Liberating Narratives against Gender-based Violence in a Community of Pakistani Women in Norway

FOTO: MODELDAY STUDIO

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Abstract

Gender-based violence (GBV) is a global and trans-cultural challenge of systemic nature, and migrant women seem to be especially vulnerable to such atrocities, suffering under dominant narratives embedded in discourses and power structures at several different levels. However, such challenges can be overcome by a liberating narrative inquiry, of which the study to be presented is an example, since it promotes equity and links fairness to women's well-being. The paper presents an experience from Norway where a group of Pakistani women together with researchers from The Norwegian Centre for Migration and Minority Health (NAKMI) became involved in a collaborative, change-oriented commitment to justice. Taking place within an empowering community setting, this experience can be understood as a sociopolitical development; that is, a mutual learning process in which all participants develop critical awareness, recognize their influence, and realize possibilities for action while creating new, liberating community narratives.
Keywords: gender-based violence, narratives, oppression, liberation, sociopolitical development, empowering community settings

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Introduction

Gender-based violence (GBV) is a scourge of global, trans-cultural, and systemic nature. Still, some special attention regarding GBV is required for certain migrant groups (World Health Organization 2010), among them Pakistani women living in Norway. In their country of origin, tradition-bound Pakistanis live in a highly patriarchal society with strong family and community bonds, and clearly defined gender roles, where GBV until recently has been accepted as a cultural norm and broadly considered a private matter (Ali & Bustamante 2008, Ali et al. 2011). [1] When a Pakistani woman migrates, she might find herself in a crossfire between discriminatory and oppressive factors stemming from her own cultural background and those arising in the receiving country, where situations of poverty, minority status and womanhood, as well as lack of social networks and economic insecurity, might increase her suffering, sometimes building a spiral of vulnerability from which she can hardly escape (World Health Organization 2010, Vatnar & Bjorkly, 2010; Guruge et al., 2009; Kasturirangan et al., 2004; Raj & Silverman, 2002; Bauer et al., 2000; Heise, 1998).

However, the actual magnitude of GBV among Pakistani immigrants has been difficult to assess. In a study from Chicago (Adam & Schewe, 2007), 71%

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1. According to the Human Rights Commission of Pakistan, in one year, 56 women were murdered for giving birth to a girl; 150 were burned (fire, acid); and 869 killed in the name of honor. Sixty-six percent of the interviewees reported on sexual violence, 93% on marital rape – a form of violence that is not recognized in the Pakistan Penal Code (Human Rights Commission of Pakistan 2013). Despite these figures, the Parliament at the time failed to enact laws that could prevent GBV and protect women who experience it.

of female immigrants from India or Pakistan reported experiencing domestic violence within the past year, which is close to the level of domestic violence among women in Pakistan reported by Human Rights Watch in 1999 (quoted in Adam & Schewe, 2007). In contrast, a survey performed in Norway (Blom & Henriksen, 2008) reported that fewer than 5% of Pakistani immigrants had experienced violence within the past year, more men than women. There are several possible explanations for such divergent results. Not only did sampling methods differ. In the Norwegian study, psychological aggression and sexual coercion were not specifically asked for, although even "trifling incidents" were supposed to count (Gulløy, 2008). Moreover, when as in Norway cultural acceptance for violence is near zero, immigrants might feel less free to report violence, a reluctance linked, perhaps, to the fear of shaming the family by exposing violence. Or, simply, violence may cease. However, surveys of this kind say very little about what it means for Pakistani women to live in the shadow of singular acts of gross violence, as for example honor killing. In our case, it was an act of overt gross violence that triggered an initiative.

Some Theoretical Considerations

To effectively confront oppression – established by physical violence, and legitimized and normalized by "ideological violence" coming to the fore in "dominant narratives", that is over-learned stories shared among group members in order to allow identification with one's group (Rappaport, 2000; Harper et al., 2004) – Watts et al. (2003) hold that it is necessary to deconstruct its ideological foundations as well as challenge its overt abuses and deprivations. This requires "growth in a person's knowledge, analytical skills, emotional faculties, and capacity for action in political and social systems", a process here referred to as a "sociopolitical development". This can take place in "empowering community settings", that is, settings where empowerment for marginalized or oppressed individuals can be expected to take place (Maton, 2008; Balcázar et al., 2004). In order to accomplish such a development, a narrative inquiry might be a viable approach (Harper et al., 2004; Rappaport, 2000).

Backdrop for this study

Old Oslo is an east-end, inner-city borough of the Norwegian capital, long regarded as one of the most deprived areas in town; in 1997 with a migrant population of about 30%, in 2013 about 38%. To address some of the problems encountered, the Centre for Health, Dialogue and Development (PMV) was

established with the aim of developing health-promoting strategies that the inhabitants in this culturally complex society could experience as meaningful. This center was frequented by immigrant women, among them women of Pakistani origin. While initially focusing on their own family's wellbeing, those who diligently used the center became agents of social change, committed to working against negative social determinants of health like social isolation, lifestyle problems, and harmful traditional practices (Aambø, 1997; De Freitas et al., 2014). After some years, these Pakistani women founded a grassroots organization, the *Pak Union*, which in the project period worked in close collaboration with PMV.

In 2005, a Pakistani woman living in Norway was killed in her father's home village in Pakistan: a case that some Pakistani women as well as some Norwegian media referred to as an instance of honor killing. Soon after, the leader of the *Pak Union* asked the Norwegian Centre for Minority Health Research (NAKMI) for assistance to get a deeper understanding of GBV in their community.

Objective

Considering their request, NAKMI negotiated a joint effort, with the objective of creating a shared understanding of what GBV mean for Pakistani women living in Norway, and, further, what could be done to ameliorate the situation.

Project team and participants

The project team consisted of the leader of the *Pak Union*, a Pakistani woman in her thirties, who had lived in Norway since her late teens, now married and mother of four children; the main researcher (first author), a white, Norwegian, male physician in his late fifties, previous founder and manager of PMV, now working at NAKMI; and two co-researchers, also from NAKMI, both young, female social scientists, themselves with immigrant backgrounds.

Because of their deep interest in the initiative, 10 women from the *Pak Union* were selected to participate in a "working group", that is a group which would meet on a regular basis, working on the project's objective. Later on, a second group, consisting of 11 women, also from the *Pak Union*, was added. The participants, in the following referred to as "the women", were between 25 and 50 years old, most of them married. All had stayed in Norway for several years, and, according to the group leader, none exceeded a high school educa-

tion and none were really poor. Some of them spoke Norwegian or English fluently, others only Punjabi or Urdu.

Procedure and Material

A partnership was formed between the *Pak Union*, PMV and NAKMI. The group meetings, 15 altogether, took place in 2006–2007 at PMV, a place the women already frequented and where they felt safe. In order to facilitate the knowledge-generating process and to better understand how migration might have affected their perceptions of GBV, the women were invited to tell stories related to GBV. The group leader translated the stories into Norwegian, or, when the story was told in Norwegian, into Punjabi – from time to time assisted by other women in the group who were fluent in these languages. After one woman had told her story, the other women commented on it, and the story was discussed in the group. These discussions were mostly in Punjabi with only summaries translated into Norwegian. This structure slowed down the group process, and allowed for detailed minutes to be gathered. As a rule, these minutes were presented back to the women during the next meeting, to be checked, commented on, and sometimes corrected. After some meetings, the researchers also presented their analysis and new insights to the women for further discussion. This dialogical process has similarities with both Paolo Freire's "education for critical consciousness", where a discussion object or "trigger" is introduced in order to facilitate deliberations (Minkler & Cox, 1980; Aambø, 1997), and a narrative enquiry (Harper et al., 2004; Rappaport, 2000), which allows all stakeholders to share their views on a certain topic and to engage in its transformation (Montero, 2006; Mulhall, 2002; Brodsky, 2009). The women gave their informed, written consent to using the presented material in research, and the project was presented to the Regional Committee of Research Ethics, which found no need of further approval.

Both the women in the working groups, the researchers and the co-researchers took part in the interpretation of the collected information. In addition, the co-authors of this paper conducted a secondary analysis of minutes, field notes and other materials compiled by the first author.

Developments and findings

The results of this undertaking are not limited to the insights gained from the women's stories and their reflections on these. From the conversations, there emerged processes and actions that seemed to expand and multiply, and which allowed for further insights and new understanding. In the following, some of

these insights will be highlighted while concentrating on the process as it developed over more than three years.

Resolving misunderstandings

To the group, women brought stories about violence, something that had happened to them, to someone they knew, or stories they had heard. After some meetings, the researchers developed and proposed a concept of *violence,* a scientific reformulation of the women's stories based on an understanding of violence as "an act intended to scare or hurt" with the following keywords: self-harm, "accidents", revenge, oppression, tradition, and "misfortune". When these were presented back to the women, they reacted negatively against both the keywords and the researchers' descriptions of these, as they did not correspond to the women's experience. The women then modified the researchers' conceptualizations, adding subcategories like self-blame, honor killing, isolation, neglect, retaliation, and self-justice. Some examples culled from the women's stories:

"A husband chased his wife in front of a car and she was killed";

"A woman was kept at home and isolated; she was not allowed to speak with others, not allowed to learn Norwegian and she got no money";

"A husband did not give his wife time and support when she felt insecure and unsafe with the rest of his family".

What counts as violence?

The researchers then put the women's stories into a grid – the stories now subdivided into the smallest meaningful elements, usually one to three sentences – asking the women to categorize the elements according to a tripartite model of violence: structural, interpersonal or intrapersonal (James et al., 2003; Johnson et al., 2005). Although the women preferred the term "cultural violence" to "structural", these categories made some sense to them. However, it turned out that they neither agreed with the researchers, nor among themselves when trying to fit the elements of the stories into these categories, which prompted further elaborations and explanations. An example:

"A boy was sent to the mosque for education". The researchers did not label this as violence. The women did: "We know our culture! The mosque school is very frightening for the children, as the imams' education may not only imply strict rules, but quite a lot of physical punishment." One woman explained that

this is how they threaten children, "If you don't behave, you will be sent to the mosque and given over to the imam for your upbringing!" Nevertheless, some of the women said it should not be labeled as violence because this school worked quite well for many children, and, moreover, this was the most common way of rearing children in Pakistan. During the meetings, quite a few disagreements emerged, and one of the women stated, "Violence exists in every aspect of the Pakistani society, but is felt differently according to one's upbringing and sur-roundings. One person might consider something so trivial as not showing enough interest in an ongoing discussion as violence, while something so severe as physi-cally abusing a person might – to a large extent – be accepted by another".

Suffering in silence

Before the group meetings, the women believed that GBV was something that happens to everybody, something that they had to put up with. Suffering in silence was a virtue. As the discussions proceeded, this belief started to change. An example of discussions that took place: A woman told that after the killing that gave rise to this project, one could hear expressions like, "It suited her well!" "The father did the right thing!" "It was just right to kill her!" Another agreed, "Our girls must learn to behave!" Then the first went on, "We somehow have got used to these kinds of expressions and we tend to think that maybe it was her own fault that she got killed?" Others chimed in, "She who endures the most is the cleverest one, because she knows that to do so is in her best interest, provided she wants to save her home and enjoy respect in the family!" One uttered, "This is how life is, and this is how it should be!" Listening to these passages, one of the women seemingly felt very uncomfortable and tried to explain, "Violence is a much-hidden phenomenon in our culture. Nobody wants to talk about it or even admit that it exists, except in a very safe, controlled environment."

There is always a woman behind!

Eventually, the women realized that they did not have to tolerate violence. This insight led to self-reflection. Far from being a new turn of self-blame, with which the women seemed to be quite familiar, they could now clearly see their own role in the vicious circle of GBV: "If you dig into stories about violence, you will always find that behind them, there is a woman!" The reasons were threefold. Firstly, Pakistani women like to see men as strong and powerful: Often women demand that their husbands and sons restore justice by all means, and in such situations, "Men are just the instruments." Moreover, "If a man is

not violent or influential he is considered weak." Secondly, when a woman gets older and becomes a mother-in-law, she gains power and then starts to treat her son's wife badly, often violently. As one of them said, "Why should they not experience what we, ourselves, have experienced?" Thirdly, the women in the project now became aware of their tendency to denigrate each other, like one of them said, "Pakistani women are only concerned about themselves, their children, their husband, their siblings etc. Others are easily condemned, mostly because the women need to create attention to their own assets."

We must start with ourselves!

The discussion culminated with the group leader stating: "Violence starts with us and ends with us. If we stop to use [sic] violence, violence will stop". Subsequently, the women directed their focus to how they usually talk about other women who are not able to stay in a marriage with a violent husband, and wondered: "Maybe women's gossip is even more effective in consolidating cultural norms that foster violence than men's brutal acts." Realizing that psychological violence (in the wording of one woman, "the violence that leaves no marks") is the most painful to endure, the most difficult to forget, and thus more devastating and humiliating than being hit, the women now urged each other to stop disparaging other Pakistanis who are not complying with prevailing norms in their community, "It is not *what* we talk about that matters, it is *how* we talk about it! We must start with ourselves and make sure that the next generation will not suffer in the same way as we have suffered!"

Mutual learning

In the course of the group meetings, the researchers also developed critical thinking with respect to their own possible role in preventing or intervening in GBV. From the discussions, they understood that living in a community where fear of violence is pervasive – a fear occasionally intensified by performances of gross violence and their subsequent verbal elaborations in which the victim more often than not becomes the scapegoat – most people will avoid direct confrontation. Moreover, finding that the framework they (the researchers) started out with did not fit the women's experiences, the researchers got insight into the oppressive effects of their scholarly definitions, their structured schemes and grids, and realized how their questions could actually constrain the women's answers within the researchers' own presuppositions.

Separating there and then and here and now

During the first meetings, the stories were quite impersonal and often related to events that had happened in Pakistan and were therefore less intrusive for them. Now, the awareness that developed around GBV among the women gave rise to the need to tell their own stories. Because such personal accounts were difficult in a group setting, private conversations with one of the female co-researchers were arranged, with the group leader as interpreter. Confidentiality was assured. However, now being aware of how unfair violence is to women, remembering and reliving their previous experiences with associated negative emotions became a new turn of suffering. The women started to complain of nausea, loss of appetite, headaches, body pain, and low mood. As this lasted for weeks, the group leader, who believed that doing practical things helps, started to organize long walks in the woods for them, and during one of these walks, she assisted them in inventing and performing a ritual. In a follow-up interview some months later, she explained:

> I asked the women to find items that could symbolize their agony (...) There is a belief that if something is covered in earth, it is behind. When we bury something, God gives consolation. And, like when we bury a person, we don't talk about the negative this person has done, but keep it all in the positive sense. Then we get over it! [2]

She then made the women dig a small hole in the ground, a grave around which they gathered, all of them putting into the hole some items that could symbolize their suffering. One of them took off her silver necklace and placed it in the grave, saying that she had "carried violence so close to her heart," and that she now wanted to give it away. Then, after sprinkling soil over the items and marking the place with a green cloth,[3] there was a big emotional outlet. Crying together, the women now voiced their grief, "Before, all our hopes were taken away. Now we also give away our pain! It is too much!"

According to the group leader, after having performed this ritual, some distinct actions took place: One of the women filed for a divorce. Others became strong enough to resist violent attacks and to say, "No!" to their husbands. Some women started weekly group discussions to raise awareness around the issue.

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2. Although it is rather doubtful whether such beliefs flourish among wider circles of Pakistani women, this is of no concern here. For this small group, it served as rationale for action.
3. Green symbolizing purity, *pak*.

Two contacted an imam, requesting him to address the issue of GBV in the mosque. Subsequently, the whole *Pak Union* was informed about the project and the lessons learnt. Among members who had *not* participated in the groups, however, there was a call for patience, "We should take it step by step...We should not enforce the older generations – violence is too engrained in their mentality – but instead just teach the new ones that they can change things." The leader of the *Pak Union* succinctly explained this reluctance to face the problem,

> When listening to other people's accounts of violence, your whole body is pulled into it. All your own experiences come to the fore … It is like balancing a tightrope between depression and hopelessness on one side, and relief and reconciliation on the other. You cannot push this process to make it faster.

The researchers followed the women over two years, and after that, continued to converse with the group leader, who followed the participating women even longer, now with some support from the *Pak Union.*

Discussion

This article describes how some Pakistani women within a collaborative setting became able to confront GBV in their community, a confrontation that implied a development from suffering in silence to taking actions: actions to cope with the consequences of violence as well as to reduce its prevalence. Under the umbrella of a shared objective, a sociopolitical development became possible due to a dialogical endeavor that quite closely followed the four steps suggested by Watts et al. (2003): Starting from an *acritical stage*, characterized by a lack of common terms and lacking awareness of dominant narratives (the researchers' scientific narratives as well as the women's cultural narratives), the stories told and subsequently reflected on, propelled an *adaptive stage* in which both women and researchers gradually acknowledged each other's different views – probably due to a safe and playful atmosphere and the fact that the researchers' categories and descriptions were presented to the group in a highly tentative manner and with wonder and curiosity, thus de-emphasizing the hierarchical relationship between participants and researchers (Norsworthy 2003). As a consequence, rather than silencing discussions, the researchers' contributions prompted new descriptions and new insights from the women that were shared. This accommodation allowed all of us to immerse ourselves in a *critical stage* where we developed awareness of our ways of talking as well as our role in perpetuating GBV.

In the end, for the women a ritual demarcated the beginning of a development similar to Watts' *liberation stage.* Having experienced being listened to by each other as well as by the researchers, the women now felt understood. Nobody had blamed them for what had happened to them, and, at this stage, more clearly separating '*here and now'* from '*there and then',* they also became able to leave at least some of their burdens, feeling lighter and suffering less.

In this process, we, the researchers, acquired new roles. We were no longer interviewers, collecting data to be analyzed according to preformed theories and conceptions. "Enacting anti-domination values" (Norsworthy 2003), we became instigators of change, mediators and advocators. We became capacity builders who inspired new, socioculturally situated practices and facilitated the women's empowerment process throughout the experience. Moreover, the narrative approach, that is inviting the women to tell stories and to reflect on these, seems to have bypassed their reluctance to report gender violence. The bravest took the lead, others followed suit, and thus a dialogical process developed in which disagreements and misunderstandings, as well as discussions and reflections, were seen as resources that could facilitate the development of knowledge and subsequently a liberating community narrative.
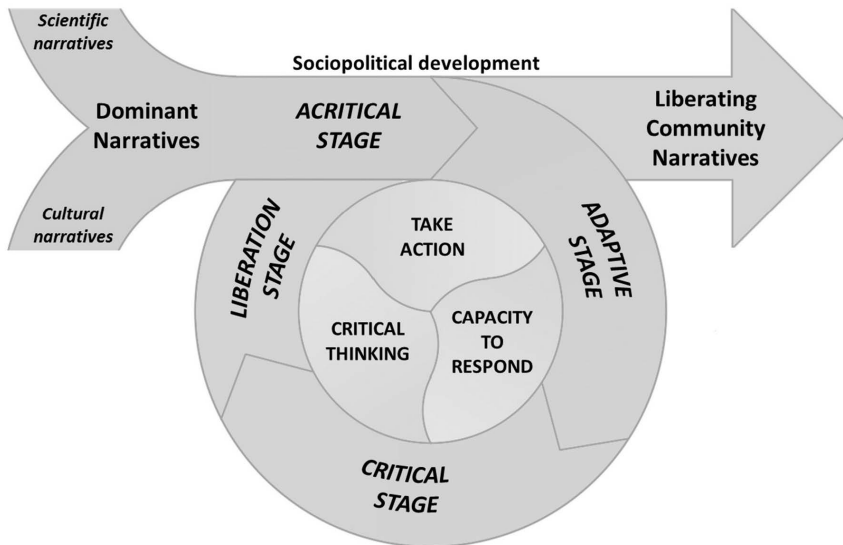

Figure 1. Sociopolitical development process: From dominant narratives to liberating community narratives

To instigate such a complex process, some kind of catalyst is needed, in our case, a setting where people could trust each other; where participants were considered experts on their own life situation; where discussions can proceed in good order, both giving space for unvoiced stories and acknowledging tacit knowledge and vague visions. Finally, realizing the great diversity in perceptions and opinions allowed the participants to become aware of significant issues that inspired learning and social change (Abe, 2012; Maton, 2008; Suárez-Balcázar et al., 2006).

However, this was not a straightforward task. Before the project started, several of the women had anticipated more power as mothers-in-law and they looked forward to treating their sons' wives as they themselves had been treated. For them, adjusting to a call for nonviolence required more than just forgetting what had happened to them. It implied on one hand reconciliation of their cultural past with present life conditions and, on the other, reconciliation of their experiences of GBV with newly acquired abilities to challenge traditional gender roles (Berger & Luckmann, 1966; Freeman, 1999). It called for a working through, a reflection on what the traumatic event meant for their individual life story. Realizing that GBV started with them and ended with them, the women could finally step out of the vicious circle of violence and retaliation, a circle which, as we have seen, was intertwined with their own life cycle. But before that happened, some of the women got really ill. The ritual, which actually can be understood as a narrative with a liberating meaning (Rappaport, 2000), became a turning point, the beginning of a virtuous circle of liberation, by which at least some of the women achieved closure. They underwent a transformative process that created awareness and mastery as they became able to negotiate cultural expectations. Thus, they also obtained a better balance between what is culturally imposed and their own, individual preferences. In other words, liberation became a personal journey in which the balance between cultural and individual narratives was redefined in their own personal way (Balcázar et al., 2012; Harper et al., 2004). The social changes in the women's nearest surroundings were evident. However, whether or not their liberating narratives will spread to even wider circles, thus influencing more people, or if they will be engulfed by narratives fostering (more) social control, remains to be seen.

Lessons learnt

This experience has several implications. We realized that researchers must be aware of their insufficient understanding of the specific circumstances within which GBV takes place. How to access the actual community, how to raise a

new vision of nonviolence, and further, how to promote a new attitude towards victims, require strategies and methods that allow for empowerment while assisting participants in decisions that affect their lives (Prilleltensky, 2012). Increasing their resources and capacities to respond to such atrocities and injustices can then enable them to move from isolation to participation and, further, from hopelessness to psychological wellbeing (García-Ramírez et al., 2011).

Moreover, we understood that research practices must be sensitive to ways in which people provide information, as it is not always possible to ask every question that we want. In the same line, researchers must be aware of dangers and risks involved in recounting trauma experiences, and take steps to minimize them and; not least, take responsibility for initiating healing processes (Rosenthal, 2003; Da Haene et al., 2010; Mechanic & Pole, 2013). In our project, the women's good relations with the leader of *Pak Union,* who followed them for a long time after the project was formally finished, served as a security net for those who became ill, and the leader was able to take steps to initiate healing processes. It can thus be argued that in a project like this, a professional therapist should be contacted even before the project started, in order to serve as a safety precaution. However, it is not evident that the women involved would trust therapists, who to them were aliens. This is an ethical challenge.

Further, in search of new, liberating scientific narratives, we will propose that scientific communities query how their worldviews bias their theoretical models and practices, and refrain from methodologies that for the sake of rigor, objectivity and neutrality preclude migrant women from taking an active role in tackling GBV (Latta & Goodman, 2005). We hold that future lines of research on GBV should not only focus on victims and perpetrators, but take into consideration dominant narratives of families, communities, leaders and service providers as well as relevant political, legal, and economic issues. As we have seen, this could be a complex challenge but certainly worth studying, especially if methods utilized can keep the sociopolitical development alive, and thus instigate and facilitate social change.

Oppressive cultural narratives tend to place women in a position of passivity: If behaving as expected, they will be respected and safe, and violence is not an impending problem. Moreover, taking the silencing effect of violence and oppression (Gill, 2004) into consideration, the vanity of outsiders defining the sufferer's problem became salient. So did the vanity of researchers introducing their own, preferred solutions, perhaps followed by efforts to manage the

helpee's resistance to change. In our project, exposing and sharing different views created a conversational space where it was possible for everyone to have a voice, to share opinions, and to feel heard. Thus, it became possible for both women and researchers to collaboratively create and exchange new, different narratives. What seems to be new in this study is that when the women became able to see and reflect on their own roles in perpetuating violence, and thus also to realize that they had to be the first to change, accommodation strategies that were all within their own abilities and control started to emerge.

As our awareness about GBV increased, we – as researchers – were reminded that neither we, nor practitioners should close our eyes to injustices and inequities that occur within migrant groups. However, rather than providing propositions and solutions, our responsibility is to provide a safe space for dialogue, and to offer guidance and support while facilitating the critical process of knowledge-generation and liberation – a process that allows women to become responsible, not only for defining their problems, but also for creating their own solutions (Jonas, 1985; Prilleltensky, 2012).

Several studies now confirm that the power to decide what to do and how to transform the community lies in the community itself. Therefore, community intervention should prioritize choice over change, and give people the opportunity to change in one direction or the other (Prilleltensky, 2012; Trickett, 2011). As we see it, the trick lies in increasing ethnic minority users' participation. This is also true regarding public services such as health and social care. It is our belief that the development of transformative health policies and practices based on minorities' own culture, needs and strengths, will generate prevention and intervention programs that are much more accurate and effective (De Freitas et al., 2014; García-Ramírez et al., 2012).

Strengths and weaknesses

This project rested on two interlocking assumptions: On one hand, in order to change something, we need to understand it, and, on the other, in order to understand something, we should try to change it (Lewin, 1997; Trickett & Espino, 2004). Under such conditions, a trigger is needed for change to happen (Kieffer, 1984). An incident of overt violence in the Pakistani community – an incident which by some was referred to as honor killing – sparked off these women's initiative and provided motivation for new insights, a deeper understanding and change. The partnership built by the *Pak Union,* NAKMI and the PMV center then allowed for creating a safe place, an empowering community

setting, circumstances that might be a necessary precondition for the develop-ments observed – however as unique as important. Therefore, caution must be taken to develop a well-functioning empowering community setting when, in the future and at different places, attempts are made to replicate a narrative enquiry like this. The unique circumstances our study relied on imply that nei-ther can our procedures be blindly transferred to other settings, nor are our findings generalizable to Pakistani communities as such.

A further weakness of this investigation is related to scientific control. More specifically, the discussions in the groups proceeded in a language alien to the researchers, and we, as researchers, were to some extent dependent on the group leader's interpretations. Being a non-professional interpreter, it is not self-evident that her translation of the stories and her summaries from the women's reflections on these same stories were adequate. However, several of the women in the group had a fairly good understanding of the Norwegian lan-guage, and as long as the interpretations were performed in the group, they would check and respond to the adequacy of the translations, which actually occurred more than once.

The intention of this research was to create a research setting and apply methods that could reflect the women's day-to-day experiences of GBV. As we have seen, this was not a straightforward task, not least because of our uncer-tainty about the validity of our western construct of violence. There are there-fore reasons to ask whether our findings and interpretations are just a product of the project's "working parties" – which perhaps can be likened with a "labo-ratory" – or if they actually do reflect real life situations. Together with the fact that the research was initiated by the Pakistani women's league on the back-ground of Pakistani women's perceived needs; that the investigations took place in a setting familiar to the women, a place several of them already fre-quented in order to discuss their day-to-day problems and achievements; that the group leader, who to a great extent facilitated the discussions, was herself a Pakistani woman with a similar background to the participants; that the stories and the women's reflections on these took place in their own language; that the stories told and reflected on were created by the women themselves, storytell-ing being a cherished way of their day-to-day communication; that they were heavily involved in interpretations of the stories as well as in our research find-ings, suggest high ecological validity, and stand in stark contrast to (paraphras-ing Bronfenbrenner as quoted in Schmuckler 2001) "strange researchers who in strange situations and for the briefest possible period of time elicit strange

answers in response to their strange questions – leaving to others to take actions". That the women after some meetings wanted to tell their own stories in more secluded settings, also bears witness to the relevancy of these stories for the women's thought processes and lifeworld as well as the group work's impact on them. So does what happened after the group work was formally ended, where several of the women became engaged in personal as well as social change. Thus, these results can safely be transferred to settings typical of these women's everyday life.

A further strength of this study is that the co-authors of this paper, who were not involved in the group work or the collection of our material, conducted a secondary analysis of the minutes, field notes and other materials compiled by the first author. This latter collaboration (secondary analysis) gave a more comprehensive vision of the experience from a liberating perspective (Watts et al., 2003).

Conclusions

This study shows that an incident of gross violence can spark off motivation and initiative for a collaborative effort to understand and cope with GBV in a broader sense. Within an empowering community setting, a sociopolitical development can take place, assisted and facilitated by researchers' interest and experience, and supported by structures that allow for sound knowledge generation and capacity building. Although insights from a study like this cannot be generalized, the knowledge generated can be highly relevant for the participants' life situation, and, as we have seen, can result in deep personal as well as social change. Therefore, we recommend that researchers pay attention to needs arising within immigrant groups and be ready to provide assistance and scaffolding to processes aiming at enhancing needy people's coping abilities. The researchers will then have to strike a balance between scientific control and ecological validity as well as between openness and confidentiality, being constantly aware that the participants might walk a tightrope between depression and hopelessness on one side, and relief and reconciliation on the other. However, the most important success factor might be a well-functioning, non-paternalistic collaboration with resource persons in the actual community who are able to act on behalf of individuals and targeted groups.

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