an enemy in their midst, it came from the outside and corrupted the population, who then needed to be saved from themselves. Popular explanations of AIDS reflect various versions of a very similar scenario, including the explanation offered by Khmer Rouge cadres themselves. Members of a Khmer Rouge breakaway group at O Bai Tap in the North-western regions near Anlong Veng told me when I visited in mid-1998, that they had never seen or heard of AIDS and upon learning of the new scourge felt further justified in their isolation and self-reliance. Khmer Rouge ideology was reflecting

long held beliefs about foreigners bringing pestilence. Before 1975, health workers called sexually transmitted infections (STI) “illness of sexual desire,” from the formal Buddhist term. During the Khmer Rouge period, the cadres forced the use of the politically correct term “illness of the community” in which the word for community implied immorality associated with the corrupt Sihanouk and Lon Nol eras. All health problems tended to be seen by the Khmer Rouge in similar judgmental terms. After all, they had been separated from the world for up to 30 years. But as their strongholds fell there were increased fears of contact with the Khmer mainstream and the STI they assumed the latter would carry from Vietnamese prostitutes. The Vietnamese, and especially their beguiling women, had always been considered a peril to the nation. This thousand-year loathing and fear of contamination was given a new voice by the Khmer Rouge, who now saw the Vietnamese as corrupted seductresses bearing the AIDS chalice. The Khmer Rouge enclaves in the 1990s had maintained the xenophobia, which had fuelled the mass crime of the 1970s and applied now to the scourge of AIDS.

It was these beliefs that surfaced yet again across Cambodia in the explanations of the origin of AIDS offered by the healers who had returned to their profession in the post-conflict era. The healers were reflecting the popular view that AIDS had arrived in Cambodia with the United Nations task force (UNTAC) in 1992. The following are some healer variations on the foreign contaminant theme.

Some healers believed AIDS had been created when an African man mated with an ape which one healer identified as “King Kong.” (“Africa” for village Cambodians signified a land where the unfortunate inhabitants had black skin.) The African spread the disease and eventually it arrived in Cambodia. In another version,

a woman was seeking refuge in the Cambodian forest when she was overwhelmed by a group of virile apes and forced to have multiple sex with their chief. One day she managed to escape and, some time later, learned that she had AIDS. She ran to the USA, and through her it spread all over the world. In this account a woman rather than a man is the first human to get AIDS, and the woman exports rather than imports the disease. One female medium believed that it was prostitutes' usage of a female version of Viagra, which they took to fortify themselves for their many clients, which had created AIDS. In this version the medicine was "the foreigner," it being imported from Thailand.

The healers felt that Cambodians, impoverished and malnourished, were particularly vulnerable to AIDS even though some considered the Cambodian strain of the virus less virulent. A female traditional healer expressed it like this. Cambodians were too poor to eat proper meals. In France and the United States people accessed more meat and were stronger so the virus that knocked them down must also be stronger. Her logic was that the medicine they needed had to be stronger too and that the AIDS strain in Cambodia was easier to treat. Few healers acknowledged that pre-revolutionary Cambodia had prostitutes, although any older healer was adept at treating syphilis, which was widely documented in the old palm leaf healing manuscripts. In 1990 a former Khmer Rouge cadre had shown me the houses where pre-UNTAC prostitutes plied their trade. They were, he said, "under control, and submitting to regular health tests."

A few healers showed reluctance to blame UNTAC soldiers for the arrival of AIDS and pointed out that AIDS had affected every country. Some put the blame on Vietnamese and Thai prostitutes for infecting UNTAC soldiers. But more commonly,

as referred to above, AIDS explanations revealed a deep-seated Cambodian prejudice against outsiders and a prejudice against those with dark skin. It was not unusual to hear that it was the black UNTAC soldiers who brought AIDS to Cambodia. In another xenophobic allusion, it was suggested that the AIDS germ had first been concentrated in the brains of affected monkeys that ate fruit grown on contaminated soil. Foreigners – Japanese, English, American and Australian – ate the monkey brain and, in this way, the germ crossed to humans and entered their blood stream. The UNTAC soldiers transferred it to Cambodian prostitutes and so it passed to Cambodian men. Such allusions suggest that perhaps the Khmer Rouge mass crime tapped some deep-seated xenophobia, which became turned upon itself. One might suggest a direct connection with the genocide, not just a general desire to blame outside influence.

Lyttleton observes that the Thai HIV/AIDS campaign has practiced similar politics of distancing and stigma as campaigns elsewhere, but in Thailand the feared other is very much the prostitute rather than the homosexual community or injecting drug users. I have observed the same in Cambodia where the men depict the Vietnamese prostitutes as eagerly patronized and also reviled as archfiends bearing the HIV virus. (Cambodians traditionally also tend to blame malaria on “others in their midst.” “Others” originally referred to the autochthonous hill tribe, the Phnong. With the outbreak of civil war in the 1970s “others” came to mean a foreign substance, such as ammunition fumes.)

None of this is to suggest that AIDS is a second killing field, but strong themes link the two - the people were vulnerable, there was an enemy in their midst, it came from the outside, and the people needed to be saved from themselves.

The upsurge of social violence and terror – the late 1990s and the new millennium

One might have thought that the end of the long civil war, the receding memory of the Khmer Rouge nightmare, greater economic stability and the birth of a new generation would bring about a reduction in community violence. Indeed, non-governmental organizations working in Cambodia remarked that this generally appeared to be so until the mid-1990s. Until then the Government wielded strong control, directing foreigners to designated places to sleep, placing prostitutes into re-education, regulating citizen movement and ritualizing public venting of anger against the reign of terror through the institution each 20 May of a National Hate Day.

The first turning point came in 1992 when politicians, wanting to gain popularity for impending elections, relaxed some of the rules. Then a market economy began to emerge and furthered the explosion of personal freedoms leading to the first concerns that people had forgotten how to behave. National Hate Day was disestablished and high schools reduced their history of the Khmer Rouge era to a mere five lines so that, in the words of Henri Locard: “The younger generations do not know what really happened, and the older know but do not understand.”⁵ In this way, the youth were born and raised in the absence of an explicit narrative of their country’s trauma, a vacuum that more violence seemed destined to fill.

In the early days after the fall of Pol Pot’s regime in 1979 some demobilized soldiers took to banditry and the odd motorcycle went missing but, after the “complete” outbreak of peace with the collapse of the final Khmer Rouge resistance in 1998, social violence escalated dramatically. The daily newspapers are now filled

with detailed catalogues of the day's violence – domestic violence, gang rapes, incest, robbery and murder. People began to ask why, and the stereotypic response was that “it was the Khmer Rouge.” One way to grasp the flavour of this violence, and the way it is generally perceived by the community, is to quote from local newspaper articles. This is not to claim that the reports are balanced or accurate, but simply that they portray the sort of awareness ordinary people have about the social violence around them.

Domestic violence

It is estimated that one in four women in Cambodia is a victim of domestic violence. The Department of Sexual Trafficking and Violence states that between 2000-2001, alcohol was the cause of 33 percent of the cases of domestic violence. Other causes of violence were adultery (33 percent), gambling (16 percent), and poverty (18 percent).⁶ According to the Kampuchea Thmey,

“A 34 year old man has beaten his family. The wife had a younger sister and had told her husband the sister would be going off to the Thai border to seek work as a green bean picker, but the husband told his wife to tell her sister not to leave. The wife became furious and told him to tell her himself. At this, the husband became enraged, took a one-meter rod and beat his wife. The sister came to help her, but got beaten as well. Then the wife's father came, and he too was beaten. When he had finished beating them the man was not yet satisfied and

burned the house. The neighbours extinguished the fire, with about a quarter of the house gone. Then the wife called the police who arrested him.”⁷

Women hurting women

There are growing reports of spurned women on the offensive against husbands and rivals. According to a report in the *Koh Santepheap Daily*,

“The victim was a Vietnamese sex worker. The perpetrator’s husband was in love with the prostitute and rented a house for her. When his wife discovered this, she and her aunt grabbed the victim, and the aunt kept her still while the wife slashed her face with a razor. The screaming of the victim attracted bystanders who immediately restrained the woman and her aunt and called the police.”⁸

Rape

Another report in the *Koh Santepheap Daily* offers the following account:

“The man bound the woman by her neck, hands and feet. This is an action of the kind that Dharani would pull the person into the waters and into Hell, and as if the man had excrement on his hands. Normally people rape very young girls, but now they are raping the elderly as

well. This woman was almost blind, crippled, impoverished. Her daughter was a widow, and called another elderly widow aged 73 years to come to her house and take her of her. The murderer broke into the house and said that he wanted to rape the 73 year old. He grabbed her and she told him she'd rather be killed than raped. He let her go and she ran away and hid behind a cashew tree near the house. She heard the older woman screaming for help. The perpetrator had stuffed his underpants into her mouth to stifle her cries. The woman's legs had been broken and her face bitten. She had been strangled. The killer was a 35-year man who lived in the same village as the victim. He had separated from his wife where they used to live in Kampot province. In this district, in the last couple of months six people had been killed, including rape of a child, and a son murdering his father.”⁹

Pedophilia and sexual abuse

In Nelson and Zimmerman's study of battered wives, more than half stated that their children also were beaten. In a further survey, 16 percent of women were battered and a large percentage stated that their husbands hit the children.¹⁰ Given that girls who have endured sexual abuse and family violence including domestic violence have been found in Cambodia to be prone to move into prostitution, there are long-term effects over the horizon.

“Three young boys aged from 11 to 14 years old were arrested for having raped a 5-year-old girl at noon in Banteay Meanchey district. The eleven-year-old is the brother of the victim, and initiated the action by persuading his friends. Their mother said that the three confessed that they had just viewed a sex video. She realized only when she saw the bloodstain on her daughter’s skirt and her son told her the truth. She sued and asked the police to take action according to the law. The 14-year-old boy also told the police that when he had lived in the provincial capital he had persuaded his immediate younger sister, then five years old, to have sex with him and when his family moved to this village, he had sex with another little girl. Altogether he had raped three girls. The police confirmed that the root cause of the problem was that a military official had played sex videos at his house and had allowed a big group of boys to watch, arousing them to rape the girls.”¹¹

Rape committed by children is increasingly common. Many people blame the Khmer Rouge for having caused so many young people to be raised with impunity. Mu Sochua, the Minister of Women’s Affairs, came under attack when she recently commented that the prevalence of gang rape and sexual abuse should not be blamed on the Khmer Rouge. Yet, others point to the easy access to pornographic videos. A monk told us the folk expression for incest “the younger brother takes the mother, the older brother takes the child.”

Murder of a parent

A 35-year-old fisherman took a cleaver to kill his mother. He had demanded \$200 eight times from his mother, but she was 69 years old and had no means to meet his demands. One day he brought 8 liters of gasoline and threatened to burn her house down. When the police arrested him, he confessed that he needed money and he believed it was no use threatening to kill someone else because they would report him and he would be thrown into prison, but if he threatened his own mother she wouldn't call the police."¹²

In relation to this type of crime a monk explained that alcohol and drug abuse had damaged the body elements within the brain that formed the basis of the mind and the normal innate abhorrence of incest and violence within the family had been weakened by this abuse. This leads into my next theme, which has to do with suggestions for strengthening the cultural competence of international peacebuilding initiatives that I launch with a recommendation that traditional healers be allowed to play a greater role. I begin by expanding on how mass violence is being explained by the traditional healers, who include, as previously indicated, Buddhist monks, vocationally trained healers called kruu, mediums and traditional birth attendants.

Reconnection and reconstruction

Jacques Semelin cites this telling observation by René Lemarchand's comparative study of the cases of Cambodia, Bosnia and Rwanda:

“The ideological factors that may be known as either Marxist-Leninism, nationalism or a perverted vision of democracy... seldom affect the masses unless their language can be radically transformed and adopted to the local culture. It is therefore the re-interpretation, or even the fabrication of myths about the history of the country that allows for the ideological “transplanting” into local culture. It is for this reason that the study of tales, rumors and memories belonging to a culture, as is proposed by Beatrice Pouligny, is important for comprehending the massacres that have been committed within them ... It is in fact this plunge into the imaginary that gives historical and emotional resonance to the ideological discourse.”¹³

Semelin provides the rationale for the following analysis, in which I show how the traditional healers and monks explain the violence and suffering in Buddhist, Brahmanic and folk idioms. The healers attempt to make sense of the contemporary violence through deeply embedded templates of cause-and-effect and morality maps understood to some extent by many ordinary people.

Healers' perspectives on the causes of the violence and suffering

The nation's religious and traditional healing system has begun to retrieve some of its former influence after being outlawed by the Khmer Rouge. Buddhism is gaining new

recruits. For example, there were 50,081 monks in 1998-99 compared with 6,500 to 8,000 in 1985-89. Several non-governmental organizations are beginning to look to Buddhism to guide approaches to health and psychosocial services, and more Cambodians are sponsoring Buddhist ceremonies to commemorate their relatives killed during the war. Other traditional healers have resumed practice and, although they are competing with Western-influenced government health messages and may not wield the same influence on those who spent long years in the refugee camps exposed to other ways, their therapeutic capacities are sought by many ordinary villagers. What light do the healers throw on how Cambodia is interpreting the mass crime of the past three decades?

The sheer scale of the turmoil, particularly the upsurge of social violence, has precluded traditional healers from arriving at any single certainty about causes and cures. Yet, they have some ideas. A monk in Ang Snuol district cited two causes for domestic violence – the cycle of poverty that leads to a search for escape in alcohol, which in turn breeds drunkenness and wife beating, and the cycle of corruption and greed that leads men into dalliance in bars, creating angry wives whose complaints then also result in wife beating. He referred to the saying “a gourd sinks, the smashed glass floats,” which refers to an inversion of the natural and that the bad has come to rule the good [this is in fact the title of a memoir on growing up under the Khmer Rouge]. The monk said that in the past a gourd would normally float, but in this era something has changed and gourds will actually sink. Until the present day, the child of good parents became a good person, but now good parents can produce bad children i.e. children who sink like a gourd now sinks.

Another explanation for violence I heard - and it is a view held not just by healers – is that all the million people who were killed during 1975-79 have been reborn and are now coming of age. These people are looking for revenge and they have a savage character. So they do to others what was done to them. The healers will cite evidence for this – that when some children are born they have marks on their wrists or upper arms which means they had been bound with hands either in front or behind. Sometimes when a child has a mark on the face, and especially on the back of the neck, people will say it was because it was beaten or executed by the Khmer Rouge in its previous life. On seeing these signs, the new parents may feel pity for the child.

Domestic violence

Healers explain domestic violence in the following terms: In former times, a couple married only after their parents had consulted an astrologer to determine physical and emotional compatibility based on year of birth. Now, couples go ahead without this checking. The parents are fearful but resign themselves to the new mode. Other couples were forced to marry during the Pol Pot times and their relationships have come unstuck because their hearts have been forced. Of those forced to marry, they say fully 80 percent have separated and the remainder only stay together because of the children.

Women hurting women

The visceral rage that leads to revenge attacks by women upon others is hard to stem. The monks try to sooth with explanations of cause-and-effect, for example, that attacks are the result of women having affairs perhaps in the past life; some have forgotten that adultery is punished by Hell.

“Today, there are some who fear, but there are others who are like animals – an animal is hungry, it eats, it is thirsty, it drinks. A dog runs after the rabbit that runs and if the rabbit has no bad karma it will run into the forest and the dog doesn’t reach it, whereas if it has bad karma, it won’t seek refuge in the forest, and the dog will bite it. In other words, it’s not the dog. The dog is simply the instrument for the fate of the rabbit. Our karma, like the dog, will pursue us until it catches us and there is no escape. A child does bad to his father, your child will do bad to you.”

The women’s karma catches up. The acid burns they suffer at the hands of angry wives represent the flames of Hell that are the traditional fate of adulterers.

The newspaper articles cited earlier pick up on the not-uncommon prejudice that marital trouble stems from the Vietnamese, more specifically Vietnamese prostitutes. At least one healer I spoke to was keen to shift the emphasis away from the ethnicity of the prostitutes and onto the risks the profession itself poses for society. Citing the old Khmer saying “kam put sralav, kam pradav srey khooc,” that is, “don’t try to bend the tree that stands firm,” he explained that a prostitute has already done wrong many times over and even if she “goes straight” and marries will

never be sexually satisfied. So any man who falls in love with such a woman cannot expect fidelity.

Coming to terms with perpetual widowhood

The monks help us to understand the seeming inability of Cambodian widows to remarry and find a path to economic security for their children. There are always going to be people who did wrong in the previous life and should therefore suffer in this one, and therefore there must be people who are born to commit violence against them. It is a system in balance, as reflected in the Buddhist story about the sparrow husband and wife.

“The male sparrow left his female partner brooding the eggs while he went to the forest to seek food. There he saw a beautiful open lotus but in landing on it in the heat of the day the lotus closed on him and he couldn’t get out. There was a forest fire, and the female sparrow waited for her husband but he didn’t return. When eventually it cooled down, the male sparrow was able to escape but when he arrived back at the nest he was covered in the aroma of the lotus. The female sparrow, angered and dismayed, vowed that she would never take up with a male in the next life, and committed suicide. The male sparrow also killed himself, vowing that in his next life he would take up with only one sparrow, namely his spouse.”

More work could be done with the monks to flush out other such stories to help heal the widows and encourage them to find alternative paths to security.

Rape and incest

The theory of karma has traditionally helped people to explain violation, even serious offences like rape, and continues to do so. For example, if I had raped another man's daughter in the previous life that father when reborn would rape my daughter in this life. As for incest, some healers explain that if in a man's previous incarnation he was an animal, he may not have had the chance to acquire human morality and he may commit incest because animals do not have an incest taboo.

Murder of a parent

Everyone in Cambodia knows that during the mass crime the children denounced and sometimes put parents to death. With the present upsurge of young people murdering their parents, some monks draw upon well-known stories, such as that of Angulimala (*Anguli* = fingers; *Mie* = enemy). The following is a distillation of the stories told by many Cambodian monks in an effort to explain violence through a Buddhist voice:

“Angulimala was born in India during the lifetime of the Buddha, and was called Ahimsaka that means, ‘The Harmless One.’ One day, some envious students set up Ahimsaka, and his teacher decided to punish

him by telling them that, to complete his training, he had one more task, to kill 1,000 people.

Ahimsaka set off into the forest and killed anyone he met. To keep count, whenever he killed, he would cut a finger from the person's hand and string the finger on a cord. People began to call him Angulimala, the one with the string of bloody fingers. Eventually, his count reached 999. Only one more finger was needed.

The king's soldiers were out hunting Angulimala, and his mother was also searching for him to save him. Buddha heard her crying, and she told him she had to save her son, so the Buddha went to look for him. Angulimala was waiting for his next victim, saw the Buddha approaching, and shouted that he should stop as he was about to die, but the Buddha continued. Angulimala ran after the Buddha to kill him, but he couldn't catch up. Gasping, Angulimala called, 'How is it you continue walking slowly, and I, running as fast as I can, can never catch you?' The Buddha said to him, 'I have stopped harming people, but you haven't.'

Being called Ahimsaka by the Buddha, he returned to his true self. The Buddha told him he could turn to Ahimsaka, and leave Angulimala behind. 'Hold on to your despair and grief. The time will come when resolution of all the evil *karma* you've created will take place.'

Children heckled the now harmless Ahimsaka. Children threw stones at him, daring him to cut off their fingers. Miraculously, every stone that was thrown in the city hit not the intended victim but Ahimsaka. Ahimsaka took upon himself the pain and punishment of all the victims, and the evil *karma* he had created found its resolution. Near death and in great pain, he was told that all the suffering he had given others is resolved. All the fingers he severed were felt by him.”

The monk was trying to explain that there are some monks who, like the Buddha, have special means to stop violent people from committing further violence. Such stories, which centre on the resolution of evil karma, are accessible to average rural villagers. Characters from these stories appear in films, on the temple walls and in traditional songs and are readily recognized. Nor had Pol Pot been averse to manipulating the Buddhist notion of karmic predestiny for his own ends.

With their rituals of purging foreign elements, whether they be spirits or ethnic minorities, post-trauma symptoms or incurable imported viruses I would argue that healers have a capacity to help people deal with personal loss and cultural bereavement that is unmatched by many of the intervention models used by emergency and humanitarian organizations. The latter are inclined to assume that universal principles and practice apply to matters of health and social justice. They do not.

Mental health programs

The forms that the consequences of trauma assume are dictated by both local history and culture, and an understanding of local idioms of distress unlocks the clinical symptom profile of psychological and social disorder. Combining local resources such as traditional healers with external relief workers can ameliorate the psychosocial problems of large groups, not just individuals. Cultural and contextual variables should be studied at population and individual levels and both Western quantitative research instruments and culture-sensitive qualitative tools are needed to measure posttraumatic stress disorder. Without them the “category fallacy” is perpetuated, where indigenous diagnoses are overlooked and Western categories imposed where they have no cultural validity.

There is a growing literature attesting to the value of traditional healers as “trauma therapists” in countries recovering from war. Bracken et al., writing on the Luwero triangle, which is Uganda’s “killing fields,” noted that “not only were they providing therapies for sick individuals, but they functioned as a link with the past and thus contributed a sense of continuity to the family.” It seems to me that traditional healers often provide a more comfortable means for the people to resolve their personal sadness and their community problems than the methods brought by the West. And more than that, the traditional methods are themselves a way of combating feelings of cultural loss caused by ongoing modernization and development projects. The latest upsurge in social violence in Cambodia is often stereotyped as a social remodelling reminiscent of the violence of the Khmer Rouge, but in fact it reflects a loss of group identity for the youth born in the wake of the Khmer Rouge and the

subsequent avalanche of Western values, who faced this double onslaught unprotected by cultural and religious codes to guide their conduct.

People recovering from war and loss are not in an ideal position to absorb new health beliefs. On the contrary, the conservative impulse often seen as a reaction to crisis causes a search to rediscover, draw upon and sometimes even to reinvent older resources, to resort to explanatory models more familiar and more able to offer comfort. Also, an “outbreak of peace” may bring about new problems such as AIDS and social violence as it has in Cambodia, for which conventional medicine has few answers. Some conflict situations isolate victims from conventional Western-style healthcare over long periods, allowing traditional healers to thrive, in which case international reconstruction teams should think twice about snatching them away.

Outsiders may not detect suffering because it can take hidden forms and remain in the background. In a country like Cambodia where trauma has affected everyone, the suffering is visible but its *cultural meaning* may be invisible to the outsider. We cannot assume that violence can always be made meaningful, but my observations in Cambodia suggest that traditional healers are striving to provide meaning to loss and trauma even if it does not make sense to us, and although they are struggling to keep pace with the changing faces of trauma, their meanings may still offer greater psychological comfort to those they are trying to heal. That communities do try to make sense of war and its aftermath is an aspect of healing that the international community needs to keep in mind.

Containing contagious disease

When it comes to confronting the upsurge of contagious diseases such as AIDS and the continued high levels of malaria in Cambodia, international interventions could be more culturally competent. These epidemics are linked in the minds of the people to their post-war vulnerability and their moral and cultural weakening and to the treachery of foreigners whose soldiers of peace brought a devastating enemy germ. The anti-AIDS and anti-malaria campaigns have been informative about “the facts” of safe sex or combating the mosquito, but they could be made more culturally competent, at least for the rural majority, by harnessing the native logic of the Cambodian people about contagion and taking into account the impact of their post-war self-image upon risk behaviour.

Social justice

Healing is not merely about the treatment of suffering individuals; it is about repairing the social and moral fabric of the community within which these suffering individuals reside. Social justice is culturally constructed. The dismantling of social justice is best done by those who know the culture, and the Khmer Rouge, as I have shown, were masters at this. They knew about the people’s ways of thinking. They knew how to tap linguistics and symbols to forge powerful messages. They knew how to tap the archaic, almost xenophobic, fears of the Cambodian people, a people who had no tradition of tourism or travel and whose perception of foreigners was limited to their experience of rapacious neighbouring countries, Vietnam and Thailand – a crocodile and a tiger ready to pounce on either side. It is now too late to put things back the way they were, but some re-centering of power and trust to where it belongs in the

community is needed and the international agencies must be kept on track. I would argue that the traditional healers as master narrators and culture brokers are the best placed to perform such tasks.

Some ask if the new upsurge of social violence in Cambodia is related to the fact that Khmer Rouge leaders have not been brought to justice. Westerners in particular question this culture of political impunity. How can survivors co-exist in their villages alongside their former tormentors? Why are people content with the response that “the perpetrators will be punished by their karma in the next incarnation?” In many countries, post-conflict peacebuilding is laden with terms such as “truth commission,” “reconciliation” or “remorse,” but these Judeo-Christian notions are anathema to Cambodian culture. As Locard notes “if you express remorse and repentance, you lose face, you put yourself in a position below the person you admit you have offended or hurt.”¹⁴

Possible healer limitations

It is feasible that the time-proven ways by which ordinary people have sought to resolve community disharmony, namely consulting village healers who for centuries have treated their “thinking too much madness,” “lovesickness madness” and “ancestral spirit disorder,” may no longer be effective. The pernicious new incarnations of trauma as parents traffic daughters, children shoot parents, brothers rape sisters, women hurl acid and youth descend into Ecstasy are culturally malignant ways to resolve conflict and manage violence for which the prescribed healing rituals may be inadequate. In the wake of a cultural revolution initiated by those rival

scholars of the mind, the Khmer Rouge, and continued by the forces of globalization, I do not claim there is any guarantee that the healers will successfully recapture the best of ebbing traditions and use them to alleviate Cambodia's suffering.

Monks, too, have been exposed to the secular world. They watch Thai television, surf the Net, communicate on mobile phones and carry guns. There are reports of alcohol abuse and night visits from sex workers as well. Novices are admitted who until recently would have been deemed ineligible because they are physically or mentally unwell – a sign of progress or standards being compromised? The Buddhist Institute has launched a program to rectify reported aberrations but is considering some hard questions: Are monks being effectively trained for outreach work? If cultural traditions are linked, albeit perversely, with the Khmer Rouge, will attempts to restore links to them be successful? How are the monks making themselves relevant to the youth? Do lay devotees have some lessons to offer? One such devotee has a very popular radio program proposing remedies for social problems and his personal integrity is seen as exemplary. The National Institute for Traditional Medicine, which is part of the Ministry of Health, also faces challenges. Their focus on assessing the pharmaceutical effectiveness of traditional plants could perhaps usefully be expanded to weighing up the potential role of vocational healers as indigenous resources for peacebuilding.

Conclusion

The Cambodian traditional healers have given voice to a particular cultural interpretation of mass crimes, one that may tap the hearts of the people who survived and of their children. Their message echoes several themes brought forward in this book. The first theme is the individual and collective dimensions of mass crime situations. Beneduce in his chapter warns of the need to analyze local forms of the reproduction of violence and its embodiment in ritual and social imagination; the Cambodian traditional healers have shown how Buddhist and local animist beliefs (and rituals) were both adapted by the perpetrators of mass crime and offer an epistemological meaning for the survivors coming to terms with “why.” Beneduce also warns of the danger of applying Western psychiatric categories such as PTSD; the Cambodian healers provide the international community with an entire lexicon, taxonomic toolkit, panorama of indigenous explanatory models, and ritual practices aimed to shore up the confidence of troubled survivors.

The chapter on Guatemala has shown the effects of the institutionalization of violence. In Cambodia, the code of conduct for killing has continued, even escalated, after the end of the civil war and the impunity levelled against the perpetrators of mass crime now applied even to the most banal “family man” killer. This is not simply a matter of former combatants and militia members gone mad (as perhaps in the former Yugoslavia and Rwanda), nor is there mileage in blaming the society through seeking a cultural reason for the continuing violence.

Lemarchand and Niwese show the cycle of interethnic violence in Rwanda and Burundi and show the need to disaggregate the perpetrators. Bašić points to a

similar heterogeneity in the former Yugoslavia and its successor states. In the Cambodian case the perpetrators and victims were (with the notable exception of the Chinese and Cham minorities) of similar ethnic, religious and cultural backgrounds and the class enemy was truly in the midst, giving rise to a degree of suspicion about even the most trusted senior cadre – and perhaps leading to a contemporary sense that anyone could have been (could be) a closet enemy.

The second theme in the book is the memories and representations of mass crimes. Sherlock considers the reinterpretations of Baltic, Ukrainian and Chechen history in the Soviet and post-Soviet periods, showing how historical discourse promotes both conflict and peacebuilding. The Cambodian case shows a similar public deligitimation of Khmer Rouge myths (the “Chinese communism”), and also the Warsaw Pact myths of the post Khmer Rouge decade (the ”Soviet communism”), that have emerged during the current love affair with free markets, but it has not been as clean-cut a break as Sherlock’s depiction of the post-Soviet scene.

Although it is not possible to trace a sure cause-and-effect relationship between the mass crimes of the Khmer Rouge era and forms of violence described in this chapter, in the eyes of many ordinary Cambodians, there is no doubt. By giving voice to the traditional healers as barometers of popular culture, this chapter captures at least one strand of that link. The evidence also shows that the Khmer Rouge are themselves a product as well as a cause of violence.

A third theme of the book is peacebuilding strategies and the role of outsiders. Kriesberg in chapter 12 discusses the role of IGOs and international NGOs in affecting the durability of peace. Good post-conflict peacebuilding rests on an understanding of this popular cultural understanding of the mass violence. We need to

address the problems of groups and not just individuals who suffer in the wake of conflict and, beyond that, to structure a culturally competent response to large-scale human suffering. We need to take the wide-angle view in which experiences from diverse disciplines including public health, social science, mental health care and rural development strategies are combined. And rather than imposing a general model of post traumatic stress disorder on every trauma situation (as may be done by international NGOs advancing mental health programs), we need to make room for local exponents of folk culture, such as traditional healers, to make their contribution to peacebuilding.

Capacity building for peace needs to take into account the transformative meaning and effect of war. Humanitarian aid can feed a cargo cult mentality. Some government officials and those from the upper echelons of society may unwittingly undermine local capacity for healing by unquestioningly privileging foreign public health strategies that are part of the package that arrives with multinational investment and missionaries. Traditional healers could perhaps trace a gentler and more culturally competent path towards the best of what is new. They understand the local rules for conflict resolution and can assist in the identification of resilience factors within the local society. Given support to adapt to post-conflict circumstances, I believe they have the potential to point the compass towards culturally competent peacebuilding. Theidon's chapter shows how *campesinos* in Peru explained lethal violence and how the war was experienced as an attack against cultural practices; the Cambodian healers, in explaining such attacks, also offer key elements for cultural competence in post-conflict peacebuilding. It is not enough, however, to create detailed compendia of the Guatemalan, Rwandan, Peruvian, or Congolese cultures and their reactions to

mass violence. Cultural competence, while founded on such understandings, calls for the development of generic skills for staff, program developers, and research and evaluation.

In this new age of global terrorism, the wheel of xenophobia so skillfully manipulated by the mass crime of the Khmer Rouge has turned full circle. The ethnic Cham community in Cambodia is targeted as a fifth column linked to world terror. This new focus echoes the Khmer Rouge attacks on the Cham. The authorities closed the Om Al-Qura Institute and planned to expel 28 overseas Islamic teachers that they believed were connected with Osama bin Laden. Hambali was arrested as a Jamaah Islamiya leader. And now, the former Khmer Rouge soldiers are being treated for nightmares. Global contemporary fears, such as of terrorism and SARS again may fuel dark currents of xenophobia not fully quenched in the survivors of the mass crime.

Notes

¹ R. J. Rummel, *Death by Government*, New Brunswick, NJ: Transaction, 1994, p. 4.

² H. Locard, "Le petit livre rouge de Pol Pot," *Cambodge Soir*, Vol. 6, October 1996.

³ A. L. Hinton, "Why did you kill? The Cambodian genocide and the dark side of face and honor," *Journal of Asian Studies*, Vol. 57, No. 1, 1998, pp. 93-122.

⁴ Locard, "Le petit livre rouge de Pol Pot."

⁵ Ibid.

⁶ See N.E. Zimmerman's report on domestic violence in Cambodia, <<http://www.ias.org.uk/theglobe/2001gapabangkok/cambodia.htm>>.

⁷ See *Kampuchea Thmey*, April 2003.

⁸ See *Koh Santepheap Daily*, May 2003.

⁹ *Koh Santepheap Daily*, May 2003.

¹⁰ N. E. Zimmerman, "Household survey on domestic violence in Cambodia," Ministry of Women's Affairs and Protect Against Domestic Violence, Phnom Penh, 1996.

¹¹ *Koh Santepheap Daily*, June 2003.

¹² *Koh Santepheap Daily*, May 2003.

¹³ J. Semelin, "Toward a vocabulary of massacre and genocide," *Journal of Genocide Research*, Vol. 5, No. 2, 2003.

¹⁴ Locard, "Le petit livre rouge de Pol Pot."