# INTEGRATING MHPSS & PEACEBUILDING: A MAPPING AND RECOMMENDATIONS FOR PRACTITIONERS

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This is the Report of a Consultancy conducted on behalf of the IASC Thematic Working Group on MHPSS & Peacebuilding within the IASC MHPSS Reference Group. The report was shared and discussed widely in four global consultations conducted July-September, 2022) with young people, grassroots practitioners, and policy and thought leaders. We thank the participants for their insights, which helped to guide revisions of the report and its recommendations.

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## ABBREVIATIONS

| | |
|---|---|
| CAAFAG | Children associated with armed forces and armed groups |
| CIMIC | Civil-military cooperation |
| CPP | Communist Party of the Philippines |
| CTF | Consultation Task Force on Reconciliation Mechanisms |
| DDR | Disarmament, demobilization, and reintegration |
| DRC | Democratic Republic of the Congo |
| ECD | Early child development |
| FGD | Focus group discussion |
| GBV | Gender-based violence |
| GIZ | Deutsche Gesellschaft für Internationale Zusammenarbeit |
| GSN | Green String Network |
| IASC | Inter-Agency Standing Committee |
| IDP | Internally displaced person(s) |
| IOM | International Organization for Migration |
| IPV | Intimate partner violence |
| KII | Key informant interview |
| KQ | Kumekucha Quest |
| LGBTQIA+ | Lesbian, Gay, Bisexual, Trans-, Queer (or Questioning), Intersex, Asexual, and/or other sexual and gender identities |
| MHPSS | Mental health and psychosocial support |
| MLI | MHPSS and Livelihood integration |
| NGO | Non-Governmental Organization |
| OCHA | Office for the Coordination of Humanitarian Affairs |
| PAR | Participatory action research |
| PBSO | Peacebuilding Support Office |
| PFA | Psychological First Aid |
| PRISMA | Preferred reporting items for systematic reviews and meta-analyses |
| PTSD | Post-traumatic Stress Disorder |
| SPR | Skills of Psychological Recovery |
| TJ | Transitional justice |
| TRC | Truth and Reconciliation Commission |
| TSK | The Story Kitchen |
| UN | United Nations |
| UNFPA | United Nations Population Fund |
| UNHCR | United Nations Refugee Agency |
| UNICEF | United Nations Children's Agency |
| UNSCR | UN Security Council Resolution |
| WCS | Women conflict survivors |
| WFP | World Food Program |
| WHO | World Health Organization |
| ZTF | Zonal Task Force |

# SECTION I:
# OVERVIEW

## EXECUTIVE SUMMARY

A major problem facing the world is how to build peace following the ravages of increasingly protracted armed conflict. Armed conflicts leave behind shattered, divided societies that are at risk of repeating cycles of violence, and therefore need concerted peacebuilding efforts. The conflicts also take a heavy toll on people's mental health and psychosocial well-being. One in five people who live in a war zone will likely develop a mental disorder, and many others suffer from painful everyday stresses associated with multiple losses, family separation, gender-based violence (GBV), disability, climate change, and ongoing insecurity, among others.

### Why Integration Matters

To build peace, there is strong need to integrate mental health and psychosocial support (MHPSS) and peace. Broadly, peace cannot take root if conflict-affected people suffer from deep emotional impacts and grievances that blunt trust and willingness to support peace processes. Without peace and social cohesion, mental health and well-being are undermined by entrenched hatreds and fears, social divisions, and stresses associated with ongoing insecurity.

Most integrative efforts and publications have focused on bringing MHPSS approaches into peacebuilding work. Although this is highly important, it is equally important to bring peacebuilding approaches into MHPSS work. In this sense, the integration of MHPSS and peacebuilding is bi-directional. Current evidence indicates that: 1) psychological and social impacts of war and conflict can contribute to cycles of violence; 2) programs and actions that interconnect MHPSS and peacebuilding are likely to have greater, positive effect than could be achieved through a focus on either area by itself; and 3) integrative efforts can help to reduce Do No Harm issues.

Nevertheless, MHPSS and peacebuilding have developed as mostly separate areas, with little interdisciplinary learning and cross-pollination between the two sectors. Historically, MHPSS and peacebuilding have evolved in distinct manners, with differing histories, disciplinary roots, institutional homes, theories, methods, practices, and problems of focus. Yet rich interconnections between peacebuilding and mental health and psychosocial well-being exist, and work on integration has intensified. In 2020, the UN Secretary-General called for strengthening the integration of MHPSS and peacebuilding. The call reflected the extensive work of the UN Peacebuilding Architecture review and the Sustainable Peace Agenda, which highlighted the significant role of MHPSS for achieving and sustaining peace.

This report grows out of a related, convergent stream of work led by the Inter-Agency Standing Committee MHPSS Reference Group, which in February 2019 reconvened the Thematic Group on MHPSS & Peacebuilding to bring expertise across the two fields and to develop a high-level framework for an integrated approach. The work of the Thematic Group on MHPSS & Peacebuilding, with an ongoing webinar series and global pre-survey in 2020 on integrating MHPSS and peacebuilding, provided a basis for this work. The report also aims to complement the UNDP guidance on integrating MHPSS into peacebuilding. Overall, the report aims to enable and enrich the integration of MHPSS and peacebuilding in humanitarian, post-conflict, and development settings. Based in part on a mapping process and drawing on the

insights from four global consultations, the report aims to describe the current state of work, analyze the connections between MHPSS and peacebuilding, examine commonalities and differences, identify challenges and areas for future development, enrich conceptualizations of integration, and offer principles and recommendations for strengthening practice of integration.

**Key Learnings from the Mapping**

Conducted September – December, 2021, the mapping had both global and country-specific dimensions. Overall, participants shared fieldwork experiences from 28 countries and 1 region. There were 165 survey responses. 68 individuals participated in (joint) key informant interviews and/or focus group discussions. Consultations with young people were held in Jordan/Lebanon, the Philippines, South Sudan, Sri Lanka, and Syria.

Participants saw integrating MHPSS and peacebuilding as important since the two areas influence and complement each other. Many saw a linked approach as more effective in achieving well-being and sustaining peace for individuals, communities, and societies. Numerous participants commented that building peace begins with oneself and having good mental health.

Participants identified three types of levels of integration. Many indicated that integration can be achieved at diverse socio-ecological levels, for example across the levels of individual, family, community, and society. For many women practitioners (e.g., in Colombia, Guatemala, and the Philippines), integration across the socio-ecological levels involved an interweaving of the spiritual dimension and the natural world. A smaller subset of participants thought of levels of integration in relation to the IASC Guidelines' intervention pyramid, which calls for multiple layers of MHPSS. Still other participants thought of levels as related to the intensity of integration, as might exist in a spectrum that varies from little integration to rich, full integration.

The mapping found that most current work on integration spans diverse themes: addressing psychological and social impacts of armed conflict; transitional justice via promoting truth telling, reconciliation, reparations, and memory; addressing gender-based violence; conflict-sensitive programming; youth action; and reintegration of formerly recruited people. Areas that were also foci included supporting empowerment and livelihoods; preventing violent extremism; mediation; community dialogues; and education, including peace education. In practice, there is often rich overlap and interconnections across these diverse areas.

Eleven program case studies further illustrate the rich diversity in the approaches being used to integrate MHPSS and peacebuilding. For example, in Guatemala, to rethread the social fabric, Indigenous Mayan women led photovoice and participatory action research to document root causes of the conflict, recover customs and beliefs, and enable voice through supportive storytelling and economic empowerment. In Sri Lanka, grassroots survivors and civil society members integrated psychosocial supports for participants into government-commissioned public consultations to shape national transitional justice mechanisms. The program case studies illustrate the context, goals, activities and processes, entry points, community engagement strategies, facilitators and challenges, and lessons learned.

Integrative work has often focused on particular sub-groups such as women and girls, young people, children and adolescents, Indigenous people, and perpetrators, among others. These sub-groups serve as a reminder that "war-affected people" is not a homogeneous category and that power differences among war-affected people can marginalize particular sub-groups and make it more difficult to see or engage with them.

Participants identified three main types of entry points: 1) recognizing a significant problem in the community, which motivated practitioners to address (e.g., recognizing the need to address increasing mental health issues or violent behavior among youth); 2) using program approaches and/or leveraging networks or sectors that can act as a vessel for integrating MHPSS and peacebuilding (e.g., youth catalysts, the use of arts and cultural media, working through health, or working through safeguarding, protection, and inclusion); and 3) building an MHPSS component into peacebuilding work (e.g., building MHPSS into transitional justice processes).

Facilitators and challenges to integration faced most often by participants included areas such as: 1) logistics and operations (e.g., commitment to integrative efforts, state actors' perception of "peacebuilding"); 2) approaches and practices (e.g., participatory processes, navigating culturally-appropriate and conflict-sensitive language); and 3) practitioner capacities related to knowledge, skills, values & attitudes (e.g., program team having expertise across both sectors, or opportunities for training, supervision, and/or mentorship).

Five country case studies from Colombia, Philippines, South Sudan, Sri Lanka, and Syria offered more detailed understanding of how integration varies across contexts in response to divergent situations. The country case studies outlined main themes of work, program examples and approaches, entry-points, facilitators, challenges, and lessons learned. Across the country case studies, grassroots actors, including women and youth, played a significant role in integrative efforts. The country studies also illustrated the value of using the arts (e.g., social media, songs, photographs, art murals) as means of enabling emotional expression and social integration. The studies from Sri Lanka and Syria illustrated the utility of adapting one's language to avoid the use of politicized terms, while conducting integration under more neutral rubrics such as "health" or "education." The country studies from Colombia and the Philippines indicated the importance of cultural understandings, including Indigenous approaches, and both cautioned against excessive use of narrow, clinical approaches to MHPSS that focus primarily on individuals. The country study from South Sudan revealed a primary focus on "war trauma," with rituals, ceremonies, and traditional customs playing a central role in healing or efforts to build peace.

The contextual diversity of the country case studies cautions against using a "one size fits all" approach. A high priority is to address the particular constellation of risks and problems in the context, and also learning about, building upon, and further strengthening the diverse assets, strengths, and networks that are particular to each context.

**Grassroots Actors in Action**

Grassroots actors are frequently invisible to outsiders yet are key agents who contribute in significant, imaginative ways to strengthen social cohesion, well-being, and resilience. Since

grassroots actors may not describe their work as integrating MHPSS and peacebuilding, their contributions may be missed. Also, they often face significant challenges, such as discrimination, difficult economic circumstances, and tokenized inclusion.

While it is not possible to consider all groups within "grassroots actors," this report focuses on four groups that emerged in the mapping and literature: women and girls, young people, men and boys, and LGBTQIA+ people. The report documents their perceptions of integration of MHPSS and peacebuilding, and challenges to integration, and also raises questions to consider when designing and delivering integrative efforts with and for them. Among the key highlights for these four groups is that women and girls and young people have unique perceptions of integration. Some women envision integration as deep relationships between self, others, and all beings. Young people who are in a liminal space of being and becoming understand integrative efforts to address a complex reality and make a more positive future. Also, there is a need for integrative efforts with and for men and boys to address violent or militarized masculinities and provide supports for healing and stigma reduction for those who have been sexually violated. As well, LGBTQIA+ young people are often at the forefront of integrative efforts as they challenge discrimination faced by their own community and other minority groups. Yet additional efforts by all groups are needed to address the MHPSS and peace needs of LGBTQIA+ people.

More broadly, grassroots actors largely use six modalities to catalyze MHPSS and peacebuilding integrative efforts: empowerment & livelihood processes; feminist movements; grassroots movements; Indigenous movements; policymaking & political processes; and social media and virtual programs. Of note, these approaches tend to be unusually holistic, and the social movements from within go well beyond the usual contours of NGO programming. Three modalities for expansion (i.e., ideas for further ways to facilitate integrative efforts) are: family & intergenerational support; strengthening the "everyday" processes; and climate action.

Although grassroots actors demonstrate resilience and creativity, supportive actors (e.g., governments, INGOs, funders, research and academic bodies) are needed to fulfill their rights and enable their work as changemakers.

**Commonalities, Differences, and Priorities for Integration**

Understanding the commonalities and differences between MHPSS and peacebuilding can help define areas of common ground that invite collaboration and complementarity across the sectors. Some commonalities include similar goals to improve human well-being and positive social relationships at multiple levels; the use of social cohesion and social ecological approaches; and leveraging community engagement and community resilience as entry-points.

Of course, differences also exist, and these are best regarded as opportunities for co-learning. Historically, work on peacebuilding has placed greater emphasis on the importance of power differences than has work on MHPSS. Significant differences arise in regard to terminology and also underlying conceptualizations. Some workers see "trauma healing" as foundational for work on peacebuilding, whereas other workers and the IASC Guidelines see a sole or dominant focus on this approach as pathologizing and as being an excessively clinical

approach when applied to societies. Much needed are spaces for respectful dialogue, reflection, and joint development of common frameworks and terminology. Currently, much more work has sought to weave MHPSS components into work on peacebuilding than the other way around.

Among the priorities identified in the report are: documenting, learning from, and supporting grassroots, bottom-up initiatives; strengthening documentation and the evidence base on effective means of integrating MHPSS and peacebuilding; enriching integration across humanitarian, post-conflict, and longer-term development phases; strengthening intersectoral work with other sectors (e.g., education, health, livelihoods); integrative work with leaders; and building integration into efforts to prevent conflict and sustain peace.

**Conceptualizations of Integration**

While significant, diverse steps are being taken to integrate MHPSS and peacebuilding, much additional work remains to be done. It can be useful to help guide this work by imagining what integration entails. Some key questions include:

- In programming, are there different levels of integration of MHPSS and peacebuilding?
- Beyond particular programs, what are wider elements of integration?
- How do cultural differences and understandings of knowledge and being color efforts at integrating MHPSS and peacebuilding?
- What commonalities and differences across the sectors enable or limit integration?
- What are some key gaps that need to be identified, discussed, and addressed in enabling further integration of MHPSS and peacebuilding?

It may be useful to think of integration as a spectrum – from light touch linkages to full integration. At the project level, for example, light touch linkages may include little conceptual integration of MHPSS and peacebuilding and no theory of change (ToC) in which the elements from both areas are necessary for the achievement of the project outcomes. Towards the middle of the spectrum, there may be a conceptual framework, but no ToC for joint processes and outcomes of the program. Or, the program brings in elements of or applies a lens from only one area into the other, integrating in a unidirectional manner. At the other end of the spectrum is a bi-directional approach. There is a clear conceptual framework and ToC for joint processes and outcomes for the program, and MHPSS and peacebuilding elements are interwoven in complementary manners and are realized as being mutually synergistic in their outcomes.

It may also be useful to think of integration as occurring across four different levels: level of programming (across all levels of the program cycle), organization-level (within an organization, agency, or group), inter-organization level (between two or more organizations, agencies, or groups), and level related to conceptualizations (through different epistemologies, understandings of well-being, and approaches to achieving political, social, and psychological change). These four levels may develop separately, be brought closer together, or braided together systematically, leading to light-touch linkage, partial integration, or full integration, respectively. In the braided approach, or full integration, for example, the people and organizations working to integrate MHPSS and peacebuilding in a particular region might form a community of practice that attempts to learn from each other on what is working and how to

enable effective agency integration. The community of practice might also enable regular meetings and dialogues for purposes of co-learning, joint capacity building, and reflecting on complex issues such as how to support and learn from diverse cultural approaches or achieve better agreement on underlying conceptualizations of integrating MHPSS and peacebuilding.

This braided approach is long-term and recognizes that the integration of MHPSS and peacebuilding cannot be achieved overnight. It also suggests that in addition to integrative programming, there needs to be inter-organizational processes of learning that make it possible to reach agreement on issues such as useful guidance and frameworks for monitoring and evaluation. It suggests also the importance of addressing conceptual issues and differences in a deliberate manner that promotes further integration and more comprehensive, high quality supports for the people who need them.

Some useful questions for wider discussion on integration of MHPSS and peacebuilding:

- Do we have useful, inclusive processes of inter-organizational or inter-community dialogue and co-learning about integrating MHPSS and peacebuilding?
- What venues or processes can enable constructive dialogue between agencies and practitioners who have focused mostly on peacebuilding or on MHPSS?
- Are different organizations contributing to common understandings and widely agreed, inter-organizational guidance?
- Are there venues for regular reflection on difficult issues or thinking through strategic directions in integrating MHPSS and peacebuilding?

**Principles and Recommendations**

The principles and recommendations provided are aligned with the *IASC Guidelines on Mental Health and Psychosocial Support in Emergency Settings* and core peacebuilding principles, such as conflict sensitivity, Do No Harm, and the full participation of women, girls, and young people (as per the Women, Peace, and Security and the Youth, Peace, and Security Agendas).

The six principles suggested for integrating MHPSS and peacebuilding are: 1. human rights and equity; 2. participation; 3. Do No Harm; 4. build on available resources and capacities; 5. integrated support systems, and 6. multi-layered supports.

The recommendations are preliminary yet were sharpened by the insights of people working in diverse countries and contexts. The suggested recommendations are grouped into the following categories: General recommendations (and includes recommendations for donors); networking, dialogue, and coordination; considering specific populations, conflict phases, and key actors; practitioner care and development; community engagement; and working with grassroots actors. In moving toward better integration, the process will be as important as the content. This includes approaching the task of integration with curiosity, openness, and a spirit of co-learning and collaboration across the MHPSS and peacebuilding sectors.

## BACKGROUND OF THE REPORT

Rich interconnections exist between peacebuilding and mental health and psychosocial well-being. Without peace and social cohesion, mental health and well-being are undermined by entrenched hatreds and fears, social divisions, and stresses associated with ongoing insecurity. Similarly, violent conflict often creates emotional impacts and grievances that blunt people's trust of others and willingness to support peace processes.

Despite these and many other connections, mental health and psychosocial support (MHPSS) practices and interventions remain mostly separate from peacebuilding efforts. MHPSS is generally included during and after conflicts as part of the humanitarian response. However, there is as of yet little interdisciplinary learning and cross-pollination between the peacebuilding and MHPSS sectors.

In 2020, the MHPSS agenda was raised in the context of the review process of the UN Peacebuilding Architecture. A Task Force, led by the MHPSS team at the Ministry of Foreign Affairs of the Netherlands, developed a set of core recommendations towards increasing interlinkages between MHPSS and peacebuilding. Also in 2020, the UN Secretary-General called for strengthening the integration of MHPSS and peacebuilding. Anticipating and contributing to these currents, the IASC MHPSS Reference Group convened in February, 2019 the Thematic Working Group on MHPSS & Peacebuilding (co-led by Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) (Ananda Galappatti, Claudia Schraewer) and UNFPA (Henia Dakkak)) to bring together MHPSS and peacebuilding expertise to develop a more integrated approach. Even before the formation of the Working Group, its members have led diverse initiatives, including a global survey (e.g., to understand what learning tools would be helpful for practitioners from both fields, and perceptions of key connections, complementarities, tensions, and divergences of MHPSS and peacebuilding) and the hosting of webinars on topics of interest related to MHPSS and peacebuilding (e.g., integration with livelihoods, integration with climate change, and highlight young people's important role). This report stands on the shoulders of these efforts and incorporates their insights.

To lay the foundation for developing technical guidance, the IASC MHPSS Reference Group initiated a consultancy in early 2021 to produce a Knowledge Product which maps current work that links or integrates MHPSS and peacebuilding, identifies diverse entry points, and facilitators and challenges to integration, helps conceptualise the integration of MHPSS and peacebuilding, and offers preliminary recommendations for practice. This Knowledge Product was developed through a collaboration between peacebuilding and MHPSS actors via the Thematic Working Group on MHPSS and Peacebuilding, whose members include: CRS, CVT, Interpeace, ARQ International, War Child Holland, GIZ, UNFPA UNICEF, IOM, WHO, as well as with other key agencies such as the UNDPPA (PBSO), UNDP, UNODC, UNOCT and UNDPO.

## HOW TO USE THIS REPORT

This report is divided into three sections.

**Section I: Overview** provides readers with: a concise summary and understanding of the findings (Executive Summary); and information about the visionary leadership, processes and institutions that led to the making of this report (Background of the Report).

**Section II: Towards Integration** provides readers with: evidence of why integrating MHPSS and peacebuilding is important and the overview of MHPSS and peacebuilding as separate fields and as fields coming together (Introduction & Rationale); a summary of integration perceptions, approaches, programs, facilitators, challenges, community engagement processes, and lessons learned, including learnings from eleven program case studies and five country case studies from Colombia, Philippines, South Sudan, Sri Lanka and Syria (Key Learnings from the Mapping); a summary of more specific perceptions, challenges, and areas of integrative action by grassroots actors, including women and girls, young people, men and boys, and LGBTQIA+ people (Grassroots Actors in Action); and MHPSS and peacebuilding areas of convergence and divergence and gaps and priorities for integration (Commonalities, Differences, and Priorities for Integration).

**Section III: Towards the Future of Integration** provides readers with: an invitation to explore, reflect, and question conceptualizations of integration, including considering integration as a spectrum and as including multiple levels, such as programming and inter-organizational levels (Conceptualizations of Integration); and to consider principles and preliminary recommendations that can help to guide effective practice (Principles and Recommendations).

At the end of each sub-section, a Key Highlights box is provided as core messaging and learnings.

# SECTION II:
# TOWARDS INTEGRATION

## INTRODUCTION & RATIONALE

Armed conflict has devastating, long-term impact on people and societies worldwide. Due to protracted conflicts in settings such as Syria, Colombia, and Democratic Republic of the Congo and new conflicts such as that in Ukraine, 2022 set an unacceptable precedent: for the first time, there are over 100 million forcibly displaced people,[1] including 48 million internally displaced persons, 26.6 million refugees, and 35 million children.[2] Armed conflicts have become increasingly protracted,[3] with many lasting a decade or longer. The protracted nature of conflicts and humanitarian crises has blurred the lines between humanitarian, post-conflict, and development settings. As a result, many analysts now speak of the triple nexus between the humanitarian, development, and peace sectors.[4,5]

Armed conflicts leave behind shattered, divided societies that are at risk of repeating cycles of violence, and therefore need concerted peacebuilding efforts.[6] The conflicts take a heavy toll on people's mental health and psychosocial well-being, as one in five people who live in a war zone will likely develop a mental disorder.[7] Many others suffer from painful everyday stresses associated with multiple losses, family separation, gender-based violence (GBV), disability, inability to meet basic needs, and ongoing insecurity, among many others.[8,9] The COVID-19 pandemic has added to these impacts and heightened awareness of the importance of mental health and psychosocial support (MHPSS). As well, climate change has posed significant risks to communities, especially to women and girls' well-being, security, and agency; and environmental degradation now threatens rural and Indigenous populations ways of living.[10]

### Why Integrate MHPSS and Peacebuilding?

Although peacebuilding and MHPSS have developed along separate lines,[11,12] MHPSS and peacebuilding are inherently related and synergistic.[13,14,15,16] Broadly, peace cannot take root if conflict-affected people suffer from deep psychological and social impacts of war, armed conflict, and destructive, inter-communal or inter-group conflict (e.g., inter-communal conflict), which can impede peacebuilding and animate ongoing hostilities. Conversely, without peace, there are significant limits on people's mental health and psychosocial well-being. Fear, insecurity, and ongoing violence impose enormous stresses, damage mental health and psychosocial well-being, and shatter social cohesion and supports such as social relations and networks.

These dynamics apply also to prevention. Even before the outbreak of armed conflict, memories and narratives of structural violence, discrimination, and mistreatment by another group can harm people's mental health and psychosocial well-being, and stir exaggerated fears of "the Other." These fears and past grievances can help to erode social cohesion and animate violence.

A brief evidence summary helps to clarify these interconnections between MHPSS and peacebuilding. Although the evidence base is still under development, the current evidence supports three main ideas.

***1. The psychological and social impacts of war and conflict can contribute to cycles of violence.***

Extensive evidence indicates that armed conflict increases rates of mental disorders such as post-traumatic stress disorder (PTSD) and depression.[17] Significant psychosocial suffering in conflict settings comes from problems such as family separation, GBV, multiple losses, displacement, loss of livelihoods, and disabilities, to name only a few.[18] The suffering is often particularly intense for girls and women since armed conflicts amplify GBV (including rape and other atrocities as weapons of war) and since GBV may continue or increase in prevalence even after ceasefires have been signed.[19,20] People who have been victimized and suffer mental disorders are more likely to develop substance abuse problems and experience reduced functionality and ability to work, thereby reducing the ability of the community to recover economically and socially.[21] Also, people who have been victimized may become perpetrators themselves.[22,23,24] This includes the experiences of children associated with armed forces and armed groups (CAAFAG), whose victimization at an early stage of life has significant consequences for the physical, mental, and psychosocial well-being, and takes a heavy toll on children's relationship with their families and communities.[25] The contribution to violence is also grounded in the underlying structural inequalities, culture, and histories that constrain the lives of people, rendering conflict and violence an option among narrowing opportunities.[26,27,28] Overall, mental disorders and psychosocial suffering are grievances that help to animate conflict and cycles of violence and block sustainable peace.[29]

The harmful psychological effects of armed conflict can have significant intergenerational impact. The emotional and social effects of war may accumulate and create a sense of victimization that becomes woven into the fabric of people's collective narratives,[30] which are subject to political manipulation, and social identities[31] that are passed down from one generation to the next, thereby inviting revenge and ongoing fighting. Parents' communications with their children can help to transmit traumatic memories and impacts, although this destructive pattern can be interrupted by appropriate social and therapeutic interventions.[32] Intergenerational impact is visible also in cycles of intimate partner violence (IPV), which is pervasive in many war zones,[33,34,35,36] directed primarily towards women, and grounded in norms of male power and privileging. For children, exposure to IPV can lead to mental disorders,[37,38] conduct problems,[39] and difficulties learning in school.[40] Also, children who were exposed to IPV are at greater risk of perpetrating IPV or suffering additional incidents of IPV,[41,42] thereby creating an intergenerational cycle that can increase the prevalence of violence in a society.

***2. MHPSS and peacebuilding are inherently synergistic. Work that systematically interconnects MHPSS and peacebuilding has greater, positive effects than can be achieved by working on either MHPSS or peacebuilding alone.***

When work is done separately on peacebuilding only, or on MHPSS only, the positive effects are limited. For example, if peacebuilding were implemented by itself, its effectiveness would be reduced by the impact of unaddressed MHPSS needs. Civilians who suffered emotional anguish or disorders such as PTSD are less likely to support peace processes.[43,44] In peacebuilding work to reintegrate CAAFAG and adult ex-combatants, MHPSS related problems, including stigma, can block reintegration efforts,[45,46,47] increasing the risk that ex-CAAFAG will

rejoin an armed group or become mercenaries.[48] Further, armed conflict carves deep social divisions that undermine social trust and social cohesion and make it difficult for peacebuilding processes to take root or to become sustainable.[49] Settings that are presumed to be "post-conflict" frequently include psychological and social impacts, searing memories of injustices, humiliations, and victimizations, and grievances that can lead to repetition and ongoing cycles of violence or claims to rights and desires.[50,51] Children are socialized into these systems of violence and may see the violence as "normal."[52] These settings often include psychological drivers of violence, such as entrenched hatreds and diabolical images of "the Other" that help to enable cycles of violence.[53]

Similarly, if work on MHPSS for conflict-affected people were implemented on its own, its effectiveness would likely be reduced by inattention to conflict-induced reductions in social cohesion, which can deter people's mental health and psychosocial well-being. In conflict and post-conflict settings, and also in settings on the verge of conflict, local people frequently identify insecurity, fears of attack, and associated concerns for the well-being of one's family as being among their top sources of distress. Such settings are often rife with poverty and deprivation that promotes food insecurity and may pull children out of school and into dangerous labor.[54] Everyday stresses not only damage people's well-being but also help to mediate the development of mental disorders, such as PTSD and depression.[55,56]

Fortunately, these limitations are overcome and better outcomes are achieved when intentional steps are taken to integrate MHPSS and peacebuilding. Promising evidence suggests that it is possible to heal individual and collective impacts of war and genocide, with benefits to people's mental health, psychosocial well-being, and willingness to support peace.[57,58,59,60] Effective interventions usually entail community-led dialogues about what happened, reflection or education on the causes of the war, psychoeducation about "trauma" and effects of war, storytelling with space for emotional expression, and discussions of peace. However, the evidence in this area needs further development. For example, comparison groups are seldom included in designs, and the failure to use strong qualitative methods may obscure the voices and views of community people.

Although there is better documentation showing how MHPSS influences peacebuilding, peacebuilding efforts that strengthen social trust and social cohesion can have synergistic effects with community-based psychosocial supports, which also aims to strengthen relationships. For example, badly stigmatized young mothers who had formerly been recruited into armed groups in Sierra Leone, Liberia, and Uganda engaged in peer support and collectively decided to undertake livelihoods projects, while trusted community advisors advocated for them in the community. As a result, the young mothers and their children gained community acceptance and reported significantly increased well-being.[61] Also, evidence indicates that work to support MHPSS can be more effective when it is integrated with truth telling, reparations, and justice processes .[62,63,64] Box 1 (p. 14) provides further examples of how a peacebuilding approach can support MHPSS.

**Box 1. Examples of How a Peacebuilding Approach Can Support MHPSS**

- The reduction of violence and provision of safety supports people's mental health and psychosocial well-being.
- Social cohesion, social trust, and positive relationships at multiple levels promote mental health, psychosocial well-being, and resilience
- People who participate in well-designed truth telling processes may report psychological benefits.
- Peaceful dialogues between leaders can reduce fear and hostility at societal level, enabling improved mental health and psychosocial well-being.
- The mental health and psychosocial well-being of formerly recruited children is enhanced by reintegration efforts that reduce stigma and community fears of returning children.
- Conflict sensitive MHPSS work prevents social divisions that could harm mental health and psychosocial well-being.
- Steps to reduce tensions between host and displaced people can improve the mental health and psychosocial well-being of displaced people.

Overall, MHPSS and peacebuilding are inherently complementary and have synergistic effects, and the benefits of integration are bi-directional. The integration of MHPSS and peacebuilding is necessary for achieving the full impact of work on both MHPSS and peacebuilding and for enabling human well-being, social cohesion, and peace. This integration ultimately enables the flourishing of individuals, communities, and wider collectives.

***3. Integrating MHPSS and peacebuilding can help to reduce Do No Harm issues.***

The lack of integration of MHPSS into peacebuilding processes can cause unintended harm. In Sierra Leone, where truth telling processes led people to discuss painful memories without consideration of whether people were ready to discuss horrendous experiences and without MHPSS support, some people exhibited increased psychological suffering and vulnerability as a result.[65] This Do No Harm issue could have been prevented through careful attention to the invasiveness of the questions, sensitivity to participants' readiness to talk, and the availability of MHPSS support for participants. Appropriately trained staff in MHPSS competencies (e.g., psychological first aid) could have prevented this Do No Harm issue. In general, people should not be encouraged to re-visit painful memories unless sufficient supports are available at the time of reawakening the memories and afterwards. Also, evidence from other contexts indicates that for some people, talking and expression are less helpful than is avoidance of the painful memories.[66,67]

The lack of integration of peacebuilding aspects into MHPSS work can similarly cause unintended harm. In humanitarian settings, where access to different areas is limited, one might tend to provide MHPSS supports for the people who can be reached. Yet if those people come from only one side of the conflict, this could be perceived as favoritism and could worsen social divisions. This situation could be avoided by working in a conflict-sensitive manner, which is a foundational, evidence-based principle of peacebuilding.[68] For example, during the Syrian crisis, some organizations facilitated a regional-wide response by providing MHPSS services to Syrian refugees and internally displaced person(s) (IDP) not only in Syria but also in Lebanon, Turkey, and Jordan.[69] A lack of attention to analyzing how an intervention may play into the social,

political, and economic power relations and dynamics in a context may mean an intervention unintentionally weakens connectors or strengthens dividers, which can undermine peacebuilding and reduce people's psychosocial well-being. Although the successful integration of MHPSS and peacebuilding does not prevent all Do No Harm issues, this integration can be a valuable step toward practice that is ethically appropriate and sensitive to both the conflict setting and the context.

Overall, then, current evidence indicates that integrating MHPSS and peacebuilding enhances positive outcomes and limits negative, unintended outcomes. Since much remains to be learned about integration, additional effort should be made to document both the benefits and the potential harms in this important area of work.

## A Socio-Ecological Framework

Workers in both the MHPSS and peacebuilding arenas favor a socio-ecological framework that helps to create a systemic, comprehensive approach. Whether applied to peace or to MHPSS, the core idea is that different levels of the social environment such as the family, community, and societal levels are highly influential and can either support or detract from peace and mental health and psychosocial well-being. Often represented as a series of concentric circles with the individual at the center, the framework captures the idea that individual beliefs and emotions are key, yet are shaped by relationships and the context at the family, community, societal, and international levels, which interact continuously. The implication for MHPSS and for building peace is the importance of working at multiple levels to create a social environment that is conducive to well-being and peace. Applying this insight to the integration of MHPSS and peacebuilding, Table A1 (see Annex A) describes how these MHPSS and peacebuilding interactions occur at multiple levels (across self, family, community, societal, and international levels) and in ways that can either support or damage mental health, psychosocial well-being, and peace.

## Overview of the Two Fields

Considering the benefits of integration, one might have expected to see extensive integration between the areas of MHPSS and peacebuilding. Yet these two key areas have been and continue to be mostly separate.[70,71] Historically, peacebuilding and MHPSS have evolved in distinct manners, with differing histories, disciplinary roots, institutional homes, theories, methods, practices, and problems of focus.

### *Peacebuilding*

Working largely at macro- and inter-group levels (such as to address tensions between competing political factions or ethnic groups), peacebuilding has sought to "prevent the resurgence of conflict and to create the conditions necessary for a sustainable peace in war-torn societies."[72] Its work has included addressing drivers of conflict; strengthening social trust, social cohesion, and resilience; enabling peaceful approaches to managing conflict; promoting norms of nonviolence; enabling relational and conflict transformation at a societal level; disarmament, demobilization, and reintegration (DDR) of armed forces and groups; human rights and election

monitoring; and rehabilitation of national infrastructure, among others. Peacebuilding also includes transitional justice, the four pillars of which are truth telling, reparation, justice, and guarantees of non-repetition. Since peacebuilding is inherently inter-organizational and multidisciplinary, peacebuilders have typically had ties with disciplines such as peace and conflict studies, political science, economics, international law and justice, international relations, human rights, sociology, and development studies, and also with areas such as African and cultural studies or women's and gender studies. Although it includes initiatives that address individual and small community group processes,[73] mainstream peacebuilding has focused more on societal issues and structural reforms than the MHPSS sector has.

Key Peacebuilding actors at the UN include the Secretary-General, the Security Council, the General Assembly, the Department of Political and Peacebuilding Affairs, the Peacebuilding Commission, the Peacebuilding Fund, UN Women, the Department of Peace Operations, UNDP, UNFPA, UNICEF, IOM, and WHO. GIZ has also been very active in supporting work that integrates MHPSS and peacebuilding. International alliances and networks include The Peace Alliance, the Global Coalition on Youth, Peace, and Security, and Peace Direct. Highly active NGOs on peacebuilding include Catholic Relief Services, Interpeace, Search for Common Ground, and International Association for Human Values, among many others. Among Government actors, the Dutch Government has led global conferences that connect MHPSS and peacebuilding and has helped to organize funding to support integrated work. Globally, the International Network on Conflict and Fragility serves as coordination mechanism for peacebuilding within the OECD DAC members. The g7+ also serves to support member countries to achieve transitions towards resilience and the next stages of development.

Political and institutional stakeholders of a country are equally important contributors. This includes national and local-level parliamentarians, ministers, reconciliation commissioners, mayors, peace negotiators, local peace committees. Less visible but perhaps even more important are the grassroots actors—youth, women, ordinary adults, religious leaders and other natural leaders—who are not part of a national or international NGO but mobilize community or group action for peace and well-being. As discussed below (see p. 16), grassroots workers frequently do not use the technical language of MHPSS or peacebuilding but may speak instead of supporting human rights, well-being, positive relations, or peaceful co-existence. Grassroots actors often have a deep understanding of the context, use locally adapted, sustainable ways of working, and take an approach that is more holistic than, for example, the humanitarian system – which can often work in sector silos, although increased efforts over recent years to ensure stronger cross-sectorial work has occurred.

### *MHPSS*

MHPSS emerged as part of humanitarian response in conflict and post-conflict settings and out of concern for the psychological and social impacts of war and conflict. The field of MHPSS is grounded primarily in disciplines such as psychiatry, psychology, and social work, with connections also in anthropology, community development, child development, women's studies, and the wider health field. MHPSS has been strongly influenced by Western psychiatry and psychology, which tend to focus on individual clinical disorders such as anxiety, PTSD, depression, and schizophrenia. The field has also been influenced strongly by community-based

psychosocial approaches that focus on relationships, the connections between emotional and social well-being, cultural understandings and practices, and non-clinical forms of distress resulting from problems such as hunger, lack of livelihoods, family separation, discrimination, loss of social supports, and living at risk of trafficking, GBV, and recruitment into armed forces or groups.

In the 1990s, work on MHPSS in humanitarian settings was polarized into the more clinical and the more holistic psychosocial support approaches.[74] This division was mended at least partly by the first global guidelines created in 2007 – the *IASC Guidelines on Mental Health and Psychosocial Support in Emergency Settings* – which deliberately used "the composite term mental health and psychosocial support … to describe any type of local or outside support that aims to protect or promote psychosocial well-being and/or prevent or treat mental disorder."[75] As outlined in the IASC Guidelines, work on MHPSS is both social and individual, with the term "psychosocial" aiming to capture the dynamic interplay and inextricable interconnections between the two. The IASC Guidelines' call initially for social interventions such as community mobilization, collective self-help, use of appropriate cultural practices, and social means of strengthening resilience. They also call for the mainstreaming of MPHSS into diverse sectors of humanitarian action such as shelter, water and sanitation, health, child protection, and education. For people who have been severely affected, the IASC Guidelines call for effective referrals to and provision of specialized care.

Key MHPSS actors at the UN include WHO, UNICEF, UNHCR, IOM, UNFPA, WFP, OCHA, and the International Federation of Red Cross and Red Crescent Societies, among others. Diverse Governments in conflict-affected countries are active on MHPSS issues. Echoing the polarization mentioned above, mental health concerns are frequently addressed by a Ministry of Health, whereas psychosocial issues are addressed by a Ministry of Social Welfare. The Dutch Government and the German Government have been strong advocates of and supporters for the holistic MHPSS approach presented in the IASC Guidelines. Many different NGOs are active on issues of MHPSS.

Globally, the IASC Reference Group on MHPSS coordinates diverse UN, (I)NGO, and other actors in implementing the IASC Guidelines and enabling the holistic, multi-level approach that they envision. The IASC Reference Group on MHPSS has developed numerous resources and tools for conducting assessments and addressing different issues (see http://mhpss.net). It also oversees over 50 country level Technical Working Groups that coordinate work on MHPSS.

Grassroots-level, professionalized MHPSS providers include the network of local psychologists, social workers, psychiatrists, counselors, and nurses. Other grassroots actors such as women's groups, youth groups, religious organizations and natural leaders play a key role in supporting people's mental health and psychosocial well-being. However, they frequently do not use these technical terms, which can be stigmatizing. Focusing on local idioms such as "thinking too much," they may use a mixture of peer-based, culturally derived, and also external supports to help address MHPSS needs. Quite often, their approaches are holistic and multi-sectoral.

***Challenges to Integration***

As indicated in previous mappings,[76,77] efforts to integrate MHPSS and peacebuilding face multiple challenges: the collective vs. the individual focus, the political focus of peace-building and concerns about impartiality, the shortage of technical expertise in both areas, the lack of clear theory and accepted terminology, the paucity of materials for operationalizing the linkage of the two areas, and the need for more cross-sectoral partnership and collaboration.

### *Steps Toward Integration*

Against this backdrop, there have been numerous steps toward integrating MHPSS and peacebuilding in recent years. Foundational steps were taken as part of the evolving "Sustaining Peace" agenda. In 2018, the Secretary-General's report on "Peacebuilding and Sustaining Peace" called for the UN to improve its engagement with civil society at the local level, and adopted twin resolutions (A/RES/72/276 and S/RES/2413) to submit an interim report on peacebuilding, including a comprehensive report as part of the 2020 review on the UN's peacebuilding architecture. In May, 2018, the UN and World Bank published a joint study, "Pathways for Peace," arguing that the key to preventing crises is investment in inclusive, sustainable development. This study highlighted how conflict causes grievances, including those owing to psychological impacts, which help to animate ongoing conflict.

In 2020, the published UN Community Engagement Guidelines aim to support UN field presences in developing country-specific community engagement strategies, including those related to peacebuilding and sustaining peace, with attention to working in a psychologically sensitive manner. Also in 2020, the MHPSS agenda was raised in the context of the review process of the UN Peacebuilding Architecture and a Task Force, led by the MHPSS team at the Ministry of Foreign Affairs of the Netherlands, developed a set of core recommendations towards increasing interlinkages between MHPSS and peacebuilding. A landmark step toward integration occurred in the UN Secretary General's 2020 report on "Peacebuilding and Sustaining Peace," in which the UN Secretary-General wrote, "the further development of the integration of mental health and psychosocial support into peacebuilding is envisaged with a view to increasing the resilience and agency of people and communities" (p. 11). Others, too, have called for integration, noting that linking MHPSS and peacebuilding contributes to the implementation of the Sustainable Develop Goals (SDGs) agenda (especially SDGs 3 and 16).[78] In 2022, UNDP published a report[79] and a guidance note[80] on integrating MHPSS into peacebuilding.

Complementing and supporting these wider currents, the IASC Reference Group on MHPSS has consistently called for the integration of MHPSS into multiple sectors since its inception in 2007. The IASC MHPSS Reference Group reconvened the Thematic Working Group on MHPSS & Peacebuilding in February, 2019, to advance these synergies and bring together MHPSS and peacebuilding expertise to develop a cohesive approach.

## Purpose

The purpose of this report is to enable and enrich the integration of MHPSS and peacebuilding in humanitarian, post-conflict, and development settings. It aims to describe the current state of work, analyze the connections between MHPSS and peacebuilding, examine

commonalities and differences, identify challenges and areas for future development, and offer recommendations for strengthening practice that integrates these two fields. Building on the extensive work already done to connect MHPSS and peacebuilding,[81, 82, 83] this report is offered in a spirit of co-learning with many different people and wanting to help develop a foundation for future work.

**KEY HIGHLIGHTS: INTRODUCTION & RATIONALE**

- Armed conflict has devastating, long-term impact on people and societies worldwide, leaving behind shattered, divided societies that are at risk of repeating cycles of violence, and they take a heavy toll on people's mental well-being.
- Evidence supports three main ideas for integration of mental health and psychosocial support (MHPSS) and peacebuilding: 1) The emotional and social impacts of violent conflict can contribute to cycles of violence; 2) MHPSS and peacebuilding are inherently synergistic. Work that systematically interconnects MHPSS and peacebuilding has greater, positive effects than can be achieved by working on either MHPSS or peacebuilding alone; and 3) Integrating MHPSS and peacebuilding can help to reduce Do No Harm issues.
- To achieve maximum positive impact, integrative efforts at different socio-ecological levels need to be interconnected and aligned.
- Historically, peacebuilding and MHPSS have evolved in distinct manners, with differing histories, disciplinary roots, institutional homes, theories, methods, practices, and problems of focus.
- Calls to action have been made for integration, including by the UN Secretary General. There is a need for more cross-sectoral partnership and collaboration between MHPSS and peacebuilding actors.
- Integrative efforts can contribute to the implementation of the peacebuilding and sustainable peace agenda and the SDGs (SDG 3 and 16).

# KEY LEARNINGS FROM THE MAPPING

A mapping was conducted to learn more about the current state of work on integrating MHPSS and peacebuilding. An extensive overview of the methods (global and country-specific mapping processes, ethics, and limitations) is provided in Annex B. The mapping included surveys (translated into Arabic, French, and Spanish) (Annex C), key informant interviews, focus groups, consultations, and review of academic and grey literature.

Conducted September – December, 2021, the mapping had both global and country-specific dimensions. The global dimension focused on learning broadly from practitioners in diverse regions worldwide about their views and experiences on linking MHPSS and peacebuilding. The country-specific dimension of the mapping consisted of four country case studies from different regions (Colombia, the Philippines, Sri Lanka, and Syria). Whereas the global dimension aimed to identify broad patterns, the country case studies aimed to illuminate how context shapes integrative efforts at the grassroots level.

A draft report was prepared in January 2022. Between then and September 2022, feedback was sought from four global consultations, and the majority of the participants were from LMIC. The suggestions from the global consultations helped to guide the revision of this report. Also, this revision added a South Sudan country case study and an additional program case study. Additional information on the mapping is provided in Annex D.

## Participant Information

Overall, participants shared fieldwork experiences from 29 countries and 1 region: Afghanistan, Central African Republic, Chile, Colombia, the Democratic Republic of the Congo, El Salvador, Ethiopia, Guatemala, India, Iraq, Kashmir region, Kenya, Lebanon, Mexico, Myanmar, Nepal, Nigeria, Philippines, Rwanda, Sierra Leone, Somalia, South Africa, South Sudan, Sri Lanka, Sudan, Syria, Tanzania, Uganda, Ukraine, and Zambia. There were 165 survey responses. 68 individuals participated in (joint) key informant interviews and/or focus group discussions. Consultations with young people were held in the Philippines, Jordan/Lebanon, South Sudan, Syria, and Sri Lanka. Annex D (Figure D1) provides additional participant information.

## Views of Integration

This sub-section highlights practitioners' perceptions on why integration is important, what integration means to them, and what the levels of integration could be.

### *Why Integration is Important*

Practitioners identified two main reasons why integrating MHPSS and peacebuilding is important: 1) MHPSS and peacebuilding influence and complement each other; and 2) a linked approach is more effective in achieving well-being and sustaining peace for individuals, communities, and societies. Commonly expressed beliefs included:

- A peaceful society cannot exist if psychological impacts of war (such as grief, depression, stress, and trauma) are unaddressed in individuals, families, and communities.
- The mental health and psychosocial well-being of individuals, families, and communities cannot last if the social fabric is fragmented.
- Cycles of violence and armed conflict risk interrupting and damaging processes of healing.
- Integration is important because it facilitates positive outcomes such as individual- and community-level well-being, resilience, social cohesion, and attainment of rights and dignity; and larger-scale changes, such as a reduction in intergenerational conflict, breaking the cycle of violence, healing collective trauma, and sustaining peace.

The participant narratives in Box 2 illustrate these views. They indicate also that for some participants, MHPSS and peacebuilding are inherently similar, though they often have different emphases on micro- and macro-levels, respectively. Some understandings are richly intertwined with elements related to culture and the relationship with all living beings.

**Box 2. Some perceptions of why integration is important.**

Integration is important "in terms of building people's resilience [and] coming to terms with… what was lost – especially the difficult 'wants' in terms of the loss of a potential future, the dreams that they had – had having to re-imagine a different [reality] for themselves and their community." – Woman practitioner, Sri Lanka

"For anyone of us to achieve peacebuilding, he needs to be at peace with himself. I don't think that's possible if you don't have stable mental health." – Young man practitioner, Jordan/Lebanon

Integration is important because MHPSS and peacebuilding are "two sides of the same coin, [but] MHPSS focuses on the individual person and her/his capacities, whereas peacebuilding focuses on relationships and community." – Male practitioner, Rwanda

Integration can be "a tool of liberation, stripping the internalization of oppression, reclaiming worth, respect, deserving of rights and in full exercise to build respectful relationships between human beings, life network, planet Earth." – Mayan Indigenous, LGBTQIA+, woman practitioner, Guatemala

### *The Meaning of "Integration"*

Most practitioners understood "integration" to mean bridging the two sectors of MHPSS and peacebuilding, and increasing the impact of each (see Box 3). Additionally, some practitioners expressed uncertainty around what integration means. One practitioner cautioned that there cannot be "one approach" to integrating MHPSS and peacebuilding. Some participants said that MHPSS and peacebuilding are intrinsically integrated and interconnected, and therefore did not need to be bridged.

**Box 3. Some meanings of "Integration"**

Integration means:

… bringing the two sectors together to "create new awareness and change attitudes towards [the other sector]" – Woman practitioner, global

… "using the tools, knowledge and practices of the peacebuilding sector and the MHPSS sector at the service of the contextual needs of communities and societies to enable them to move towards positive, sustainable peace, [and] increased well-being" – Woman practitioner, Nepal

… "identifying key joint elements to be shared and key elements to remain under [the] specific [sectors] while allowing for cross-reference" – Woman practitioner, Uganda

Further, distinctive understandings emerged for women and girls and young people. These are explored in the "Grassroots Actors in Action" section (p. 30). Further examples can also be seen in the country case studies for Colombia and Syria.

***Levels of Integration***

Practitioners described three types of levels for integration. The first, and most common, related to socio-ecological levels, for example across the levels of individual, family, community, and society. For many women practitioners (e.g., in Colombia, Guatemala, and the Philippines), integration across the socio-ecological levels involved an interweaving of the spiritual dimension and natural world. For example, a woman practitioner from the Philippines shared:

> "The first level [of integration] is the integration within oneself (spirituality principles) and having peace within yourself; [the second level is] integration with others (family, community, and humanity) …; [and the] third level would include integration with all creation and nature (earth)."

The second type related to levels in other frameworks. For example, one might integrate MHPSS and peacebuilding components within the IASC Guidelines' intervention pyramid.

The third type related to the intensity of integration, as if across a spectrum based on the degree to which approaches and practices from each sector had become embedded and interwoven with one another. One Western-based woman practitioner who works globally described three levels in this regard:

> The first level may include "providing a base training in MHPSS for peacebuilding activities, in order to 'do no harm' and understand the risks and potential impacts of peacebuilding work on the person's mental health, and also to ensure referral mechanisms and resources are in place. And conversely to ensure MHPSS activities are conflict sensitive, for example, and understand the larger impact that might be possible in the interest of peacebuilding. [A second] level may be to create linkages between the two areas of programming, where they are happening in parallel but not fully integrated… And a third [level] might be full integration of the activities and goals. This third level might also make it more possible to track the combined impact."

**Typology and Diversity of Programs**

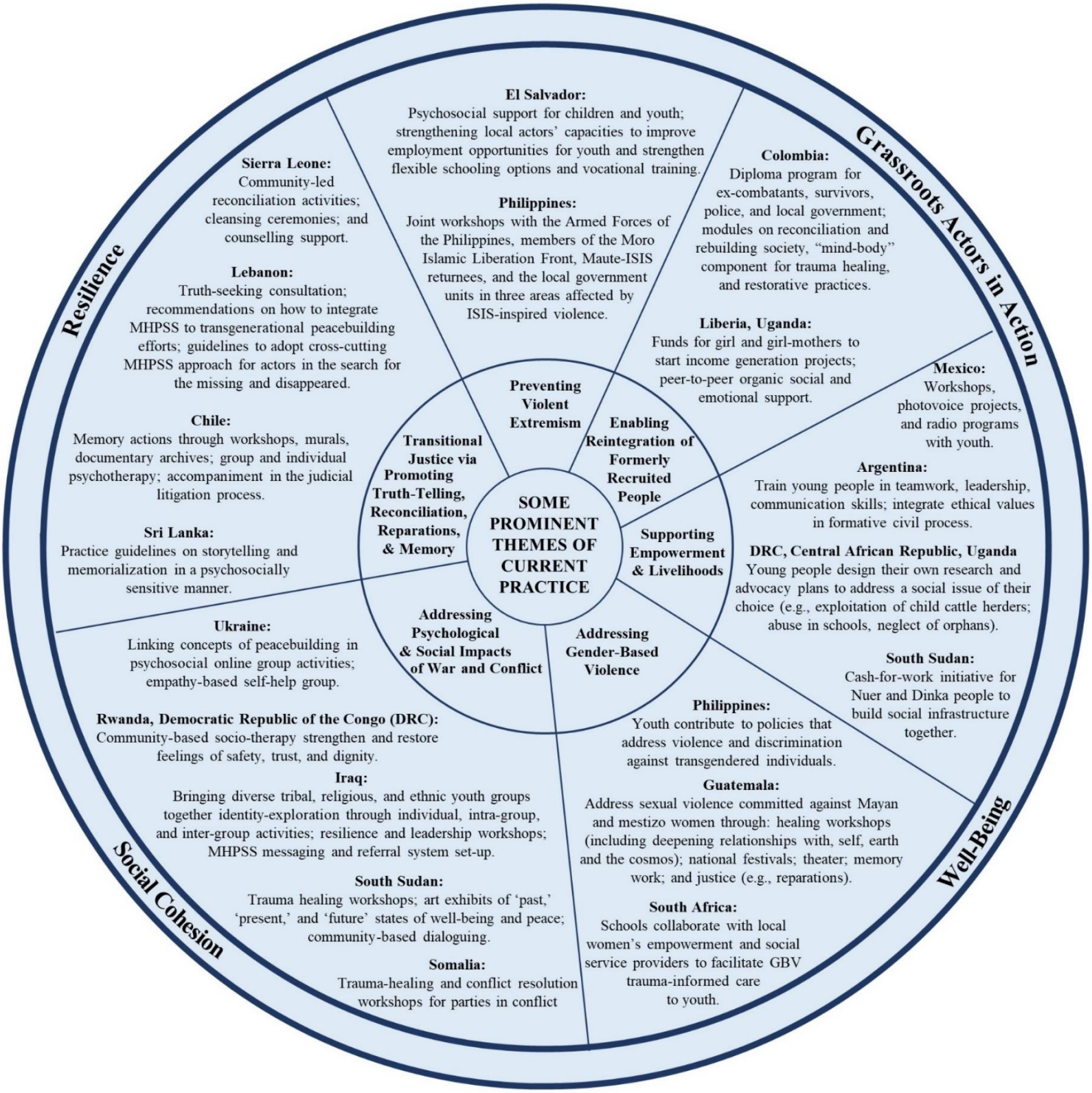
A visual typology of some of the main thematic categories of work that integrate MHPSS and peacebuilding is provided in Annex D (Figure D2). The most central themes in which integrative work occurs include: addressing GBV and sexism; conflict-sensitive programming, which is likely more widely used in the peacebuilding sector than in the MHPSS sector; addressing psychological and social impacts of war and conflict, which is often referred to as "trauma healing," particularly in the peacebuilding field; reintegration of formerly recruited people, in the context of DDR; transitional justice, including sub-areas such as truth telling, justice, reparations, and reconciliation; and youth action, including youth led work on discrimination, social justice, and LGBTQIA+ issues. Overall, the integrative work being done attempts to bring MHPSS components into peacebuilding, with less work being done to bring peacebuilding components into MHPSS.

Frequent themes also included economics and empowerment, education (including peace education), community dialogues, mediation, memory, and preventing violent extremism. Themes such as "health" or "human rights" appeared less frequently and were sometimes used as names for work that integrated MHPSS and peacebuilding. In some contexts, terms such as "peace," "mental health," and "psychosocial support" were reportedly seen as being too political or contentious, leading practitioners to group the relevant work under more acceptable labels such as "health." Also, youth activists frequently spoke of their work in terms such as "human rights" without using terms such as "mental health" or "peacebuilding," though their work had implications for both.

To illustrate the diversity of work within some prominent themes of current integrative practice, Figure 1 (p. 24) indicates illustrative program approaches for each theme. The six themes do not reflect the full diversity of themes, but rather showcase some of the main themes addressed in current integrative work. The size of the thematic area represents the prominence of that theme based upon the survey, interview, and consultation data. The six themes, in order of prominence, are: Addressing psychological and social impacts of war and conflict; Transitional justice via promoting truth telling, reconciliation, reparations, and memory; Addressing gender-based violence; Supporting empowerment and livelihoods; Preventing violent extremism; and Enabling the reintegration of formerly recruited people. The themes and program approaches are surrounded by the four cross-cutting themes of social cohesion, resilience, well-being, and grassroots actors in action. Here, "grassroots actors in action" is understood as community-level people (including women and girls, young people, men and boys, and LGBTQIA+ people) who champion positive change for well-being and peace at local, national, and international levels. Table D2 in Annex D provides the organization leading the work in each example in Figure 1.

Although the programs in Figure 1 are shown under one theme, they often cut across themes in practice. Since the diagram is based on a global mapping, it may not capture the constellation of work done in particular countries. Since work on integration can evolve rapidly, this depiction may have a relatively short shelf life. Of note, the diagram is descriptive rather than prescriptive—it depicts current work but is not a picture of the field as it necessarily is or should be.

**Figure 1. Some prominent themes of current practice and program examples that link MHPSS and peacebuilding.**



## Sub-Groups

Integrative work also exhibited considerable diversity in its attention to the distinctive situation, needs, and resources of particular sub-groups. Box 4 gives examples of some of the sub-groups that are often the focus of efforts to integrate MHPSS and peacebuilding. These examples are not exhaustive since the list could easily be extended. In addition, the examples are not all discrete but include partially overlapping categories. For example, people who are identified as perpetrators may themselves have been victims of violence as well. Still, the identification of sub-groups can help to challenge homogeneous views of "war-affected people," who may vary according to their developmental status (e.g., children and adolescents,[84] youth, elders), gender, sexual orientation, ability status, ethnic and religious orientation, social and economic status, and so on. This differentiated view also calls attention to issues of power and difference in the local setting, and invites programming and community actions that prioritizes social inclusion and helps to meet the needs of different sub-groups.

**Box 4. Examples of Sub-Groups Addressed in Current Integrative Work**

***Women:*** Women are often targeted directly in armed conflict, are survivors of diverse forms of GBV and discrimination, and carry heavy burdens of suffering and responsibility for their children and families. Yet women are highly effective peacebuilders. Supports for women frequently address the impacts of GBV, mobilize climate action, engage women in livelihoods, and enable women to support social cohesion, transitional justice, and peace at community and wider levels, including societal efforts to end discrimination against women.

***Young people:*** In conflict affected societies, youth are often marginalized, unemployed, and uncertain about their future. Young people who identify as LGBTQIA+ are often targets of severe discrimination and violence. Although many young people have been drawn or forcibly recruited into armed forces or groups, youth are often human rights defenders, creative change agents, and peacebuilders. Supports for youth are often gender-sensitive and may include a mix of education, livelihoods, and work on healing and peacebuilding.

***Children:*** Children are seen as moving through developmental stages such as early childhood (birth to school entry), middle childhood (6-10 years), and adolescence (early, 10-13 years, and late, 15-18 years), with different cognitive, emotional, social, and physical capabilities at different stages. For young children, ECD programs include work on healthy caregiver-child relationships and freedom from violence; middle childhood programs are often school-based and may include peace education, respect for diversity, bullying reduction, and social and emotional learning; adolescent programs often involve peace education, livelihoods, and engagement in peer processes of peacebuilding that feature adolescents' maturing cognitive and social abilities as well as their agency. For children who have been associated with armed forces or groups (CAAFAG), programs frequently combine education, livelihoods, MHPSS, and stigma reduction to enable integration into civilian life.

***Indigenous people:*** Although they are frequently invisible or exoticized, Indigenous people often live in areas of armed conflict and suffer land theft and damaging resource extraction, yet are often at the forefront of work that integrates peace, well-being, and climate action. In many settings, Indigenous people work themselves to solve the problems they face and develop their own, community led actions, without the support of external organizations such as NGOs.

***Perpetrators:*** Recognizing that peace requires reconciling communities with those who had attacked them, practitioners have increasingly focused on enabling collective healing and community social cohesion with perpetrators such as former genocidaires, ex-combatants, GBV perpetrators, or partici-pants in other criminal violence. Programs frequently make use of collective education and dialogues, truth-telling, group-based MHPSS, and discussion of the importance of peaceful co-existence.

## Program Case Studies

Eleven program case studies further illustrate the rich diversity in the approaches being used to integrate MHPSS and peacebuilding. The case studies illustrate the context, goals, activities and processes, entry points, community engagement strategies, facilitators and challenges, and lessons learned. These cases, are broadly illustrative of the field. While they point to important approaches, there is still a need for rigorous studies and work to identify best practices for integrating MHPSS and peacebuilding. Program case studies are presented in Annex E, with brief descriptions in Table 1 (pp. 27-28).

## Entry Points

The participants identified three main types of entry points:

*1) Recognizing a significant problem in the community, which motivated practitioners to address it:* Practitioners might recognize the need to address increasing mental health issues and violent behavior among youth or to prevent extremism. Or, recognizing that people living in prolonged fear tend to become isolated and passive, practitioners might prioritize collective agency and work to strengthen social relations and improve well-being. As noted by numerous participants, much needed in the definition of problems are attention to local views and also analysis of causal chains that make it possible to identify and address the drivers of problems such as GBV.

*2) Using program approaches and/or leveraging networks or sectors that can act as a vessel for integrating MHPSS and peacebuilding:* Cited approaches included: young people as catalysts for peace and well-being; the use of arts and cultural media; and working through the health sector, the education system, or protection, safeguarding, and inclusion arenas, which may seem more 'neutral,' for MHPSS and peacebuilding work. The latter was important in contexts in which terms such as "MHPSS" and "peacebuilding" had been politicized and hence, were risky to use.

*3) Building an MHPSS component into peacebuilding work*: Much work at present focuses on this approach, which can, for example, build survivor-led processes and MHPSS into transitional justice processes. Of note, the entry point of building peacebuilding components into MHPSS remains underutilized.

The variety of potential entry points opens diverse pathways for initiating integrative programs and efforts. Whatever entry points are used should have meaning and priority for the affected people, who are often in a good position to help select entry points. Further entry-points, mapped in the program case studies, are provided in Table 1.

## Facilitators of and Challenges to Integrating MHPSS and Peacebuilding

The facilitators of and challenges to integration of MHPSS and peacebuilding fell broadly into three categories: logistics and operations, approaches and practices, and practitioner capacities (knowledge, skills, values & attitudes). Table 1 (see the following pages) provides examples of facilitators and challenges in the program case studies. A more comprehensive list is available in Annex D (Table D1).

**Table 1. Program case studies, highlighting their brief description, entry-points, facilitators, and challenges.**

| Location | Descriptions of Program | Entry Points | Facilitators | Challenges |
|---|---|---|---|---|
| Colombia | Avoiding medicalized, outsider approaches, participatory action research (PAR) that respects Indigenous views is used in Montes de María to develop a local approach to psychosocial care and strengthening social cohesion. | • Do No Harm<br>• Different Associations (women's youth, and Indigenous)<br>• Local activists | • Creativity of local people<br>• Co-learning approach<br>• Long-term approach of pragmatic solidarity and mutual accompaniment | • Political and transitional justice aspects (ongoing armed conflict, government corruption, failed reparations processes, and challenging trials)<br>• Extreme poverty<br>• Intra-community conflicts |
| Guatemala | To rethread the social fabric, Indigenous Mayan women led photovoice and PAR to document root causes of the conflict, recover customs and beliefs, and enable voice through supportive storytelling and economic empowerment. | • Women in action<br>• Local ways of knowing, doing, and being | • Responsive to community members' material and cultural resources and insights and wisdom<br>• Long-term approach of pragmatic solidarity and mutual accompaniment | • Political and transitional justice aspects (ongoing armed conflict, government corruption, failed reparations processes, and challenging trials)<br>• Extreme poverty<br>• Intra-community conflicts |
| Iraq | To address psychosocial needs, loss of livelihoods, and tensions between returnees, IDPs, and host community members, participants of livelihood projects engage in MHPSS well-being and social cohesion processes. | • Leveraging "livelihoods"<br>• Assessments and evidence (leaning on needs assessment to demonstrate desire and need) | • Opportunities for connection between community members<br>• Actors across the MHPSS and livelihood units had clearly defined responsibilities | • Unpredictable security concerns and COVID-19 measures restricted staff movements<br>• Participant difficulty in differentiating the MHPSS and livelihood services and staff |
| Jordan & Lebanon | To prevent violent extremism, youth engaged in workshops on stress relief, resilience, and human values; and led community-service projects using the arts, addressing drivers of violence and promoting peace. | • Understanding youth needs<br>• Working with those most at-risk | • Human connection and shared humanity of all was at the core of all processes<br>• Using a 'psychosocial peacebuilding' approach Working closely with parents, teachers, community leaders, and others of influence | • Long-term funding<br>• Political parties and (I)NGOs promising benefits that did not materialize or was not culturally sensitive<br>• Elder males' reluctance in traditional communities to engage with non-traditional programs |
| Kashmir | To address human rights violations, participants attended culturally relevant, safe spaces, engaged in creative expression and skills-building workshops; developed coping strategies and connectedness; and dialogued for peace. | • Lack of appropriate support by State<br>• Culture, spirituality, and religion<br>• Understanding youth needs | • Welcome local expressions<br>• Acknowledging experiences<br>• Creative, cultural, context-specific initiatives and processes (e.g., culturally-sensitive language)<br>• Opportunities for connection | • The controversial nature of being a "peacebuilder"<br>• Security concerns, stigma, lack of infrastructure and resources<br>• Unawareness of mental health challenges |
| Kenya | Youth at risk of violent extremism engaged in peer-support groups and creative avenues (e.g., music, storytelling, sports) to address past trauma, build resilience, and learn how to promote peace and justice. | • Understanding youth needs<br>• Youth in action | • Years of experience working with the communities<br>• Engaging local youth volunteers<br>• Opportunities for connection and mentorship | • Time and effort to teach about ways that move beyond biomedical approaches and Western-/Eurocentric frameworks |

| | | | | |
|---|---|---|---|---|
| | | | | • A subpar integrative approach may not fully unravel root causes of injustice, marginalization, and violence |
| Lebanon | Young people from host and refugee communities collectively participated in climbing activities to build inclusive communities, improve mental well-being, and address social cohesion challenges. | • Understanding youth needs<br>• Physical health | • Trained members on MHPSS-informed climbing and positive inter-group relations<br>• Network of partners that are aware of integration benefits<br>• Listening to, learning from, and addressing needs of the community | • Limited climbing professionals with background in relevant fields for integration<br>• Lack of adequate financial resources, knowledge and skills in connecting peacebuilding and MHPSS<br>• Limited resources to sustain diverse network of actors who are familiar with integration |
| Nepal | Women conflict survivors and civilians with disabilities conducted locally designed collective memory work and advocacy efforts (e.g., network building, travelling photo exhibition) to support reconciliation and acceptance. | • Lack of appropriate support by State<br>• Women in action<br>• Mobilizing those "left behind" | • Victims and survivors eager to receive MHPSS training<br>• Program team that has experience in both MHPSS and peacebuilding<br>• Training peacebuilding staff in narrative practices to integrate PSS<br>• Provision for self-care, PSS, or counselling for staff | • MHPSS and peacebuilding sectors operate within different organizational networks<br>• MHPSS services largely restricted to two major cities, limiting access to those in other areas |
| Nigeria | Amidst the Boko Haram insurgency, mobile MHPSS services were provided, and community members engage in capacity building workshops (e.g., on conflict mitigation) and community-based peace committees. | • Assessments and evidence (leaning on needs assessment to demonstrate desire and need)<br>• Inter-group conflict<br>• Cross-sectoral and multi-stakeholder collaboration | • Building on strategic priorities of government and local and international NGOs<br>• Listening to, learning from, and addressing the needs of survivors<br>• Building capacity of credible community stakeholders and structures | • Unresolved emotional issues of participants<br>• Limited professionals with clinical MHPSS skills<br>• Lack of adequate knowledge and skills in connecting peacebuilding and MHPSS<br>• Limited amount of time for counsellors to stay in the community |
| Sri Lanka | Grassroots survivors and civil society members integrated MHPSS such as psychosocial supports for participants into government-commissioned public consultations to shape national transitional justice mechanisms | • Do No Harm<br>• Historic opportunity (to include government through a democratic process, led by grassroots movement) | • Grassroots community members led core efforts – increasing social cohesion and trust<br>• Desire and capacity of staff to support the work<br>• Expertise available on how best to interweave PSS into TJ mechanisms | • Some members perceived as representatives of the government, causing public to be skeptical<br>• Ethnicised fault-lines prevalent in society were reflected in composition of some member groups<br>• Lack of qualified psychosocial personnel<br>• Confusion about what "PSS" actually means |
| Ukraine | With community leaders, police, and ex-combatants, a multi-stakeholder team used somatic methods with individuals and groups to stabilize well-being and support social cohesion. | • Adverse mental health and psychosocial well-being<br>• Open-mindedness | • Good collaboration among partners<br>• Working with influential people in the public sphere<br>• Advocacy campaign | • Evidence-based impact analysis is necessary to scale, yet funding is limited<br>• On-going hostilities pose a threat to civilian peace processes |

## Country Case Studies

The country case studies (Annex F; with brief descriptions in Table 2 on p. 30-31) offer a more detailed understanding of how integration varies across contexts in response to divergent situations. The country case studies outline main themes of work, program examples and approaches, entry-points, facilitators, challenges, and lessons learned.

Numerous similarities are evident among the four country case studies. The fact that all four studies, which come from different regions, involve long-standing conflicts illustrates the increasing prevalence of protracted conflict. Also, grassroots actors, including women and youth, play a significant role in integrative efforts. All the country studies illustrated the value of using the arts (e.g., social media, songs, photographs, art murals) as means of enabling emotional expression and social integration. The studies from Sri Lanka and Syria illustrate the utility of adapting one's language to avoid the use of politicized terms, while conducting integration under more neutral headings such as "health" or "education." The country studies from Colombia and the Philippines indicate the importance of cultural understandings, including Indigenous approaches, and both caution against excessive use of narrow, clinical approaches that focus primarily on individuals. The country study from South Sudan revealed a primary focus on war trauma, with rituals, ceremonies, and traditional customs playing a central role in healing or efforts to build peace. As well, the country studies showed keen attention to including marginalized people, including LGBTQIA+ people. The notable differences in integration work done likely owed to the divergent contexts.

These differences underscore the importance of adapting integrative work to the context and avoiding a "one size fits all" approach. In light of the socio-historic, cultural, economic, religious, geographic, and political differences across the four countries, a high priority is to adapt integrative work to the particulars of the context, addressing the particular constellation of risks and problems and also learning about, building upon, and further strengthening the diverse assets, strengths, and networks that are particular to each context.

## Mapping Limitations

The main limitations included time parameters, survey fatigue, and language barriers. As well, initially, the UN definition of "youth" as people between the ages of 15 – 24 years was followed. However, the variable definition of "young people" across diverse contexts led to the expansion of the definition to include individuals up to 35 years. The mapping did not include representative samples from all parts of the world.

**Table 2. Overview of the four country case studies, Colombia, Philippines, Sri Lanka, and Syria: country context, main themes of work, and highlights of integration (country names are linked to their respective country case studies in Annex D).**

| Country | Country Context | Main Themes of Integration | Selected Highlights |
|---|---|---|---|
| Colombia | • >50 years of conflict with mass displacement<br>• Limited 2016 peace agreement<br>• Drug trafficking, ongoing inequities, land contestation, attacks on local leaders | 1. Addressing psychological and social impacts of conflict<br>2. Gender-based violence<br>3. Reintegration<br>4. Police reform and citizen relations<br>5. Indigenous activism | • Women, youth, & Afro-Colombian activism<br>• Engaging men to help address GBV & toxic masculinity<br>• Indigenous views & action, with links to climate change<br>• Use of laws that support MHPSS |
| Philippines | • Legacy of colonialism<br>• Two protracted conflicts<br>• Struggles over land and other resources<br>• Toxic masculinity<br>• *Rido* conflict | 1. Preventing violent extremism<br>2. Reintegration of ex-combatants<br>3. Addressing discrimination<br>4. Inter-ethnic/-religious cohesion<br>5. Justice and reconciliation<br>6. Women and youth action | • Youth action & solidarity with LGBTQIA+ people<br>• Strong Filipino identity & Indigenous psychology<br>• Women mediators, peacebuilders<br>• Value of using the arts |
| Sri Lanka | • Protracted conflict between Tamil militants and Sinhalese-dominated government<br>• Discrimination against ethnic & religious minorities<br>• Riots, pogroms, repression, forced mass displacement, massacres, torture, disappearances | 1. Building MHPSS and peace-building into the work of the national Consultation Task Force on Reconciliation Mechanisms<br>2. Psychosocially sensitive storytelling<br>3. Integrating conflict-sensitive MHPSS services into state systems<br>4. Advocacy & provision of supports for marginalized people<br>5. Building community capacities<br>6. Changing institutional culture | • Focus on "health" avoided the use of politicized terms<br>• Value of using creative modes by youth activists<br>• Grassroots action<br>• Advocacy for including marginalized people, including people who are LGBTQIA+<br>• Value of an ongoing community of practice<br>• Peace-positive leadership |
| South Sudan | • Two civil wars leading to South Sudan's independence<br>• Inter-ethnic crisis<br>• Power-sharing government as of 2020<br>• Struggles over land, water, cattle, and other resources; mass displacement<br>• Violence against women and girls | 1. Addressing inter-ethnic conflict<br>2. Addressing GBV<br>3. Preventing violent extremism and gang violence<br>4. Working with leaders | • Focus on trauma healing<br>• Religious leaders, women activists, and young people as enablers<br>• Cultural ceremonies and rituals as highly visible in everyday efforts for peace and well-being |
| Syria | • 11-year Syrian crisis<br>• Diverse actors, including government, | 1. Addressing psychological and social impacts of war and conflict<br>2. Addressing inter-ethnoreligious conflict | • Use of the education system during the war helped to avoid politicized terms |

| | | | |
|---|---|---|---|
| | non-state armed groups, and extensive international involvement<br>• Social and economic challenges, human rights violations, displacement<br>• Deliberate attacks on health and education centers and cultural sites<br>• Extensive gender-based violence | 3. Improving host-IDP relations<br>4. Preventing violent extremism<br>5. Women as mediators<br>6. Promoting collective memory<br>7. Infrastructure development | • Inter-religious processes<br>• Women's action, defying prejudices, and using stereotypes of womanhood to their advantage<br>• Youth activism and spontaneity |

**KEY HIGHLIGHTS: KEY FINDINGS FROM THE MAPPING**

- Integrating MHPSS and peacebuilding is important since the two areas influence and complement each other. Also, a linked approach is more effective in achieving well-being and sustaining peace for individuals, communities, and societies.
- Types of levels for integration, related to: 1) socio-ecological levels, as occurs, for example, across the levels of self, family, community, and society; 2) levels in other frameworks such as the IASC Guidelines' intervention pyramid; and 3) the intensity of integration, as if across a spectrum based on the degree to which approaches and practices from each sector became interwoven with one another.
- A snapshot of the current work on integration spans diverse themes: Addressing psychological and social impacts of war and conflict; Promoting truth telling, reconciliation, reparations, and memory; Conflict-sensitive programming; Addressing gender-based violence; Youth action; Supporting empowerment and livelihoods; Preventing violent extremism; and Promoting reintegration, among others.
- Entry-points include: 1) recognizing a significant problem in the community, which motivated practitioners to address; 2) using program approaches and/or leveraging networks or sectors that can act as a vessel for integrating MHPSS and peacebuilding; and 3) building an MHPSS component into peacebuilding work.
- Facilitators and challenges occur across areas such as: 1) logistics and operations, ii) approaches and practices, and iii) practitioner capacities (knowledge, skills, values & attitudes).
- Integrative work should adapt to the particulars of the context, addressing the particular constellation of risks and problems and also learning about, building upon, and further strengthening the diverse assets, strengths, and networks that are particular to each context.

# GRASSROOTS ACTORS IN ACTION

*"Amid the destruction and debris, [there are] details of grass, weeds and vines that persisted and grew in the cracks – like hopes for peace that rise from the rubble of war."*[85]

- Lan Mercado

Grassroots actors are key agents who contribute in significant, imaginative ways to strengthen social cohesion, well-being, and resilience (see Box 5). Grassroots actors frequently include natural leaders such as faith leaders, influential women, teachers, and youth leaders, among many others. They come from diverse sub-groups, such as men, women, youth, LGBTQIA+ people, children, and people with disabilities.

Grassroots actors, however, may be invisible to outside actors, and may describe their work as "promoting good relations" rather than as connecting MHPSS and peacebuilding. Grassroots actors frequently express that they are situated in voicelessness, as even if their voices are 'heard,' their ideas and insights are carried forward in rigid, inauthentic, and tokenized manners. They also face challenges such as structural barriers limiting participation and decision-making; violations of human rights; insufficient investment for empowerment; aggravated mental health conditions; unmet basic needs, including livelihoods; and insecurity (including displacement and increased violence) due to climate change.[86,87,88] Their agency and practical expertise have seldom been acknowledged, much less validated and appreciated.

While it is not possible to consider all groups within "grassroots actors," this section focuses on four groups that emerged from the mapping and literature: women and girls, young people, men and boys, and LGBTQIA+ people. Their value as peacebuilders has often diminished by stereotypes such as those depicting young people as "victims,"[89] "perpetrators," or a "Lost Generation." In reality, however, grassroots actors defy dualities and stereotypes, and exhibit considerable diversity and complexity. Although they face challenges related to oppression, GBV, mental health and psychosocial

**Box 5. Grassroots actors in action.**

**Philippines:**

A young woman activist who had been falsely accused of being a spy and who was tortured found healing, connectedness, and strength in a group of other victims. Driven by her social justice work, inspired by the victims' resilience, and frustrated by the government's lack of redress, she and others formed a human rights NGO to support torture victims and their relatives, and families of the disappeared and killed. They hosted psychosocial counselling, story-telling sessions, and documentation initiatives. Today, she continues to be a vocal feminist who advocates for the rights of minority groups, including individuals targeted for extrajudicial killings. She is also discovering "soul work" – ceramics and watercolor painting – to shape the important initiatives she leads and to cultivate her own well-being.

**South Sudan:**

The atrocities faced by a former child soldier, now a young man, did not prevent him from fostering his love and talent for using art a powerful tool to bring communities together. Today, he facilitates art-based "trauma-healing" to promote inter-tribal social cohesion. He draws "how [his] people used to stay together before the war, during the war, and [what a future could look like that] brings back the love that people used to have." He paints inter-tribal rituals, dancing, and marriages, believing that "through art, a divided community can come together and feel like one." Motivated by his own experiences, he works closely with youth at risk of extremism, facilitating spaces to explore their emotions, vision a better future, and develop skills for peace and well-being. He is unwavering in his stance that young people "can transform the nation."

well-being, and climate change, they can also show remarkable resilience in the face of adversity.

Intersectionality is a key issue when discussing the role of grassroots actors. Although sub-groups such as women and youth are often discussed separately, in part to underscore the importance of gender issues, there is considerable intersectionality across characteristics such as age, sexual orientation, ethnicity (including Indigeneity), race, socioeconomic status, citizenship status, language, ability status, and religious and spiritual orientations, among others. In addition, there have been calls for avoiding excessively binary approaches and recognizing, for example, the complementarities and synergies between the Women, Peace, and Security (WPS) agenda and the Youth, Peace, and Security (YPS) agenda. [90] As well, with more expansive conceptualizations of "gender" being sought,[91] the rights and capacities of LGBTQIA+ people to be fully realized are being advanced.

Nevertheless, sub-groups are positioned in different ways, and it is important to recognize the separate, unique experiences of sub-groups such as women and young people (see also the Box 5 on p. 25).[92] This section considers separately each of the four selected sub-groups, with attention to their perceptions of integration, challenges to integration, and questions to consider when designing and delivering integrative efforts with and for them. The section concludes with modalities that grassroots actors use to catalyze integrative efforts.

**Women and Girls**

The vital role of women and girls in peacebuilding has been legitimated by UNSCR 1325[93] and reaffirmed by the WPS agenda. An expanding literature attests to their importance in peacebuilding.[94,95,96]

> Integration includes, "a threading of multiple strands of living and learning and being, an ethico-onto-epistemology, an integral whole of being-doing, acting-reflection that transcends or ruptures dualisms and acknowledges and learns from all living beings (trees, rivers, mountains, etc.) within the pluriverse."
>
> Mayan, Indigenous, woman practitioner, PhD, Guatemala

Women's and girls' perceptions of integration largely reflected their own ways of knowing, doing, and being. Some women (including some Indigenous women) participants envisioned integration in terms of deep relationships between self, others, and all beings. They saw themselves as being inextricably interconnected with, and being in harmony with, the land, animals, nature, the earth, and the spiritual. They saw the deepening of relationships as a way of achieving integration, and also as an outcome to be achieved through integrative efforts. By acknowledging and celebrating the reciprocal relationship with the natural and spiritual worlds, these women explore what is seen as most sacred and healing, thereby helping to open new paths toward well-being.

Women's and girls' approaches to peacebuilding and well-being are highly holistic. In Somalia, a mother-daughter team aimed to improve the psychosocial well-being and social connection for girls and boys through "Ocean Therapy," which included waterside meditation and water-based dialogue circles.[97] Other efforts included: exploring the role of bodies and sexualities (Mayan Indigenous, LGBTQIA+, woman, Guatemala); addressing the restoration of

land as a cultural identity and healing necessity (woman, Colombia); and embracing prayer and other religious and spiritual ceremonies (young woman, Kashmir region, Program Case Study).

Despite their remarkable resilience, women and girl peacebuilders face disproportionate levels of challenges, such as GBV, political and economic disempowerment, and poor mental health conditions. In settings such as in Colombia, Sri Lanka, and Syria, women take on the burden of being the primary caretaker and breadwinner. As well, narrow conceptualizations of women and girls as "victims" can limit their active participation in leading and contributing to positive DDR efforts; and, not acknowledging their role as "perpetrators" can cause tension within and cause harm to communities.[98]

Climate change also poses significant risks to women and girls' well-being, security, and agency. [99] Increasing climate and environmental insecurity has led to an increase in GBV.[100,101] Women and girls are often the custodians of the land but are not able to own the land, excluding them from decision-making relating to environmental governance. Indigenous women and girls are disproportionately affected by anti-environmental activities (e.g., land-grabbing and pollution of rivers and other natural entities), leading to their displacement and adversely impacting their well-being. As such, grassroots women and girls have often led peacebuilding and MHPSS efforts that intersect with climate action. [102]

Box 6 presents some questions to consider when designing and delivering integrative efforts with and for women and girls.

**Box 6. Considerations for MHPSS and peacebuilding integrative efforts with and for women and girls.**

- What are women's and girls' ways of knowing, being, and doing, related to "well-being," "peace," and "integration"? How can we build on these?
- How can we then better invite women and girls to co-create integrative efforts with us?
- How can we learn from and support women and girls in addressing the nexus of climate change, well-being, and peace?

### Young People

The vital role of young people in peacebuilding has been legitimated by UNSCR 2250[103] and affirmed by the YPS agenda. An expanding literature attests to their importance in peacebuilding.[104,105,106]

> "We experienced peace and relief ourselves – we worked on ourselves, and we felt how powerful it's impact was, so this encourages us to spread [peace and relief] and help others with [peace and relief]."
>
> Young woman practitioner, Jordan/Lebanon

Young people's perception of MHPSS and peacebuilding integrative efforts is grounded in a strong desire to have a positive impact and work with others to co-create positive relations and well-being. They reject the idea of being "passive consumers" of programming, limitations on their agency, and being instrumentalized by INGOs. For young people who are curious, creative, and in a liminal space of being and becoming, integrative efforts serve to address a complex reality and help to build a more positive future. Many understand integration as helping themselves and others to turn inwards and cultivate inner

wisdom for internal peace that embodies forgiveness, compassion, empathy, respect for self and to others, and a strong sense of being and acting in solidarity with others. This inner transformation ignites them to drive societal transformation. Realizing that they have a choice, they choose to be changemakers "today" so that they and others can see and reap the benefits "tomorrow."

> "I believe that holding a gun is no longer – in the Bangsamoro context – we no longer need that. What we need more is to enlighten the youth in a progressive way!"
>
> Young woman practitioner, Philippines

Many young people are also cognizant of colonialism and histories of exploitation, and are acutely aware of the systemic injustices they face. They see themselves as best positioned to deconstruct oppressive systems and shape practices that acknowledge diverse experiences. This includes addressing the plight of LGBTQIA+ young people (e.g., Philippines Country Case Study) and advocating for climate action policies that promote well-being and peace.[107,108]

The diverse challenges young people face include: questioned about their motives and legitimacy; higher levels of harassment towards young women; targeted by the government and other groups for speaking out; communities' skepticism due to the youth-led violence or insurrections; and intergenerational power dynamics. The security risks and emotional burdens are high, and many express a desire for emotional and social (MHPSS) supports. Their capacities to engage in integrative efforts are further diminished by a lack of access to material goods, technologies, and networks and mentors. For many, basic needs are a priority, as without these, participating in MHPSS and peacebuilding becomes either impossible or futile.

Box 7 presents some questions to consider when designing and delivering integrative efforts with and for young people.

**Box 7. Considerations for MHPSS and peacebuilding integrative efforts with and for young people.**

- How can we move away from instrumentalizing young people during programming, towards supporting youth-led actions that promote well-being and peace?
- What intersectionality features do young people care about, and how can these features be woven into integrative efforts?
- What steps can be taken to insure that young people play a central role in generating ideas and action, including the provision of emotional support?
- How can integrative efforts partner with actors that offer livelihoods and basic needs supports, to ensure young people can participate and lead integrative efforts in a way that is fair and safe to them?

### Men and Boys

The significance of men and boys in promoting peace and achieving the WPS architecture appears within UNSCRs 2106 and 2242.[109]

Men and boys, too, face formidable challenges in working to integrate MHPSS and peacebuilding. They are often perceived as perpetrators, combative, domineering, and/or the privileged sub-group, without a full understanding of how violent or militarized masculinities

> "We have no other choice than to live here. But not [just] in this country – in this world… We have two options. Either to fight with each other and cause problems for each other. Or, make our time in this world beneficial, and to enjoy it. But the only way [to do] that is if we work together as a community… that's what drives me."
>
> Young man practitioner, Jordan/Lebanon

have led to male dominance and reinforced discrimination against women and other marginalized groups.[110] In conflict, men and boys may perform aggressive acts in order to uphold an image of "the protector," to earn rewards for certain behavior (including financial incentives), and avoid being branded as a "coward" or "useless". [111] Moreover, although women and girls are most frequently affected by gender and sexual based violence and are the main focus of efforts to address GBV, evidence indicates that men and boys are also affected and in need of support.[112,113,114] Although the gender and sexual violence against men and boys has been recognized in the UNSCR 2467,[115] there is still a need for this scope to be understood and for frontline workers to receive clarity on how to care for them.[116] Integrative efforts are needed to address both masculinities and gender and sexual violence faced by men and boys. For example, a Fijian NGO prioritizes "trauma healing" and personal transformational work with men, works with leaders and chiefs to address culturally-entrenched gender stereotypes, and addresses how security institutions influence militarized masculinities.[117]

Currently, young male peacebuilders are active at local levels, and their efforts are increasingly visible in high-level peace and security processes. Less attention is given to how their gender identities contribute to, and are affected by, violent conflict at the local level (including in households).[118] Integrative efforts that work across local and national levels can likely help to develop comprehensive supports for men and boys, and may also act as a powerful conduit for them to catalyze positive change in their local communities. In view of men's privilege in most societies, however, it is important to avoid sidelining women's organizing capacities and leadership or marginalizing other men and gender diverse groups that lack privilege. [119]

Box 8 presents some questions to consider when designing and delivering integrative efforts with and for men and boys.

**Box 8. Considerations for MHPSS & peacebuilding integrative efforts with and for men and boys.**

- How can men and boys help to understand and address the local manifestations of masculinity, power, and privilege that undermine well-being and peace?
- How can men and boys become more supportive of wider efforts to address well-being and peace, including steps to reduce violence against women and girls and enable their full participation in integrative efforts?

### LGBTQIA+ People

The well-being and peace needs of LGBTQIA+ people in development and humanitarian settings are largely unmet. Many LGBTQIA+ young people suffer from discrimination, strong stigma, dehumanization, family exclusion and homelessness, ineffective legal means for reporting violations and seeking accountability, and gender and sexual violence.[120,121,122,123] For example, a Sri Lankan trans-identifying young person shared the difficulty of trans people

accessing care in a psychiatric hospital. In particular, they could receive only 15 minutes of care, and if they asked for more time, they were seen as needing to be admitted.[124]

Still, LGBTQIA+ young people are at the forefront of challenging discrimination, while also supporting other minority groups. In the Philippines, LGBTQIA+ young people take an active role alongside heterosexual women peacebuilders in leading campaigns and peacebuilding dialogues that advocate for young women-led approaches to conflict transformation and resolution and countering of violent extremism.[125] Unfortunately, there is often incomplete reciprocity in such approaches, as solidarity and financial resources are often not shared back to LGBTQIA+ people. Also, integrative efforts with and for LGBTQIA+ people are largely initiated and led by themselves. Much needed are integrative efforts that are designed and delivered by all groups of people, and that will reduce the burden on LGBTQIA+ people while also promoting well-being, a sense of belongingness, and social connectedness.

An LGBTQIA+-inclusive understanding of the WPS agenda can also draw attention to overlapping forms of oppression, make root causes of violence more visible, and encourage new and innovative programming.[126]

Box 9 presents some questions to consider when designing and delivering integrative efforts with and for LGBTQIA+ people.

**Box 9. Considerations for MHPSS & peacebuilding integrative efforts with and for LGBTQIA+ people.**

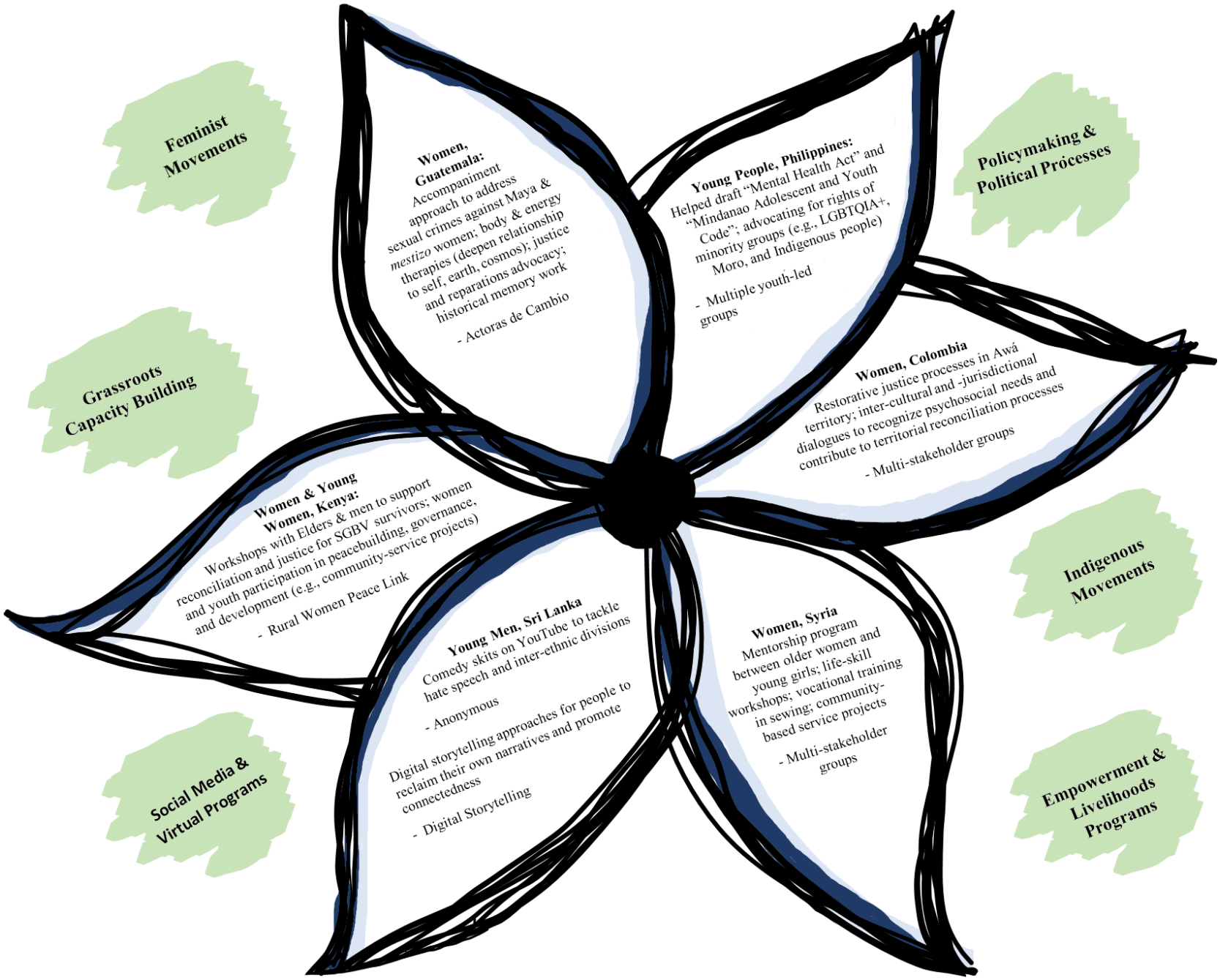
- Do we take time to learn from LGBTQIA+ people in different settings?
- Are there spaces and places for integrative efforts to be hosted that are not hostile or stigmatizing towards LGBTQIA+ people? What might creative entry-points be in this regard?
- What can be done to enable LGBTQIA+ rights as a cross-cutting and central part of wider work to integrative work?

## Areas of Integrative Action

Against this backdrop, the mapping identified six important ways, or modalities, that grassroots actors often use to catalyze MHPSS and peacebuilding integrative efforts: Empowerment & livelihood processes; Feminist movements; Grassroots movements; Indigenous movements; Policymaking & political processes; and Social media and virtual programs. These are illustrated as parts of a flower (see Figure 3 on the following page) to capture the importance of the natural world and the arts for grassroots actors, and especially of women, girls, and young people. Also, three priority "expansion modalities" – current approaches that can be further expanded and enriched to facilitate integrative efforts – emerged. Although these nine modalities do not incorporate all the modalities used by grassroots actors worldwide, they illustrate an unusual level of dynamism and creativity and excite our collective imagination.

One expansion modality—Family & intergenerational support—reflects the importance of parenting and intergenerational family processes. Recognizing the intergenerational impacts of violent conflict, many practitioners see the family as a way for establishing positive attitudes and behavior that can later transfer to positive capacities in society. A Syrian woman

**Figure 3. Six modalities that women and youth use to catalyze integrative efforts.**



shared the idea of using parenting workshops to interweave concepts related to MHPSS and peacebuilding. Of course, intergenerational tensions often arise in families and households, as the older generation may be unwilling to change their prejudices towards particular groups, or be unwilling to face their own suffering. Practitioners in transitional justice contexts also shared that the younger generation may be unaware of and/or uninterested in "the past." Fortunately, these differences can motivate constructive action. For example, young people (including trans-identifying) from the Philippines, and women from Rwanda and Guatemala suggested hosting intergenerational dialogues to promote co-learning, healing, and brainstorming about integrative efforts on which they could cooperate on together.

A second expansion modality—Strengthening the "everyday" processes—indicates that grassroots actors find opportunities for well-being, belonging, and connection in "everyday" settings. In Kashmir, where women may not be welcomed at mosques, they gather at spiritual shrines to offer emotional support and explore hopes for peace.[127] Similarly, a Syrian young man. discussed an informal, university program that invited students to offer resources, such as books, to others in need. This promoted a sense of well-being for the receiver, and a sense of belonging and connectedness to a greater community for the both the receiver and the giver. Additionally, a Sri Lankan male physician described how he intentionally brought awareness to the minority Muslim community's donations to the hospital (highlighting the Islamic religious practice of *zakat*) to help demonstrate the "human-ness" of Muslims and promote a sense of social cohesion in the hospital work-place.

A third expansion modality–climate action–reflects the leadership of grassroots actors to address climate change, which acts as a major challenge to well-being and peace (see Box 10).

**Box 10. Actions by grassroots actors to address climate change, MHPSS, and peacebuilding**

Globally, climate change has contributed to mass migration and displacement, intercommunal violence and security risks, loss of livelihoods and subsistence, and eco-distress, -anxiety and traumatization.[128,129] The impact of climate-induced devastations is amplified among populations facing marginalization and inequities, including women, young people, and Indigenous People. Many Indigenous cosmologies embody a deep respect for and connection with the land, nature, earth, and other natural resources. The degradation of the environment can create a loss of identity, cultural practices and traditions, relationships with one another and the natural world, and spiritual well-being and healing.[130]

Yet grassroots actors have emerged as a powerful voice for climate action, while simultaneously addressing peace and well-being needs. In Colombia, Afro-Colombian women took leadership roles in developing ethno-territorial plans and decisions regarding land use. [131] Trained in GIS/GPS technologies, land titling procedures, and alternative dispute resolution methods, the women facilitated mediation processes, formalized women-headed household state land title applications, and transferred ownership of land to rural Afro-Colombian families. Many women also joined community councils and advocated for women to lead efforts on managing natural resources and addressing land disputes, which ultimately increase resiliency to respond to climate shocks and mitigate the risk of conflict.[132]

In Guatemala, a grassroots school run by Indigenous women for low-income Indigenous girls, led a sustainable farming practices project for students and their mothers. [133] The process included teaching them about Indigenous spices and the value of traditional practices, and designing organic gardens to harvest food; while also providing the regular school curriculum to the students, which involves mentorship on topics such as civic participation, trauma mitigation, and leadership skills. The project reaffirmed the confidence and agency of mothers and the girls to address societal-level

concerns, contributed to shifting societal norms related to women working, enabled community-level mutual support, and re-instilled Indigenous knowledge that could help to mitigate potential climate-induced risks. [134,135]

As well, the Pacific Conference of Churches, a network of grassroots religious and local leaders who support communities across the Pacific islands, addresses climate-related security concerns through an array of approaches. This includes: hosting a Youth Consultation in 2019 for young people to worship, sing, study climate change, and draft recommendations to address climate-induced challenges[136]; and creating security policies that promote social cohesion and collective well-being between host communities and climate-driven displaced people.[137] Members have also drafted a culturally- and contextually-relevant ecological framework that considers theology, economics, cultures, and spiritualities to promote wellbeing, wholeness, resilience, and connectedness to all strands of life.[138]

Current unstable and extreme climate conditions require intentional work to weave climate prevention and climate adaptation tactics together with integration work on MHPSS and peacebuilding. Entry-points may include: learning from environmental peacebuilding approaches[139]; working through environmental problems as a way for cooperation between groups in conflict[140]; listening to and learning from grassroots actors' and Indigenous People's ways of doing and being; and utilizing a gendered approach to transform social inequities and championing women, girls, and young people as agents of change, in line with the WPS and YPS agendas. [141,142,143]

Although grassroots actors demonstrate resilience and creativity, supportive actors (e.g., governments, INGOs, funders, research and academic bodies) are needed to fulfill their rights and enable their work as changemakers. For example, some academic bodies in Nigeria and Syria offer such support.[144,145] Annex G provides some reflection questions when developing integrative efforts with grassroots actors, mapped onto the socio-ecological levels. These questions are based upon the interviews, focus groups, and consultations with grassroots actors. These act as an invitation to consider power asymmetries and how to collaborate with grassroots actors who are championing change for MHPSS and peacebuilding.

**KEY HIGHLIGHTS: GRASSROOTS ACTORS IN ACTION**

- It is essential to acknowledge and validate the significant contributions, lived experiences, and expertise of grassroots actors.
- Grassroots actors may not describe their work as integrating MHPSS and peacebuilding, and they often face significant challenges, such as discrimination and difficult economic circumstances.
- Women and girls and young people have unique perceptions of integration. Some women envision a type of integration that calls on the deepening of relationships between self, others, and all beings; and young people who are in a liminal space of being and becoming understand integrative efforts to address a complex reality and make better an unknown future.
- There is a need to address violent or militarized masculinities and provide supports for healing and stigma reduction for men and boys who have been sexually violated.
- LGBTQIA+ young people are often at the forefront of integrative efforts, by challenging discrimination faced by their own community and other minority groups; yet more efforts made by all groups are needed to address the MHPSS and peace needs of LGBTQIA+ people.

- Grassroots actors largely use six modalities to catalyze MHPSS and peacebuilding integrative efforts: Empowerment & livelihood processes; Feminist movements; Grassroots movements; Indigenous movements; Policymaking & political processes; and Social media and virtual programs. Two modalities for expansion (i.e., ideas for further ways to facilitate integrative efforts) are: Family & intergenerational support, Strengthening the "everyday" processes, and Climate action.
- Supportive actors (e.g., governments, INGOs, funders, research and academic bodies) are needed to fulfill grassroots actors' rights and enable their work as changemakers.

## COMMONALITIES, DIFFERENCES, AND PRIORITIES FOR INTEGRATION

Efforts to integrate MHPSS and peacebuilding would do well to consider some of the commonalities and differences and also some of the gap areas and priorities that lie ahead. The identification of commonalities across sectors can help define areas of common ground that invite collaboration and integration across sectors. The analysis of differences can identify points of divergence that lay the foundation for the complementarity of MHPSS and peacebuilding. It can also identify differences in conceptualizations, terminology, and approaches that are not readily bridged but that help to stimulate the dialogue and mutual learning that is fundamental for achieving further integration of MHPSS and peacebuilding. Box 11 invites reflections to this end.

**Box 11. Questions to consider for integration of MHPSS and peacebuilding.**

- What do you see as some important commonalities between the MHPSS and peacebuilding sectors?
- What do you see as some of the key differences?
- How can some of the differences be of potential value in integrating MHPSS and peacebuilding?
- How should we approach differences that can be sources of uncertainty and division?

### Commonalities

At the level of goals, an important commonality is that both MHPSS and peacebuilding aim to improve human well-being and positive social relationships at multiple levels. Also, both the MHPSS and peacebuilding sectors seek to develop a systemic approach that bridges the micro- and the macro-levels. Neither sector, however, has succeeded in achieving this bridging by single sector efforts. Attending to societal social cohesion and addressing structural factors, mainstream peacebuilding has focused more on the macro-level than has the MHPSS sector, whereas MHPSS has focused more on individuals and smaller groups at micro-levels than has the peacebuilding sector. Integration, then, opens for both sectors pathways towards the mutually beneficial bridging of micro- and macro-levels.

Social cohesion and social ecological approaches are also points of commonality. Psychosocial support strengthens supportive networks and enables the attitudes, caring, outreach, and functionality that are essential for well-being and also for healthy relationships and social cohesion. Focusing on violent societal and international conflict, mainstream peacebuilding has focused more on preventing and transforming conflict between groups and building social cohesion on a large scale than the MHPSS sector has done. The complementarity of these approaches is noted above and is highlighted by social ecological approaches. Both the MHPSS and peacebuilding areas agree on the need for supports and processes at levels such as the individual, family, community, societal, and international levels.

Community engagement and community resilience provide further areas of commonality and a frequent entry point in both sectors. The IASC Guidelines call for enabling collective self-help and support, which are processes that both draw upon and strengthen social cohesion. Community-based psychosocial support processes entail communities mobilizing themselves

around a common goal, with community members who are positioned in different ways working hand in hand to achieve that goal. Similarly, the peacebuilding sector includes a wealth of work aimed at community empowerment, reducing intra- or inter-community tensions, and strengthening social trust, social capital, and social cohesion at community level. Both sectors recognize the importance of working with and through local leaders, natural leaders such as women and youth, and existing social networks. The peacebuilding sector, with its strong social justice orientation, invites careful analysis of power relations and attention to social inclusion in community discussions and actions. Attention to the latter issues can do much to strengthen inclusive participation and empowerment, which MHPSS practitioners also view as highly important.

In addition, both MHPSS[146] and peacebuilding[147,148] aim to strengthen resilience at multiple levels. Resilience entails the ability to navigate and cope with adversity, respond to stressors in an adaptive way, and engage in problem-solving that manages conflicts constructively and promotes well-being and social cohesion. Both sectors recognize the importance of collective agency and action as integral parts of strengthening resilience. The collective agency and action may be evident in work that communities or particular groups (including youth) do in truth telling, addressing psychological and social impacts of war and conflict, enabling economic empowerment for survivors of gender-based violence, addressing discrimination based on sexual orientation, or preventing violent extremism, among others. It is also evident in efforts to reduce societal level stresses from inequities and discrimination, and to enable peaceful relationships across groups and geographic regions. The fact that the MHPSS sector aims to strengthen resilience more at a micro-level, while the peacebuilding sector focuses mostly on strengthening resilience more at a macro-level, could provide a win-win option for both sectors by developing a more systemic approach that bridges the micro- and the macro-levels.

The importance of bridging resilience processes at the macro- and micro-levels is difficult to overstate. Without coordinated efforts across levels, it is possible for good work on resilience at one level to cause impediments or harm at another level. For example, work by Indigenous communities in Guatemala has strengthened their solidarity, resilience, and well-being, and it has also increased their sense of autonomy. Yet the latter could threaten the State, leading to further discrimination and wrongdoing against Indigenous people.[149] It is essential to complement community, regional, or identity-group resilience with wider processes of societal resilience that strengthen social cohesion throughout the society and enable societies to transform relationships in a peaceful manner.

**Differences and Ongoing Questions**

The MHPSS and peacebuilding sectors also have many differences in areas such as training and background, disciplinary affiliations, conceptualizations, methods, and terminologies. Until recently, the peacebuilding sector has emphasized work with former perpetrators more than the MHPSS sector, which had focused primarily on supporting people affected by armed conflict. As discussed above, significant differences between the MHPSS and mainstream peacebuilding sectors (e.g., in their micro- vs. macro-level emphases, respectively) can be a source of complementarity and strength. However, it is natural for different sectors to

have differences that are not clear points of complementarity and are more challenging to address. Still, discussions of these may offer new opportunities for growth, collective insight, and enrichment of integration.

The two sectors have differed in regard to how much attention they devote to power differentials. Peacebuilders have long regarded political and other power differences as of central importance since they contribute to armed conflict and need to be addressed in resolving or preventing it. By contrast, the MHPSS sector has been relatively less attentive, until recently, to power differences. Over the past decade, however, the analysis of power differentials has become more prominent in the MHPSS sector. Work on community engagement and MHPSS has emphasized the necessity of understanding power differentials in identifying and engaging with marginalized, highly vulnerable people.[150,151] Work on GBV often underscores how the institutionalized power differences that privilege men over women contribute to violence such as IPV.[152,153] Also, global movements toward localization have called for increased attention to the power differences between international agencies such as NGOs and local actors, and for placing increased budget and power in the hands of local actors.

Among practitioners who seek to integrate MHPSS and peacebuilding, some focus on "trauma healing," while many others focus on "MHPSS," in accord with the IASC Guidelines. People who speak of "war trauma" or "trauma healing" often prefer these terms because they are simple and convenient for local people, whereas "MHPSS" seems technical and more cumbersome for local people to use. Also, terms such as "mental health" tend to evoke stigma and can even mean that one is "crazy." Proponents of "mental health and psychosocial support" prefer this term because it does not pathologize survivors, recognizes that armed conflict can produce diverse mental disorders besides "trauma," and appreciates that people are affected not only by mental disorders but also by suffering due to problems such as hunger, family separation, trafficking, and fears of GBV and ongoing insecurity. A sole or dominant focus on "collective trauma" or "trauma healing" could imply, erroneously, that the main support needed is "counseling" or other specialized supports. Because "trauma" is often regarded as a clinical malady, the prioritization of "trauma" may marginalize the importance of psychosocial issues, which might undermine the intentional bridging of mental health and psychosocial support that has been important in enabling a holistic approach.

This difference in focus is not only a difference in terminology but also reflects different views of the main problems and priorities. These differences require additional attention and are best approached with empathy, openness, and flexibility on all sides. It would be a mistake for one group to impose its terminology or its implicit theory of change on the other. There should be extensive dialogue about the importance of the underlying concepts, and an effort to find common ground that respects the core tenets of the IASC Guidelines and also common values that provide a strong base for collaboration.

Current conceptual differences in work to integrate MHPSS and peacebuilding relate also to the priority of learning more fully from the insights from work on peacebuilding. As discussed above, much more work has sought to weave MHPSS components into work on peacebuilding than the other way around. Bi-directionality is key, as there is much to be learned and stronger outcomes to be achieved by integrating peacebuilding elements into work on MHPSS. For

example, the conflict-sensitive approach to programming[154] that has been prominent in peacebuilding would strengthen also work on MHPSS. MHPSS staff would also benefit from trainings on different areas of peacebuilding such as transitional justice, DDR, and preventing violent extremism. In addition, work in the peacebuilding sector has been strongly influenced by conceptualizations of social capital,[155,156] which is closely connected with social cohesion. Although social capital conceptualizations have guided some work on MHPSS,[157,158] it has been less prominent overall in the MHPSS sector. Similarly, attention to structural violence[159] has been more extensive in the peacebuilding sector than in the MHPSS sector.

Yet there is much room for convergence and integration. Increasing evidence suggests that social capital is influential in preventing mental disorders.[160,161] Also, MHPSS sits at the intersection of human and social capital, opening the door for convergences. With regard to structural violence and structural drivers, considerable evidence indicates that poverty, discrimination, and severe inequities damage people's mental health,[162] often by decreasing people's access to or willingness to use mental health services.[163] Also, there is increasing attention to the drivers of child protection issues such as violence against children,[164,165] which damages children's mental health and psychosocial well-being. An important task for the future is for each sector to mine the conceptual riches of both sectors, strengthening the integration of MHPSS and peacebuilding.

## A Systemic Approach

To achieve its full potential, work on integrating peacebuilding and MHPSS should think big and expand the integrative work at different levels (see Table 3 below).

**Table 3. A socio-ecological, systems approach to integrating MHPSS and peacebuilding.**

| Level | Examples of MHPSS-Peacebuilding Integration |
|---|---|
| Individual | - Skills development in self-awareness, empathy, caring, and developing positive relationships<br>- Strengthening mental peace, including self-calming and self-regulation, reflection on one's attitudes, values, and behavior<br>- MHPSS supports for individuals who suffered violence, torture, sexual abuse, etc.<br>- Supporting men's and women's emotional sensitivity and empathy, development of non-toxic masculinity and nonviolent, gender equitable identities |
| Family | - MHPSS supports for family members of torture survivors or people who had been "disappeared"<br>- Family based supports for reducing destructive family conflict and creating an enabling environment for children, adolescents, and youth<br>- Programs such as "SASA!"[166] that help to change men's and women's attitudes on the normalcy of GBV and reduce intimate partner violence<br>- Family support for members who participate in processes of truth telling or reconciliation |
| Community | - Processes of collective acceptance and support for formerly recruited people and people with war-related disabilities<br>- Constructive dialogues between people holding divergent political and other views<br>- Cooperative projects to reduce tensions and improve community cohesion |

| | |
|---|---|
| | - Collective burial or cleansing rituals that support collective mourning, well-being and peace<br>- Community-led processes that reduce violence, including GBV, improving livelihoods, and promoting climate action<br>- Infrastructure initiatives to rebuild social areas of healing and enjoyment, such as planting gardens or painting school walls |
| Societal | - Societal planning of reparations guided by discussions with affected people to learn what they need most<br>- Justice and reconciliation policies that reduce economic inequities and severe daily stresses<br>- Memorialization processes to acknowledge loss, develop shared collective narratives and help restore trust.<br>- Societal campaigns (including digital ones) and actions to end racism, sexism, militarism, climate change, and other drivers of violence and armed conflict<br>- Widespread processes of nonviolent conflict transformation that reduce stresses and enable societal well-being. |

Interconnections across the different levels—bridging the micro- and macro-levels— are essential to the effectiveness of a socio-ecological approach. Efforts to support the community acceptance and reintegration of formerly recruited children would have limited impact unless aligned steps were taken also to enable positive relations at the family level. Similarly, efforts at community level to improve relations between ethnic or religious groups that had been in conflict would have limited success unless they were coupled with societal efforts to reduce discrimination and inequity across group lines. Much work remains to be done in identifying the actions needed at different levels and ways of strengthening connections across the levels. The integration of MHPSS and peacebuilding is a key part of strengthening these connections.

**Gaps and Priorities**

This mapping has identified a number of significant gaps that need to be addressed in enabling further integration of MHPSS and peacebuilding. These were used to define the priorities and recommendations below.

***1. Documenting, learning from and supporting grassroots, bottom-up initiatives.*** Extensive, highly promising work on integrating MHPSS and peacebuilding is done by grassroots actors, including women and youth, who are not allied with a national or international NGO or other agencies. Although these actors lack the power and visibility of international NGOs and large scale projects, it is important to document their work, listening to and dialoguing with local actors.[167] Externally supported efforts should build on and avoid causing harm to grassroots initiatives.

***2. Diversifying and strengthening conceptualizations relevant to integrating MHPSS and peacebuilding.*** The cornerstones of integration efforts are conceptual frameworks that embody the importance of both MHPSS and peacebuilding and define interacting pathways for achieving integrated outcomes that could not have been achieved through work in one sector alone.

At present, some potentially valuable conceptual frameworks are used mostly in small pockets or particular geographic regions, without much attention globally. A case in point is liberation psychology,[168,169] which in Latin America has animated extensive work that integrates MHPSS and peacebuilding. Challenging individualized views of mental health or well-being, liberation psychology views impaired psychological well-being as caused by oppression and political abuse.[170] People's well-being improves when people reflect on their oppression, organize themselves, and take collective action to address to improve their own circumstances, step out from under the yoke of oppression, and work to transform the structures of oppression and injustice. This transformational conceptualization and approach have also proven useful in countries such as South Africa.[171] There is considerable need of further cross-regional dialogue, learning, and exchange in developing enriched conceptualizations regarding integration of MHPSS and peacebuilding.

Also potentially relevant are conceptualizations of conflict-sensitive programming;[172] social capital;[173,174] psychosocial approaches to peacebuilding;[175,176,177,178] social psychological approaches to reducing inter-group hostility through contact;[179] enabling cooperation;[180] transforming conflict supporting narratives;[181] strengthening human agency;[182,183] enabling community agency[184] and collective resilience;[185,186] and environmental peacebuilding,[187,188] among others. In regard to the inequities and institutionalized sources of destructive conflict that simultaneously animate conflict and damage mental health and psychological well-being, theories of structural violence[189,190] and feminist work on a continuum of violence[191] are highly relevant.

***3. Strengthening documentation and the evidence base on effective means of integrating MHPSS and peacebuilding.*** The evidence base on integrating MHPSS and peacebuilding is weak at present. Many programs have not formulated joint outcomes and are not evaluated rigorously. Many evaluations focus more on outputs (e.g., number of people trained or number of people who participated in particular activities) than on actual outcomes. Few evaluations use powerful designs and robust measures of outcomes related to both peacebuilding and MHPSS. Even in published literature on the topic, there is a paucity of evaluations that include a comparison group, making it difficult to make causal attributions.

In addressing this priority, the use of mixed methods[192] will be highly valuable, as a combination of qualitative and quantitative data afford the richest insights. Qualitative methods give voice to people's lived experiences and avoid the limits that come with asking mostly preconceived questions. Posing elicitive questions is a useful way to learn what is most important to people.[193] Qualitative methods may also enable higher levels of participation with local people, and can engage with diverse cultural media such as storytelling, song, and proverbs. Also, highly valuable are quantitative methods such as surveys, which need to be validated in the local context. Culturally grounded surveys can be developed through approaches such as using qualitative methods to identify key local concepts and idioms, which become the basis for the subsequent development and use of surveys.

***4. Learning from Indigenous processes that interconnect work on well-being and social cohesion.*** Indigenous actors typically lack the power and access to privileged platforms of governments and large development actors, and are often made invisible. Relatively little work

has engaged with Indigenous actors, who may have epistemologies and cosmologies that are very different from those that are dominant in the international humanitarian, development, and peacebuilding arenas.[194,195,196] These differences make it inappropriate to take outsider ideas about MHPSS or peacebuilding "off the shelf" and apply them with Indigenous peoples. Also, it might be inappropriate to use internationally developed indicators and measures, or to use evaluation designs such as randomized controlled trials that put power in the hands of outsiders and tend to evaluate outside approaches, thereby marginalizing Indigenous voices. The priority is to start by listening and learning, using cultural modalities such as narrative and storytelling to document what people do to promote well-being and social cohesion. Also crucial is learning about the Indigenous ways of knowing that underpin their approach and guide their own thinking about well-being, which is often intimately connected with views of land, Nature, and spiritual harmony, and the impacts of climate change. This learning can set the stage for supportive dialogues about whether and how to blend outside and Indigenous approaches.

***5. Enriching approaches to community engagement.*** As noted above, both the MHPSS and peacebuilding sectors assign a high priority to community engagement. Yet the peacebuilding sector has more work with communities that is locally guided and owned and therefore more sustainable. In the MHPSS sector, as well as in its allied child protection sector,[197] many NGO projects are top-down and driven mostly by experts, with community people being "implementing partners" or "beneficiaries." In this approach, the NGOs hold the power, and they typically lead the assessment, analyze which problem(s) need to be addressed, select an intervention based on international standards or guidelines, lead and oversee the intervention implementation, and then conduct or guide an evaluation. This way of working has its place and seems necessary in acute emergencies or in settings in which group gatherings and participatory approaches could be seen as forms of political organizing and could endanger people.[198]

Still, in many settings this top-down approach causes problems, such as poor sustainability, creating dependency or keeping local people in a position of having little voice and power. With predominantly Western ideas and categories related to MHPSS, local people might see them as alien or as belonging to the outside agency since they may not align with local understandings and idioms of distress.[199] Eager to address urgent issues, outside agencies may not listen deeply to or learn about the local idioms of distress and modalities for supporting well-being, which are present in every society.[200] This approach runs a relatively high risk that the outside approaches will not be sustainable, since local people feel little/no ownership of them. Also, the outside approaches may cause unintended harm by marginalizing and weakening local beliefs, values, and practices.

An important priority is to make increased use of community-led approaches in which communities or other collectives decide which issues to address, design an action plan for addressing the issue(s), mobilize the community for inclusive action, and take stock of their accomplishments and challenges, making needed adjustments.[201] This process resembles what many youth groups, women's groups, and Indigenous communities are already doing. A key point, though, is that Governments, UN agencies, INGOs, and development agencies and actors can help to support this approach by playing a facilitative, co-learning role. This approach itself includes peacebuilding elements because it is highly inclusive of all people, including those who had been marginalized. It also engenders high levels of social cohesion, which increases as

people define a common goal or interest and then act together to achieve it. This approach is highly consistent with the IASC Guidelines, which call for extensive self-help and mobilization from within the community.

A promising approach is the facilitation of "design" tools and techniques (sometimes known as "human centered design" or "design-thinking"), in which community members lead creative problem-solving processes to re-imagine their realities and catalyze positive change in their lives and environments. However, it is important to avoid the imposition of design methods without adequate attention to social, cosmological, ecological, and spiritual realms that can enrich innovation processes and outcomes,[202] and to use decolonized design methods that are led by and with local people.[203,204] This way of working has been shown to be useful in peacebuilding contexts.[205]

***6. Strengthening engagement with and support for young people on integrating MHPSS and peacebuilding via media such as sports, arts, and social media.*** Too often, youth have been thought of as a "vulnerable group" or as a potential liability to society that requires corrective steps. However, this report, like some other recent reports,[206,207] emphasizes that youth are excellent sources of peacebuilding and MHPSS support, even though they may use different language to describe their work. A high priority is to build trust with and respect for youth, learn about and help accompany and support their activities, and enable them to have a voice and significant influence in global work on integrating MHPSS and peacebuilding.

Working with young people on the issues of highest priority to them in their context (e.g., issues facing LGBTQIA+ people in the Philippines, basic needs and livelihoods in Syria) is central to meaningful integrative work. Also of significant value is the use of entry points such as sports and the arts, which are naturally engaging for youth and enable expression, solidarity, teamwork, leadership, and wider social cohesion.

***7. Enriching integration across humanitarian, post-conflict, and development phases.*** Widespread work on integrating MHPSS and peacebuilding in post-conflict settings may create the impression that integration is mainly a post-conflict priority. Table 4 illustrates work that integrates MHPSS and peacebuilding is highly relevant in humanitarian contexts.

**Table 4. Examples of MHPSS-peacebuilding integration across different phases.**

| Humanitarian | Post-Conflict | Longer Term Development |
|---|---|---|
| Conflict-sensitive MHPSS programming | Addressing individual and collective psychological and social impacts, with links to dealing with the past, social cohesion, justice, and attitudes toward peace | Change social norms that discriminate based on gender, ethnicity, ability status, etc. |
| Reducing conflict between displaced people and host communities | Reintegration of formerly recruited children or adults, with supports for stigma reduction and social cohesion | Strengthen MHPSS care and access for marginalized people |

| | | |
|---|---|---|
| Addressing land and economic issues in a way that reduces stresses and builds social cohesion | Work on transitional justice with attention to MHPSS supports and material improvements | Early child development, child protection, and education for socializing children for constructive handling of conflict |
| GBV supports (including MHPSS), with attention to stigma and social integration | Memory work done in a manner that includes MHPSS | Structural reforms to address institutionalized racism, sexism, and social inequities |

As discussed earlier, sharp distinctions between humanitarian, post-conflict, and longer-term development settings have become blurred, so items that are in one column might also be included in others, too. The country case studies illustrate how protracted conflicts may create complex country situations that intermix of humanitarian, post-conflict, and longer-term development contexts. In future work, it is important to intentionally integrate MHPSS and peacebuilding at all phases in contextually appropriate ways. Much needed is work that examines how to adapt integration to the fluid, complex environments of contemporary armed conflicts, which intersect with problems such as fragile states, protracted droughts, and climate change.

***8. Strengthening the intersectoral work that integrates MHPSS and peacebuilding.*** Many initial integration efforts focused on addressing psychological and social impacts of war and conflict and the integration of psychologically oriented supports into peacebuilding. It is equally important to focus on work in the other direction, that is, on using peacebuilding conceptualizations, methods, and processes to strengthen MHPSS work. Mixed teams of MHPSS workers and peacebuilders should be prioritized, as few individuals can claim to have the requisite technical skills of both sectors. Integrative work should give increased attention to the drivers of conflict and structural injustice, which, in turn, require increased attention to issues of land, climate change, livelihoods, health, education, social and political participation, and material well-being, and their interconnections with MHPSS. Work to integrate MHPSS and peacebuilding should also occur in multiple humanitarian and development sectors such as health, protection, and education.

***9. Supporting integrative work with leaders.*** Peacebuilders have long called for work with leaders at multiple levels, including the mid-level leaders who may have fewer constraints than the top political leaders.[208] Leaders themselves can be war affected and in need of MHPSS, the lack of which may play a role in leading them to obstruct peace. An important priority is to build MHPSS elements into peacebuilding work with leaders at different levels, such as: youth, teachers, and women at grassroots level; respected religious or academic leaders at mid-level; and political leaders at the national or regional level.[209] This is not a call for subjecting leaders to therapy, but for helping to rekindle important qualities such as empathy and caring that are often blunted by violent conflict. For mid-level leaders, for example, empathy and care for people on the opposing side can be increased through processes such as interactive problem-solving workshops.[210,211] In turn, mid-level leaders have access to and may be able to have similar influence on top leaders. Supporting the development of women leaders in governance such as in the health sector can also aid integration since women are keenly attuned to family and community wellbeing, and their positioning as leaders helps to correct gender discrimination, which is a highly pervasive form of social injustice.[212]

***10. Emphasizing MHPSS-peacebuilding integration in conflict prevention.*** Integrative work on MHPSS and peacebuilding originated in efforts to address the psychological impacts of war as part of post-conflict peacebuilding. However, an equal priority should be to prevent armed conflict before it has erupted.[213, 214] Even in the absence of armed conflict, there may be inter-group tensions, powerful fears about what "the Other" might do, and poignant grievances due to discrimination, economic deprivations, inequities, disputes over land rights, loss of political power, and sexual- and gender-based mistreatment, among others. Coupled with increasing political rivalry and threats, these fears and grievances, which divisive politicians may skillfully manipulate, can help to undermine constructive means of handling the conflict and can fuel escalation and enable the eruption of armed conflict. Work to integrate MHPSS and peacebuilding should begin before armed conflict has erupted and should address drivers of conflict, including exclusion, economic and social inequities, sexism, and climate change and also their mental health and psychosocial impacts.

With these priorities in mind, some tentative conceptualizations for integration, and principles and recommendations for strengthening work that integrates MHPSS and peacebuilding, are offered next.

**KEY HIGHLIGHTS: COMMONALITIES, DIFFERENCES, AND PRIORITIES**

- Commonalities between MHPSS and peacebuilding include that they both: seek to improve human well-being and positive social relationships at multiple levels; aim to develop a systemic approach that bridges the micro- and the macro-levels; the use of social cohesion and social ecological approaches; value the importance of human and social capital; leverage community engagement and community resilience as entry-points; and strengthen and bridge resilience across micro-levels and macro-levels.
- Differences between MHPSS and peacebuilding include: their relative micro- vs. macro-level emphases; terminology related to "mental health"; and views of the main problems and priorities.
- Much more work has sought to weave MHPSS components into work on peacebuilding than the other way around.
- A systemic approach (a socio-ecological, systems approach) is needed to achieve the full potential for integrating MHPSS and peacebuilding.
- Gaps and priorities include: documenting, learning from and supporting grassroots, bottom-up initiatives; diversifying and strengthening conceptualizations relevant to integrating MHPSS and peacebuilding; strengthening documentation and the evidence base on effective means of integrating MHPSS and peacebuilding; learning from Indigenous processes that interconnect work on well-being and social cohesion; enriching approaches to community engagement. strengthening engagement and support with and for young people via media; enriching integration across humanitarian, post-conflict, and longer-term development phases); strengthening intersectoral work with other sectors (e.g., education, health, livelihoods); supporting integrating work with leaders; and making integration part of efforts to prevent conflict and build sustainable peace.

# SECTION III:
# TOWARDS THE FUTURE OF INTEGRATION

## CONCEPTUALIZATIONS OF INTEGRATION

As noted above, significant, diverse steps are being taken to integrate MHPSS and peacebuilding. Since much additional work remains to be done, it can be useful to have a space for imagining what integration entails. This section invites thinking about questions that may help to enrich our approaches to integration. Some key questions include:

- In programming, are there different levels of integration of MHPSS and peacebuilding?
- Beyond particular programs, what are wider elements of integration of MHPSS and peacebuilding?
- How do cultural differences and understandings of knowledge and being color efforts at integrating MHPSS and peacebuilding?
- What commonalities and differences across the MHPSS and peacebuilding sectors enable or limit integration?
- What are some key gaps that need to be identified, discussed, and addressed in enabling further integration of MHPSS and peacebuilding?

These and related questions admit no simple answers and require much additional discussion across diverse areas and approaches.

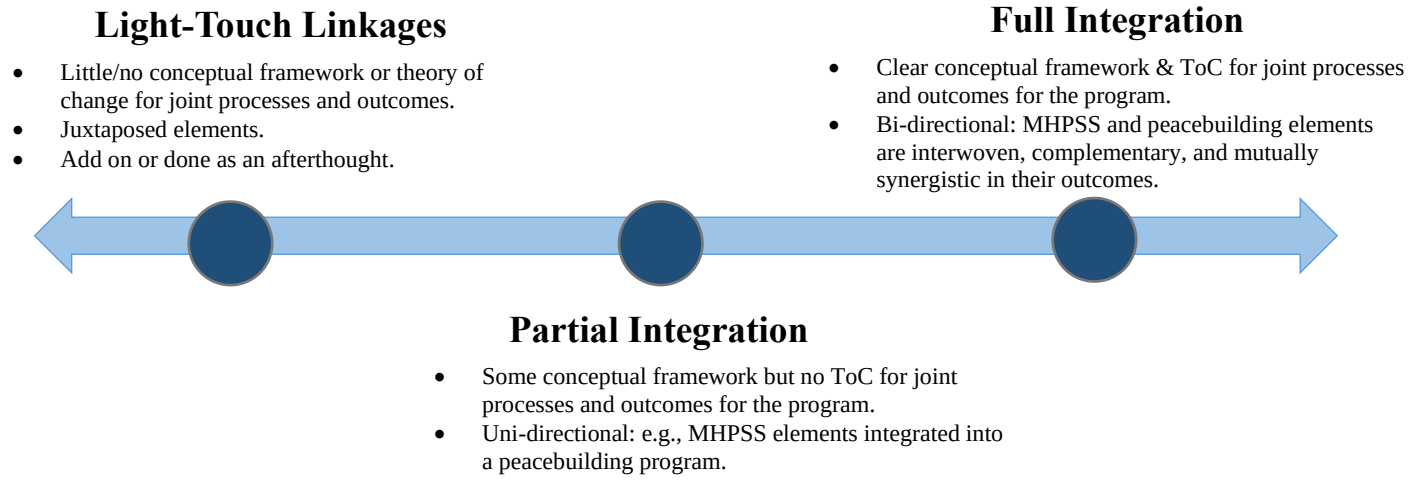
Importantly, a richly contextual approach is a necessity. In a setting where mental well-being is a severe concern, a strong or sole focus on MHPSS may be more appropriate initially than a highly integrative approach would be. Conversely, in a setting of severe insecurity, a strong or sole focus on peacebuilding may be more appropriate initially. The need for contextual sensitivity cautions against headlong rush into integration or packaged approaches for enabling integration. This section is intended to be more of an invitation to dialogue than a prescriptive framework on integration.

### Levels of Integration

#### *Programming*

It is useful to think of a spectrum of integration between MHPSS and peacebuilding in programming (see Figure 4). At one end are light touch linkages that juxtapose MHPSS elements

**Figure 4. Different levels of program integration of MHPSS and peacebuilding.**



and peacebuilding elements in particular projects, but with little conceptual integration and no theory of change in which the elements from both areas are necessary for the achievement of the project outcomes. For example, an NGO that implemented a peacebuilding project on strengthening social cohesion might also provide staff care that included MHPSS supports. Yet the staff care could arise more from human resource or ethical concerns (e.g., over burnout) than from an integrated conceptualization of how staff mental health and psychosocial well-being is an integral aspect of the peacebuilding processes used to strengthen social cohesion and how it contributes to positive outcomes.

Toward the middle of the spectrum, more systematic integration between MHPSS and peacebuilding occurs in programs that bring together elements from each area, often with positive outcomes. Prominent in this part of the spectrum are partial integration approaches that bring in elements of or apply a lens from the other area. For example, an NGO project might bring an MHPSS approach into efforts to strengthen inter-group dialogue and social cohesion. Or, a peacebuilding project might use a psychosocial approach, but without attention to how the peacebuilding work contributes also to mental health and psychosocial well-being. These unidirectional approaches may have positive effects, yet may not achieve the full range of positive outcomes that could have occurred through bi-directional integration.

Mid-spectrum interventions may also include both MHPSS and peacebuilding elements, but do not include indicators and measures of each. Similarly, assessments may have focused more on one sector than the other, and the intervention design might not have a strong conceptualization of how peacebuilding and MHPSS elements will interact to produce meaningful change. Here, programs might have multiple components but without a clear theory of change or articulation of which components do the heavy lifting.

At the other end of the spectrum are more fully integrated program approaches that conceptualize MHPSS and peacebuilding as inextricably interrelated and that take an integrated approach at all stages of the programming cycle. Well-developed conceptualizations of the interplay between MHPSS and peacebuilding would guide assessments, program design, capacity building, implementation, and monitoring and evaluation. Such conceptualizations would also include a theory of change or conceptual analysis of how the components fit together and which aspects have the greatest impact.

Box 12 presents questions to consider to achieve higher levels of integration of MHPSS and peacebuilding at the programming level.

**Box 12. Questions to consider for higher levels of integration of MHPSS and peacebuilding at the programming level.**

- Is the program guided by an assessment of both MHPSS and peacebuilding aspects, with attention to grassroots efforts already underway?
- Does the program have a coherent theory of change that shows how both MHPSS and peacebuilding elements interact and contribute to the desired outcomes?
- Are there indicators related to both MHPSS and peacebuilding?

### *Organization-level*

It may be useful, as well, to imagine how different levels of integration relate to organizational processes, where the organization could be a UN agency, an international NGO, a Government Ministry or agency, a national NGO, or a community-based organization. To avoid the privileging of formal organizations, it is also meant to include non-formal groups such as a women's group or a youth group that works on integrating peace and well-being.

A particular organization may achieve light integration by interconnecting work on MHPSS and peacebuilding in one or two projects without making integration central in its full range of programming. Also, light integration could reflect the lack of strong conceptualization of the benefits of integration. Another organization might achieve a moderate level of integration by, for example, consistently building MHPSS elements into its peacebuilding programs and with clear conceptualization of why this integration is essential. Yet this same organization might not apply a bi-directional approach by incorporating peacebuilding elements into its MHPSS programs. At the highest level of integration, an organization might have a clear, bidirectional conceptualization of and strategy for integrating MHPSS and peacebuilding, together with a clear theory of change and careful documentation and learning that guides ongoing improvements in the integration.

Box 13 presents questions that organizations might consider to achieve higher levels of integration of MHPSS and peacebuilding.

**Box 13. Questions to consider for higher levels of integration of MHPSS and peacebuilding at the organizational level.**

- Do we have the appropriate mix of expertise (in-house or through collaboration) in both MHPSS and peacebuilding?
- Is linking or integrating MHPSS and peacebuilding peripheral or central in our long-term strategy?
- Do we have in place the monitoring, evaluation, and learning expertise and processes that are needed for strengthening our program approaches and avoiding causing unintended harm?

### *Inter-Organizational*

At the inter-organizational level, too, diverse levels of integration may apply. With lower levels of integration, few organizations might use integrated approaches, possibly with low levels of coordination, agreement on program approaches, and learning across the lines of MHPSS and peacebuilding. At moderate levels of integration, a group of organizations working on integration might evolve, with some limited attention given to coordination, agreement on program approaches, and cross-learning. At higher levels of integration, extensive exchange and co-learning would occur across the MHPSS and peacebuilding sectors. Also, larger consortia or coalitions of organizations would guide integration using well conceptualized, agreed upon, and evidence supported approaches, and with careful attention to coordination, cross-learning, theory development, and strengthening of practice. It is at this highest level of integration that the two fields come together most fully, with potentially transformative impact.

Box 14 presents questions to consider to achieve higher levels of integration of MHPSS and peacebuilding at inter-organizational levels.

**Box 14. Questions to consider for higher levels of integration of MHPSS and peacebuilding at the inter-organizational levels.**

- Is there regular dialogue and sharing of what works across organizations that are working to integration MHPSS and peacebuilding?
- Are inter-organizational efforts underway to strengthen the MHPSS and peacebuilding capacities that are needed?
- Is there collaborative, inter-organizational thinking about the changing context in a particular region and how work that integrates MHPSS and peacebuilding should evolve?

### *Conceptualizations*

Efforts to integrate MHPSS and peacebuilding may also be guided by conceptualizations, such as different epistemologies, understandings of well-being, and approaches to achieving political, social, and psychological change. Global North actors often highly regard scientific inquiry as a path to knowledge, whereas people in societies in the global South may instead privilege other ways of knowing that come from religious experience or spirituality. For example, Indigenous people may see well-being as inherently interconnected with land, animals, and spiritual balance, whereas global North actors tend not to conceptualize well-being in this way. Global North actors who work on integrating MHPSS and peacebuilding may cause unintended harm by marginalizing or weakening conceptualizations and practices that may be at the center of collective well-being, identity, and dignity for local people. Even across specialists in peacebuilding or MHPSS, people may have divergent understandings of core terms such as "psychosocial" or "MHPSS."

Box 15 presents questions to consider for integration of MHPSS and peacebuilding at the level of conceptualization.

**Box 15. Questions to consider for integration of MHPSS and peacebuilding at the conceptualization level.**

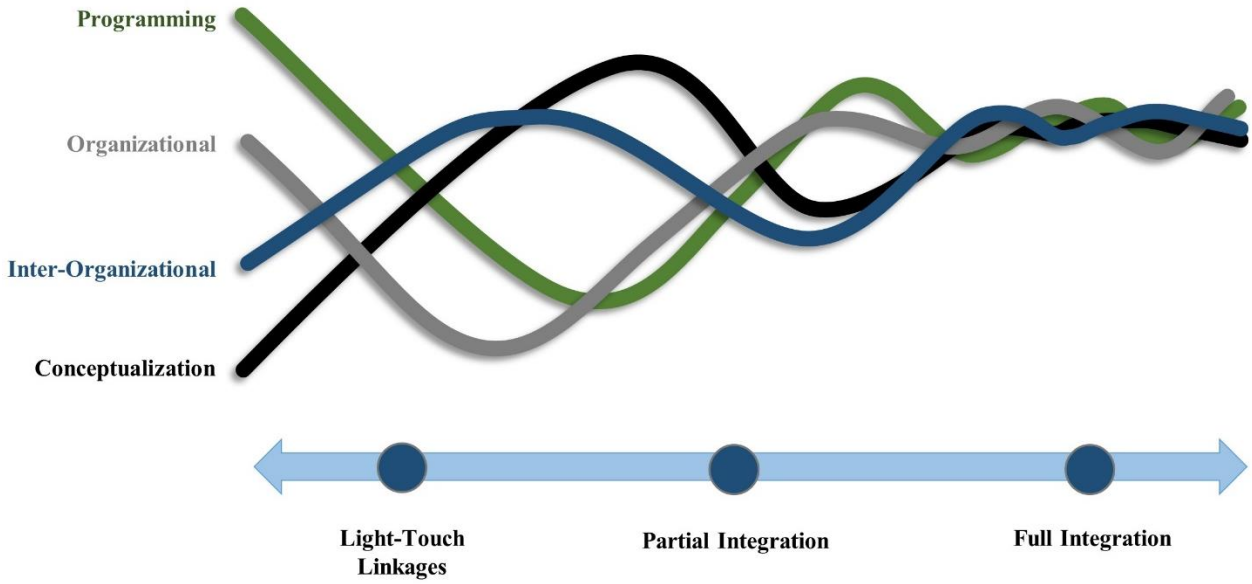
- What are my own understandings of MHPSS and peacebuilding, and how might they differ from those from other cultures, ethnicities, settings, agencies, or social positions (or intersections thereof)?
- In discussions of integrating MHPSS and peacebuilding with different groups, are we actually discussing the same things?

### *A broader view of integration*

Having outlined these diverse aspects, it is useful to consider how they might work together to promote the integration of MHPSS and peacebuilding, or how, conversely, they might develop separately, without benefitting from the synergies between them. Figure 5 (see the following page) depicts each of these elements as strands that can be separate and have only

light-touch interconnections or can be intentionally woven together into a united braid. Although the strands in the braid are depicted as being separate, there is in fact overlap and interaction across strands. For example, programming involves conceptualization and also organizational and inter-organizational processes.

**Figure 5. How the elements of programming, organizational processes, inter-organizational processes, and conceptualizations of integration may develop separately, be brought closer, or braided, leading to light-touch linkage, partial integration, or full integration, respectively.**




In the light touch area of the spectrum, one could imagine programming work that integrates MHPSS and peacebuilding well, but with few inter-agency efforts to learn together and guide future work, or few discussions about how to incorporate diverse conceptualizations into the work. In the partial integration area, efforts may help to bring the different strands together by, for example, enabling inter-organizational discussions about what is working and how to avoid causing unintended harm, or by learning from different agencies how they are integrating MHPSS and peacebuilding and using different conceptual frameworks or models. In the full integration area, the strands are recognized as inherently inter-connected and complementary and are woven together fully into a braid. For example, the people and agencies working to integrate MHPSS and peacebuilding in a particular region might form a community of practice that attempts to learn from each other on what is working and how to enable effective agency integration. The community of practice might also enable regular meetings and dialogues for purposes of co-learning, joint capacity building, and reflecting on complex issues such as how to support and learn from diverse cultural approaches or achieve better agreement on underlying conceptualizations of integrating MHPSS and peacebuilding.

This braided approach is long-term and recognizes that the integration of MHPSS and peacebuilding cannot be achieved overnight. It also suggests that in addition to integrative

programming, there needs to be inter-organizational processes of learning, reaching agreement on issues such as useful guidance and frameworks for monitoring and evaluation. It also underscores the importance of addressing conceptual issues and differences in a deliberate manner that promotes further integration and more comprehensive, high quality supports for the people who need them.

At present, the braided approach is mostly aspirational as more attention is being given to developing integrated programming. As the next section indicates, however, different conceptual approaches are at play, and there is much need of dialogue about how to unpack and learn from different approaches, while avoiding the situation in which different workers or agencies use similar language but with different meanings and underlying conceptualizations.

Moving forward, some useful questions for wider discussion on integration of MHPSS and peacebuilding are presented in Box 16. These and related questions may help to move beyond the organization-specific, fragmented approaches that have often limited the effectiveness of work in the triple nexus.

**Box 16. Questions for wider discussion on integration.**

- Do we have useful, inclusive processes of inter-organizational dialogue and co-learning about integrating MHPSS and peacebuilding?
- What venues or processes can enable constructive dialogue between agencies and practitioners who have focused mostly on peacebuilding or on MHPSS?
- Are different organizations contributing to common understandings and widely agreed, collaboratively constructed guidance?
- Are there venues for regular reflection on difficult issues or thinking through strategic directions in integrating MHPSS and peacebuilding?

## KEY HIGHLIGHTS: CONCEPTUALIZATIONS OF INTEGRATION

- It is useful to think of integration as a spectrum – from light touch linkages to full integration.
- Integration can occur across various levels, including at the level of programming, organizational-level, inter-organizational level, and related to conceptualizations.
- Elements of programming, organizational processes, inter-organizational processes, and conceptualizations of integration may develop separately, be brought closer, or braided, leading to light-touch linkage, partial integration, or full integration.
- At present, the braided approach is mostly aspirational as more attention is being given to developing integration efforts at the programming level.
- Continued explorations, reflections, and questions should be sought for wider discussions on integration of MHPSS and peacebuilding. This may help to move beyond the organization-specific, fragmented approaches that have often limited the effectiveness of work in the triple nexus.

## PRINCIPLES AND RECOMMENDATIONS

Work on integrating MHPSS and peacebuilding should be consistent with the *IASC Guidelines on Mental Health and Psychosocial Support in Emergency Settings* (referred to below as the IASC Guidelines)[215] and also good practices developed in the peacebuilding sector. The principles section below fits with core peacebuilding principles such as conflict sensitivity, Do No Harm, and the full participation of women, girls and young people (as per the WPS and YPS agendas). Following the Principles section are recommendations regarding how to integrate MHPSS and peacebuilding. These complement and are consistent with the IASC Guidelines and the UNDP guidance note[216] and peacebuilding principles. The recommendations are best regarded as working rather than final since much remains to be learned about how to integrate MHPSS and peacebuilding in an appropriate manner and in diverse countries and contexts.

### Principles

***1. Human rights and equity.*** Promote the human rights of all affected persons and protect and provide redress for people who have suffered or are at heightened risk of human rights violations. Work to reduce the inequities that damage mental health and psychosocial well-being, impede social cohesion, and contribute to cycles of violence.

***2. Participation.*** Following a localization approach, maximize the meaningful participation, representation (including strengthened voice), and leadership of affected people, and local and national actors. Include sub-groups that have been discriminated against such as women, youth, people with disabilities, or people who identify as LGBTQIA+. Integrative work should support people's agency and dignity. Rather than regarding them as passive victims or beneficiaries, facilitate their active engagement during assessment, design, delivery, and evaluation stages of programming. In this manner, individuals and communities become active co-producers of knowledge and impact.

***3. Do No Harm.*** Be context and conflict sensitive and avoid worsening social divisions and damaging mental health and psychosocial well-being. Truth-telling work should avoid reawakening painful memories prematurely, and should include appropriate MHPSS supports. Recognize and prevent the damage that can be done by reparations or truth-telling processes that support some survivors but not others. Excessive or uninformed use of trauma language should be avoided, as should individualized, medicalized approaches that focus primarily on mental disorders that risk pathologizing populations. Consider the stigma and other harm that could be caused by imposing the technical language of MHPSS. While avoiding stigmatizing labels, however, it is essential to provide specialized care for people with mental disorders. Be gender sensitive in designing programs, both to support survivors and to avoid stigmatizing people. In work on gender, attend both to women and girls, and also to men and who have experienced gender-based violence, including a mindful approach to supporting those who have been sexually abused. Take a resilience approach that enables individual and collective resilience, self-reliance, and problem-solving. As well, consider the importance of environmentally friendly operations, materials, and approaches, thereby mitigating and preventing environmental damage caused by humanitarian or development work.

***4. Build on available resources and capacities.*** Identify, respect, and prioritize building upon the peacebuilding and MHPSS assets, networks, and resources that local people have, enabling self-help, including community-led processes and local resources such as cultural, linguistic, intellectual, monetary, and material resources.

***5. Integrated support systems.*** The proliferation of stand-alone services, such as those dealing only with rape survivors, formerly recruited people, or people with a specific disorder such as PTSD, can create a fragmented care system and a non-holistic approach to peacebuilding. Activities that are integrated into wider systems of health, economics, education, and social support (both non-formal and formal) often reach more people, are more sustainable, and carry less stigma. This integrative approach requires appropriate capacity building on issues such as making appropriate referrals.

***6. Multi-layered supports.*** For both MHPSS and peacebuilding, it is important to develop a layered system of complementary supports that meet the needs of different groups. Consider how the integration of MHPSS and peacebuilding relates to the intervention pyramid of the IASC Guidelines (Table 7).

**Table 7. Examples of processes and activities that connect MHPSS and peacebuilding at each level of the IASC pyramid.**

| Level in Pyramid | Examples of Processes and Activities that Connect MHPSS and Peacebuilding |
|---|---|
| Specialized services | Specialized services for formerly recruited people, survivors of torture, survivors of GBV, and other people (including MHPSS and peacebuilding workers) who need specialized care. Provide this care in a way that increases social cohesion (such as pairing specialized care with group dialogues that address topics of healing and receptivity towards peace). |
| Focused, non-specialized supports | Psychological First Aid in peacebuilding contexts; skill building on self-awareness, understanding feelings, meditation, methods of calming and self-regulation, sensitivity to inequities and discrimination, and non-violent handing of conflict; supportive assistance for participants in truth telling or justice processes; supports for mediators who help to manage disputes at different levels and handle conflicts over land, water access, and other resources; case management of (land) conflicts that include stress reduction and a nonviolent approach. Non-clinical MHPSS supports for leaders. |
| Family and community supports | Collective efforts (including arts and cultural media) to address mental and psychosocial impacts of armed conflict and enable social cohesion through education, dialogue, truth telling, etc.; dialogues and cooperation across lines of conflict; collective self-help activities that reduce stigma towards formerly recruited people, rape and GBV survivors, individuals with disabilities, among others; use of cultural rituals and networks to bring opposing communities together and reduce tensions; collective, nonviolent approach to memory processes; safe spaces for survivors of GBV; education to reduce enemy images and reduce stresses from insecurity; locally driven processes of restorative justice that reduce stresses and social isolation; non-specialist training for peacebuilders who work on DDR processes and gender transformation; supports for preventing family violence and intimate partner violence. |

| | |
|---|---|
| Basic services & security | Conflict-sensitive and climate-sensitive approach to work in all sectors; work in all sectors designed to both reduce stresses and social divisions and enable social cohesion and positive relationships; integrating an MHPSS lens (e.g., enabling survivors to help design work on truth telling, justice, memory, and reconciliation). |

Work at these four different levels needs to be interconnected. Work at all four levels contributes to societal well-being and peace. However, specific guidelines will need to focus on societal-level integration of MHPSS and peacebuilding, through efforts such as implementing national reparations policies, national reintegration policies, or national processes of memory work in a manner that is integrated with MHPSS.

**Recommendations**

***A. General Recommendations***

- ***Take a bi-directional approach to integrating MHPSS and peacebuilding.*** Efforts to build MHPSS into peacebuilding only, without considering how to build peacebuilding into MHPSS, will likely be limited in their impacts. Recognize that MHPSS and peacebuilding are inextricably interrelated, complementary, and mutually synergistic in their outcomes. Bi-directional integration is necessary for achieving well-being and enabling sustainable peace.
- ***Connect and align work on MHPSS and peacebuilding at different socio-ecological levels.*** Recognize that if too much work is concentrated on a particular level (e.g., family or community level), or if work is done at multiple levels but is not interconnected, the impact of the integration work will be limited. Alternatively, when work is done in an interconnected manner, both the MHPSS and peacebuilding outcomes are likely to be more positive and sustainable.
- ***Develop a contextually appropriate approach.*** Conduct a (joint) context and conflict analysis, considering for example the socioeconomic, climate, cultural, religious, spiritual, and political dimensions. Adapt the approach to fit the context and the conflict phase (humanitarian, post-conflict, longer-term development). Respecting the diverse entry points for work on connecting MHPSS and peacebuilding, avoid a 'one size fits all' approach.
- ***Be sensitive to and respectful of people's gender and sexual orientation.*** Utilizing an intersectionality lens, recognize that women and men, girls and boys, and people who identify as LGBTQIA+ may face different exposures to violence, diverse kinds of discrimination, different situations with regard to social stigma and social cohesion, and different needs in regard to mental health and psychosocial well-being. Appreciate that across these lines of difference, people have significant potential to be peacebuilders and enablers of mental health and psychosocial well-being.
- ***Take an inclusive approach.*** Invite the ideas and energies of people who are positioned in different ways and with different intersectional identities, and appreciate and support their engagement. Avoiding tokenism or the privileging of particular sub-groups, work to strengthen social cohesion and address power asymmetries at all levels. If reparations are provided, ensure that the reparations extend to everyone who has been affected, including the family members of the people who experienced violence directly.

- ***Integrate MHPSS and peacebuilding at all stages of the program cycle.*** Assessments, including joint assessments, should examine issues of both MHPSS and peacebuilding, considering issues such as idioms and sources of distress and well-being, social trust, social cohesion, and resilience. Program design should intentionally integrate MHPSS and peacebuilding components, such as describing a joint theory of change with a clear idea of the expected outcomes that reflect the synergies between them. Monitoring, evaluation, accountability, and learning systems should be established jointly and include measures of both the MHPSS and peacebuilding outcomes. Capacity building efforts should focus on both MHPSS and peacebuilding, with clear attention to the different kinds of expertise and skills needed within each field (e.g., based on the IASC pyramid levels for MHPSS) and across both fields (e.g., at different socio-ecological levels, and capacities such as empathy, active listening, and nonviolent communication skills).
- ***In integrating MHPSS and peacebuilding, include a mix of focused MHPSS work and work in other sectors.*** As emphasized by the IASC Guidelines, MHPSS work includes a mix of psychologically focused work and work that integrates MHPSS into multiple humanitarian sectors. Efforts to integrate MHPSS and peacebuilding frequently involve elements of economics, health, education, and land and the environment. It is essential to take intersectoral approaches to supporting social cohesion and well-being. Livelihoods should especially be prioritized. Otherwise, local people may be unable, or unwilling, to participate in and/or lead integrative efforts.
- ***Adapt integration approaches to fit different stages of conflict.*** Recognize that integration of MHPSS and peacebuilding is important and possible during active conflict (humanitarian), post-conflict, and longer-term development phases (see Table 6, p. 35). In each phase, adjust work according to the current needs, emerging opportunities, and considerations of feasibility and ethics. For example, in a particular active conflict area, it might be feasible but not ethical to enable public, cross-conflict dialogue (i.e., dialogue between people or representations of communities/populations in conflict), since mutual fears and hostilities are too strong and could lead to additional violence. In contrast, it might be both feasible and ethical to enable well timed, cross-conflict dialogue in a post-conflict environment.
- ***Adopt an orientation of co-learning and systematic documentation.*** Have regular dialogues about how to identify whether an intervention has been effective, and use mixed methods in measuring effectiveness with an eye toward insuring that both qualitative and quantitative data receive adequate attention. Work to strengthen the evidence base regarding the integration of MHPSS and peacebuilding. Do so using a respectful approach that shares learning in an accessible manner with local people, avoiding extractive processes. Recognize that in the name of strengthening evidence-based practice, it is possible to cause unintended harm by imposing outside approaches that do not fit the context.
- ***Take a respectful approach that is flexible with regard to terminology.*** Recognize that many young people and women practitioners at grassroots level may not describe their work as "MHPSS" or as "peacebuilding." In some cases, using these terms may increase risks to or stigmatize them. In connecting with them, it can be useful to learn to speak their language, use their local concepts and idioms, or use less specialized terms such as "well-being" and "improving social relations," at least on an interim basis.

- ***Take a long-term approach, working for sustainable benefits for conflict-affected people.*** Building social cohesion and the needed layers of peacebuilding and MHPSS supports takes time. Encourage donors to adopt a flexible, long-term funding mechanism that is needed to fully integrate MHPSS and peacebuilding. Encourage also the dedication of funding specifically for integrative efforts, thereby reducing competition for funds. See Box 17 for further considerations for donors.

**Box 17. Considerations for donors.**

- ***Dedicate funding for integrating MHPSS and peacebuilding***. Without dedicated funding, there is a risk that integration of MHPSS and peacebuilding will not be prioritized. Recognize the value of enabling integration via work in diverse sectors such as education, health, and climate change, and also the value of setting up an incubator model to encourage prototyping, sustaining or scaling integration.
- ***Support integration across the spectrum, with an eye towards contextual appropriateness.*** Provision of funding across the spectrum is essential to establishing a strong foundation for future integration work. Yet in a context of high insecurity, beginning with an emphasis on peacebuilding may be appropriate, whereas in a context that poses severe challenges to mental well-being, beginning with an MHPSS emphasis may be appropriate.
- ***Enable support for integration by local actors.*** Recognizing the importance of grassroots actors, funding should support not only international actors but should include direct support for integration work by local NGO and CSO actors that are led by and/or champion young people, women and girls, Indigenous peoples, and other marginalized groups. Consider also allocating funds for local and national actors to cover human resources and operational costs, which can enable the hiring and retention of MHPSS and peacebuilding specialists.
- ***Improve the quality of funding for integrating MHPSS and peacebuilding.*** Prioritize multi-year, flexible funding that contributes to program impact and sustainability. Enable the sharing of indirect costs between leading agencies and downstream partners, and lighten conditions that require pre-financing, co-financing, and rigorous needs assessments such that local actors can compete with highly-resourced organizations and agencies. To bring in local actors, consider using less technical jargon, simplifying proposal templates and guidelines, and having longer submission timeframes.
- ***Enable collaborative learning and evidence-strengthening for integration.*** Recognizing the value of the work done by local actors and the collective need to learn from their approaches, support efforts to document their work and its impact. To help strengthen the evidence base around integration, consider the value of mixed methods, appreciating the importance of qualitative methods that enable the voice, agency, and cultural approaches of local actors. Consider also the value of regional and global co-learning events that bring together actors, including those from LMIC, to discuss and document learning and identify gaps in knowledge that can help to guide future work on integrating MHPSS and peacebuilding.

### *B. Networking, Dialogue, and Coordination*

- ***Develop and strengthen networks that include people and expertise from the MHPSS and peacebuilding sectors.*** Integration requires knowledge and technical expertise from both sectors. Since few individuals have the requisite knowledge and expertise in both sectors, it is important to reach out to counterparts in the other sector for advice and collaboration. Networks that bring together MHPSS workers and peacebuilding workers (with sector-specific expertise or with experience implementing integrated approaches) in particular areas or even globally could help to develop improved assessments, theories of change in integrative work, advice on and means of implementing integrative work, clear ideas about integration outcomes and integrated systems of monitoring and evaluation, and careful

attention to ethical aspects of the work and to Do No Harm issues. Cross-cutting networks flourish when they are guided by underlying values of mutual respect and trust, equity, reciprocity, co-learning, and humility.

- ***Enable constructive dialogue about complex issues and the way forward in work to integrate MHPSS and peacebuilding.*** Recognize that integration work presents complexities that no single agency or individual can resolve effectively on their own and that differences of conceptualization, approach, terminology, and ethics are best addressed through processes of dialogue. Develop and nourish spaces for dialogue that honor different voices and perspectives, avoid the press for premature consensus, and take a reflective, non-didactic approach. Such dialogues work best when there is mutual respect, deep listening, openness to different ideas and values, and a spirit of co-learning.
- ***Coordinate across the MHPSS and peacebuilding sectors.*** People who work on MHPSS and peacebuilding should connect with the coordination groups in both sectors and enable cross-sectoral dialogue to define joint strategies, roles and responsibilities, common or complementary activities, and other processes. Consider organizing a common meeting for open discussion and co-learning, with consideration of the possibility of forming a working sub-group on MHPSS and peacebuilding that could enhance cooperation, reduce duplication, and enable a comprehensive approach.

### *C. Considering Specific Populations, Conflict Phases, and Actors*

- ***Attend to and work with highly vulnerable people.*** In each conflict affected setting, particular sub-groups such as elders, people with disabilities, young children, former perpetrators, displaced people, or particular ethnic or religious groups may be strongly impacted yet may be relatively invisible. In integrating MHPSS and peacebuilding, it is important to include the highly vulnerable people, who may vary by conflict, into processes that simultaneously strengthen social cohesion and promote mental health and psychosocial well-being.
- ***In displacement settings, support positive relations between returnees, host, and displaced people.*** The provision of aid only to displaced people can undermine social cohesion and incite violent conflict and fears that harm mental health and psychosocial well-being. Help returnees, host, and displaced people find common ground by, for example, focusing on children and developing cooperative efforts to support the well-being of all children.
- ***Integrate MHPSS and peacebuilding at all phases of conflict, including before the outbreak of armed conflict.*** Recognize that the integration of MHPSS and peacebuilding is a priority not only in post-conflict settings but before, during, and after armed conflict. The wider goal of building sustainable peace and well-being should be kept in mind during all phases, yet the particular objectives, modalities, processes, and priorities should be adapted to the context, including the phase of the conflict. An essential part of this priority is to address the drivers of armed conflict, such as political and social exclusion, mistreatment of particular groups of people, resource scarcity, and climate change.
- ***Consider how best to engage with State and non-State armed actors, and other security actors.*** Partnering with State and non-State armed actors and other security actors (e.g.,

police) is often critical to implement, legitimize, and sustain integration initiatives and outcomes. Yet in many contexts, engagement may pose challenges such as the risk of increasing the legitimacy of or appearing to be complicit with actors who systematically violate human rights. Scan for appropriate opportunities to engage with different actors, paying close attention to human rights and drawing where possible on lessons learned from past experiences of engagement and collaboration. Be cautious and sensitive about the language one uses, recognizing that understandings and terminologies of "MHPSS" and "peacebuilding" can have implications for how integration is perceived and accepted.

- ***Integrate MHPSS aspects into work on transitional justice and vice-versa.*** Specialized care for survivors of violence will be strengthened effects if it is coupled with survivors having platforms for truth-telling processes (private and public), justice initiatives, reparations, and work towards non-occurrence of violence. Conversely, work on transitional justice will have strengthened effects if it integrates MHPSS elements, such as having facilitators trained in the use of Psychological First Aid. Truth-telling processes should be appropriately-timed and non-aggressive; reparations should address the needs of everyone, to avoid some people or sub-groups feeling invisible or slighted; and justice initiatives should mindfully integrate perpetrators, who may identify themselves as survivors, as leaving them out may cause them to feel unheard and invisible, without redress, and vengeful.

### *D. Practitioner Care and Development*

- **Enable care, including self-care, for practitioners.** Recognize the high stress levels associated with both peacebuilding and MHPSS work and life in fragile, conflict and post-conflict settings. Enable care not only for the staff of agencies but also for grassroots practitioners who may work alone or in small groups, outside the limelight.
- **Provide capacity building (trainings) and mentorship opportunities to practitioners, including local and national practitioners.** Ensure a competent workforce to deliver quality peacebuilding and MHPSS efforts by working with and building local, national, and international capacity; and assuring competency-based training with appropriate supervision and additional training. Providing mentorship to grassroots practitioners will enable motivation, creativity, and sustainability of integrative efforts.
- **Share contextualized toolkits with local and national practitioners, which will enable their work.** Particularly needed are inter-organizational, -agency, or -group toolkits and toolkits that have been tested and applied in diverse contexts. These may include sector-specific toolkits and toolkits that address work at different stages of the humanitarian program cycle, and more generally, project cycles. The former may include the IASC MHPSS Intervention Pyramid, MHPSS referral guidelines, a conflict sensitivity guide, or a toolkit on guidelines for participatory dialogue. The latter may include results-based management guidelines, M&E frameworks, and leadership development resources.

### *E. Community Engagement*

- **Support narrative and other processes of collective healing and social cohesion.** In work on addressing the psychological and social impacts of violent conflict, recognize the power

of peer supports, acknowledge people's suffering, and learn about and support cultural modes of healing through storytelling, rituals, song, dance and other arts and media. Since the sources of suffering are diverse and may include problems such as stigma or being unable to feed one's family, avoid a singular focus on "trauma." Recognizing that diverse views have value, create safe spaces in which people can share their views but without pressuring them to do so. In some contexts, expression may be harmful. Recognize also that people may see talking alone as inadequate for healing and well-being. Where justice concerns are strong, take contextually appropriate steps to link healing dialogues with inclusive reparations, and support ways for these justice concerns to be addressed through all relevant processes, including restorative, legal, and community processes. Also help people to reflect on the past and the present, as well as on how they would like their future to be.

- **Enable collective action to support well-being and peace.** Taking a slow approach that moves according to "community time," enable all people – however they are positioned – to have a voice, participate in, and lead community action on healing, reconciliation, truth telling, restorative justice, dialogue, mediation, and related priorities that are set by the community itself. Take an inclusive approach that navigates local power relations and includes the voices of highly marginalized people. For example, pragmatically involve local power elite (including local leaders such as village chiefs) while making sure that everyone has a voice in discussions and collective decisions. Outside agencies should play facilitative, co-learning, and documentation roles, but should avoid guiding communities or blunting their creativity. Recognize that such participatory approaches may not be appropriate in contexts of active hostility where group discussions may be seen as politically motivated and therefore dangerous.

- **Learn about and support cultural values and practices, when they are consistent with human rights.** Support cultural rites of burial and bereavement and cultural ways of strengthening social cohesion and reducing stigma. Recognize that in some societies or sub-groups within a society, people may have spiritualistic cosmologies and think of healing in terms of reducing spiritual distress or discord by conducting spiritual rituals that restore harmony between the living and the ancestors. Since not all cultural practices are appropriate to support, support only those that are consistent with human rights standards. Since culture and views of people's well-being are always changing, invite discussions about how local understandings of well-being and social relations connect with peacebuilding and MHPSS, and with human rights more broadly.

- **Integrate peacebuilding and MHPSS into education and early child development (ECD) at community level.** Dialogue with teachers, school administrators, school management committees, and community people about how to bring themes of peace and well-being into schools. Provide training and support for teachers and education staff on how to make schools supportive learning spaces for all children. Working with natural helpers (e.g., teachers, social workers, community leaders, mothers, and grandmothers), enable communities to support ECD activities for children 0-8 years and their caregivers. Include age-appropriate activities that promote empathy, caring, turn-taking, teamwork, supportive communication, self-regulation, and modeling of nonviolent approaches to handling conflict. Engage with caregivers about what it means to have peace in the community, and how it relates to peace in the family.

- **Support participatory processes in the design, implementation, and evaluation of integrative work.** Bottom-up methodologies such as PAR can reconfigure power and enable affected people to develop and implement their own culturally and contextually appropriate approaches to integration. These may also help to innovate and solve local problems.

### *F. Working with Grassroots Actors, including Young People, Women and Girls, and Indigenous Peoples*

- **Recognize the importance of including children, youth, women, Indigenous Peoples, and other groups facing marginalization in work on peacebuilding and MHPSS.** Processes of peacebuilding and MHPSS must be fully inclusive and respectful, and must avoid historic patterns of discrimination, oppression, and invisibility of marginalized people. Learn from, include, and enable supports for LGBTQIA+ people and people with disabilities, working in a contextually appropriate manner and avoiding stigmatizing or endangering people.
- **Provide opportunities for youth, women, Indigenous peoples, and other groups facing marginalization to contribute to policymaking at the local, national, and international levels.** Facilitating these opportunities will shape strategic and long-term directions for peacebuilding and MHPSS that are of relevance to these populations and to the local context; and also creates a sense of ownership and accountability to making and sustaining positive change and impact. Work with Indigenous people should adhere to the UN Declaration on the Rights of Indigenous People.[217]
- **Create opportunities that prioritize youth as ambassadors and leaders for well-being and peace.** This can dissuade them from engaging in or returning to violence, and can promote their dedication, agency, and creativity to developing integrative efforts. Opportunities should include intentional efforts to support young people with diverse intersectionalities, such as living with a disability.
- **Support women's and girls' initiatives and roles in peacebuilding and enabling well-being.** Women and girls can be, and often are, at the forefront of integrative efforts, but must be further supported, especially where gender asymmetries are deeply engrained.
- **Learn from and support Indigenous epistemologies and practices in integrating peacebuilding and MHPSS.** Recognize that Indigenous people often view well-being and peace as inextricably interconnected with the earth, their lived environment, and their ancestors. It is important to learn about and document their views without judging them and to support their practices for enabling well-being and peace. To prevent culture bias, it is important to avoid the imposition of outsider language and approaches while enabling constructive inter-cultural dialogue and co-learning.

# CONCLUSION

This report has emphasized the inherent synergies between work on MHPSS and peacebuilding. The integration of MHPSS and peacebuilding offers both fields the opportunity to bridge the micro- and the macro- levels in their work, thereby building the more systemic approach that is needed to enable well-being and peace. Done well, the integration of MHPSS and peacebuilding also promises to increase the impact of programs and collective actions beyond what could be achieved by single sector approaches. Integration can also help to prevent the Do No Harm issues associated with unintegrated approaches. Integration should be a central priority in practice and policy in fragile and conflict affected settings.

In moving forward, a priority is to exercise imagination in integrating MHPSS and peacebuilding. Although most current work on integration builds MHPSS aspects into work on peacebuilding, integration is, and should be recognized as, a bidirectional process. Efforts to bring peacebuilding aspects into work on MHPSS are much needed. Since work on integration is relatively new, it is important to work towards integration in a spirit of co-learning and willingness to develop new approaches. This report has highlighted the innovative work being done by women, youth, Indigenous people, and other grassroots actors. Their creative approaches inspire humility and should ignite desire to learn from their rich insights and ways of working and being. They invite us to reach beyond current, dominant approaches to integration and develop and test new approaches to connecting MHPSS and peacebuilding.

Efforts to integrate MHPSS and peacebuilding should respect the importance of context and recognize that no single approach applies all settings. A high priority is to develop or select and adapt the integrative approaches to the particulars of each context, avoiding the temptation to engage in premature scale up of standardized packages or approaches across many different contexts. In one situation, the priority might be to bring a peacebuilding approach into MHPSS work, whereas in another context, the priority might be to bring an MHPSS approach into peacebuilding work. Unintended harm could be caused, then, by rigid requirements or demands to integrate programming in a particular manner. Excessive pressures to integrate MHPSS and peacebuilding could create undue distress and undermine the slow, deliberate process required for achieving high levels of quality and impact in the integrative work.

In moving toward better integration, the process will be as important as the content. Since a great deal remains to be learned about when, how, and even whether to integrate in a particular context, it is important to approach the task of integration with curiosity, openness, and a spirit of co-learning and collaboration across the MHPSS and peacebuilding sectors. This will challenge everyone to set aside preconceptions, view differences in matters such as terminology and tacit or explicit theories of change as opportunities for learning, and work in a collaborative manner, even though current structures for intersectoral coordination are weak. Valuable efforts will likely include making spaces for cross-sectoral dialogue, reflection, and co-learning, work as intersectoral teams, and the development of intersectoral approaches to documentation, evaluation, and strengthening the evidence base. Through a collaborative process, both fields can achieve their fullest potential and enable MHPSS and peacebuilding work to make the greatest contribution to human well-being and peace, which ultimately go hand in hand.

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**Annex A. Socio-ecological framework of MHPSS and peacebuilding.**

A socio-ecological framework in Table A1 below shows examples of how MHPSS and peacebuilding can interact at different levels and can enable or damage well-being and peace.

**Table A1.** Examples of how MHPSS and peacebuilding can interact at different levels and can enable or damage well-being and peace.

| Level | Damaging to mental health, psychosocial well-being, and peace | Supportive of mental health, psychosocial well-being, and peace |
|---|---|---|
| Individual | - unaddressed psychological and social impacts block desire for peace<br>- machismo, harmful masculinities and unhealthy gender stereotypes, and limited self-awareness and management of feelings<br>- skills bullying and intimidation<br>- feelings of fear, hostility, and exclusion from mistreatment & discrimination<br>- substance abuse, often coupled with lashing out, fighting, and impulsivity<br>- youth feelings of alienation<br>- suicidal ideation | - peace in one's mind<br>- empathy and caring for other people<br>- awareness of one's feelings and how they can affect behavior and other people<br>- self-regulation and self-care<br>- nonviolent orientation and skills<br>- appreciation of the value of diversity<br>- non-patriarchal orientation<br>- values of reciprocity and interdependence<br>- youth activism for peace and human rights |
| Family | - fear, distrust, bullying, humiliation, or marginalization within the family<br>- intrafamily hostility and negative dynamics<br>- witnessing or direct victimization by violence in the family<br>- male privileging with subjugation of girls and women<br>- teaching of machismo and support for being tough and fighting | - role modeling of empathy, love, and caring<br>- modeling of gender equality and nonviolence by caregivers<br>- constructive handling of family conflict<br>- safety and encouragement in discussing one's feelings and how to have better relationships<br>- modeling and encouragement of helping and pro-social behavior |
| Community | - exposures to threats and violence<br>- lack of safe spaces<br>- gang activity, with active bullying and recruitment of children and youth<br>- social divisions between groups, with hostilities and fears on all sides<br>- modeling of violence<br>- young people socialized for violence<br>- norms of toughness, intolerance, & discrimination | - social trust<br>- collective care for vulnerable people<br>- management of cross-group tensions<br>- collective problem-solving and resilience<br>- processes of reciprocity, respectful dialogue, and relationship building<br>- access to mental health services<br>- cultural practices for truth telling, forgiveness, restorative justice<br>- resistance to gangs, paramilitaries, etc. |
| Societal | - oppression and discrimination against particular groups<br>- collective impacts and narratives of grievance that promote ongoing conflict<br>- inequities across groups<br>- extremist images and messages about the demonic 'Other' flourish along with calls to violence<br>- mass media, including social media, encourage division, fear, and hatred | - policies and leaders promote equity<br>- national policies integrate MHPSS and peacebuilding and provide inclusive supports and services<br>- civil society works to strengthen tolerance, inclusivity, and well-being<br>- media promote peace and well-being |

| | | |
|---|---|---|
| | | - wider collective identity, values, and social cohesion that provide common ground and enable peaceful co-existence |
| International | - fear, animosities, and enemy imaging between countries<br>- the climate crisis<br>- intergenerational narratives of suffering and grievance between countries<br>- arms trading and weapons stockpiling by adversaries<br>- spread of weapons of mass destruction<br>- inter-country mass killings, torture, genocide, or policies of oppression and exclusion<br>- weak international restraints on the use of violence<br>- global trade and finance policies that enable resource extraction, ongoing poverty<br>- geopolitics of power, threat, dominance, & exclusion | - international collaboration to address problems such as climate change<br>- international diplomacy and efforts to resolve destructive conflict through peaceful means<br>- international norms and treaties that limit the spread of and prohibit the use of weapons of mass destruction<br>- strengthening tools such as international law and prosecution of perpetrators of war crimes and crimes against humanity<br>- promotion of human rights at all levels |

## Annex B. Methods

Focusing on practice, the mapping was designed to elicit learning about current work that integrates MHPSS and peacebuilding and to identify views about integration, entry points, facilitators and challenges, and lessons learned. It aimed to bring forward and emphasize the voices, perspectives, and learning of grassroots practitioners.

Conducted September – December, 2021, the mapping had both global and country-specific dimensions. The global dimension focused on learning broadly from practitioners in diverse regions worldwide about their perceptions and experiences on linking MHPSS and peacebuilding. The country-specific dimension of the mapping consisted of four country case studies from different regions (Colombia, Philippines, Sri Lanka, and Syria). Whereas the global dimension aimed to identify broad patterns, the country case studies aimed to illuminate how the context shapes efforts to integrate MHPSS and peacebuilding and facilitated connections with practitioners at the grassroots level.

A draft report was finalized in January 2022. Between then and September 2022, feedback was sought from four global consultations, and the majority of the participants were from LMIC. Alongside other revisions, a South Sudan country case study and an additional program case study were added. Additional information on the mapping is provided in Annex D.

### *Global Mapping*

The global mapping entailed both a global survey that was available via Google links in English, Arabic, French, and Spanish, and key-informant interviews. The links were shared widely via diverse networks, including youth and peacebuilding networks, via social media, and via invitations from the four point-persons who enabled the country case studies. Participation was voluntary.

The global survey (see Annex C) asked ten open-ended questions about six themes: (1) The importance of linking MHPSS and peacebuilding; (2) Conceptualization of the linkage between MHPSS and peacebuilding; (3) Entry points for connecting MHPSS and peacebuilding; (4) Facilitators of and challenges in integrating MHPSS and peacebuilding; (5) Promising practices and lessons learned in integrating MHPSS and peacebuilding; and (6) Resources and supports for integrating MHPSS and peacebuilding. These questions draw and build upon on the survey conducted by the IASC WG MHPSS & Peacebuilding in 2020. Translators Without Borders translated responses in French, Spanish, and Arabic, and the Syrian point person translated the Arabic responses from Syria.

Key informant interviews (KIIs) probed similar questions to the global survey. Additional questions were asked, including the acceptability and relevance of terms such as “mental health” and “peacebuilding,” the influence of culture, intersectoral considerations such as livelihoods and education, and the role of women and youth as changemakers. KIIs were 45-60 min. in length and conducted via Zoom. Key practitioners were selected purposively based on their extensive experience in connecting MHPSS and peacebuilding in one or more geographic regions. KIIs were also conducted with country-level practitioners and grassroots practitioners,

including youth, women, and people who identify as LGBTQIA+. These KII participants had either been recommended by the country point persons or identified through their survey responses as having in depth knowledge that could be explored further. Concerted effort was made to conduct KIIs with practitioners across the four main regions of Asia, Latin America and the Caribbean, the Middle East and North Africa, and sub-Saharan Africa. The country-level KIIs were conducted in English by the consultants, and, in Spanish and Arabic by the point persons for country work in Colombia and Syria, respectively. All KIIs were recorded with permission and the recordings were kept confidential. The Syrian point person translated the Arabic interviews, and Colombian translators translated the Spanish interviews.

Additional information came from an organization that conducted a consultation with young people in Jordan and Lebanon, which probed questions similar to those used in the surveys. One consultant was present. The consultation was conducted in Arabic, and translated by a staff member of the organization.

*Country-Specific Mapping*

In consultation with the Inter-Agency Steering Committee that helped to guide this work, five countries – Colombia, the Philippines, South Sudan, Sri Lanka, and Syria – were selected for country-specific mapping and development of country case studies. Since previous mappings had emphasized sub-Saharan Africa, effort was made to include other regions and also a diversity of active conflict, post-conflict, and longer-term development settings. Sri Lanka, where the armed conflict ended in 2009, probably fits most closely the category of long-term development. Both the Philippines and Colombia are complex mixtures, as both have the stability of long-term development settings yet are affected by ongoing, though limited, armed conflicts. Having just emerged from its horrendous war, Syria is probably closest to being a humanitarian setting and continues to be affected by conflict. South Sudan, too, has elements of a humanitarian setting mixed with protracted conflict mixed with progress toward implementing a peace agreement. The mixed nature of these settings indicates the difficulties of drawing sharp distinctions between conflict, post-conflict, and development settings.

A key factor in the selection of countries for the country-specific mappings was the availability of a well-placed point person who had active networks in country on work that integrates MHPSS and peacebuilding and was willing to help connect with grassroots practitioners, including youth and women. The point persons were: (1) Sri Lanka: Ananda Galappatti, (2) Philippines: Dr. Elizabeth De Castro, (3) Colombia: Dr. Wilson López López, (4) South Sudan: Dr. Heide Rieder and and Lillian Modong Yohanah, and (5) Syria: Dr. Nabil Samarji.

For each country, a country case study was developed based on a selective review of relevant literature, review of responses to the global survey by participants from that country, and also from country relevant KIIs, FGDs, and consultations. In the Philippines and Syria, additional information came from youth consultations, which probed questions similar to those used in the surveys. The youth consultations were 60-90-min. discussions of youth participants with the consultants (in the case of the Philippines) or with the relevant point person (in the case of South Sudan and Syria). Women's and mixed consultations were also held in Syria. These

data, coupled with significant advice and inputs from the country point person, were used to develop a 5-page synthesis that outlines the context, provides an overview of the different kinds of work being done to connect MHPSS and peacebuilding, and brings forward key lessons learned.

*Ethics*

The consultants drew on local advice to help guide the processes of: obtaining informed consent through oral and/or written means, maintaining privacy and confidentiality, and related to ongoing monitoring and feedback from participants. Identifying information (name, email, organization) was anonymized and stored without personal identifiers. For this report, direct quotations are used only with the participants' consent and without disclosure of their names and organization. To avoid an extractive approach and also to enable co-learning, this report and its key findings were shared with all the participants via electronic distribution and also through global consultations from July – September 2022.

*Limitations*

Time limitations on the consultancy limited the depth and breadth of engagement with different actors, especially at grassroots level, where time is needed to build trust, especially with young people who have felt instrumentalized and discriminated against in many international efforts. Also, the consultants have better networks in the MHPSS sector than in the peacebuilding sector, which likely limited the extent of the information collected on the peacebuilding side. The participation in the global survey may have been limited by its timing and by survey fatigue, as this global survey followed a global survey for a UNDP consultancy by Drs. Friederike Bubenzer, Marian Tankink, and Yvonne Sliep.

Language, however, posed the greatest challenge for this mapping. Most grassroots practitioners, especially young people, do not use technical terms such as "MHPSS," "mental health," or "peacebuilding," even though their work connects supports for well-being with supports for social cohesion, positive relationships, resilience, and peaceful co-existence. This challenge was navigated by listening openly, avoiding the imposition of technical terminology, and following the advice of the point persons, who had an in depth understanding of the context and often helped to explain to participants what learnings were being sought.

Initially, the UN definition of "youth" as people between the ages of 15 – 24 years was followed. However, who counts as "youth" often varies across countries and depends on characteristics such as not being married. the variable definition of "young people" across diverse contexts led to the expansion of the definition to include individuals up to 35 years of age. As this shift was not made prior to disseminating the survey, only the KIIs, FGDs, and consultations considered this new age bracket.

**Annex C. Global survey**

**[GLOBAL SURVEY: ENGLISH]**

**Q1.** Full Name (First and Last):

**Q2.** Email and/or Phone Number:

**Q3.** How did you hear about this survey? Please specify organization, communication platform, and/or social media platform:

**Q4:** Do you identify as someone who works primarily in:

- Mental Health and Psychosocial Support (MHPSS)
- Peacebuilding
- Both Equally (MHPSS and Peacebuilding)
- I work in a different way and address issues of well-being, social cohesion, trust, and resilience (please specify below).
- Other (specify):

**Q5.** Please check all that you identify with being:

- A woman
- A man
- LGBTQIA+ (refers to a person who identifies as (but not limited to) lesbian, gay, bisexual, transgender, queer, intersex, asexual, or other gender or sexual orientation)
- Youth (refers to a person who identifies as 15-24 years old)
- A person with a disability (refers to a person who identifies with a physical, developmental, psychosocial and/or learning disability)
- Other (includes identity elements such as religious affiliation, caste or tribe, and/or other elements of identity that are important to you in your context): _____

**Q6.** What is/are your location(s) of work (specific town/city, region, and country):

**Q7.** What is the name of the organization you currently work for?

**Q8.** What type of organization do you currently work for? Select all that apply.

- Community Organization
- National NGO
- International NGO
- Local Government (Low & Middle Income Country)
- National Government (Low & Middle Income Country)
- Local Government (High Income Country)
- National Government (High Income Country)
- Inter-Governmental, Bilateral or Multi-lateral Organization

- Donor Agency
- Research Organization or Think Tank
- Academic Institution
- Other: _____

**Q9.** How many years of experience have you had with connecting MHPSS and Peacebuilding into your work?

- 0-3 years
- 4-8 years
- 8+ years

**Q10** Why do you think it is important to connect MHPSS and peacebuilding?

**Q11.** Thinking of a project you have been involved in or know fairly well that successfully linked MHPSS and peacebuilding, please describe:

**Q11a.** the project's goals:

**Q11b.** the project's main processes and/or activities (e.g. what did you/your team do):

**Q11c.** the project's main outcomes to date (e.g. how did participants benefit/improve:

**Q11d.** If applicable and available, please include website links:

**With the project you just described in mind, please answer the following questions:**

**Q12.** What observations, considerations and/or problems to be addressed led you and your colleagues to want to connect peacebuilding and MHPSS in this project?

**Q13.** Please describe briefly how the community engaged in this project, and whether and how community engagement helped to open the door for connecting peacebuilding and MHPSS.

**Q14.** What facilitated the connection between peacebuilding and MHPSS?

**Q15.** What challenges arose in connecting peacebuilding and MHPSS?

**Thinking beyond your project now, and considering wider efforts to connect peacebuilding and MHPSS, please answer the following questions:**

**Q16.** What are three good practices or lessons learned in connecting peacebuilding and MHPSS?

**Q17.** What does "integrating" peacebuilding and MHPSS mean to you? Further, are there levels to "integration," and if so, what might they be?

**Q18.** How could efforts to integrate peacebuilding and MHPSS become sustainable?

**Q19.** What resources and supports would you like to see to support your efforts in integrating peacebuilding and MHPSS?

**Further Information/Contact**

**Q20.** Please share anything else that you feel could be helpful to the work of connecting MHPSS and Peacebuilding, including but not limited to relevant initiatives, existing resources in the field or other relevant technical groups and practice networks that you are aware of. Please share weblinks or contact details for these where possible.

**Q21.** As mentioned at the start of the survey, the findings will be publicly shared in an aggregate form in a report, which will be available in early 2022. Would you like to be informed when the report is available?

- Yes
- No

**Q22.** Can the consultants of the IASC Reference Group for MHPSS and Peacebuilding contact you for further information and/or for an interview, if needed? We will only contact you regarding follow-up from this survey and will not share this publicly or with other initiatives without your consent. Please select all that apply.

- Yes to connecting via email for further information, if needed.
- Yes to connecting for an interview, if needed.
- No to connecting.

**Q23.** If yes, please confirm your preferred contact method and information:

- By email, as I provided earlier
- By phone, as I provided earlier
- Other: _____

**Thank you very much for your input and support!**

**Annex D. Mapping results.**

This Annex presents the additional findings from the mapping, beginning first with participant information and views of integration. It then presents a typology that illustrates the dominant thematic areas in which integrative work is being done globally. This is followed by a table to illustrate facilitators and challenges to integration.

*Participant Information*

Survey

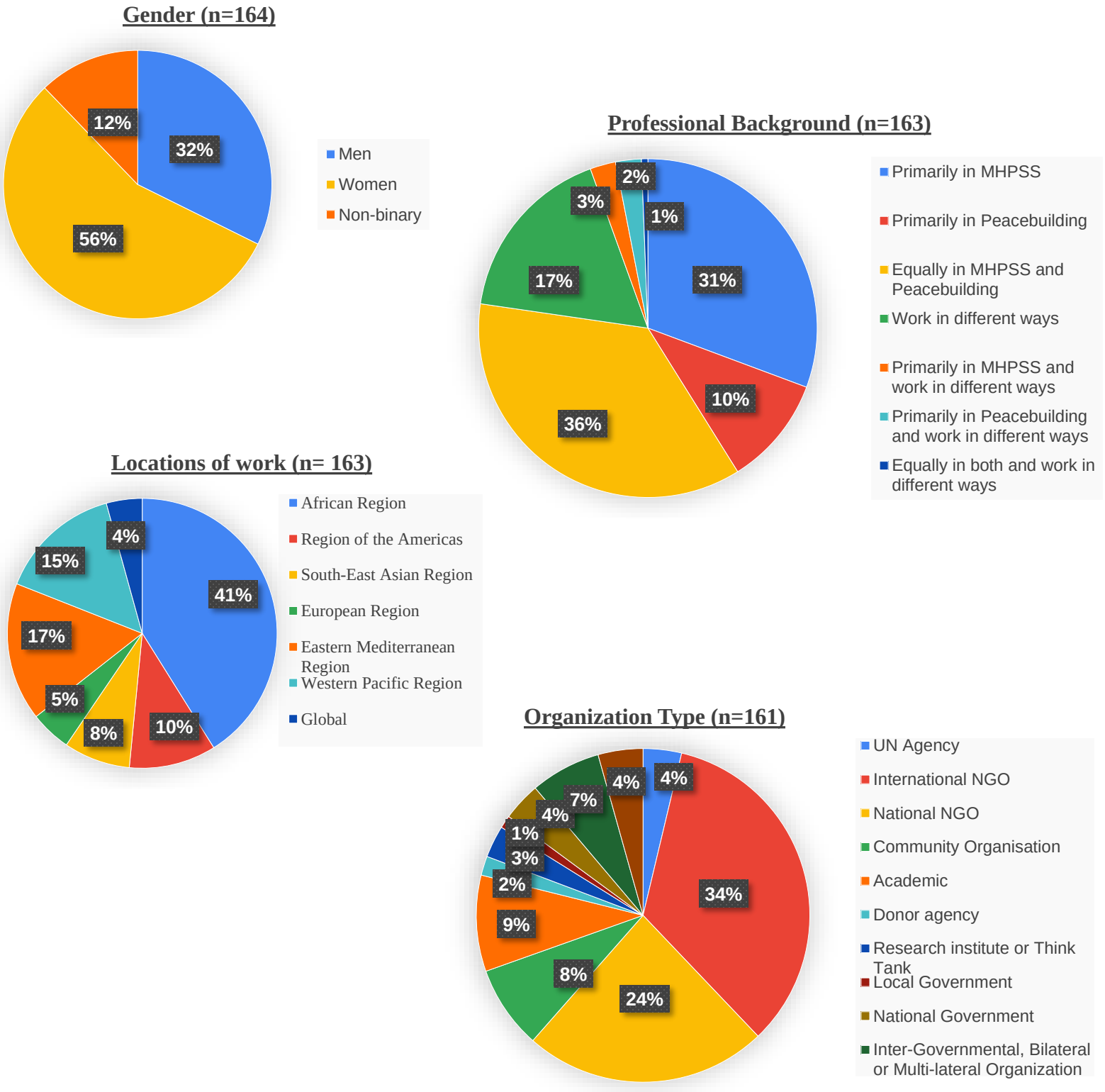
167 responses were shared, with two not being included as they were highly incomplete. 42 responses were in non-English languages. Although some participants were from the global North, the responses shared fieldwork from 29 countries and 1 region: Afghanistan, Central African Republic, Chile, Colombia, the Democratic Republic of the Congo, El Salvador, Ethiopia, Guatemala, India, Iraq, Kashmir region, Kenya, Lebanon, Mexico, Myanmar, Nepal, Nigeria, Philippines, Rwanda, Sierra Leone, Somalia, South Africa, South Sudan, Sri Lanka, Sudan, Syria, Tanzania, Uganda, Ukraine, and Zambia.

Overall, of 164 responses considered, 56% of participants identified as women, 32% identified as men, and 12% identified as non-binary (selecting both genders or selecting neither). Of 164 responses considered, 15% identified as youth (between the ages of 15 – 24), 7% as LGBTQIA+, and 10% with a disability. Asked about their primary area(s) of work (n=163), 36% of participants indicated MHPSS and peacebuilding equally; 31% indicated a primary focus on MHPSS; 17% indicated they worked in "a different way [that] addresses issues of well-being, social cohesion, trust, and resilience;" and 10% indicated a primary focus on peacebuilding. In terms of practitioners' organization types (n=161), most participants work at an international NGO (34%), followed by working at a national NGO (24%), academic institution (9%), and community organization (8%). Additionally, the top three regions (as per the WHO categorization of regions) of fieldwork are (n=163): African Region (41%), Eastern Mediterranean Region (17%), and Western Pacific Region (15%). Finally, in terms of practitioners' years of work (n=163), 37% of participants have 8+ years of work, 28% have 4-8 years of work, and 35% have 0-3 years of work. Figure D1 (see the following page) includes pie-charts that provide information on participants' gender, professional background, type of organization affiliation, and locations of work.

Key Informant Interviews (KIIs) and Focus Group Discussions (FGDs):

23 people across five regions participated in key informant interviews. Three joint interviews (two in Sri Lanka two in Syria) were also conducted. Additionally, four FGDs were conducted (two in Sri Lanka and two in Syria). A total of 68 individuals participated in (joint) KIIs and/or FGDs.

**Figure D1.** Global survey participants' information.



Youth Consultations

Four youth consultations were held in October - November 2021, during the phase of writing the draft report with: 11 youth in the Philippines; five youth from Jordan and Lebanon; 34 youth in Syria; and eight youth in Sri Lanka. In the Philippines, Sri Lanka, and Syria consultations, the age bracket was extended to age 35 years. One consultation was held with five young people in South Sudan in September 2022. As well, one global consultation was held with 11 young people in July 2022 to receive feedback on the draft report.

*Typology of Programs*

To provide a snapshot of current work on integration, Figure D2 (p. 83) shows a visual typology of some of the main thematic categories of work that integrate MHPSS and peacebuilding. A wide range of themes are being addressed, with work being focused more on some themes than on others. The largest circles represent the themes that the most work centers around, with smaller circles indicating that a theme has generated less work. The closer a particular circle is to the center of the page, the more central that particular theme seems to be overall in work that integrates MHPSS and peacebuilding. In alphabetical order, the most central themes in which extensive work occurs include:

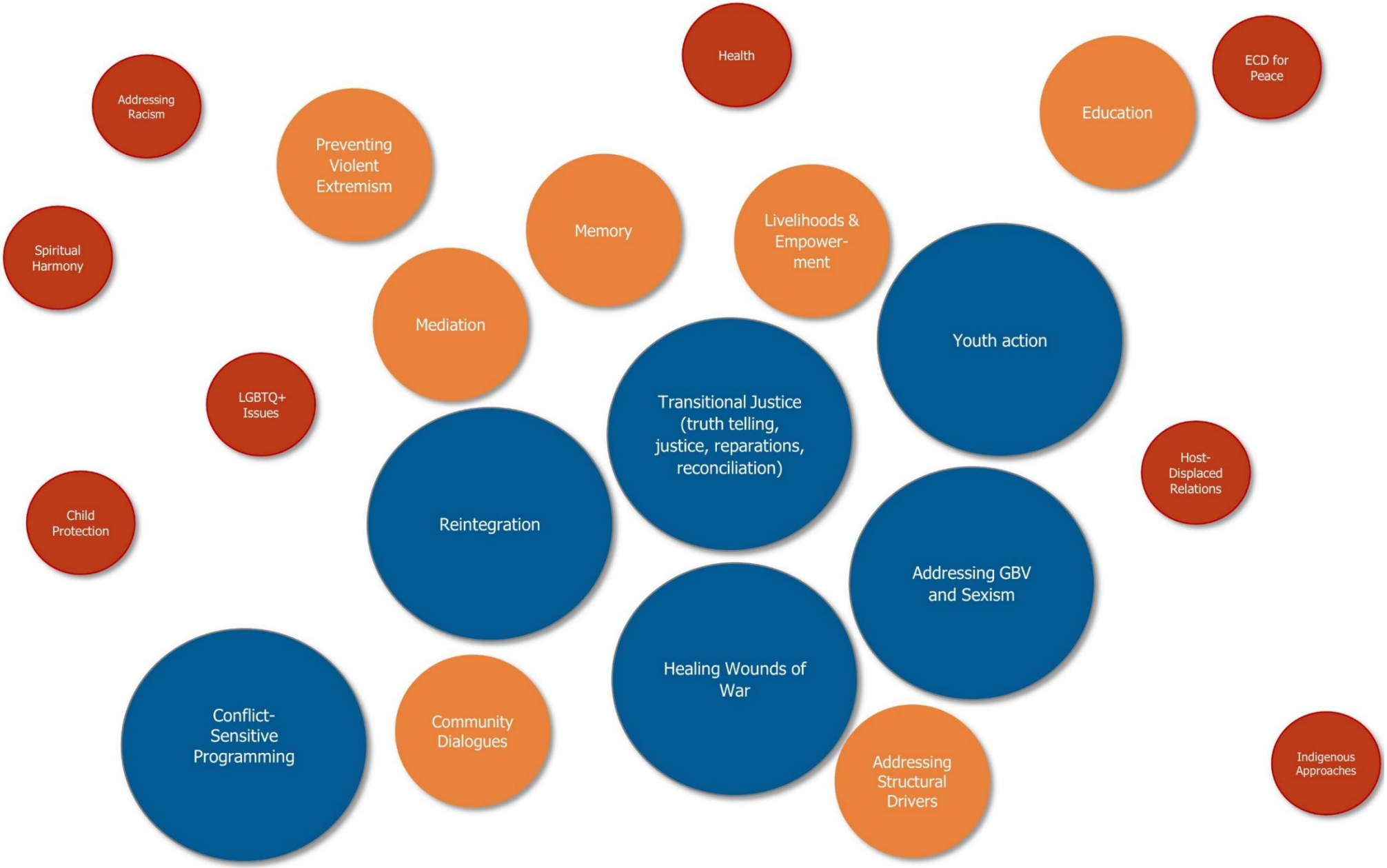
- Addressing GBV and sexism;
- Conflict-sensitive programming, which is likely more widely used in the peacebuilding sector than in the MHPSS sector;
- Addressing psychological and social impacts of war and conflict, which is often referred to as "trauma healing;"
- Reintegration of formerly recruited people, including children formerly associated with armed forces or armed groups;
- Transitional justice, including sub-areas such as truth telling, justice, reparations, and reconciliation;
- Youth action, including youth led work on discrimination, social justice, and LGBTQIA+ issues.

Although these areas are depicted separately according to the categories named by participants, there are significant overlaps between these areas. For example, youth action could address transitional justice, or issues of GBV. Similarly, trauma healing can occur as part of reconciliation.

Frequent themes also included economics and empowerment, education (including peace education), community dialogues, mediation, memory (memory work often involves dealing publicly with the past, memorialization, narratives and commemorations of what happened, etc.), and preventing violent extremism. Themes such as "health" or "human rights" appeared less frequently and were sometimes used as names for work that integrated MHPSS and peacebuilding. In some contexts, terms such as "peace," "mental health," and "psychosocial support" were reportedly seen as being too political or contentious, leading practitioners to group the relevant work under more acceptable labels such as "health." Also, youth activists frequently spoke of their work in terms such as "human rights" without using terms such as "mental health" or "peacebuilding," though their work had implications for both.

Several caveats about this typology deserve mention. It partly reflects subjective judgments since it is not based on representative sampling and systematic reviews using PRISMA standards.[218] As discussed above, it represents the different themes separately, although they can overlap extensively in particular settings. Four central themes—social cohesion, resilience, well-being, and youth and women action—are not included because they are so cross-cutting. Many other themes were not included because showing too many themes made the typology overwhelming. As will be shown by the country case studies below, the typology may not capture the constellation of work done in particular countries. Since work on integration can evolve rapidly, this depiction may have a relatively short shelf life. Of note, the typology is descriptive rather than prescriptive—it depicts current work but is not a picture of the field as it should be.

**Figure D2. Visual typology of main categories of work that integrate MHPSS and peacebuilding.**



The facilitators of and challenges to integration of MHPSS and peacebuilding fell broadly into three categories: 1) Logistics and operations, 2) Approaches and practices, and 3) Practitioner capacities (knowledge, skills, values & attitudes). Common examples of facilitators and challenges shared by participants are presented in Table D1.

**Table D1.** Facilitators and challenges of integrating MHPSS and peacebuilding.

| Facilitators | Challenges |
|---|---|
| **Logistics & Operations** | |
| • Actors who are committed to and interested in pursuing integrative effort<br>• Funding for pilot and long-standing programs<br>• Having a clearly stated purpose for the integration program; clearly stated program goals and activities. | • Volatility of the region<br>• Additional crises (e.g., COVID-19, climate crisis) aggravating an already difficult situation<br>• Inability to reach community members living in remote areas;<br>• State actors' perception of "peacebuilding" as a threat<br>• Lack of long-term, flexible funding |
| **Approaches & Practices** | |
| • Leveraging participatory processes with community members<br>• Learning about and using people's ways of knowing and doing<br>• Including livelihoods efforts, which was seen as needed by community members for participating in and/or co-leading integrative efforts<br>• In regard to transitional justice, including MHPSS within truth seeking and reconciliation commissions and processes, with provision of MHPSS as part of reparations | • The separation of sectors, including by donors;<br>• limited time to contextualize programs<br>• Lack of effective measurement and evaluation tools to understand the impact of integrative efforts<br>• Navigating the complexities of culturally-appropriate and conflict-sensitive language<br>• Difficulties in influencing decision makers to use decolonizing approaches |
| **Practitioner Capacities (knowledge, skills, values & attitudes)** | |
| • Practitioners have a strong understanding of why integration is necessary<br>• Program team has a balance of expertise across the MHPSS and peacebuilding sectors (and/or on-going training is available to learn about the other sectors' work)<br>• Clearly stated roles and responsibilities of practitioners across MHPSS and peacebuilding.<br>• Prioritization of practitioner self-care | • "Mental health" is stigmatized<br>• Uncertainty about what "integration" means or perception that MHPSS and peacebuilding have different conceptual frameworks<br>• Lack of training, supervision, and/or mentorship on the competencies required of practitioners |

There was two infrequently mentioned challenges related to practitioner capacities. First, one practitioner working in Kenya shared that both MHPSS and peacebuilding staff were "suspicious" of each other: the MHPSS staff did not trust the peacebuilders to not do harm by preventing re-traumatization of the participants they were working with; and the peacebuilders felt the MHPSS professionals were "add-ons" to their work, and therefore not equal partners.

Second, a practitioner who had worked in Myanmar described the local Burmese staff as holding harmful biases and assumptions towards the Rohingya people, whom the integrative program was intended to support. The belief of the Burmese staff that the Rohingya people should leave Myanmar caused tension within the work environment. These challenges illustrate how professional-based or ethnic-based biases and assumptions that local staff may have towards one another or a community group can influence the way in which integration work is conducted. It is possible that such challenges are rare. However often they occur, these challenges need to be discussed openly, acknowledged, and transformed.

**Table D2.** Organizations leading programs across the six prominent themes of integration.

| Theme of Integration | Country/ Countries of Work | Organization/Network |
|---|---|---|
| **Preventing Violent Extremism** | Philippines | IAHV - Philippines |
| | El Salvador | GIZ |
| **Enabling Reintegration of Formerly Recruited People** | Colombia | Dunna - Creative Alternatives for Peace |
| | Liberia, Uganda | 10 international NGOs + 4 international consultants |
| **Supporting Empowerment & Livelihoods** | Mexico | Juventudes por la Paz |
| | Argentina | Nuestra Agenda |
| | DRC, CAR, Uganda | War Child UK |
| | South Sudan | CRS - South Sudan |
| **Addressing Gender-Based Violence** | Philippines | STRAP; Bahaghari; (PAP) Psychological Association of the Philippines |
| | Guatemala | Colectiva Actoras de Cambio |
| | South Africa | IOM - South Africa |
| **Addressing Psychological & Social Impacts of Warn and Conflict** | Ukraine | DF , Center Voskhozhdeniye |
| | Rwanda, DRC | CBS Rwanda |
| | Iraq | CRS - Iraq |
| | South Sudan | Independent consultant through Green String Network and Whitaker Peace Development Initiative |
| | Somalia | Visioncorpsinitiative |
| **Transitional Justice via Promoting Truth-Telling, Reconciliation, Reparations & Memory** | Sierra Leone | CRS - Sierra Leone |
| | Lebanon | GIZ - Lebanon |
| | Chile | Programa de Reparación y Atención Integral en Salud y Derechos Humanos |
| | Sri Lanka | The Asia Foundation |
| | Sierra Leone | CRS - Sierra Leone |

**Annex E. Program case studies**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# Colombia: Enabling a Community-Led Approach in Montes de María With Long-Term Co-Learning and Accompaniment

***NOTE: This program case focuses on community engagement and the importance of respectful, community-led processes.***

**Background:** Colombia has endured 60 years of armed conflict. Near the Caribbean coast, Montes de María consists of 15 municipalities (counties) and includes Afro-Colombian communities, Indigenous communities, and farming communities where land has been hotly contested. Montes de María has been the site of over 70 massacres, thousands of murders and disappeared people, paramilitary and guerilla actions, and political polarization. Although homicides in the region decreased following the 2016 peace agreement, drug trafficking through the region continues, generating strong tensions over land control and fear, anguish, and terror among the general population. Local people have strong distrust toward Government institutions, including the health system.

**Program Goals:** The program goal is to co-construct with communities in Montes de María a model of psychosocial care, a term that is used to avoid the reductive, medicalized implications of the term 'mental health.' The model will recognize and build upon the extensive resilience and practices of care and self-care that communities have developed over decades of adversity.

**Program Activities:**

*Collaborative Approach:* A multi-disciplinary team from Colombia and the UK enable this work. The people who are from outside of Montes de María teamed up with collaborators who have in depth understanding of and strong relationships with communities in Montes de María.

*Positioning the Team.* Using a participatory action research (PAR) approach, the team entered communities not as 'experts' but as respectful co-learners who learn from and accompany the communities. Initially, the team asked community leaders whether it would be useful to have a project in which the communities and the team would co-construct understandings of and approaches toward strengthening psychosocial care in mental health. The local leaders responded positively, saying that mental health had been sorely neglected.

*Participatory definition of and approach to supporting psychosocial care and well-being.* Recognizing the history of fear and self-silencing, a priority was to restore people's voice and enable them to come together for dialogue and planning. The collective dialogue helped to rekindle traditions of collective discussion, planning, and action that had been disrupted by the armed conflict. Through collective dialogue that involved not only men but also women and young people, communities are able to reflect on how they have been affected, what they have done to manage and survive a very difficult, dangerous environment, and what they want to do together to strengthen well-being and move forward as a people. These dialogues can help to strengthen cultural identity and collective resilience. They also help to develop contextually relevant approaches and create opportunities for access to health care that is sustainable and consistent with the region's political, social, and economic context.

*Documentation:* The team uses a mix of qualitative and quantitative methods. The qualitative methods help to give voice to people and capture the main themes and difference expressed during the community discussions. The quantitative methods will incorporate learning from the qualitative methods and allow tracking of changes in well-being over time.

**Entry-Points:**

*Do No Harm:* In Colombia, some international NGOs have used top-down, expert driven approaches, causing unintended harm by marginalizing local practices and weakening cultural values and identities. Much needed was an alternative approach that comes from the people, embodies their values and culture, fits the context, and would be more sustainable.

*Different Associations*: Montes de María has numerous existing traditional or ongoing Associations (e.g., women's, youth, and Indigenous) that promote community well-being and social cohesion. These provide natural fora for collective discussion and decision-making regarding psychosocial care and well-being.

*Local activists, including youth and women:* In addition, there is a rich history of activism and set of activist networks to draw upon.

**Process Outcomes:** The collective dialogues have heightened attention to issues of mental health and psychosocial well-being and have strengthened social cohesion. Still in the early phase, the dialogues have surfaced understandings, networks and resources that will inform the model that people will develop.

**Facilitators of Integration:**

- Creativity of the local people.
- The co-learning approach, with power resting with community people.
- A long-term approach of pragmatic solidarity and mutual accompaniment.

**Challenges to Integration:**

- Political and transitional justice were difficult due to ongoing armed conflict, government corruption, failed reparations processes, and challenging trials that were both encouraging and discouraging.
- Extreme poverty challenged some participants' long-term engagement in the project.
- The conflict aggravated pre-existing intra-community conflicts, sowing divisions.

**Lessons Learned:**

1. The imposition of outsider approaches can cause harm by further silencing people and marginalizing their own processes of care, support, and social cohesion.
2. It is important to understand and build upon the local culture and cosmology, which in this case envisioned relationships with land and nature as central to people's well-being. Western approaches may not fit the local context and may disrespect people's cultural beliefs, dignity, and identity.
3. Cultural humility is key, as is moving according to "community time."
4. Peacebuilding and MHPSS are long-term processes that require long-term engagement.

*One of the problems that communities systematically point out is that sometimes formulas are brought in from outside…with all the negative consequences that this has. Communities call this "action with damage."*

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**Acknowledgement:** Dr. Wilson López López, Pontificia Universidad Javeriana, Bogota Colombia

# Guatemala: Indigenous Voices & Images: Mayan Ixil Women of Chajul

**Background:** In Guatemala's armed conflict between 1960 – 1996, government forces attempted to destroy Indigenous Mayan communities through mass atrocities, scorched villages, disappearances, and mass displacement and exile. Women were directly targeted through rape, torture, and tearing fetuses from mothers' wombs. During and after the worst years of genocidal violence, rural women lived in deep poverty and had few spaces for reweaving the social fabric and responding together to the material and psychosocial effects of the war. Indigenous epistemologies, values, and practices had been attacked during the war and needed support.

**Program Goals:** Working with the grassroots organization, The Association of Mayan Ixil Women – New Dawn, The Voices & Images: Mayan Ixil Women of Chajul program aimed to create spaces in which survivors, with external accompaniment, re-threaded community among a religiously, linguistically, politically and generationally diverse group of women. Using a participatory action research (PAR) approach, local women co-determined how to tell the story of the violence they had experienced and how they were responding to its multiple effects. The project also aimed to improve women's material circumstances via economic empowerment and development activities.

**Program Activities:**

*Economic Development:* Women used loans to invest in a talent and passion of their choice (e.g., weaving huipiles or cortes, small gardens, honey). Women could sell what they made, repay the loan, and use the rest as profit to support themselves and their families.

*Bearing Witness:* Using self-selected creative modalities (e.g., photography, dramatization, collective drawings, collages, storytelling), women told stories of their losses and violations, and also documented how they were responding in the present to their complex challenges. Integrating photography processes ("photovoice" and "talking photography") with participatory action research (PAR), the women became co-researchers in "photoPAR." They documented root causes of the conflict; engaged collaboratively in critical reflection and analysis of these understandings; recovered customs and beliefs that had been threatened by the military; and highlighted their persistence and resistance during a continuum of violence. Reflecting on their losses, grief, and sorrows, they heard, acknowledged, and supported one another in sharing their stories.

**Entry-Points:**

*Women in action:* Many women were not interested in testifying in either the Catholic Church-led or U.N. negotiated Truth Commissions, nor in simply talking about the past. They were interested in rethreading the social fabric by storytelling, and only if these stories could be shared with the broader public to build a better future for their children.

*Local ways of knowing, doing, and being:* Context-specific understandings and capabilities (e.g., from Freirean pedagogical and analytical techniques, creative resources, and Indigenous practices such as oral histories, weaving, religious rituals and ceremonies) were realized as rich capacities to underpin the PAR processes. Additionally, it was observed that a more local and culturally relevant methodological approach to engaging in peacebuilding was needed. This led to the women co-determining the use of the "photoPAR" methodology, which would better align with how they wanted to engage with storytelling.

**Community Engagement:** The photoPAR group began as 10 women and grew over time to include 20 women from what had become an NGO of over 150 women. In many ways, the women led the process, making key decisions about the methods, analysis, and use of the information.

**Outcomes:** Women were motivated to work collectively in building processes that responded to violence and violations that persisted even after the signing of the Peace Accords in 1996. Some outcomes included: developing leadership skills, developing and sustaining an after-school program through which children learned to read and write in their Indigenous language, facilitating work in villages that multiplied their skills, and joining church-based or NGO-based projects as leaders. Some participants ran for local political positions, represented Mayan women in national organizations, and led survivors' participation with giving testimonies in trials. One became a Mayan mayor of the town. The participants' children, now adults, are among those who have opted not to migrate from the town but to remain in the town, building a better life for themselves and their families.

**Facilitators of Integration:**

- Being responsive to community members' material and cultural resources and insights and wisdom; and facilitating processes through which they carry forward data collection and evaluation methods in their own manner.
- A dedication to long-term, pragmatic solidarity and mutual accompaniment.

**Challenges of Integration:**

- Political and transitional justice were difficult due to ongoing armed conflict, government corruption, failed reparations processes, and challenging trials that were both encouraging and discouraging.
- Extreme poverty challenged some participants' long-term engagement in the project.
- The conflict aggravated pre-existing intra-community conflicts, sowing divisions.

**Lessons Learned:**

1. Peacebuilding and MHPSS are long-term processes that require long-term engagement.
2. Cultural competency is a significant misnomer. To enter a community that is different from one's own (such as linguistically, culturally, nationally, and in terms of racialization and impoverishment), requires deep humility and compassion, a curiosity to learn, an invitation from those in the community, and a gradual building of mutual trust and respect.
3. Learning from and listening to their understandings of MHPSS and peacebuilding. The women themselves did not speak about MHPSS and peacebuilding. Rather, their understanding of well-being was grounded in Mayan cosmovision, in which well-being is inextricably interconnected with being in harmony with the land, animals, and Nature.
4. "Talking" as a solution to suffering is not universal. Suffering is deeply embodied, so 'healing justice' and '*buen vivir*' (an Indigenous value that well-being is rooted in harmony with community and nature) processes must also be embodied.

"The only way to achieve well-being or *buen vivir* for all within a community or context is through community-based organizations and social movements working together in ways that are rooted in the customs, beliefs and practices of their communities, dialogic relationality, mutual accompaniment and/or pragmatic solidarity, working together towards healing justice."

Dr. M. Brinton Lykes

**Acknowledgement:** Dr. M. Brinton Lykes, Co-Director, Center for Human Rights & International Justice, and Professor, Community-Cultural Psychology, Boston College

# Iraq: MHPSS and Livelihood Integration Program

**Background:** For decades, Iraq has experienced armed conflict leading to widespread displacement of millions of Iraqis, severe trauma and human rights violations, loss of livelihoods, and social, ethnic, and sectarian divisions. Additionally, tensions between returnees, IDPs, and host community members have escalated because of forced relocation and returns due to IDP camp closures, frustration over corruption and lack of employment, and security concerns.

**Program Goals:** The MHPSS and Livelihood Integration (MLI) program in Iraq aims to strengthen the mental health and emotional well-being of livelihood participants, equip them with work-related life skills, social and soft skills, and the ability to address work-related stressors using positive coping mechanisms. In addition, the MLI programming promotes social cohesion and peacebuilding at the community level, by bringing together returnees, IDPs and members of the host community.

**Program Activities:**

*MHPSS Awareness Session:* MHPSS concepts with participants are shared and explored. An intake assessment is also facilitated to understand what the mental health and psychosocial needs are, and what skills the participants want to develop.

*Life, Social, and Soft Skills Sessions:* Topics include coping with stress & building resilience; positive thinking, patience, adapting to change, perseverance & motivation; teamwork & conflict resolution skills; self-confidence & self-esteem; time management & prioritization skills; communication skills; problem-solving skills; and leadership skills & relationship building. These sessions are often interwoven into peer-support group meetings.

*Peer-Support Group Meetings:* Participants share work-related challenges, ideas, and opportunities with other members who are in a similar situation with their livelihoods work (e.g., starting a new business). The meetings provide a space to build relationships that enhance positive coping, skills-building and problem-solving; and help build a strong social network and social cohesion.

*Individual Counselling:* This is available for participants who request this additional support.

*Staff Training:* Trainings on the concept of MHPSS and livelihood integration and the program itself.

*MHPSS and Livelihood Integration Manual:* The manual outlines the MLI approach and implementation to inform combined programming across different contexts. It provides detailed guidelines for hosting the MHPSS Awareness Sessions and the Life, Social, and Soft Skills Sessions.

**Entry-Points:**

*Leveraging "livelihoods:"* Common social cohesion concerns observed included distrust and division among returnees, IDPs, and host community members. Due to unequal access to basic services and employment, coupled with a persistent need for emotional support, the team realized that connecting MHPSS with livelihoods in areas in need of social cohesion could create an opportunity to ease social tensions and strengthen community connections and well-being.

*Assessments and evidence:* An MHPSS and livelihoods needs assessments across North, Centre, and Centre-South regions showcased a significant need to do this integrated work. Nearly all the participants found it a good idea to combine both sectors, noting interest to take part in programming that combines MHPSS and livelihood support.

**Community Engagement:** Activities were contextualized to fit the participants' priorities and needs. Additionally, some MLI programs included peer mentors. The mentors were community people who own a business and join the

peer-support group sessions to discuss work-related topics, ideas and challenges, answering questions from participants and providing business advice and support. The mentoring approach was seen as valuable in helping to restore the social fabric and strengthen solidarity.

**Outcomes:** Between December 2020 and October 2021, 409 people were reached. MHPSS sessions were integrated into livelihood projects such as those targeting individual livelihood assistance, cash for work activities, and carpentry workshops. 44 MHPSS awareness sessions and 122 peer-support groups were held, 18 individual counselling requests were met, and 67 staff were trained.

Seeing it as highly relevant, participants reported high satisfaction with the MLI program. Participants shared that the program enabled and/or improved: positive thinking, motivation to work, self-confidence, teamwork, adapting to new or changing situations, and a sense of belonging through the development of social support networks. Participants found the peer-support groups especially relevant, and many participants have used the peer-support groups to build lasting relationships that go beyond the program. One group of male participants set up an online chat to meet regularly and to share business advice.

**Facilitators of Integration:**

- Opportunities for connection between community members (e.g., the peer support groups) provided ways to build relationships and reduce biases, assumptions, and other tensions.
- Actors across the MHPSS and livelihood units had clearly defined responsibilities and engaged in consistent and effective processes for programmatic coordination.

**Challenges of Integration:**

- Unpredictable security concerns and COVID-19 measures restricted staff movements, which sometimes led to the inconsistency of MHPSS sessions being offered.
- Participants sometimes had difficulty differentiating the MHPSS and livelihood services and staff, which proved difficult for the MHPSS teams who were asked to respond to questions that were unrelated to their work.

**Lessons Learned:**

1. Engage participants in visioning and designing the structure and activities of programming.
2. Integrate MHPSS activities at the beginning of a livelihood project. This builds trust and positive initial connections that can then form into supportive relationships and strengthen social cohesion and peacebuilding capacities within the communities.
3. Conduct integrated programming where needs are the greatest and social tensions are high (e.g., amongst returnees, IDPs, and host community members).
4. Ensure participants are aware of the function and responsibilities of different sector teams.
5. Ensure consistent collaboration and coordination between the different sector teams.
6. Livelihoods simultaneously reduces daily stressors and enables social cohesion; and MHPSS enables more effective livelihood and social relations.

**Acknowledgement:** Julie Meier, MHPSS Programme Officer, IOM Iraq;
and Hatem Alla Marzouk, Programme Coordinator MHPSS – Iraq Mission; IOM Iraq

# Jordan and Lebanon: Nonviolent Empowerment and Preventing Extremism for Children Impacted by Armed Conflict

**Background:** In Jordan and Lebanon, both host and refugee communities experience ongoing, vicious cycles of poor mental, emotional, and physical well-being and of direct, structural, and cultural violence. Adverse outcomes disproportionately impact children and youth, which has turned schools, camps, and neighborhoods into fertile breeding grounds for rising extremism and recruitment amongst young people.

**Program Goals:** The "Healing, Nonviolent Empowerment and Preventing Extremism for Children impacted by Armed Conflict in Jordan and Lebanon" Program by the International Association for Human Values, aims to provide a comprehensive, innovative psychosocial approach program to building peace. Active between 2016 – 2019, the overall objective was to enhance the well-being, resilience and psychological reintegration of children impacted by armed conflict and reduce violent behavior risk.

**Program Activities:**

*Psychosocial Peacebuilding for Youth:*

- Stress Relief and Resilience Workshops*:* A workshop to address stress, reactivity, and violence, release stress and fears, and improve sleep.
- Trauma-Relief, Healing, Resilience and Human Values Trainings: Provided 'deeper-trauma relief,' empowerment and human values training for children most at risk of self-harm, suicide, aggression or recruitment.
- Youth Anti-Violence and Peace Ambassadors Trainings: Combined physical, emotional, mental and social empowerment with peacebuilding skills training for youth to become change agents in their communities. Youth designed and implemented Peacebuilding Projects to address the driving factors of violence, enable social cohesion, and promote peace in their families, schools, and communities through creative forms (e.g., theatre plays, sports, campaigns, and graffiti work).

*Psychosocial Peacebuilding Community Approach:* Strengthened trainings for teachers, staff, parents and caregivers and created new local capacity to provide preventive and rehabilitative support to children and youth. Training included workshops on learning how to release stress, develop resilience and professional self-care, and a train-the-trainers program was developed for teachers and frontline workers.

**Entry-Points:**

*Youth needs:* Youth needed to release their stress and trauma, to feel a sense of belonging, to have healthier family and community supports, to have their concerns and ideas heard, and to engage in proactive behavior to change the status quo of injustices in their community. These considerations suggested the need to also strengthen the capacity of parents, caregivers, and other community leaders to manage their own stress and better support the youth; and to include experiential, community-service projects for youth to co-create and lead.

*Working with those most at-risk:* Identified the most vulnerable and least supported children and adults, particularly those suffering from sleeping problems, anxiety, depression and PTSD, and struggling with the widespread prevalence of school drop-out, child labor, early marriage, drugs, crime, safety concerns, and lack of educational and employment opportunities. Thus, the program was delivered through public schools, private schools, unofficial Syrian schools, orphanages, juvenile centers, refugee camps, community centers, and local NGOs.

**Community Engagement:** During the design stage, consultations were held with key stakeholders in Amman and the refugee camps in Jordan, as well as in Tripoli, Lebanon, including with representatives of the ministries, municipalities, local and international NGOs, UN agencies, youth and families. During the program, youth designed,

organized, and implemented actions to improve the safety, well-being and resilience of (other) children in their communities and to prevent and transform radicalization.

**Outcomes:** 16, 249 Syrian, Jordanian and Lebanese children received basic training in stress relief and resilience tools, and reported improvements in their sense of hopelessness (-44%), sleeping problems (-40%), PTSD (-37%), and sense of well-being (+49%). Additionally, 167 Youth Anti-Violence and Peace Ambassadors designed 15 Peacebuilding Projects of importance to them. These included a soccer competition with mixed Jordanian and Syrian teams to strengthen inter-community cohesion; girls with experience of early marriage wrote a script for and produced a theatre play (broadcasted on a regional TC channel) to raise awareness about the violence and reduced life opportunities experienced; an anti-bullying flash-mob campaign reached tens of thousands of people live and online during the Lebanon protests. Furthermore, 2,811 parents and caregivers and 477 frontline workers participated in trainings to provide support to youth and improve their personal resilience; and 99 local frontline workers graduated from the train-the-trainers program.

**Facilitators of Integration:**

- Placing the human connection and shared humanity of all, which encompasses the aspiration for well-being and peace, was at the core of all processes. This was intrinsically reflected in the behavior, participatory approaches, values, trust, connectedness and communication among both intervenors and beneficiaries throughout the project.
- Creating an open space for youth to address healing and prevention of violent extremism through a diverse lens that impacted any and all aspects of their lives (i.e., moving beyond just the traditional or technical understandings of MHPSS and peacebuilding needs).
- Working closely with parents, teachers, social and youth workers, community leaders and other stakeholders of influence to raise widespread awareness about well-being and peace.

**Challenges of Integration:**

- Long-term funding to sustain momentum and positive change.
- Political parties and (I)NGOs promising outcomes that did not materialize, and promoted psychosocial support that brought little relief or was not culturally sensitive. This caused mistrust and dissatisfaction.
- More reluctance from elder males in traditional communities to engage with non-traditional programs.

**Lessons Learned:**

1. Provide evidence-based well-being techniques and tools, which both intervenors and target groups can practice independently to improve their resilience and stress-management. This prevents burn-out, helps develop one's potential as a peacebuilder by nurturing inner resources, and strengthens the experience of inner peace amidst external conflict.
2. Provide training to peacebuilding practitioners on the design, delivery, and analysis of psychosocial interventions to increase sustainability and outcomes of peacebuilding.
3. Appeal to what already makes sense to all: people understand the direct link between well-being and inner and outer peace. Once they experience the benefit of an integrated approach, they will be inspired to engage in the processes for their own lives.

**Acknowledgement:** Dr. Katrien Hertog, Director of Peacebuilding Programs, International Association for Human Values

# Lebanon: Climbing for Peace

**Background:** With an estimated 1.5 million Syrian and 0.3 to 0.5 million Palestinian refugees, Lebanon has one of the highest number of refugees per capita in the world. The collapse of the economy and the accompanying hyperinflation have had serious consequences for the majority of the country's population. Shortages in social services, lack of employment opportunities, and poverty among refugees and the Lebanese have led to increasing, sometimes violent, tensions. Syrian refugees often experience violence, abuse, exploitation, family separation and severe levels of stress. Support for the wellbeing and conflict issues between refugee and host populations facing marginalization in Lebanon is limited.

**Program Goals:** Since 2017, the Climbing for Peace project of the Swiss non-profit organisation ClimbAID has been using climbing to build inclusive communities, improve mental wellbeing, and promote social cohesion with young people from host and refugee communities in Lebanon. The project includes a mobile climbing wall, a permanent facility in Taanayel, and outdoor climbing trips to local areas.

**Program Activities:**

*YouCLIMB:* An MHPSS-informed climbing course, based on climbing therapy, experiential education and mindfulness practices. The 8-session curriculum aims to improve physical and mental wellbeing and develop social and life skills among participants (trust, respect, cooperation, teamwork, communication, conflict resolution, problem solving and decision making).

*ACADEMY:* Trains young women and men from host and refugee communities to volunteer as facilitators for the YouCLIMB program and the management of the climbing facility. Volunteers attend trainings covering a wide range of topics, such as facilitation skills, child protection, inclusion and gender equality. Members also train to take part in competitions with other climbers across the country.

*Women's Team*: A women-only training team aims to challenge gender stereotypes and promote female empowerment. Alongside climbing, the weekly sessions serve as a safe space for young women to discuss shared topics, such as health, wellbeing and leadership.

*Beqaa Bouldering Competition:* Annual event which promotes healthy competition, and brings together climbers from host and refugee communities from all over the country to foster friendship and a sense of belonging to the Lebanese climbing community.

*Outdoor Rock Climbing:* Outdoor trips provide participants the opportunity to practice their sport in nature, which can be calming, transformative and meaningful, providing a space for reflection and deepening self-awareness and self-regulation skills. The initiative also aims to develop sustainable local tourism for guided climbing trips in the future.

**Entry-Points:**

*Youth needs:* There are high levels of tension between host population and refugee communities; and severe stress and mental health concerns amongst young people across these populations. An intentional effort was made to create activities that promote friendship, social cohesion, and psychosocial wellbeing.

*Sport for Development:* Sport can serve as a neutral modality to encourage relationship development and social cohesion. Sport can also promote psychosocial wellbeing. Climbing-therapy can serve as a means to address depression, anxiety, and trauma. Climbing is a valuable tool to promote cognitive development and teach participants to focus, set and keep goals, moderate emotions and control stress. In this sense, climbing can serve as a means to develop transferable skills such as problem solving and conflict resolution. The physical component was seen as an intentional and core part of the programming to promote peace and wellbeing.

**Community Engagement:** ClimbAID hosts "community sessions," to provide a safe space for all participants – beneficiaries, volunteers, staff, pro-climbers – to climb together. As well, the community is invited to lead and support programming, contributing to a sense of ownership and accountability, and fostering a shared space for trust, listening, and collaboration.

**Outcomes:** Since 2017, more than 2400 children and young people have benefited from ClimbAID's programs. Periodic evaluations demonstrate the positive impacts, including self-reported improvements in mental wellbeing. In collaboration with the University Clinic Erlangen (Germany), UNSW Sydney (Australia) and Antonine University (Lebanon), ClimbAID is currently conducting a two-arm wait list-controlled study on the impact of the YouCLIMB program on mental and psychosocial wellbeing.

**Facilitators of Integration**

- Community members who facilitate MHPSS-informed climbing sessions and positive inter-group relations.
- Continuous investment in training and coaching of local staff and volunteers by professionals.
- A network of partners that understand and support ClimbAID's mission (e.g., for trainings, outreach).
- Listening to, learning from, and addressing the needs of the community (beneficiaries, volunteers, staff).

**Challenges of Integration**

- Lack of local climbing instructors with a background in social work, psychotherapy or other relevant fields for integrating peacebuilding and MHPSS.
- Lack of funds, knowledge, and skills to develop and provide a targeted contextual approach in connecting peacebuilding and MHPSS.
- Limited resources to build and sustain a more diverse network of actors (e.g., schools, charities, government officials, religious leaders) who are experienced with integration and are motivated to encourage wellbeing, reconciliation, and social inclusion

**Lessons Learned**

- Peacebuilding can be embedded in MHPSS interventions through climbing therapy and experiential education; which can promote trust, respect, conflict resolution, and other core values for inclusive and peaceful communities.
- It is important to improve the psychosocial wellbeing of beneficiaries to achieve personal and communal peace, especially within and between refugee and host communities in challenging settings.
- Prioritize training community members in MHPSS and peacebuilding concepts, who can act as programming focal points and also role models in communities.

"For me, climbing is a medium to express myself and show myself what I am capable of." - Sabine (Climber)

"Climbing is my way of challenging myself. I love the strong mental component that requires planning, thinking and visualisation. Climbing has also taught me to put myself in others' shoes, knowing how they feel in certain positions on the wall."- Wissam (Spotter back)

"It is a different place than outside, there is no segregation, discrimination or racism." - Ahmad (Spotter front)

**Acknowledgement:** Beat Baggenstos, Founder & Managing Director, ClimbAID

# Kashmir: Zuun-è-Daeb with Ufra Mir

**Background:** The territorial dispute for Kashmir between India and Pakistan since 1947 persists even today. From deprivation of human rights, daily killings, mental health crisis, growing drug menace, and aggravations between rebel, civil society, and government groups, there continues to be burdensome toll on individuals and communities.

**Program Goals:** Using a traditional, culturally-relevant, decolonized approach and sensitive symbolism, the International Center for Peace Psychology's "Zuun-è-Daeb with Ufra Mir" program focuses on creating community safe spaces in a context of extreme censorship, distress, fear and shrinking spaces for expression in Kashmir. The Founder's name "Ufra-Mir" is intentionally included and suggested by community members, as she is a trusted woman in the community, and this made women feel comfortable in attending. Through the program, community members shared their emotions, stories, struggles, hopes and pain related to mental health, conflict, crisis, and daily fears of living in a conflict-zone, taking charge of their narratives. *Zuun-è-Daeb* is a Kashmiri term that refers to a room from where one can gaze at the moon. *Zuun-è-Daebs* are traditional spaces in homes, which can represent safety and connection. With the arrival of modern architecture, *zuun-è-daebs* are not as prevalent. Thus, the name becomes even more significant for Kashmiri community members, as it creates an inviting undertone to the work being done.

**Program Activities:**

*Facilitate Experiential Activities*:

- Creative Expressions: Art, storytelling, experiential workshops and other modalities promoted well-being, self-awareness, dialogue, sharing of experiences of conflict, taking charge of narratives, and also provide space to explore possibilities for different levels of peace.
- Skill-Building/Training: The 'creative expressions' activities and programming were sometimes also taught to community leaders (e.g., teachers), such that they can facilitate them in their own spaces with proper guidelines and training.

*Knowledge Exchange:*

- Invite Local/Global Experts: Experts from MHPSS, peacebuilding, and other sectors were invited to encourage discussions, reflections, and questions with community members. These discussions also equipped community members with relevant skills for coping, advocacy, dialogue, and activism.
- Resource Sharing: MHPSS and peacebuilding resources were compiled, shared in online and offline spaces, and aimed to destigmatize mental health conversations, while promoting community support-seeking and peace-based values and behaviors.

**Entry-Points:**

*Lack of appropriate support by State:* Discrepancy between the support being recommended and provided by State actors versus what was needed and requested by the community (including addressing the lack of State actors acknowledging the conflict and suffering). This led to a grassroots approach to provide desired support, and to create spaces for listening and dialogue that acknowledge all experiences due to the conflict.

*Culture, spirituality, and religion:* Some community members hesitated to engage in programming due to a lack of contextual and culturally relevant services, stigma, and polarizing perceptions of MHPSS and peacebuilding. Therefore, spirituality and religion were interwoven within the activities. Breathing and mindfulness techniques for developing coping skills were related to how Kashmiri's offer prayer. Also, teachers and school staff were trained in peace and

well-being concepts and taught to incorporate them in curricula. As well, the program worked with journalists for social media strategies to destigmatize MHPSS.

*Youth needs:* Youth (mostly girls and young women) lack safe spaces for expression, which led to observable mental health and psychosocial challenges. Safe spaces where these youth could feel comfortable in being their authentic selves and share their aspirations, hopes, and struggles was thereby emphasized.

**Community Engagement:** Community members and youth were invited to co-design and support initiatives through constant feedback mechanism and volunteering options. Through this process, community ownership and accountability, and fostering a space for trust, sharing of vulnerabilities, listening, and understanding were increased.

**Outcomes:** Participants feel empowered, confident, calm, and less lonely. They also help to create a sense of community and meaning in their lives. The activities promoted de-stigmatization and care-seeking behavior. For some individuals, it was the first and only space where they could share their stories of trauma, mental health, abuse, and violence; and hence, they shared feelings of liberation.

**Facilitators of Integration:**

- Creating a space that welcomed participants' local expressions and acknowledged their experiences.
- Creative, cultural, and context-specific initiatives and processes (e.g., utilizing language and terms that are more culturally sensitive and favorable, such as starting with "emotional well-being," and then talking about "mental health").
- Establishing opportunities for social connection and peer-to-peer dialogue.

**Challenges of Integration:**

- Navigating the controversial nature of being a "peacebuilder," who in Kashmir could be perceived as somebody who is discredits the public resistance movement or as someone who promotes resistance to the government by aligning with the community.
- Security concerns associated with talking openly about peacebuilding initiatives, stigma and unawareness of MHPSS, and lack of infrastructure and resources make it challenging to engage in effective integrative work.
- Many people are not aware of their mental health challenges, as their focus is on daily survival. To talk about mental health is therefore a privilege, which may not be possible for many.

**Lessons Learned:**

1. Use a community-based and culturally contextualized approach.
2. Intentionally engage in iterative cycles of learning, unlearning, and (re)designing initiatives to best fit the evolving context and needs of the community.
3. Prioritize self-care, constant professional trainings, protection and support system for practitioners.
4. Amplify the expertise of local practitioners by acknowledging their work, creating opportunities for them to feed their learnings through top-down and bottom-up approaches, and developing mentorship opportunities.

**Acknowledgement:** Ms. Ufra Mir, Peace-psychologist and Founder of the International Center for Peace Psychology

# Kenya: Kumekucha Quest

**Background:** Kenya continues to face violent extremism by radical militarist groups. In recent years, the Somali-based Al-Shabaab militant group has primarily radicalized Kenyan Muslims and the Somali diaspora, with a focus on recruiting students and youth who experience marginalization, unemployment, and human rights abuses (including by local officials). This has led to youth experiencing severe trauma, and a rise in tensions and divisions for youth along intergenerational and ethnic and religious lines.

**Program Goals:** The Kumekucha Quest (KQ) is a new, two-year project by the Green String Network (GSN), focused on children and youth (aged 10-24 years old) in Nairobi and Kwale Counties, Kenya. As a youth-led consortium, KQ works to address conflict, injustice, and the impacts of trauma. KQ focuses on trauma awareness, the resilient strengths arising from trauma, and social healing as a peacebuilding, conflict transformation effort. It adapts the processes taken from an existing community-led social cohesion program (Kumekucha: It's A New Dawn) for the prevention of violent extremism.

**Program Activities & Processes:**

*Healing-Centered Peacebuilding Approach:* Centers on pillars of: inclusion (e.g., inviting multi-sectoral and multi-disciplinary actors, individuals with lived experience, and local and traditional healers to contribute to design and delivery processes); customization and contextualization (e.g., ensuring the program is culturally adapted and utilizes and strengthens community resources); breaking the cycle of violence (e.g., by engaging with both victims and perpetrators); systems' thinking (e.g., leveraging ecological healing and collective healing approaches); and trauma-informed tools (e.g., utilizing neuroscience concepts to ground practices, embodied practices to help regulate the nervous system, and arts-based practices to encourage creativity).

*Stage 1: Kumekucha Quest*

- Peer Support Groups: Through a 12-week peer support group process, young people (age 18 – 24) highlighted their lived experiences, learned to address past trauma, built resilience to daily stressors and challenges, and learned about how to promote peace and justice. Creative avenues were used to facilitate this work through music, storytelling, sports, and the arts, and to develop skills for emotional regulation and coping with emotional distress. Additional activities were designed to improve connections amongst children, youth, and adults.

*Stage 2: Kumekucha Watoto ("children") and Vijana ("teens")*

- Mentorship: Participants from the earlier stage will be trained as mentors, who can support younger children and teens (age 10 – 17) in their communities.

**Entry-Points:**

*Youth needs:* It was observed that there was high levels of apathy, isolation, aggressiveness, abuse, chronic somatic illness, and low levels of flexibility, tolerance, and the ability to trust and work together. Thus, an intentional effort was made to create social support networks that youth can tap into to access various services and facilitators as they work together towards the betterment of themselves, their younger peers, and their wider community.

*Youth in action:* As a youth-led consortium, youth identified activities and processes of interest that would help facilitate the exploration of MHPSS and peacebuilding themes. Thus, sports, arts, storytelling and other creative modes were selected for teaching and learning.

**Community Engagement:** KQ works with young people to co-design training materials creating definitions of concepts and stories to highlight MHPSS and peacebuilding themes were determined based on their lived experiences. This engagement in design is critical for ownership and buy-in. Young people will also lead the peer-support groups and eventually selected participants will also become mentors to teens and kids (10-17 years old), which will help create a sense of belonging, purpose, and commitment.

**Outcomes:** The larger Kumekucha program, which focuses not only on young people, demonstrated impact in three areas: trauma and resilience (e.g., used healthier ways of alleviating stress, reduced post-traumatic stress symptoms, and attended one's place of faith more frequently); social cohesion (e.g, increased trust in members of one's community and of other groups, increased willingness to forgive, and stronger belief that former members of armed groups should be allowed to return to their communities); and community engagement (e.g., increased level of engagement in one's community, socially, civically, or politically). It is expected that the KQ program will show similar outcomes.

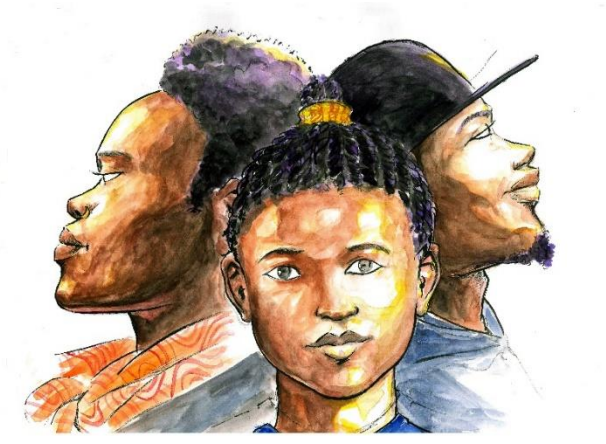
**Facilitators of Integration:**

- Having years of experience working with communities to develop the culturally contextualized 'healing-centered peacebuilding' approach, which leverages the strengths of the MHPSS and peacebuilding fields, rather than working in a siloed manner.
- Engaging and supporting local youth volunteers to build a shared vision for peace, and to facilitate and sustain the change they wish to see in their communities.
- Building connections between community members, fostering mentorship within these new connections to promote hope and healing, and empowering them to flourish without any formal framework.

**Challenges of Integration:**

- Time and effort to create spaces of teaching and learning for international, national, and local stakeholders to move beyond biomedical approaches and Western-/Eurocentric frameworks.
- Root causes of social injustice, marginalization, and chronic violence may not be fully unraveled if a truly integrative approach is not taken

**Lessons Learned:**



1. Facilitate an inclusive process to culturally contextualize program design and delivery and invite leadership from people with lived experiences and others with diverse experiences and expertise (e.g., traditional healers). This approach values the knowledges, cultures, and healing practices of local and Indigenous Peoples
2. Focus on how to engage both victims and perpetrators. In chronic violence, there is often not a clear distinction between victim and perpetrator, and everyone affected by trauma should have access to a support system to break the cycles of violence.
3. Programming should go beyond just treating the individual, to also enabling systems change. This includes understanding how broader agendas influence justice, development, and governance; and perpetuate legacies of colonialism and structural issues, enabling violence, abuse, and neglect.

**Acknowledgement:** Dr. Angi Yoder-Maina, Executive Director, Green String Network

# Nepal: Dealing with the Past

**Background:** The 10-year-long armed conflict in Nepal (1996 to 2006) devastated thousands of families. 15 years following the signing of the Comprehensive Peace Agreement, there has been limited progress in addressing rights, rehabilitation, and reparation needs of victims/survivors through transitional justice processes. Historically, transitional justice mechanisms have ignored issues facing women conflict survivors and civilians with disabilities.

**Program Goals:** Through working with local civil society organizations and victims' groups, the Dealing with the Past program of GIZ/ZFD (Civil Peace Service), 2016-2020, enabled victims/survivors to engage in, design, and implement collective memory work and related advocacy to help strengthen reconciliation, public acknowledgement, and acceptance about the past.

**Program Activities:**

*Story Sharing and Documentation – in partnership with The Story Kitchen (TSK):*

- Story Workshop: TSK designed the Story Workshop as a safe space to enable women conflict survivors (WCS) to share their experiences and be witnessed, to reflect on issues of transitional justice and their own justice needs, and to build solidarity and unity. Staff used narrative practices and integrated arts-based therapeutic tools to strengthen the process.
- Women Victim's/Survivor's Story Documentation: Using a "survivor-to-survivor" approach, a group of WCS were trained by TSK to collect audio stories from other WCS and write these using narrative practice approaches. As survivors, they were able to empathize and write stories that honored the ways of storytelling and the meanings WCS gave to their experiences.

*Training and Mentoring:*

- Conflict Victims/Survivor Groups and Networks: Through workshops on memory work victims/survivors reflected on and local and national memorialization practices. They developed localized Memory Work Charters articulating what was important and meaningful for them regarding memory work to guide local processes.
- Civilians with Disabilities: Civilians with disabilities caused by the conflict met through a Story Workshop and engaged in a process to co-develop a public education and advocacy campaign sharing their stories in a "travelling photo exhibition".

*Co-creating Spaces for Public Witnessing and Acknowledgement:*

- Locally Designed Commemoration Processes: Supported planning with district level Conflict Victim's Committees to design commemorative, public acknowledgement events for families of conflict victims who were forcefully disappeared and killed and for survivors of torture.
- 'Living Memories' Photo Exhibition: Photo stories of civilians made disabled by the conflict were exhibited in co-organized public events in collaboration with local victims' groups. They invited local government officials and civil society leaders who gave public acknowledgement and commitments of support. The general public and school children met and engaged with the storytellers. The exhibition aimed to challenge the stigma of disability and emphasized the need for non-recurrence of violence.

**Entry-Points:**

*Lack of appropriate State support:* The lack of follow up and very slow progress on the Truth and Reconciliation Commission (TRC) mechanisms left community members feeling disempowered, unheard, and not supported. Community-led narrative practices were used to create local spaces for acknowledgement and enable victims/survivors to share their stories in ways that were meaningful and supportive to them.

*Women in action:* WCS lacked opportunities to lead within the established victims' organizations and to have their stories and needs acknowledged and addressed (including in relation to sexual and gender-based violence). Thus, TSK initiated a "survivor-to-survivor approach" for collecting stories of WCS and supported networks of women conflict survivors.

*Mobilizing those left behind:* Civilians living with disabilities had been disconnected and largely ignored by the victims'/survivors' networks and in transitional justice programs. As such, there was a need to find ways for them to self-organize and take forward their own advocacy agendas locally and nationally.

**Community Engagement:** The project began with broad needs assessments aimed at identifying people who had been excluded or marginalized in TJ processes. There was an emphasis on community-led work, as this was understood to be a meaningful contribution, given the stalled transitional justice process and uncertainties of if and how it would move forward.

**Outcomes:** A core group of 14 WCS trained as "Justice Reporters" by TSK collected more than a thousand stories and now train and mentor other women. These approaches strengthened these women as local leaders and supported the development and strengthening of local and the national networks of WCS. Additionally, civilians with disabilities formed the National Network of Disabled Conflict Victims, which is now recognized and regularly consulted as one of the national victims' associations. During the second wave of the COVID-19 pandemic in 2021, the network made referrals and advocated for their members to receive psychosocial support (PSS) from the local government and civil society organizations. Moreover, the locally designed commemoration processes motivated local governments to organize events for acknowledging and honoring families of victims on a yearly basis.

**Facilitators of Integration:**

- Wellbeing and PSS needs were repeatedly emphasized by victims and survivors. They were eager to receive training (e.g., Psychological First Aid training) to support themselves and their communities.
- Having a program team whose experiences bridged both MHPSS and peacebuilding helped draw expertise from both fields.
- Training peacebuilding staff in narrative practices helped integrate PSS, and changed the approach to story-based work related to transitional justice and dealing with the past.
- Provision for self-care, PSS, and/or counselling for staff was integrated into program budgets. This built experiential understanding of PSS and increased the likelihood of welcoming this provision in wider transitional justice and reconciliation programming.

**Challenges of Integration:**

- The MHPSS and peacebuilding sectors in Nepal operate within different organizational networks, which makes it more difficult to collaborate across organizations.
- MHPSS services are largely restricted to the two major cities, limiting access to those in other areas.

**Lessons Learned:**

1. Where the State has failed to appropriately acknowledge and honor victims/survivors, focusing on community-led informal processes of truth telling and memorialization can create valuable outcomes for well-being and acknowledgement.
2. Support longer term training and mentoring of local practitioners, especially those with experiential knowledge of the conflict, in both peacebuilding and psychosocial approaches.
3. Support local networking and connections, which can facilitate further opportunities to integrate MHPSS and peacebuilding efforts.
4. Create spaces for dialogue and knowledge exchange on MHPSS and peacebuilding approaches between victims/survivors, practitioners, and policy makers.

**Acknowledgements:** Ms. Shaileshwori Sharma, Peace Advisor, GIZ/ZFD Civil Peace Service Nepal;
Dr. Ruth Marsden, Programme Advisor, MHPSS.net (formerly GIZ/ZFD Nepal, 2016-2020).

# Nigeria: Counselling on Wheels

**Background:** Boko Haram is a radical Salafist Islamist movement that, since 2009, has conducted a brutal armed insurgency in Borno State, Nigeria. The group has attacked both government forces and civilians including with suicide attacks and mass civilian kidnappings. The conflict has caused millions of people to be displaced. There is currently a need to address the severe psychosocial needs of communities; and to support perpetrators and victims of violence (especially young female kidnap victims) to reintegrate into communities, as they are highly stigmatized and struggle for acceptance after returning home.

**Program Goals:** Since 2017, the Counselling on Wheels project, by the NEEM Foundation, provides 'door-step' mental health and psychosocial rehabilitation services to under-served and hard-to-reach populations affected by the insurgency, and has worked to build resilience and support conflict prevention in order to prevent violent extremism across Borno State.

**Program Activities & Processes:**

*Counseling and Therapy:*

- Mobile Counselling: Group therapy was provided by lay counsellors (trained and supervised by psychologists), which follows a protocol informed by cognitive-based therapy and narrative approaches. Relaxation techniques and vocational counselling is also incorporated.
- Art and Play Therapy: Creative activities (e.g., music, dance, drama, and art and crafts) were built into mobile counselling sessions, which aim to heal trauma and prevent extremism (by challenging radical ideologies, and enhancing resilience and a greater sense of community and national identity).

*Peacebuilding:*

- Community Engagement: Monthly community-based peace meetings and regular capacity building workshops (to train key community stakeholders on peace building and conflict mitigation) helped community members define the type of post-conflict society they want to build, ultimately creating a sense of ownership. Stakeholders included Bulamas (District Heads), women leaders, religious leaders, security services and other credible influencers.
- Community Based Peace Committees: Trained stakeholders worked in Peace Committees to support Government and NGO peace building processes of re-integration, reconciliation, and conflict mitigation.
- Peace Messaging and Sensitisation: This has included: a documentary on the project; a series of short clips with positive messages from key community influencers; and booklets and flyers educating individuals on how to manage conflicts at the community level and psychological symptoms, such as coping techniques and self-care.

**Entry-Points:**

*Assessments & evidence:* Indicated a paucity of trained psychologists and a lack of supports for under-served people, especially poor, rural, and remote dwelling women/girls and children. Women and girls who were survivors of rape or abduction needed counseling services in safe places that enabled high levels of confidentiality. These findings suggested the need for mobile service delivery.

*Inter-group conflict:* Attitudes towards social cohesion needed to be improved by addressing mistrust, resentment, and ethno-religious tensions. Also, there was a need of specific peacebuilding work aimed at enhancing resilience and reducing vulnerability to violent extremism.

*Cross-sectoral and multi-stakeholder collaboration:* Five school partnerships for advocacy and sensitization to GBV issues (and its relationship to well-being and conflict) were created; and a consultation forum with representatives from official security organizations (e.g., military, police, and the Civilian Joint Task Force) was held.

**Community Engagement:** First, Community Liaison Officers identified community leaders (e.g., district officials, religious leaders, Elders, or representatives of specific demographic groups, such as young people or women). Second, they engaged in community sensitization and awareness processes about the project with the community leaders, which included presenting information about the project and addressing any concerns and questions. Finally, the community leaders disseminated this information to the community. In this manner, a transparent and collaborative relationship was created to support design and delivery efforts.

**Outcomes:** Between 2017 and 2019, the program engaged more than 20,000 people in therapy services and reached nearly 2,000 people through the peacebuilding initiatives (including 22 social cohesion community stakeholder meetings; two capacity building workshops for peacebuilding leaders). Additionally, five peace murals were created with over 500 community members to convey their support for shared values, such as forgiveness, tolerance, and unity.

**Facilitators of Integration:**

- Building upon the strategic priorities of the government and local and international NGOs.
- Listening to, learning from, and addressing the needs of survivors (e.g., including that unhealed personal trauma impedes peaceful coexistence and collective healing).
- Building the capacity of credible community stakeholders and structures. These community stakeholders ultimately determined the challenges that needed to be addressed, and led processes to deciding concrete, action-oriented solutions.

**Challenges of Integration:**

- Unresolved emotional issues from participants made it difficult to host peace meetings.
- Limited professionals with clinical skills to provide MHPSS services, especially to those community members who required additional support given severe mental illnesses.
- Lack of adequate knowledge and skills to provide a targeted contextual approach in connecting peacebuilding and MHPSS.
- Counsellors could only stay in communities for a limited amount of time, which made provision of comprehensive and holistic care challenging. This was further aggravated by the large number of individuals who were seeking support.

**Lessons Learned:**

1. Contextualize the intervention (e.g., to fit the local culture(s), practice(s), and history).
2. Peacebuilding can be interwoven into MHPSS interventions, including through the creation and dissemination of posters, pictures, and drawings about promoting peace, tolerance, and other core values of peacebuilding.
3. Aim to improve the psychological well-being of each survivor, so as to achieve personal peace.
4. Train diverse stakeholders on MHPSS and peacebuilding concepts in order to address the root causes of conflict, and to promote and sustain peace.

**Acknowledgement:** Dr. Fatima Akilu. Executive Director, NEEM Foundation

# Sri Lanka: Consultation Task Force on Reconciliation Mechanisms

**Background:** After centuries of colonialization (1505 – 1948) and Sri Lanka's struggle for independence, the Sinhalese-dominated government discriminated against Tamil people, leading to calls for separation, the rise of the Liberation Tigers of Tamil Eelam, and the protracted armed conflict (1983 – 2009). Individuals and communities continue to suffer from the human rights violations and atrocities that took place during the armed conflict, including from massacres, enforced disappearances, torture, and mass displacement. Today, incidents of political, ethnic, and armed violence persist, and thousands of people are still missing.

**Program Goals:** To holistically address the legacy of suffering that took place during the armed conflict (including continued violence and discrimination) a civil society network of victims, grassroots actors, and others led efforts to integrate an MHPSS lens into the 2016 government-commissioned Consultation Task Force on Reconciliation Mechanisms (CTF). The CTF hosted public consultations across 15 zones (eight districts across the North and East Provinces, and seven across the other provinces) to understand how four proposed transitional justice (TJ) mechanisms (i.e., an Office on Missing Persons; an Office on Reparations; a Truth, Justice, Reconciliation and Non-Recurrence Commission; and a judicial mechanism comprising a Special Court and an Office of the Special Counsel) should be designed and function. The civil society network helped to host the consultations; led the strategic design and delivery of psychosocial support for consultation participants and implementing personnel; and advocated for MHPSS practices to be interwoven within the four proposed TJ mechanisms. This case description focuses mostly on the latter rather than on the wider work of the CTF.

**Program Activities:**

*Consultations Processes Led by Civil Society (With Grassroots Network Support) on the TJ Mechanisms:*

- Zonal Task Force (ZTF): 92 ZTF members (civil society persons, including those from the grassroots network) hosted the consultations across the 15 zones. ZTF members ensured public legitimacy, ownership, and participation, and gave a voice to victims from various ethno-religious communities.
- Sectoral Consultations: Gathered perspectives from major national-level actors (e.g., religious groups, tri-forces and police, political, media). One consultation was held specifically with organizations providing psychosocial support to affected people.
- Documentation: Written submissions (e.g., personal statements, letters, reports) were welcomed.

*Network Efforts on Psychosocial Support to Participants and Implementing Personnel:*

- Training of ZTF members: Training emphasized sensitive facilitation; competent responses to participants in distress, or, if needed, referral to an MHPSS practitioner; self-care and monitoring of their own (and colleagues) levels of stress in response to the consultation work; and engagement in regular peer group support and meetings with MHPSS supervision.
- Consultation Zone MHPSS Focal Point: One MHPSS Focal Point per zone was trained to accompany and support consultation activities; and receive referrals and follow-up on persons in need.
- Psychosocial First Aid (PFA) or MHPSS Practitioner: Trained PFA persons or an MHPSS practitioner were available at all consultations.
- Post-Consultation Follow-Up: Those under distress during the consultation were followed-up with.

**Entry-Points:**

*Do No Harm:* Since the process of consultation can reawaken painful memories of violence and loss, and implementing personnel may also experience distress or be required to respond to persons who need support, psychosocial workers called for interweaving psychosocial support (PSS) throughout the consultation process. Similarly, the TJ process itself

can have considerable psychosocial impacts on those who participate in different mechanisms (e.g., re-traumatization); thus, integrative approaches beyond the consultation process was understood as necessary.

*Historic opportunity:* A grassroots-informed consultation process, centering victims' needs, would demonstrate that civil society can influence government action through a democratic process.

**Community Engagement:** To further support the grassroots network and the CTF and ZTF members, there was also the Panel of Representatives (49 members), who were additional civil society members who had knowledge of TJ, connections to local networks, and provided ethnic, religious, regional, or gender expertise.

**Outcomes:** The CTF demonstrated how grassroots and civil society members could mobilize a large-scale movement for TJ and MHPSS. A total of 7,306 submissions for how the TJ mechanisms should be designed and function were received, including many that outlined the need for psychosocially sensitive TJ mechanisms. These submissions amounted to the country's first report on learnings and recommendations on TJ mechanisms and reconciliation (Volume I), including a dedicated section on PSS. Additionally, a strategy and operational framework was created for PSS provision by the Office of Missing Persons (developed in its' initial years, and has yet to be implemented); and the Office of Reparations acknowledged PSS provision in its' policies and guidelines and the developed of a "Support Programmes for Aggrieved Persons: Manual for Training of Case Managers Delivering Psychosocial Support." Finally, the many women involved as participants and implementors (e.g., 50% of ZTF members were women), demonstrated the critical role grassroots and civil society women can have during TJ and MHPSS efforts.

**Facilitators of Integration:**

- The grassroots network and ZTF members included members from the fishing and farming communities, teachers, retired public officials, and community-level activists and advocates. This increased social cohesion and built trust that enabled participation in the consultations and PSS.
- Several ZTF members had personal direct experience of the conflict and/or on-going violence, which made their desire and capacity to support an integrated process all the more strengthened.
- Panel of Representatives members provided expertise on how best to interweave PSS within the consultation processes and into TJ mechanisms.

**Challenges of Integration:**

- The CTF and ZTF members were often perceived as representatives of the government, which caused the general public to sometimes be skeptical and weary of the process.
- Ethnicised fault-lines prevalent in society were reflected in the composition of ZTFs, which sometimes made collaboration and connection challenging.
- Finding qualified psychosocial personnel in some zones was difficult. In areas where there were none, a person outside of the zone had to be identified and needed to travel to the zone.
- In some cases, the PSS provided may not have been helpful, as there was some confusion on what "PSS" actually meant (e.g., whether it was enough and/or appropriate to simply provide a bottle of water).

**Lessons Learned:**

1. Building on the existing networks and resources of diverse grassroots and civil society actors, enable TJ processes to be guided by survivors' needs and perspectives.
2. Create inclusive spaces for participants to share their diverse experiences. The CTF did not explicitly focus on the armed conflict, and included other issues that caused suffering (e.g., insurgencies, religious and ethnic conflict, and discrimination).
3. To protect and promote the well-being of those engaged in the design and delivery of TJ mechanisms, develop 'psychosocially-sensitive' TJ processes.

**Acknowledgement:** Mr. Ananda Galappatti, Co-Founder/Co-Director, MHPSS.net and Technical Advisor on Psychosocial Support, GIZ

# Ukraine: Vitality Project Donbas

**Background:** Beginning in 2014, armed conflict and shelling in the Donbas region, which includes Donetsk and Luhansk oblasts, has been constant along the contact line between Ukraine and Russia. The conflict has claimed 14,000 lives and forced 1.3 million people to flee their homes. Many Ukrainians in these regions have a long history of trauma, expressed somatically and other ways, from destructive Soviet policies, including the Holodomor famine, forced deportations, and politically motivated institutionalization of dissidents for "mental health" care.

**Programs Goals:** The Vitality Project Donbas program, is a collaboration between the NGO Development Foundation together with Wesleyan University and conflict-affected community leaders, ex-combatants, and mental health professionals throughout Ukraine. Focusing on somatic methods of MHPSS, it aims to stabilize conflicts in stress-ridden communities that experience ongoing threats in the Donbas region.

**Program Activities:**

*Intermixing Individual and Interpersonal Well-being, With Attention to Peacebuilding:* The project uses a holistic approach to somatic methods that views individual and social health as integrally connected. Somatic methods use movement to develop body-mind connection and increase self-awareness, to counter the effects of trauma in individuals. Done in both individual and group settings, these practices hone awareness, and also develop sensitivity, empathy, and creative cooperation between people, strengthening social cohesion.

*Training:* The project launched with an 8-day online training for trainers for MHPSS care providers working in Donbas. Project leaders shared somatic methods and Skills for Psychological Recovery (SPR) that they refined over five years of collaborative research and pilot programs in Ukraine working directly with conflict affected people in and around Donbas. Each MHPSS care provider participating in the ongoing project received a tablet computer with specially designed software for guiding movements. They also receive resources for working with clients, including Ukrainian-language recordings of the project's evidence-based individual and group movement methods. All the therapeutic approaches were adapted to follow the health and safety precautions necessitated by the current pandemic.

*Ongoing Consultation:* In the following seven months, participants met with workshop leaders and project supervisors for weekly 2-hour group consultation sessions during which participants discussed specific cases (anonymously), practiced methods, and learned new techniques.

*Development of Software Tool for Psychosocial Tracking and Care:* Development Foundation psychologists teamed up with Indeema Software Inc. to design special software for the psychosocial health care providers participating in the study. It offers tools for tracking their client's progress (with confidentiality) via the survey developed and validated in the Ukrainian language by Johns Hopkins Bloomberg School of Public Health. Ukraine's Ministry of VA is considering adopting this mobile application for use at the national level to help identify needs and administer social support more effectively nationwide.

**Entry Points:**

*Adverse mental health and psychosocial well-being:* Recognition that veterans, soldiers, families of soldiers, medical personnel, war relief workers and police have been most directly impacted by the armed conflict needed MHPSS and relational support and could be instrumental in modeling and promoting peace in civil society.

*Open-mindedness:* The openness of groups and institutions such as the police and the Ministry of Veterans Affairs to supporting the well-being, creative cooperation, and social connection of their staff and clients.

**Community Engagement:** The work began in smaller group settings: family home, schools, community center, treatment centers, police precincts, armed forces training centers, but are intentionally designed to apply and encompass

broader social settings that range from the municipal to the national levels. Additionally, as trained people interact with and reach out to others, they model peace and well-being, and help to share the somatic approach with others in the community.

**Outcomes:** The Wesleyan University Quantitative Analysis Center has helped to analyze the impact of somatic methods in individual and group contexts, ex-combatants and civilian populations, and family environments. Mental health indicators related to functionality, anxiety, depression, alcohol use, and social connection, are assessed through a screening tool in Ukrainian language that was developed and validated by Johns Hopkins University. Initial data shows a statistically significant positive improvement in participants' "functionality." The main positive impact has been on clients' functionality, with the greatest benefits seen in people who initially had the hardest time functioning in daily life. The project is operating on a scale and has impacted over 1600 people in its first year (2020-21), with 47 people having received intensive training and supervision as providers.

**Facilitators of Integration**

- Good collaboration among partners such as the Ministry of Veterans Affairs in Ukraine, the National Guard, the United Nations Recovery and Peacebuilding Program, the Government of the Netherlands. Practitioner-academic collaboration has been instrumental in documenting the program impact, as well. Individual and social well-being are naturally interconnected. By working with people who are influential in the public sphere, this project makes it possible to reach widely into the civil society.
- An advocacy campaign will be organized to reduce the stigma of help seeking and increase access to help at the district and local levels.

**Challenges to Integration:**

- Implementation of this approach on a national scale requires evidence-based impact analysis, yet funding support for such analysis is limited.
- Ongoing hostilities pose a threat to civilian peace processes.

**Lessons Learned**

1. Data collection by service providers requires additional funding and administration, which takes up a significant part of the budget and local authorities are not ready to provide sustainable funding for the study, as all efforts are focused on direct MHPSS assistance.
2. Much needed is support for longer term training and mentoring, organizational and supervisory support of local practitioners, especially those with experiential knowledge, in both peacebuilding and psychosocial approaches. It would be most beneficial to include these peacebuilding and conflict resolution skills, breathing techniques and somatic practices in education programs for the Armed Forces and the National Guard, and the National Police, especially in areas where it performs the functions of military police, as well as in the training of employees of Civil-Military Cooperation - CIMIC.
3. It is important to support local networking and connections that advance long-term development and institutionalization or enculturation of peacebuilding and MHPSS.

**Acknowledgements:** Katja Kolcio, PhD, RSME, Associate Professor and Director of the Allbritton Center for Civic Engagement at Wesleyan University; Marta Pyvovarenko, Development Foundation mental health research expert.

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# COLOMBIA

## CONTEXT

Colombia has been torn by decades of armed conflict that began in 1964 and was animated by a proliferation of armed groups, discrimination and deep social inequities, narcoterrorism and drug trafficking, environmental destruction, land contestation and injustice (including by multinational corporations), among others. [219,220] Using the media, political leaders have often stimulated and encouraged the use of violence.[221] The conflict left a legacy of social division, landmines, and ongoing killings and violence following the signing of a peace accord in 2016.

The main actors in the conflict were the Government of Colombia, far-right paramilitary groups (primarily the United Self-Defense Forces of Colombia (AUC)) that supported the Government, drug and crime groups, leftist armed groups such as the Revolutionary Armed Forces of Colombia—People's Army (FARC-EP), the National Liberation Army (ELN), and the Popular Liberation Army (EPL).

The Unified Victims Registry indicates that over 8 million people have been victimized by violence since 1985. The forms of violence include massacres, forced displacements, torture, assassinations, kidnappings, threats, forced disappearances, illegal recruitment (including of children), sexual violence, attacks on civilian property, expropriation and extortion, combat, and use of antipersonnel mines, among others.

Peace talks 2012-2016 between the Government and the FARC-EP led to officially sanctioned peace and the disbandment of the FARC—EP. However, multiple forms of societal violence continue, including gender-based violence, homicide, and gang and paramilitary activity, among others.[222] Drug trafficking continues to be an important source of violence. In Montes de María near the Caribbean coast, which had previously been the site of small farmer (*campesino*) activism, recently formed paramilitary groups illegally control parts of the land for purposes of drug trafficking.[223] There and in other areas, social leaders, community activists, and human rights workers are frequently subjected to death threats and violence.[224] Throughout Colombia, deep inequities continue to animate violence and armed conflict.

This protracted situation has created profound issues of mental health and psychosocial well-being and problems of injustice, violence, and societal normalization of violence. The conflict has increased mental disorders, with the increases being higher among people who were already marginalized or vulnerable.[225] However, some of the greatest effects are seen not in clinical disorders but in the psychosocial suffering associated with discrimination and marginalization; living in constant fear; losses of loved ones, home, and belongings; lacking livelihood to support one's family; threats to and losses of one's land; and disruptions of traditional practices that support one's social identity and social cohesion. Fear and isolation have been long-standing[226] but are worsened by the COVID pandemic. As of October, 2021, the government had confirmed over 860,000 cases of COVID-19, which has caused 26,000 deaths.[227] Also, the massive influx of Venezuelan refugees has placed additional stress on the already strained Colombian social system.

## INTEGRATION OF MHPSS AND PEACEBUILDING

This country study, which is based on 11 responses to the global survey, 6 key informant interviews, and diverse papers and country reports, indicated that a considerable amount of work is being done that integrates MHPSS and peacebuilding.

### Views of Integration

Overall, views regarding integration of MHPSS and peacebuilding were divided evenly between those that focused primarily on how MHPSS supports peacebuilding and those that took a more holistic approach. Examples of those with an MHPSS focus include:

> "Peacebuilding requires overcoming the effects of violence on individuals, families and communities. Addressing mental health effects and psychosocial well-being enables the rebuilding of the social fabric necessary to advance in peacebuilding." (woman)

> "For me, mental health is the main factor in the generation of individual well-being. I think that it is the main factor in the development of a community, improvement in human relationships and their environment. Thus, it is the basis for peacebuilding." (woman)

Holistic conceptualizations include:

> "Because long-term armed conflict processes impact the very constitution of social ties, which implies a psychosocial trauma that must be addressed beyond individual and psychological analysis, to understand how the subjective and the collective intertwine, the personal with the political, the group with the societal, in such a way that peacebuilding actions and interventions are directed to transform the socio-psychological infrastructure that it is constituted as a psychosocial barrier for peacebuilding and reconciliation, not only in victims and veterans, but also in all society." (man)

Holistic conceptualizations were prominent also in Indigenous understandings. For example, the Awa-Kraiker people of southern Colombia view of relations with one's land and Nature as essential aspects of well-being. Thus, the use of violence to steal or control Indigenous lands is not only an issue of injustice but also a deep psychological and social wound. This deep interconnection of people and environment is at odds with individualized approaches to mental health that are prominent in Western psychiatry and psychology.

### Areas of Integrative Work and Approaches

In Colombia, work on connecting MHPSS and peacebuilding has often focused on the areas indicated in Table F1 below. However, many other areas have also attracted extensive work, including memory, forgiveness, reconciliation, strengthening social cohesion, justice, supporting migrants and displaced people, land reform, and preventing different forms of violence.[228]

**Table F1. Several of the main areas of work in Colombia that interconnects MHPSS and peacebuilding, together with examples.**

| Area | Program or Action Examples |
|---|---|
| Addressing psychological and social impacts of conflict | - The ACOPLE project enables mental health for Afro-Colombian torture survivors using a mix of specialized services and community-based supports.[229]<br>- Agroarte Colombia, the Communa 13 neighborhood arts collective, which grew out of massacres and other horrors in Medellín, uses art, music, and theatre to promote healing and justice.[230] |
| Gender-based violence | - In rural areas on the border with Ecuador, the Hombres en Marcha project enables women's political participation and engages men as allies for promoting gender equity.[231]<br>- In Chocó, Doctors Without Borders provided emergency psychological services for rape survivors, accompanying them as they received health care in settings that lacked institutional provisions for women's safety. |
| Reintegration | - Fundación CRAN enables the reintegration of formerly recruited children by providing psychosocial support, training for parents and community members on reducing stigma, providing livelihoods training, and supporting grassroots groups to promote reintegration.[232] |
| Police reform and citizen relations | - The Colombian National Police created the Police Unit for Peacebuilding (UNIPEP) to help transform the police into an institution that helps to enable citizens to exercise their rights and freedoms and feel safe. Together with Alianza para la Paz, Interpeace provides capacity building for UNIPEP on how to manage and prevent violence, including GBV, and enable conflict transformation.[233]<br>- Dunna—Creative Alternatives for Peace provided training related to trauma healing and restorative practice as a means of addressing relational issues between ex-combatants, victims, the police, and institutions represented in the Mayor's office. |
| Indigenous activism | - In Cauca, where guerilla and paramilitary groups cultivate coca, Indigenous activists who are armed only with sticks and machetes confront the armed intruders. The protection of their land helps to protect their identity and way of life and also reduces climate change.[234]<br>- In Chocó during the war, when guerilla forces recruited many children, Indigenous women surrounded the guerilla camp at night, refusing to leave until their children had been released. The armed group complied with their demand. |

Although extensive work has been done to address 'collective trauma' in Colombia, many practitioners now caution against a narrow focus on problems such as PTSD, not only to avoid pathologizing people but also to recognize the importance of the social divisions and social impacts in Colombia. Indigenous activism in Colombia has helped to underscore the poor fit between Westernized, individual approaches in supporting Indigenous people. More holistic, contextual approaches have recently been developed.[235,236]

### Women and Youth Peacebuilders

The Colombian armed conflict has highlighted the connections between armed conflict and violence against women and girls. Widespread rape, family violence, and sexual violence led many women to flee their homes and also led girls to join armed groups.[237] Youth, too, have been strongly impacted by the armed conflict. Before the peace agreement, the FARC and other armed groups recruited large numbers of children, and at present, armed groups and gangs continue to recruit children.[238]

Nevertheless, both women and youth have emerged as highly significant peacebuilders in Colombia. Women played a key part in enabling the signing of the 2016 agreement and have been influential thereafter in enabling peacebuilding in different communities.[239] For example, Lucy Gomez Mina lives in an Afro-Colombian community in Cauca, where endemic GBV was exacerbated by the conflict and where male authorities keep women from leaving their homes. Using an embroidery workshop as a means of bringing women together, she helps to create spaces where women survivors of violence break their silence, share their stories in a supportive context, and receive training on nonviolent conflict resolution and how to disrupt violence in their families and communities.[240]

Consistent with the vision of UN Security Council Resolution 2250 on Youth, Peace, and Security, youth peacebuilders in Colombia work in diverse ways that support well-being and social cohesion. [241] A 2018 mapping reported that youth and youth groups are highly active on issues such as gender, disability, and support for marginalized people and groups.[242] Many youth reported that their work on peacebuilding was grounded in their personal experiences with loss of family members or concerns about hope and the future. In Colombia, youth are voices and agents of change who can help address the structural patterns of discrimination and marginalization that had helped to animate the armed conflict.[243]

### Facilitators and Challenges

Key facilitators and challenges to integrative efforts in Colombia are shared in Table F2.

**Table F2. Facilitators and challenges of integrative efforts in Colombia.**

| Facilitators | Challenges |
|---|---|
| • Program approaches that connect fully with the human dimension; learn from local people about their needs, priorities, and aspirations; and build on their local resources, including cultural resources.<br>• Indigenous activism and grassroots mobilization for holistic action.<br>• Intersectional, multidisciplinary approaches that interweave work on issues of social inequity, land, climate change.<br>• Government efforts such as the Unified Victims Registry and laws and policies that support MHPSS and peacebuilding. | • Extensive use of top-down approaches that do not connect with the lived experiences of people in diverse areas and afford little space for locally led and owned approaches.<br>• Ongoing climate of fear, with killings of or threats against social leaders (including youth and women), drug trafficking, and extensive guerilla and gang activity.<br>• Discrimination against Indigenous and Afro-Colombian peoples.<br>• Large landowners and international corporations continue to take land from poor farmers and Indigenous people. |

| | |
|---|---|
| • Engagement of religious actors, who have local legitimacy and can help to mobilize communities to improve holistic well-being and social relations and follow their moral vision.<br>• School reconstruction as a means of rebuilding the social fabric.<br>• Activation of schools and teachers around strengthening MHPSS and social cohesion, engaging also with parents and communities to bridge school, family, and community efforts for peace and well-being.<br>• Territorial reconciliation processes.<br>• Solidarity among victims/survivors.<br>• Strong agency by Indigenous and Afro-Colombian people. | • Relatively low levels of public support for the peace process.<br>• Ongoing societal normalization of violence.<br>• Developing strong indicators and measures of impact, as the evidence base in Colombia remains underdeveloped.<br>• Fragile state presence in rural areas.<br>• Perceptions of work on MHPSS and peacebuilding as being political.<br>• Ongoing recruitment of children by gangs.<br>• Lack of stable employment opportunities for youth.<br>• Discrimination against LGBTQIA+ people.<br>• Highly patriarchal societal norms.<br>• The COVID-19 pandemic. |

## LESSONS LEARNED

1. Overemphasis on clinical approaches to MHPSS is pathologizing and not very helpful in improving social relations, which are key to healing, transitional justice, and conflict prevention.

2. Pay close attention to and support the use of Indigenous understandings and approaches, recognizing that they may differ significantly from those of more global work on MHPSS and peacebuilding. Recognize also that patriarchy remains strong among Indigenous peoples.

3. Learn from, accompany, and support grassroots, bottom-up processes that are locally owned, contextually appropriate, and sustainable in integrating MHPSS and peacebuilding.

4. Make work with youth and women central in efforts to integrate MHPSS and peacebuilding, recognizing that they may use different terms and approaches in describing their work.

5. Address gender issues at levels ranging from the family to the societal levels as part of work on integrating MHPSS and peacebuilding.

6. Work on climate change is an indispensable part of wider efforts to integrate MHPSS and peacebuilding.

7. Use existing Government laws and policies to leverage support for MHPSS.

8. Work is needed to reform the mass media and reduce symbolic violence and societal narratives that undermine emotional well-being and social cohesion

# PHILIPPINES

## CONTEXT

The Philippines has a complex history of injustices and human rights violations, which includes over 400 years of colonialism, invasion, and occupation by Spain and the U. S.; life under dictatorial and totalitarian leaders; and disappearances, torture, killings, and large-scale massacres, including of Moro and Indigenous people.[244,245] As evident in the People Power Revolution that ended the 20-year rule of Ferdinand Marcos[246], Filipino people also have strong activism for social justice and peace.

Today, the Philippines is torn by two protracted armed conflicts. The communist rebellion (1969 – present) pits the government's Armed Forces of the Philippines (AFP) against the New People's Army (NPA) (the armed wing of the Communist Party of the Philippines). In its anti-imperialist struggle, the NPA opposes the inequities of land distribution, diminished political power of minority groups, and rampant social injustice.[247,248]

As well, the Moro Conflict (1968 – present) between the AFP and the Moro Islamic Liberation Front (MILF) on the southern island of Mindanao is a significant source of violence. The Moro people, who comprise of diverse Muslim ethnolinguistic groups, want secession and freedom from oppression associated with the mass migration of Christian settlers into Mindanao, land dispossession, and social and political exclusion by the Christian-majority government.[249] In 2014, a peace agreement was signed and the Transitional Justice and Reconciliation Commission (TJRC) was established to promote healing and reconciliation between the Moro people, Indigenous people, and Christian settlers.[250] The TJRC acknowledged the diverse needs of communities, especially as there are over 17 million Indigenous people belonging to over 110 ethnolinguistic groups inhabit the region,[251] as do numerous subsects of the Moro people. It proposed reparations for land dispossession and cultural and gender-sensitive, psychosocial healing. However, the peace agreement failed due to obstructions in passing legislation.[252]

The complexity in Mindinao increased further due to the emergence of the Islamic State. The 2017 Battle of Marawi between the Islamic State of East Asia (ISEA) and the AFP killed many and led to 350,000 IDPs and refugees fleeing Marawi. In January, 2019, ISEA bombed the Roman Catholic cathedral in Sulu.[253] Amidst increasing tensions between ethno-religious groups, a two-phase plebiscite was held in 2019, which established the Bangsamoro Autonomous Region of Muslim Mindanao (BARMM).[254] However, the conflict between the AFP and the Bangsamoro Islamic Freedom Fighters (a Moro insurgency faction) reignited in March, 2021.[255]

Today, many Filipino people say that the colonial past has influenced their identity, spirituality, and local traditions. Armed conflict, violent extremism, extrajudicial killings, poverty, toxic masculinity, discrimination, and the disempowerment of women, youth, and minority groups tear at the social fabric. As well, Moro people tend to see *rido* conflict (clan warfare), as a greater source of violence and insecurity than the conflict itself.[256] Adverse mental health and psychosocial well-being conditions prompted the 2018 Mental Health Act in 2018, though the burden of stress and mental and substance use disorders continues to fall most heavily on young people and those facing marginalization.[257,258,259] In addition to frequent natural disasters, the COVID-19 pandemic has caused a rise in suicide rates and loss of livelihoods.[260,261]

## INTEGRATION OF MHPSS AND PEACEBUILDING

This country case study is based on 23 survey responses, 2 key informant interviews (one with a woman practitioner and one with a transgender youth), one youth consultation (with 11 youth), and diverse papers and country reports.

### Areas of Integrative Work and Program or Action Examples

In the Philippines, work on connecting MHPSS and peacebuilding has often focused on the areas indicted in Table F3 below. Other areas that have received attention include: transitional justice mechanisms (including restitution through psychosocial support), issues of land dispossession, and support for IDPs[262,263,264]

**Table F3. Areas of priority and program work that integrates MHPSS and peacebuilding.**

| Areas | Program or Action Examples & Approaches |
|---|---|
| Inter-Ethic Conflict | - In school forums and dialogues, Christian and Muslim youth discussed prejudices and how to reduce them and also organized joint activities.[265] |
| Discrimination Against LGBTQIA+ People | - A youth-led initiative enabled discussion of issues faced by trans people (e.g., stigma and trauma), trans rights, and the societal responsibility to transform prejudices and harmful behaviour.[266] |
| Memory Work | - The "Accompaniment Programme" organized peer supports, health and legal supports, and MHPSS sessions for people with missing relatives; the participants created commemoration spaces.[267] |
| Prevention of Violent Extremism | - PVE programming restructured entirely to integrate MHPSS; emphasis on positive transformation; involved faith-based, women, and traditional leaders and civic groups to accompany programming, given the positive psychosocial impact they have program participants[268] |
| Deradicalization and Reintegration | - The "Youth Peacebuilding Leadership Training" program taught former youth IDPs and out-of-school youth affected by the Marawi Siege breathing, relaxation, trauma and stress relief techniques; the youth implemented a community-service project related to promoting peace and well-being [269] |
| Multi-Stakeholder Action | - The "Integrating MHPSS into Peacebuilding" event enabled cross-sectoral connection and exchange of ideas and experiences for people from the BARMM government, civil society, and academe.[270] |

### Mobilizers of MHPSS and Peacebuilding

Grassroots leaders, women, and youth have mobilized extensive work on peace and well-being. Their ongoing efforts are frequently based on Filipino wisdom, ways of being, identities and cultures, including Filipino Indigenous psychology.

#### *Sikolohiyang Pilipino (Filipino Indigenous psychology)*

Decolonizing efforts in the Philippines aim to reclaim elite-dominated power, demand justice for human rights abuses and land dispossession, provide healing and support to victims and survivors, and acknowledge, preserve, and revive Indigenous and minority-group wisdom, ways of being, identities, and cultures. An important conceptual foundation of grassroots movements is *Sikolohiyang Pilipino* – Filipino Indigenous psychology. *Sikolohiyang Pilipino* aims to foster

national identity and consciousness, ignite social awareness and involvement, and bring to center stage Indigenous languages and cultures, including Indigenous healing approaches. As well, it broadens the application of psychology beyond the 'clinical' sphere to take account of all areas of prominence in Filipino life, leading to, for example, 'psychology for the arts,' 'rural psychology,' 'livelihood psychology,' and 'psychology for agriculture.' The collective orientation of *Sikolohiyang Pilipino* also rejects the Western, individually oriented nature of psychology. In doing so, *Sikolohiyang Pilipino* aims to decolonize the Filipino mind.[271]

An example of *Sikolohiyang Pilipino* in practice is the "*Paaaralang Bayan*" ("School for People, School for Life") program by Education for Life. Between 1992 and 2004, over 2000 grassroots leaders, including farmers, women, and teachers, participated in 6-week residential courses. The courses aimed to develop 'holistic' capacities for shaping and mobilizing movements that address challenges in society. The 'holistic education program' adapted insights and methods from *Sikolohiyang Pilipino,* Paulo Freire's "Pedagogy of the Oppressed,"[272] and Grundtvig's philosophy of learning for life.[273] Participants developed skills in communication, negotiation, and peaceful conflict resolution, alongside explorations in Filipino psychology, culture, family relations, neighbourliness, and spirituality. Learning from their own life experiences, observations, and reflections, the participants were better able to champion change for peace and well-being in their communities.[274]

***Women in Action***

Women in the Philippines experience high levels of GBV, political and economic disempowerment, and poor mental health and psychosocial well-being.[275,276,277] The fact that the majority of victims of extrajudicial killings are poor men has left many women widowed and in dire circumstances.[278] In the BARMM, these issues are intensified. For example, in the past, government armed forces have committed rape, mutilation, and other acts of violence against Moro and Indigenous women.[279] The restriction of men's mobility and livelihood activities due to *rido* conflicts has created an additional burden for women to support their families, often by taking risky jobs such as serving as emergency medics and rescue agents during conflict, or taking leadership positions in armed groups and forces.[280]

Amidst this context, there has been national-level recognition of the role of women in leading peacebuilding efforts. The Philippines was the first Asian country to adopt a National Action Plan for the implementation of UNSCR 1325 (2000), and many women were trailblazers in the Mindanao peace process, and have continued to advocate for all people's needs and rights.[281] However, toxic masculinity, the marginalization of women of particular groups or their ethno-religious status, and mental health and psychosocial challenges limit the full potential of women to engage in these processes.[282] For example, in the clan-dominated politics of Mindanao, women from elite clans are often the only women allowed to participate and lead peacebuilding processes.[283]

Yet, against this backdrop, women leaders have been instrumental in championing integrative efforts. At the grassroots-level, *Baigani*, a feminist solidarity group, provides psychosocial and financial support for widows and orphans of extrajudicial killings to overcome trauma, fears, and stigmatization and enable them to realize their strengths and capacities.[284] Calling themselves "women warriors," they draw on each other's strength, and create spaces of connection for widows and children experiencing isolation and grief, enabling them to unite,

remember, and celebrate the lives of their loved ones.[285] At the national-level, in 2021, the Bangsamoro Women Commission (BWC), which supports women political and economic empowerment, rights and social protection, and family development, conducted Psychological First Aid (PFA) training for 30 of their employees, and provided PFA to community members during the South Upi armed conflict.[286] Additionally, the "Women Insider Mediators – Rapid Action and Mobilization Platform" trains women (especially Moro, Indigenous, and ex-MILF women) as peacebuilders and mediators, is launching an initiative to strengthen these women's capacities for facilitating MHPSS in conflict affected communities.[287, 288]

***Youth in Action***

Youth are creative, highly energetic actors who support well-being and peace with and for other youth and their communities. They are motivated by: a tenacious regard for attaining social justice; frustration at the government's inefficient processes and ineffective action; desire to develop skills that can support their future employment and career prospects; and the opportunity to create networks and maintain friendships with other youth. Many youth feel valued when they provide support in meaningful ways to other youth, and develop a keen sense of being together and connectedness.

Youth have distinctive characteristics that make them well suited for their roles as peacebuilders. In comparison to the older generations, they see themselves as changemakers and not automatically bound to old ways of knowing, doing, and being. They are keenly aware of intersectionality and as such have having greater capacity to empathize with, be open-minded about, and "walk in solidarity" with all youth. Attuned to the impact of colonial legacies on their generation and previous generations, they seek to nourish well-being and peace that is grounded in Filipino identity, culture, and ways of being together. One youth shared that *Sikolohiyang Pilipino* is quintessential for meaningful and sustainable peace and well-being in the Philippines, as it brings forward a distinct sense of 'community' and 'connectedness' that is at the heart of the Filipino way of being together. At the same time, youth recognize that the imposition of a monolithic Filipino identity and culture could be disrespectful and could cause harm by, for example, perpetuating the assimilation strategies that had previously been imposed on Moro and Indigenous communities.[289] Many young people value learning from and incorporating the insights from diverse philosophies, sources of knowledge, languages, and spiritual and religious traditions that help to transform the colonial mindset.

The integrative efforts of youth are visible in the work of undergraduate and graduate students at the Center of Psychological Extension and Research Services, Ateneo de Davao University. Having received training on topics such as psychosocial support, specialized mental health care, peace education, prevention of violent extremism, and community dialogue practices, youth then work with community organizations in Mindinao, providing accompaniment and integrative efforts that are conflict-sensitive and culturally contextualized.[290]

Youth can also be drivers of change where no change had seemed possible. In the policy arena, youth took a strong advocacy stance together, enabling them to contribute to the 2018 Mental Health Act. Youth reported that at present, they are helping to draft the Mindanao Adolescent and Youth Code. Willing to challenge hierarchical political structures and antiquated beliefs about sexual orientation, youth have become strong voices of support for addressing the stigma towards and discrimination of minority groups, especially LGBTQIA+ people, and also for

enabling social cohesion between different ethno-religious groups. In this respect, Filipino youth embody the spirit of *"bahala na!"* which from the *Sikolohiyang Pilipino* perspective entails the willingness to take on any task with courage and determination, applying oneself to the best of one's ability.[291]

Youths' strong sense of solidarity is evident in their thinking about and work to correct inequity among young people. Cognizant of their privilege, youth who are relatively well off understand that the burdens of poverty and other life challenges prevent some youth from engaging in social change processes. Self-identifying privileged youth are calling for integrative efforts to take a multi-sectoral, inclusive approach to programming that addresses economic needs and engages with youth who are in difficult circumstances and who may be hard to reach.

**Challenges**

Key challenges to integrative efforts in the Philippines are shared in Table F4.

**Table F4. Challenges of integrative efforts in the Philippines.**

| Challenges |
|---|
| • Community members cannot lead/participate in integrative efforts because basic needs are not met.<br>• Limited services for addressing mental health disorders (~1,200 practicing psychiatrists, psychologists, and psychiatric nurses).[292]<br>• A culture of toxic masculinity and religious beliefs limit women's full participation and leadership.<br>• A 'culture of violence' has become the 'norm.'[293]<br>• *Rido* conflict can cause the rest of the province or country to 'other' the clans in conflict, who are then not invited or permitted to participate in matters of peacebuilding.<br>• Providing support to individuals and communities in remote regions. |

## LESSONS LEARNED

1. Contextualize integrative efforts based on the diverse needs of communities, with close attention to dimensions such as gender and sexual orientation, ethnicity, religion, language, political affiliation, and geographic region.

2. Ground integrative efforts within Filipino wisdom, identity, and culture; and ensure such embedding moves beyond a monolithic understanding of wisdom, identity, and culture.

3. Learn from and strengthen the inclusive participation and capacities of grassroots, women, and youth (including LGBTQ+ people) in mobilizing integrative efforts.

4. Strengthen alliances with men and religious leaders to secure and expand gender equality, including to eliminate discriminatory cultural and social practices limiting girls and women's participation or leadership in MHPSS and peacebuilding integrated efforts.

5. Address the violence brought by *rido* conflicts, and the disproportionate impact it has on Moro and Indigenous communities, and especially on women.

# SOUTH SUDAN

## CONTEXT

The context of South Sudan is best seen in the wider context of Sudanese history. Situated in northeast Africa, Sudan was for centuries a fertile mixing point of African and Arab peoples. Islam and Arabic culture dominated the northern part of Sudan, while African traditional religion (animism) and Christianity dominated the southern part. In the 19th and 20th centuries, Egyptian and British rule imposed differing tactics in northern and southern Sudan, fueling discrimination and ethnic tensions between the two areas.[294] Following Sudan's independence in 1956, tension between southern separatists and the north culminated in the 1955-1972 First Civil War and the 1983-2005 Second Civil War. The eventual signing of the 2005 Comprehensive Peace Agreement laid the groundwork for South Sudan's independence from Sudan in 2011. Yet the oil rich Abyei Administrative Area continued to be a contested district.[295, 296]

In 2013, following months of deteriorating political relations between President Kiir and Vice President Machar, the South Sudanese Crisis erupted between government forces loyal to the Kiir and opposition forces loyal to Machar.[297] Central to the Crisis were ethnic tensions between the Dinka (who supported Kiir) and the Nuer (who supported Machar), who had a long history of competing over cattle, land, and water. Both sides committed human rights violations, including the recruitment and use of children.[298] The Crisis caused an estimated over 2 million people to become internally displaced,[299] of which includes over 750,000 people fleeing to neighbouring countries[300] and over 200,000 people seeking safety in Protection of Civilian Sites.[301,302] In 2015, a peace deal was signed, yet fighting resumed in 2016.[303] Citing ethnic cleansing and economic collapse, the UN declared a famine in areas of South Sudan.[304]

In September 2018, a peace agreement, the Revitalized Agreement on the Resolution of the Conflict in the Republic of South Sudan ("RARCSS"), was signed. In February 2020, the Transitional Government of National Unity was formed as a power-sharing government between differing parties to move forward the R-ARCSS.[305] Although there has been progress in implementing the R-ARCSS, implementation delays led South Sudanese leaders to extend the transitional process to 2025.[306,307] Inter-/intra-communal conflict is rampant and is often driven by tensions over land, water, and other resources. GBV is also a key part of the conflict, as difficult economic conditions lead young men to engage in cattle-raiding to meet rising dowry standards.[308,309,310]

Conflict has been exacerbated by the COVID-19 pandemic, environmental disasters, and severe food insecurity.[311] Over 8.9 million people, including 4.6 million children, are estimated to need humanitarian assistance and protection, and about 2 million people are internally displaced.[312] South Sudanese people experiences dire mental health challenges, including high levels of PTSD and depression.[313] As well, cultural norms and social and economic inequities have caused a generalized breakdown of the rule of law and the normalization of violence, leading to high levels of GBV. [314,315] Yet MHPSS and GBV services continue to be grossly inadequate.[316]

## INTEGRATION OF MHPSS AND PEACEBUILDING

This country case study is based on 26 survey responses, five key informant interviews (four women and one man), one consultation with six grassroots practitioners (four men and two women), one consultation with five young people age 18-32 (2 young men and 3 young women), and diverse papers and country reports.

### Areas of Integrative Work and Program or Action Examples

Table F5 illustrates work on connecting MHPSS and peacebuilding in South Sudan. Other valuable work includes: strengthening social cohesion by providing displaced and host communities,[317, 318, 319,] and support the reintegration of girl CAAFAG.[320]

**Table F5. Areas of priority and program work that integrates MHPSS and peacebuilding.**

| Areas | Program or Action Examples |
|---|---|
| Inter-Ethnic Conflict | Series of trauma awareness and social cohesion trainings with young leaders to learn how to talk to their peers about the consequences of violence, trauma, cattle raids, and abductions to build and restore inter-ethnic peace.[321] |
| Gender Based Violence | The "Leaders of Peace in South Sudan" programme trains community-based 'psychosocial focal points' to be first responders to GBV cases and forms support groups that advocate at regional/national levels for peace, security, and MHPSS.[322,323] |
| Preventing Violent Extremism & Gang Violence | The "Youth Action for Reduced Violence and Enhanced Social Cohesion" programme works with youth gang members and other at-risk youth to acquire self-regulation skills, literacy, livelihoods, education and vocational training, alongside psychosocial activities and dialogues on gender norms to enable peace.[324] |
| Working with Leaders | The 'Minor Shift – Major Change' programme provides leaders (e.g., military generals, national security officers, government officials) with workshops on stress management, trauma healing, and resilience.[325] |

#### *Trauma Healing*

Practitioners in South Sudan widely view trauma healing as a central component of integration efforts and as essential in promoting mental well-being, resilience, and social cohesion. While not all South Sudanese people have been traumatized, a widespread perception is that most people have experienced traumatic events.[326] The term 'trauma' is usually associated with mental disorders [327] that require specialized care, yet practitioners recognize the paucity of specialized care services.[328] A local artist whom an international NGO had trained in trauma healing, subsequently facilitated "art-based trauma healing" programs in order to encourage inter-tribal social cohesion. He paints inter-tribal rituals and marriages and shares these at community exhibitions, while simultaneously hosting trauma healing workshops.[329]

Yet there are also calls for caution about how the trauma discourse has become internalized in the country.[330, 331] Some suggest that the dominant trauma lens has homogenized lived experiences and socio-cultural processes, and has promoted a Western lens on suffering and healing. [332] A singular focus on trauma may ignore the nuances of how individuals and communities experience and express daily conditions and hope for peace and recovery. [333]

Practitioners acknowledged that there should be a balance of the needs for specialized care for trauma-affected people with community-based psychosocial and peacebuilding approaches that already exist.[334]

**Enablers & Mobilizers of Integrated Approaches to MHPSS and Peacebuilding**

South Sudan practitioners see local leaders and local practices as central enablers and mobilizers of MHPSS and peacebuilding. This includes the significant role of religious leaders, local ceremonies and rituals, women activists, and young people.

***Religious Leaders***

Religious leaders are uniquely situated at the forefront of integrative work, as they are influential and highly respected community members. Often seen as neutral mediators, they can diffuse and resolve intracommunal conflict by facilitating religious traditions, rituals, and customs.[335] Religious leaders also partake in large-scale national- and community-level initiatives. For example, the South Sudan Council of Churches developed the "Action Plan for Peace," which includes the implementation of a psychosocial call centre to encourage forgiveness, healing, and reconciliation. Individuals can share their challenges and pray with pastoral counsellors, and may also request material support, educational support, and referrals. [336, 337] Additionally, a faith-based community organization hosts trauma-healing workshops for local peace committees. The organization trains local counsellors to provide basic psychosocial support in various systems, including in security institutions (e.g., the police system). [338]

***Cultural Ceremonies and Rituals***

Ceremonies and rituals are highly visible in everyday efforts to promote peace and well-being in South Sudan. For communities experiencing mass loss, traditional burial and funeral ceremonies encourage individual and collective healing and also contribute to community resilience. Prayer, singing, dancing, and other rituals (including ethnic-specific practices) act as culturally-valued customs that enable mourning and community connectedness.[339]

In some communities where a killing has occurred by an unknown perpetrator, a "funeral dance" and associated mourning songs are organized to 'invite' the unknown perpetrator(s) to reveal themselves. [340] Upon hearing the songs, neighbouring communities seek to find out whether their members include the unknown perpetrator(s). Often, the perpetrator(s) reveal themselves out of fear of being cursed or punished severely. In contrast to formal investigations or mediation processes, ceremonies can help to address inter-/intra-community challenges in a culturally-relevant and effect manner. Ultimately, identification of the perpetrator(s) increases the sense of collective security, and the mourning songs enable a sense of healing.[341]

Some communities also use cleansing rituals, such as *Mabior*, to support the psychological healing and social inclusion of ex-combatants during reintegration efforts.[342,343,344] *Mabior* has also been used as a ceremony by Dinka and Nuer people to resolve conflicts, and includes feet- and hand-washing rituals, sharing a meal over sacrificial meat, and making vows to end conflicts. [345]

### *Women Leaders*

In South Sudan, cultural norms and social and economic inequities greatly contribute to violence against women and girls (VAWG), devastating their wellbeing and security. Despite women's central role in the family and labor spheres, they are marginalized politically, socially, and economically. [346,347] About 65% of women and girls in conflict areas experience physical and/or sexual violence; and intimate partner violence occurrence is one of the highest in the world.[348] VAWG is also connected to prominent drivers of inter-communal conflict – e.g., forced child marriages serve as a survival mechanism during famine and war, causing an increase in bride prices (often supplied through cattle) increase, which can initiate cattle raiding. [349,350] Due to shame, stigma, and a culture of silence, most women and girls do not seek support.[351]

Yet women are emerging as central leaders to promote peace and healing.[352] One consortium used a women-led approach to effecting change by: training (young) women in peacebuilding and mediation; hosting intergenerational CSO forums and radio programs to transform stereotypes and harmful behaviour, including those related to gender and age biases, protection issues, and interethnic conflict; and championing young women to catalyze advocacy efforts, including formulating and discussing peace recommendations with R-ARCSS representatives. [353,354]

### *Young People*

South Sudanese young people face tremendous challenges related to poverty, food insecurity, lack of access to education, and lack of job opportunities.[355] Unable to afford the brideprice, young men often feel trapped and unable to start a family, leading some to turn to cattle raiding. Killing, abduction, recruitment into armed forces, rape, and other grave violations against children and young people is prevalent. [356] The South Sudanese culture of war aggravates tribalism and the desire to take up arms amongst young people. [357,358] Their marginalization by society and the humanitarian and development sectors further deepens animosities and contributes to adverse well-being.[359]

Nevertheless, young people are deeply motivated to be agents of change.[360] For example, a former child soldier, now an artist and practitioner, uses an arts-based and trauma-healing approach with at-risk youth to prevent violent extremism.[361] Although young people desire to inspire change, it can often be difficult for them to do so.[362] One participant stated, "If you are a young person, you don't have a voice. If you are a young person, you don't have a position, you don't own anything. This is the mentality that we want to break – [the idea that] we are only poor."[363] To address this kind of situation, one consortium holds fora for young people to lead discussions on issues of concern with community and government leaders; and simultaneously provides psychosocial support activities (e.g., mindfulness-based stress reduction) and dialoguing activities to explore power, violence, identity, and social norms that underpin violence and privilege.[364,365]

Young people also utilize sports as a modality for reducing tribalism and gender discrimination, and promoting differences as a source of enrichment and strength in communities.[366,367] For example, National Unity Day in South Sudan brings young women and

men athletes together to strengthen interethnic social ties, address harmful gender norms, encourage ideals of peace, tolerance and unity, and foster forgiveness and collective healing.[368, 369] In 2020, National Unity Day featured nine days of sports events (e.g., wrestling, volleyball, football), community peacebuilding events, and gender workshops.[370]

As well, young people's local governance or leadership structures, such as *Monyomiji*, enables pro-peace norms and community well-being.[371] This informal, traditional institution consists of young men who take up community governance and help resolve conflict, such as by: providing security forces for uninterrupted peace discussions; apologizing for wrong-doings on behalf of perpetrators; and encouraging healing and inclusion ceremonies, such as working with a traditional 'medicine man' to offer sacrifices and conduct cleansing rituals that help to reduce desires for revenge and exclusion.[372,373]

### Challenges

Table F6 highlights key challenges to integration in South Sudan.

**Table F6. Challenges of integration in South Sudan.**

| Challenges |
|---|
| • High levels of stigma towards mental health and psychosocial wellbeing.<br>• Lack of trained professionals and infrastructure to provide specialized mental health care.<br>• Inter-communal conflict and gang violence undermines the progress of the peace agreement.<br>• Safety issues cause challenges with return and reintegration motivations.<br>• Cultural and social gender norms that marginalize and violate girls and women.<br>• Most individuals and families face severe poverty, compounded by a macroeconomic crisis.<br>• Community members prefer material support, as there is limited awareness of how cognitive skills development and social cohesion practices can drive impact.<br>• Devastating impacts of floods driven by climate change, such as restricting access to remote areas. |

## LESSONS LEARNED

1. Learn from and strengthen the inclusive participation and capacities of grassroots actors.
2. Take a holistic approach that balances the provision of specialized mental health with psychosocial supports and services that promote resilience and social cohesion.
3. Recognize the importance of GBV in armed conflict and take concerted effort to prevent it and mitigate its effects.
4. Strengthen alliances with men, religious leaders, and community leaders to secure and expand gender equality, including to eliminate harmful social and cultural practices limiting girls and women's participation or leadership.
5. Leverage non-harmful cultural and social approaches (e.g., dance, song, drumming, spiritual ceremonies) to promote healing, collective resilience, and social cohesion, especially to address intercommunal conflict.
6. Connect integrated efforts to other systems (e.g., education), opportunities (e.g., livelihoods), and ways of life (e.g., cattle raising, migration and displacement, climate-change driven disasters).

# SRI LANKA

## CONTEXT

Sri Lanka has a violent history of centuries-old colonization by different foreign powers (1505-1948),[374] youth-led insurrections in the South of the country and counterinsurgencies by the State (1971-1990),[375] protracted armed conflict (Sri Lankan War) between the Tamil militants and the Sinhalese-dominated Sri Lankan government (1983-2009), recurring communal riots, pogroms, repression, and systemic discrimination against its ethnic and religious minority groups. There is documented evidence of widespread human rights violations and atrocities carried out by State and non-State actors related to these conflicts. Communities and individuals have experienced enforced disappearances, massacres, torture, suicide bomber attacks, forced mass displacements, and militarization of civilian spaces.[376,377]

In response to growing civilian protests to address the grievances of the Sri Lankan War, in 2016 the government commissioned the "Consultation Task Force on Reconciliation Mechanisms" (CTF). Led largely by a civil society network and grassroots actors, the CTF hosted public consultations across 15 zones (eight districts across the North and East Provinces, and seven across the other provinces) to understand how four proposed transitional justice (TJ) mechanisms (i.e., an Office on Missing Persons; an Office on Reparations; a Truth, Justice, Reconciliation and Non-Recurrence Commission; and a judicial mechanism comprising a Special Court and an Office of the Special Counsel) should be designed and function.[378] However, many of these proposals have not yet come to fruition.[379]

As well, since 2013 the frequency of violence against Muslims have risen, notably through anti-halal campaigns and anti-Muslim. The 2019 Easter Sunday attack on three churches and three hotels, linked to ISIS, increased hostility towards and marginalization of Muslims. State regulations have regularly discriminated against Muslims.[380]

Adverse mental health and psychosocial well-being is of grave concern. The massive Indian Ocean tsunami of 2004 first propagated attention towards psychosocial issues and trauma, ultimately resulting in a national mental health plan.[381] However, challenging political and operational environments have stymied these efforts. In response, a 2018 MHPSS Community of Practice (CoP) was established to strengthen knowledge exchange and to facilitate implementation of evidence-based practice.[382] It's work is on-going.

Sri Lanka continues to experience a high prevalence of domestic violence, child abuse[383], violence in schools[384], violence and inhumane treatment within institutions and in the provision of service, repression by the State, political, inter-ethnic and inter-religious violence, thousands of missing persons, and families in long-term displacement. [385,386]

## INTEGRATING MHPSS AND PEACEBUILDING

This case study draws on: 5 survey responses, 3 key informant interviews (with 5 participants), and 3 consultations/FGDs (with 19 participants) – the majority of whom were women, and about half of the group were young women and men, including one transgender youth – and findings from reports, research publications, and other relevant papers.

### Views of Integration

Practitioners understand integration as deeply interconnected, or as one key informant shared, "two sides of the same coin." Both areas of work aim to foster understanding for the self and others, help people cope with loss and pain, build solidarity for peace and justice, address suffering, and reimagine a different future.

Integrative approaches should address elements related to emotion, identity, experience, history, perceptions of "the other," access to power and resources, as well as the roles of religion, culture, and socialization. Yet terminology can be problematic, as "mental health" evokes stigma[387,388] and "peacebuilding" and "human rights" are politicized.[389,390] Victims and survivors prefer language that validates their experiences; and State actors often want to avoid peacebuilding language.[391] As well, for integration to be successful, approaches should engage all stakeholders, so that efforts with one group will not be undermined by the actions of another. Integration efforts should also be directed to all groups – including to 'perpetrators,' to communities in regions that do not have access to support, and to minority groups (e.g., LGBTQIA+ and Muslims).

For many, the CTF (see program case study p. 67) helped familiarize themselves with the concept of integration, demonstrated how integration efforts can "go beyond" institutional frameworks, and how grassroots people should "have seats at the table" for TJ initiatives.

### Entry Points for Integration

There are several entry points for integration: 1) Community-based and grassroots-led initiatives, 2) Culture, storytelling, entertainment, music, arts, comedy, social media engagement, 3) Education and healthcare systems and services, 4) Humanitarian assistance and development interventions, 5) TJ, reconciliation, and peacebuilding initiatives, and 6) Prevention of violence efforts for: GBV, child protection, domestic violence, and extremism.

### Areas of Integrative Work: Approaches and Processes

In Sri Lanka, work on connecting MHPSS and peacebuilding has often focused through the approaches and processes indicated in Table F7.

**Table F7. Approaches and processes of integration in Sri Lanka.**

| Approach | Selected Process Elements |
|---|---|
| **Public consultations through the CTF** [392]<br>- Interwoven psychosocial support, accompaniment, and risk management into public consultations for developing TJ mechanisms; the Final Report included MHPSS | -Acknowledged potential for distress among participants and staff<br>-Selection of credible, representative taskforce members from the grassroots-level<br>- Aware of intra-/inter-group power dynamics |

| | |
|---|---|
| issues as a standalone chapter and across the proposed mechanisms | - Listened empathically to all groups affected by conflict /political & communal violence |
| **Psychosocially sensitive storytelling[393,394]**<br>- Provided opportunities for people to share stories of their experiences;<br>-Established humane counterpoints to prevailing stereotypes, and misinformation about people's experiences, lived realities and intentions and aspirations | -"Do No Harm:" acknowledged scope for distress and alienation when sharing<br>- Disarmed defenses by challenging prejudices and misconceptions through creative modes<br>- Acknowledged and validated experiences and cultural attributions of others (e.g., language)<br>- People connected over shared elements |
| **Integrating conflict sensitive MHPSS services into State systems**<br>- Integrating MHPSS into the Ministry of Education's social cohesion policy[395]<br>- Building capacities of counsellors within healthcare, social services, and women's development services[396,397]<br>- Incorporating PSS approaches in mental health policies and action plans[398,399]<br>- Into reconciliation mechanisms[400] | - Enabled MHPSS related capacities amongst state officials, personnel and systems<br>- Supported design of policies and services that are sensitive to MHPSS needs of the community<br>- Created multi-stakeholder teams (e.g., health and, education; humanitarian actors across INGOs, NGOs, and policy), that do not often collaborate and may be wary of each other<br>- Focus on "health" avoided the use of politicized terms |
| **Advocacy for) provision of supportive services to all groups affected by conflict, particularly those commonly marginalized[401]**<br>- e.g., people with disabilities, perpetrators of violence, people who are LGBTQIA+ | - Acknowledged discrimination, oppression, marginalization, and violence as antithetical to mental health, well-being, and peace at all levels<br>- Provided MHPSS services to all people<br>- Helped people understand the perspectives, pain and suffering from the other group(s) |
| **Building community and capacities**<br>- Developed capacities of people who have experienced violence to support others[402]<br>- "Manohari" program: storytelling (using animals rather than humans) to counter bias, enable self-reflection, and develop emotional literacy[403]<br>- Established support groups for connection and solidarity, learning and coping skills; platforms for advocacy and activism | - Indirectly challenged biases/assumptions, by providing new/alternative perspectives on ingrained prejudices and hostilities<br>- Used "everyday terms," rather than "loaded" language and terminology<br>- Helped people to manage emotions such as guilt, shame, anger, fear, betrayal, and outrage<br>-Provided safe and neutral spaces for people to 'unpack' their experiences, emotions, biases and assumptions and sustain change |
| **Transforming institutional culture and providing peace-positive leadership[404]**<br>- Made institutional spaces multi-cultural, safe, and welcoming for diverse people<br>- Leadership initiatives helped staff reflect on inclusive practices and created natural opportunities for connection (e.g., eating together, participating in joint festivals) | - Integrated "regular" concepts related to human relationships and interaction into the work environment (e.g., decency, conflict management, making people feel safe)<br>- Framed culturally-and conflict-sensitive practices as improving quality of services<br>- Showed openness and appreciation of practices of other religions and communities (e.g., "zakat") |

### *Women In Action*

Women have spearheaded justice, reconciliation, and well-being efforts for decades.[405] Women organize efforts at community, regional and national levels, seek accountability for human rights violations, seek information about disappeared family members, and protest violence and

inactions.[406] For example, during the CTF process, 50% of those facilitating the consultations as 'zonal task force members' were women, and many suggestions for addressing psychosocial support within TJ mechanisms was shared by women activists and women-led organizations.[407]

Women face challenges, however, including the burden of heading households as a single parent, sexual violence, financial exploitation, and disempowerment in high-level political arenas. Grassroots, women-led organizations address these concerns through intersectoral efforts that are grounded in culturally-sensitive and gender-responsive needs. Suriya Women's Development Centre provides psychosocial support to women survivors, entrepreneurship and livelihoods support, legal aid, and uses collective and cultural activism to mobilize women to enable positive change. In spaces where women are involved in political arenas, they may still face violence at home. One woman shared, "there is a considerable discrepancy between the amount of effort women put into peace and well-being processes and the power they actually hold in their homes and communities."[408] Transforming interpersonal relationships at the home, and helping men became allies, has therefore become critical in women pursuing efforts for well-being and peace.[409]

### *Youth in Action*

Youth demonstrate an energetic and dedicated spirit to facilitating well-being and peace. Many use creative modes to address hate speech and bring forward untold stories and memories. One young person created a YouTube comedy sketch about a Tamil boy's experiences during the war, and youth across ethnoreligious backgrounds shared their understanding of the challenges faced by Tamil youth.[410] The young man shared (translated): "As a development worker, when I try to talk about social issues, it can sound like hate speech. As a comedian [what is perceived as hate speech is] diluted." Other youth have used digital storytelling for individuals to reclaim their narratives through photography, film-making and social media[411]; facilitated music workshops that bring children from different ethnoreligious backgrounds together to sing songs in one another's language;[412] and led efforts for peace museums and memorial initiatives.[413]

However, youth face many challenges, including: being questioned about their motives and legitimacy; higher levels of harassment towards young women; being targeted by the State and other groups; and skepticism due to the youth insurrections in the past. The emotional burden and security risk is high. Amidst this backdrop, young people demonstrate grit and resiliency for their work, and in some cases, are able to also deeply empathize. One young woman shared (translated): "When someone says something bad and hurtful to me, I try to understand their background, [context, and experiences], because a few years back my thinking was also not like it is now."

Youth also advocate for integrative efforts that address the needs of people most often ignored, including people identifying as LGBTQIA+ and people with disabilities. For many, there is an unwavering commitment to doing this work with humility and co-learning. With one young woman who works to support the economic capacities and psychosocial well-being of women who have disabilities, she shared (translated): "Sometimes when a person talks to me in sign language, I become disabled, so now I am learning sign language."[414]

## Facilitators and Challenges

Table F8 (see the following page) highlights key facilitators and challenges to integration in Sri Lanka.

**Table F8. Facilitators and challenges to integration in Sri Lanka.**

| Facilitators | Challenges |
|---|---|
| • Grassroots initiatives, which leverage sense of solidarity (often from collective grievances) and collective coping capacities. [415,416]<br>• Safe, reflective spaces to unpack emotions, develop understanding for the perspectives of other groups, cultivate empathy, and share one's own experiences and concerns constructively. [417,418]<br>• Sensitivity towards terminology associated with "MHPSS" and "peacebuilding."<br>• Engaging people through creative modes and making content relatable.<br>• Open-minded and reflective leaders[419]<br>• Inter-agency collaboration.<br>• Evidence-generation on the impact of integration efforts (to attract funding). | • Rigid frameworks and siloed mandates in institutions that lead to diluted services.<br>• Strong emotional and social gaps between service providers and users (and families).<br>• Emotions of fear, hatred, and superiority towards groups, becoming "intergenerational "truisms."<br>• Single focus interventions may be insufficient.<br>• Lack of political will and public commitment.<br>• Short-term donor funding cycles.<br>• Lack of multi-stakeholder coordination, communication, information-sharing, and transparency leads to inefficiencies.<br>• Emotional and social burdens on practitioners, who may be perceived as disruptive or co-opted<br>• High costs/burdens of working overtime for MHPSS and peacebuilding. |

## LESSONS LEARNED

1. Provide leadership that enables peace-positive institutional cultures. Leaders should encourage inclusivity, and be self-aware, reflective, open-minded, and sensitive to nuance.

2. To transform institutions that have socialized staff into patterns of inhumane conduct, invest in peace-positive leadership and staff support to help change policies and practice, enforce humane regulations, and enable peer norms and capacity building.

3. To introduce and sustain psychosocially- and peace-sensitive policies/practices in institutions, be sensitive to terminology and focus on how the policies/practices provide benefit to institutions.

4. Advocate for long-term, flexible funding models, as transformation takes time.

5. Reconciliation processes should be guided by the views and needs of diverse, conflict affected people, including Tamil, Muslim, Sinhala people and others.

6. Create safe spaces for people to explore themselves, unlearn prejudices, process perspectives, and transform emotions. Approaches that promote points of connection are essential.

7. Develop integrative frameworks and ensure conceptual coherence among practitioners[420]

8. Address intergenerational impact supporting people across time and over generations.

9. Strengthen interpersonal relationships within homes, schools, communities and in service delivery, especially when interacting with people who are in positions of relatively less power.

10. To address the costs/burdens of long-time work on MHPSS and peacebuilding, invest in supportive efforts for individuals (e.g., self-care and -regulation practices) and systems-change

# SYRIA

## CONTEXT

Since the onset of the Syrian crisis in 2011, Syria remains one of the world's most complex humanitarian emergencies. Globally, Syria has been considered one of the three least peaceful countries for ten consecutive years.[421] Despite an overall decline in large-scale hostilities, the security situation remains highly dynamic and prone to escalation, particularly in areas of mixed or contested control, and in the northwest, northeast, and southern regions.[422]

"Conflict encyclopedia" is a term coined to the Syrian crisis, given the multiple and diverse local, regional, and global triggers, including the involvement of international players, the government, and non-state armed groups. The rise of extremist groups furthered the complexity of the crisis and the involvement of international actors. The increased internationalization disillusioned many local actors and communities since it created a sense that the international community would be unable to support local people.[423,424]

Peace negotiations have been attempted, including the 2012 "Six-Point Proposal,"[425] the UN-backed Geneva Communique (talks between the regime and the opposition), and the UNSCR 2254 (2015) that called for a peaceful political transition.[426] However, none of these succeeded. The latter two continue to be pushed forward by the UN.[427]

Currently, the unavailability of health services, poor access to clean water, social and economic impact of COVID-19, continued disease outbreaks including cholera, and localized hostilities cause significant death and injury, human rights violations, and displacement. Deliberate attacks on civilian infrastructure, such as on health and education centers and cultural sites have decimated social and community cohesion and spaces of recovery.[428,429,430] More than 350,000 people have been killed since the start of the crisis and almost one in every 13 people is estimated to be a child.[431] The crisis continues to have a disproportionate impact on women and girls, significantly restricting their freedoms, such as freedom of movement and the ability to seek employment, trapping them in cycles of vulnerability, subordination, and GBV.[432] Since the onset of the crisis, the Syrian economy has shrunk by more than half, and sharp, macro-economic deterioration continues unabated. Over the same period, the Syrian pound has undergone a 70-fold depreciation, which has accelerated since the onset of Lebanon's financial crisis in late 2019. The implementation of new unilateral coercive measures in June 2020 further exacerbated the depreciation pressure. The Syrian pound has now lost at least 36 per cent of its value since September 2020 alone.[433]

Approximately 1 in 10 Syrians live with a mild to moderate mental health condition, and 1 in 30 suffer from a severe condition.[434] Women and young people suffer from mental health conditions the most.[435] The combination of financial and material deprivations, need for protection and status, and lack of a meaningful alternatives has led to child marriage, child recruitment, and child labor. [436] It is estimated that 15.3 million people in Syria, including 7 million girls and boys and 4.5 million women, are in need of humanitarian assistance in 2023.[437]

## INTEGRATION OF MHPSS AND PEACEBUILDING

This country case study is based on 21 survey responses, four key informant interviews (one woman, one man, one young male, and a joint interview with two women), a focus group discussion with four practitioners (one young male and three women), one women's consultation (2 women age 25-30), another women's consultation (8 women age 25 – 40), one youth consultation (12 young people age 18 – 24), and diverse papers and country reports.

### Perceptions of Integration

Syrian practitioners viewed linking MHPSS and peacebuilding as a necessity for healing from grievances and trauma, and for building social connections and cohesion across groups, particularly across ethnic, religious, and political divisions, and between host community members, IDPs, and returnees.

The ongoing hostilities and the cumulative psychological harm from over a decade of war lead practitioners to prioritize mental health and psychosocial well-being in integrative efforts. However, they caution against using terms such as 'mental health' and 'depression,' which cause stigma and do not translate into Arabic. They emphasize that integrative efforts will need to recognize the diversity across language, religion, ethnicity, and tribal identity. Integrative efforts should also acknowledge and use cultural idioms of distress, cultural and supernatural explanatory models, and religious and culture-specific healing practices.[438] They also emphasize integration is not feasible unless livelihoods have been addressed. As one young practitioner put it (translated), "How can we talk about MHPSS and peace, when we don't even have livelihoods? There is an economic meltdown!"

Also, the use of the term "peacebuilding" is problematic since it has been politicized, and may not resonate strongly with local people. One woman practitioner shared (translated), "It was strange to hear 'integration of MHPSS and peacebuilding' at first, because there is tunnel vision of what "peacebuilding" means – that it is only from the political point of view – and to discuss [peacebuilding from this view] would be an obstacle. But talking about peace within the family- and community-levels is better." The term "peacebuilding" is also associated with INGOs and the UN presence, which some practitioners are wary towards.[439] As a result, integrative efforts are seen as most successful at the micro-level. Overall, it seems more appropriate to speak of "building relationships," strengthening "social cohesion," and "improving community."[440]

Despite these complexities, the interviewed Syrian practitioners were enthusiastic about the idea of linking MHPSS and peacebuilding. For them, it offered hope, a vision, and a pathway for the future. Although the context does not yet allow the full attainment of "peace," Syrian practitioners have a spirit of readiness and unity, reflective of the Syrian people, that makes them receptive to new possibilities.

**Areas of Integrative Work and Program or Action Examples**

In Syria, work on connecting MHPSS and peacebuilding has often focused on the areas indicated in Table F7 below.

**Table F9. Areas of priority and program work that integrates MHPSS and peacebuilding in Syria.**

| Areas | Programs or Action Examples & Approaches |
|---|---|
| Addressing Psychological and Social Impacts of War and Conflict | - The "BelSalameh" program trains: MHPSS professionals on psychotherapy; frontline workers on PFA, art-based psychosocial support, and referral systems; and medical experts and case managers on GBV support. It also organizes recreational and artistic activities such as youth-led projects, documentary film, public events on peace messaging.[441] |
| Addressing Inter-Ethnoreligious Conflict | - A program hosted in rural Damascus schools taught children of different ethnoreligious groups social and emotional skills and used films to support dialoguing activities.[442] |
| Improving Host-IDP Relations | - A program brought returnees and host community members together to collectively identify a challenge in the community and to co-create and implement a solution. A similar program was hosted for young people and framed through an entrepreneurship lens.[443] |
| Preventing Violent Extremism | - A peace education project implemented five approaches: mainstreaming peace concepts into formal education curricula; using arts-based psychosocial approaches; leading faith-based resilience and interfaith dialogues; mobilizing children as 'agents for positive change'; and developing a network of youth social leaders across Syria and southern Turkey.[444] |
| Promoting Collective Memory | - Supports initiatives that document and archive all forms of art and cultural expression (graffiti, murals, photographs, poems, songs, theatre performances); and engages in dialogue and commentary to establish networks and support between people.[445] |
| Infrastructure Development | - Rehabilitation of damaged infrastructure fosters morale, and communal clean up initiatives acts as a "mood-booster" in Aleppo and Homs cities.[446] |

The education system provides a valuable entry point for integrative efforts, especially if depoliticized terms such as "resilience" and "early child development" are used. Interviewees and participants in consultations shared that at schools, infrastructure activities such as painting the walls, filling up bullet holes, and putting up windows can promote a sense of hope, safety, and normalcy. Also, formal curricula can focus on the promotion of psychosocial well-being, social and emotional competencies, and peacebuilding values, and non-formal learning sites can host spaces for healing and social cohesion.

**Women in Action**

Women face many hurdles to their meaningful participation. These include overall safety and security concerns, limited opportunities to engage in international-level peacebuilding

processes, oppression by patriarchal practices and religious norms, strong challenges to their mental health and psychosocial well-being, and staggering levels of domestic violence and sexual abuse.[447] As well, many men have enrolled in military service or left the country, leaving women to take on the burdens of being the primary caretakers and the breadwinners.[448]

Nevertheless, women have actively sought to pave the way for peace and well-being. Some women creatively defy prejudices, and use stereotypes of womanhood to their advantage. For example, women activists who led local mediation tactics to release detainees said their efforts had succeeded since the party holding detainees viewed the women as 'peaceful' and not associated with political or military missions. [449]

Women also intentionally leveraged their social status to promote peace and well-being. In rural Aleppo, a highly respected woman community leader participated in a mentorship program that paired her and other older women with young girls at risk of dropout and early marriage. This led to many young girls participating in vocational training for sewing, life skills workshops, and youth-led community service projects.[450] At the Atmeh IDP camp, a woman leader from the Center for Women's Empowerment, which provides psychological support and other activities (such as awareness-raising and education), used her social status and strong relationships with women to organize a campaign that prevented the presence of small arms in the camp. This disarmament action, which was coupled with a camp cleanup, involved 100 women and the dissemination of over 200 pamphlets carrying messages such as "no using weapons inside the camp," and drawings of a pencil emerging from a gun instead of a bullet.[451]

Women's centrality in the household also serves as an entry-point for integrative efforts. In a small group discussion, a young male practitioner (translated) stated, "If she can raise her children to accept all ethnicities and backgrounds (e.g., political and religious differences) – to play with everyone – then there will be more well-being and peace." In response, a woman practitioner suggested using 'parenting-skills' training to share MHPSS and peacebuilding concepts and develop related competencies amongst mothers.

Many additional women-driven initiatives, which may not be formally recognized as MHPSS and peacebuilding efforts, exist at the grassroots level, including through local-level transitional justice mechanisms.[452] Acknowledging and learning from these processes can hold significant potential for shaping future integrative efforts for Syria.

**Youth in Action**

Amidst multiple adversities, both in country Syrian youth and Syrian refugee youth have driven imaginative grassroot movements and worked in solidarity with each other. The Syrian Youth Assembly, which consists of local and refugee Syrian youth, works to empower youth as leaders for peace processes by facilitating peacebuilding activities, such as advocacy initiatives, debate clubs, access to opportunities that develop 21st century skills, and engagement in initiatives under UN auspices. It also promotes MHPSS by providing psychological support and social counselling to young people.[453]

Human rights activism is central to youth's work. "PeaceLens," a youth-led project, trains youth on documentary film-making to express peaceful ideas, create opportunities for social connectedness, and advocate for human rights (e.g., raising awareness and addressing the suffering caused by GBV).[454,455] Social media efforts and online platforms are often at the heart of this work, since street-art and other in-person initiatives can be targeted for destruction.[456]

Youth also have positive impact through the work that they do quietly in everyday settings and on a small scale. A young male practitioner shared that at his university, there is a program in which students give items they no longer need (such as a book) to a student who is in need. This promotes a sense of well-being for the receiver, and also fosters a sense of belonging to a greater community for both the receiver and the provider. The impact of Syrian youth can also be found in the ways in what one young male practitioner called "simple" and "spontaneous" activities that manifest well-being and peace. Through dancing in the middle of the impoverished streets,[457] parkour-styled jumps through bombed buildings, and flips off of tanks,[458] Syrian youth reclaim spaces of destruction and devastation as spaces of freedom, joy, and connectedness.

### Challenges

Key challenges to integrative efforts in Syria are outlined in Table F9.

**Table F9. Challenges facing Syrian practitioners for integrative efforts.**

| Challenges |
|---|
| • Community members cannot lead/participate in integrative efforts because basic needs are not met.<br>• Infrastructure damage to the health system and a low number of MHPSS specialists limits the capacity to address mental health disorders and adverse psychosocial well-being.<br>• Patriarchal norms and religious beliefs limit women's full participation and leadership.<br>• Stigma and exclusion due to personal circumstances (e.g., female-headed household, experiencing a disability, informal marriages) limit individual's full participation and leadership.<br>• Grassroots initiatives are not recognized for their impact.<br>• The politicized nature of peacebuilding creates skepticism amongst international actors and the State to fund valuable efforts, including in education and livelihoods.<br>• Instability due to insecurity, socioeconomic conditions, and the COVID-19 pandemic. |

## LESSONS LEARNED

1. Use language, idioms, and expressions that are culturally-sensitive to the context, and consider dimensions such as gender, ethnicity, religion, tribal affiliation, and political affiliation.

2. Train and build the capacity of psychosocial support providers and mental health care specialists.

3. Prioritize support for basic needs, and interweave livelihoods into integration efforts.

4. Leverage the formal and informal education system for integrative efforts.

5. Strengthen and support grassroots initiatives, including creating alliances between religious leaders, women, and youth leaders to further accelerate efforts locally and nationally.

**Annex G. Reflection questions for integration efforts when working with grassroots actors.**

| Level | Reflection Questions |
|---|---|
| Individual | • What are, and how can we learn about and support, their diverse ways of knowing, doing, and being?<br>• What are their desired skills (e.g., basic livelihoods, psychologist first aid), and how can we include them in trainings?<br>• What are their current self-care and -regulation practices, and how can we strengthen current practices and/or promote new practices to address specific well-being needs?<br>• What are their discriminatory biases and assumptions, and how can we include self-awareness approaches and transformational processes in the trainings? |
| Family | • How can we provide self-care and -regulation practices for their caregivers and family members?<br>• How can we provide inclusive and gender-sensitive training on parenting-styles, relational dynamics, and/or conflict resolution?<br>• How can we encourage their caregiver(s) and family to participate in designing and delivering integrative efforts? |
| Community | • Where are current places of integrative efforts (e.g., school clubs, parent-teacher associations, informal networks and civil society organizations)? And, how can we strengthen and fund current efforts; and help brainstorm and fund innovative efforts, especially those led by minority groups?<br>• How can we leverage intra- and inter- community networks to model inclusion, cohesion, and connectedness?<br>• How can we address infrastructure and mine risk concerns at, and access issues to, sites that can host integrative efforts (e.g., health centers, play spaces, religious spaces, schools)?<br>• How does knowledge exchange (e.g., in-person, radio, and social media events) of MHPSS and peacebuilding topics occur, and how can we support these for integrative efforts?<br>• How can we encourage inter-generational processes to co-create integrative efforts? |
| Society | • How can we strengthen a collaborative, multi-sectoral approach between government, civil society, and these grassroots actors?<br>• How can we strengthen opportunities for these grassroots actors' contribution to international, national, and local policymaking processes?<br>• How can we create regional or international working groups on "MHPSS and Peacebuilding," including groups led by women and girls, young people, LGBTQIA+ people, and others facing marginalization and inequities? |

[1] UN News (2022, May 23). *UNHCR: A record 100 million people forcibly displaced worldwide*. Retrieved from https://news.un.org/en/story/2022/05/1118772
[2] UNHCR. (2021). *Refugee data finder.* Retrieved from https://www.unhcr.org/refugee-statistics/
[3] Marc, A. (2016). *Violence and conflict in the 21st century*. Washington, DC: World Bank Group.
[4] Oxfam. (2019). *The humanitarian-development-peace nexus.* London: Author.
[5] IASC (2022). *A mapping and analysis of tools and guidance on the H-P linkages in the HDP-nexus*. Geneva: Author.
[6] World Bank. (2018). *Pathways for Peace Inclusive Approaches to Preventing Violent Conflict*. Washington, DC: International Bank for Reconstruction and Development & The World Bank.
[7] Charlson, F., van Ommeren, M., Flaxman, A., Cornett, J., Whiteford, H., & Saxena, S. (2019). New WHO prevalence estimates of mental disorders in conflict settings: A systematic review and meta-analysis. *Lancet, 394*, 240-248.
[8] Machel, G. (2001). *The impact of armed conflict on children*. Cape Town: David Philip.
[9] Miller, K. E., & Ramussen, A. (2017). The mental health of civilians displaced by armed conflict; an ecological model of refugee distress. *Epidemiology and Psychiatric Science, 26(2)*, 129-138.
[10] Yoshida, K., Bond, H., & Kezie-Nwoha, H. (2021). *Defending the Future: Gender, Conflict, and Environmental Peace.* LSE Centre for Women, Peace and Security, Gender Action for Peace and Security, and the Women's International Peace Centre. Retrieved from: https://www.lse.ac.uk/women-peace-security/publications/Defending-the-Future-Gender-Conflict-and-Environmental-Peace
[11] Bubenzer, F., & Tankink, M. (2017a). Introduction to Special Issue: Linking mental health and psychosocial support to peacebuilding in an integrated way. *Intervention*, *15*(3), 192 - 198.
[12] Bubenzer, F., & Tankink, M. (2017b). Building sustainable peace through an integrated approach to peacebuilding and mental health and psychosocial support: A literature review. *Intervention, 15*(3), 199-214.
[13] Hamber, B., Gallagher, E., & Ventevogel, P. (2014). Narrowing the gap between psychosocial practice, peacebuilding and wider social change: An introduction to the Special Section in this issue. *Intervention, 12(1)*, 7-15.
[14] Bubenzer et al. (2017a).
[15] Hertog, K. (2017). The intrinsic interlinkage between peacebuilding and mental health and psychosocial support. The International Association for Human Values model of integrated psychosocial peacebuilding. *Intervention*, 15*(3)*, 278-292.
[16] Hart, B., & Colo, E. (2014). Psychosocial peacebuilding in Bosnia and Herzegovina: Approaches to relational and social change. *Intervention, 12(1)*, 76-87.
[17] Charlson et al. (2019).
[18] Miller et al. (2017).
[19] Tol, W., Stavrou, V., Greene, M. C., Mergenthaler, C., van Ommeren, M., & Moreno, C. G. (2013). Sexual and gender-based violence in areas of armed conflict: a systematic review of mental health and psychosocial support interventions. *Conflict and Health, 7*, 16.
[20] Stark, L., & Ager, A. (2011). A systematic review of prevalence studies of gender-based violence in complex emergencies. *Trauma Violence Abuse. 12(3)*, 127-134.
[21] Becker, A., Motgi, A., Weigel, J., Raviola, G., Keshavjee, S., & Kleinman, A. (2013). The unique challenges of mental health and MDRTB. In P. Farmer, J. Y. Kim, A. Kleinman, & M. Basilico (Eds.), *Reimagining global health* (pp. 212-234). Berkeley: University of California Press.
[22] Staub, E. (2003). *The psychology of good and evil: Why children, adults, and groups help and harm others*. Cambridge, UK: Cambridge University Press.
[23] Arthur, P., & Monier, C. (2021). *Mental health and psychosocial support to sustain peace: Four areas to explore for improving practice*. New York: NYU Center for International Cooperation.
[24] Widom, C. S., Czaja, S. J., & DuMont, K. A. (2015). *Science, 347(6229)*, 1480-1485.
[25] UNICEF. (2021). *Children recruited by armed forced or armed groups.* Retrieved from https://www.unicef.org/protection/children-recruited-by-armed-forces
[26] Baines, E.K. (2009). Complex political perpetrators: Reflections on Dominic Ongwen. *The Journal of Modern African Studies 47*(2), 163–191.
[27] Bourgois, P. (2001). The power of violence in war and peace: Post-Cold War lessons from El Salvador. *Ethnography*, *2*(1), 5-34.

[28] UNICEF. (2022). *Mental health and psychosocial support in children associated with armed groups and armed forces programmes: Operational guidance.* New York: Author.
[29] World Bank (2018).
[30] Bar-Tal, D., Oren, N., & Nets-Zehnut, R. (2014). Sociopsychological analysis of conflict-supporting narratives: A general framework. *Journal of Peace Research, 51(5),* 662-675.
[31] Volkan, V. (1999). *Bloodlines: From ethnic pride to ethnic terrorism.* Boulder, CO: Westview.
[32] Ingabire, C. M., Kagoyire, G., Habarugira, N., Rutayisire, T., & Richgers, A. (2022). "They tell us little and we end up being confused": Parent-child communication on familial experiences of genocide and its aftermath in Rwanda. *Transcultural Psychiatry, 5(3),* 349-361.
[33] Meinhart, M., Seff, I., Troy, K., McNelly, S., Vahedi, L., Poulton, C., & Stark, L. (2021). Identifying the impact of intimate partner violence in humanitarian sSettings: Using an ecological framework to review 15 years of evidence. *International Journal of Environmental Research and Public Health* 2021, *18,* 6963.
[34] Brown, D., Meinhart, M., Poulton, C., & Stark, L. (2022). The economic burden of intimate partner violence in Colombia: Estimated health costs among females aged 13-24. *Journal of Interpersonal Violence,* 8862605221104531.
[35] Kelly, J. T. D., Colantuoni, E., Robinson, C., & Decker, M. R. (2018). From the battlefield to the bedroom: A multilevel analysis of the links between political conflict and intimate partner violence in Liberia. *BMJ Global Health, 3(2),* e000668.
[36] Stark, L., & Ager, A. (2011). A systematic review of prevalence studies of gender-based violence in complex emergencies. *Trauma, Violence, & Abuse, 12(3),* 127-134.
[37] Devries, K. M., Knight, L., Child, J. C., Kyegombe, N., Hossain, M., Lees, S., & Naker D. (2017). Witnessing intimate partner violence and child maltreatment in Ugandan children: A cross-sectional survey. *BMJ Open, 7,* e013583.
[38] Levendosky, A. A., Bogat, G. A., & Martinez-Tortya, C. (2013). PTSD Symptoms in young children exposed to intimate partner violence. *Violence Against Women, 19,* 187-201.
[39] Laurenzi, C. A., Skeen, S., Sundin, P., Hunt, X., Weiss, R.E., Rotheram-Borus, M.J., & Tomlinson, M. (2020). Associations between young children's exposure to household violence and behavioral problems: Evidence from a rural Kenyan sample. *Global Public Health, 15,* 173-184.
[40] Glass, N., Kohli, A., Surkan, P. J., Remy, M. M., & Perrin, N. (2018). The relationship between parent mental health and intimate partner violence on adolescent behavior, stigma and school attendance in families in rural Democratic Republic of Congo. *Global Mental Health, 5,* e20.
[41] Capaldi, D. M., Knoble, N. B., Shortt, J. W., & Kim, H.K. (2012). A systematic review of risk factors for intimate partner violence. *Partner Abuse, 3,* 231-280.
[42] Tengkorang, E. Y., & Owusu, A. Y. (2018). A life course understanding of domestic and intimate partner violence in Ghana. *Child Abuse & Neglect, 79,* 384-394.
[43] Lambourne, W., & Niyonzima, D. (2016). Breaking cycles of trauma and violence: Psychosocial approaches to healing and reconciliation in Burundi. In Pumla Gobodo-Madikizela (Ed.), *Breaking intergenerational cycles of repetition: A global dialogue on historical trauma and memory* (pp. 291-307). Opladen: Barbara Budrich Publishers.
[44] Vinck, P., Pham, P. N., Stover, E., & Weinstein, H. M. (2007). Exposure to war crimes and implications for peace building in northern Uganda. *JAMA, 298(5),* 543-554.
[45] Betancourt, T. S., Agnew-Blais, J., Gilman, S. E., Williams, D. R., & Ellis, B. H. (2010). Past horrors, present struggles: The role of stigma in the association between way experiences and psychosocial adjustment among former child soldiers in Sierra Leone. *Social Science & Medicine, 70,* 17-26.
[46] Denov, M., & Marchand, I. (2014). "One cannot take away the stain": Rejection and stigma among former child soldiers in Colombia. *Peace and Conflict: Journal of Peace Psychology*, 20, 3: 227–240.
[47] Tonheim, M. (2012). 'Who will comfort me?' Stigmatization of girls former associated with armed forces and groups in eastern Congo. *The International Journal of Human Rights, 12(2),* 278-297.
[48] Wessells, M. G. (2006). *Child soldiers: From violence to protection*. Cambridge, MA: Harvard University Press.
[49] World Bank (2018).
[50] World Bank (2018).
[51] Biehl, J., & Locke, P. (2010). Deleuze and the Anthropology of Becoming. Current anthropology, 51(3), 317-351.
[52] Staub (2003).
[53] White, R. K. (1984). *Fearful warriors: A psychological profile of U. S. – Soviet relations*. New

York: Free Press.
[54] ILO. (2010). *The worst forms of child labour, education and violent conflict*. Geneva: Author.
[55] Miller et al. (2017).
[56] Riley, A., Varner, A., Ventevogel, P., Taimur Hasan, M. M., & Welton-Mitchell, C. (2017). Daily stressors, trauma exposure, and mental health among stateless Rohingya refugees in Bangladesh. *Transcultural Psychiatry, 54(3),* 304-331.
[57] Staub, E., Pearlman, L., Gubin, A., & Hagengimana, A. (2005). Healing, reconciliation forgiving and the prevention of violence after genocide or mass killing: An intervention and its experimental evaluation in Rwanda. *Journal of Social and Clinical Psychology, 24(3),* 297-334.
[58] Biricyaza, E., & Habimana, S. (2020). Contribution of community-based sociotherapy interventions for the psychological well-being of Rwandan youths born to democide perpetrators and survivors: analysis of the stories telling of a sociotherapy approach. *BMC Psychology, 8,* 102.
[59] Fuertes, A. (2012). Storytelling and its transformative impact in the Philippines. *Conflict Resolution Quarterly, 29(3),* 333-348.
[60] Hart, B. (2020). Building peace in complex contexts of psychosocial trauma. In J. Funk, N. Good, & M.. E. Berry (Eds)., In *Healing and peacebuilding after war.* New York: Taylor & Francis.
[61] McKay, S., Veale, A., Worthen, M., & Wessells, M. (2011). Building meaningful participation in reintegration among war-affected young mothers in Liberia, Sierra Leone and northern Uganda. *Intervention, 9(2),* 108-124.
[62] Hamber, B. (2021). Transitional justice, mental health and psychosocial support. Draft consultation paper 30 June. Paper submitted to the Renewing the UN Approach to Transitional Justice Project.
[63] Hamber, B. (2009). *Transforming societies after political violence: Truth, reconciliation and mental health*. New York: Springer.
[64] Hamber, B., & Gallagher, E. (Eds.) (2015). *Psychosocial perspectives on peacebuilding*. New York: Springer.
[65] Cilliers, J., Dube, O., & Siddiqi, B. (2016). Reconciling after civil conflict increases social capital but decreases individual well-being. *Science, 352(6287),* 787-794.
[66] Jones, L. (2013). *Then they started shooting: Children of the Bosnian War and the adults they become*. New York: Bellevue Literary Press.
[67] Boothby, N. G., & Knudsen, C. (2000). Children of the gun. *Scientific American, 282(6),* 60-65.
[68] Anderson, M. B. (1999). *Do No Harm: How aid can support peace—or war*. Bounder, CO: Lynnne Rienner.
[69] Hijazi, Z., & Weissbecker, I. (2015). *Syria crisis: Addressing regional mental health needs and gaps in the context of the Syria crisis.* Washington, DC: International Medical Corps.
[70] Bubenzer et al. (2017b).
[71] Hamber et al. (2014).
[72] UNDP (2021).
[73] Federer, J. P., Pickhardt, J., Lustenberger P., Altpeter, C., & Abatis, K. (2019). *Beyond the tracks? Reflections on multitrack approaches to peace processes.* Zürich: Centre for Humanitarian Dialogue.
[74] Wessells, M., & van Ommeren, M. (2008). Developing inter-agency guidelines on mental health and psychological support in emergency settings. *Intervention, 6(3/4),* 199-218.
[75] IASC. (2007). *IASC Guidelines on Mental Health and Psychosocial Support in Emergency Settings*. Geneva: Author.
[76] Bubenzer, F., van der Walt, S., & Tankink, M. (2017). *Mapping global practice: Healing Communities, transforming society. Mental health, psychosocial support and peacebuilding*. Cape Town: Institute for Social Justice and War Trauma Foundation.
[77] Reimann, C. (2021). *GIZ reflection paper on the nexus of MHPSS and peacebuilding*. Unpublished paper.
[78] Kingdom of the Netherlands. (2020). *Mind the past to build the future: Integrating MHPSS in peacebuilding.*
[79] UNDP (2022a). *Integrating mental health and psychosocial support into peacebuilding: Summary report of data collected*. New York: Author. Retrieved from https://www.undp.org/publications/integrating-mental-health-and-psychosocial-support-peacebuilding
[80] UNDP. (2022b). *Integrating mental health and psychosocial support into peacebuilding: Guidance note*. New York: Author. Retrieved from https://www.undp.org/publications/integrating-mental-health-and-psychosocial-support-peacebuilding
[81] Hamber et al. (2015).
[82] Bubenzer et al. (2017a).
[83] Bubenzer et al. (2017b).

[84] UNICEF. (2022). *Global multisectoral operational framework*. New York: Author.
[85] Mercado, L. (2021, October 20). *The Battle of Marawi virtual art exhibit (updated). Lan Mercado. 20 October 2021.* [Video]. YouTube. Retrieved from https://www.youtube.com/watch?v=ijSn_jJ6dWo&ab_channel=LanMercado
[86] Simpson, G. (2018). *The Missing Peace: Independent progress study on Youth, Peace, and Security*. UNFPA & PBSO. Retrieved from https://unoy.org/downloads/the-missing-peace/
[87] Izsák-Ndiaye, R. (2021). *If I disappear: Global report on protecting young people in civic space.* Office of the Secretary-General's Envoy on Youth. Retrieved from https://unoy.org/downloads/if-i-disappear-global-report-on-protecting-young-people-in-civic-space/
[88] Yoshida et al. (2021).
[89] Simpson (2018).
[90] Berents, H. (2020). *Thinking intergenerationally: WPS and the Youth, Peace and Security agenda.* Retrieved from https://reliefweb.int/report/world/thinking-intergenerationally-wps-and-youth-peace-and-security-agenda
[91] Merkel, K., & O'Neill, K. (2021). *Thematic review on gender-responsive peacebuilding.* UN Peacebuilding Fund. Retrieved from https://www.un.org/peacebuilding/sites/www.un.org.peacebuilding/files/documents/gender_thematic_review_2021_23_nov.pdf
[92] Simpson (2018).
[93] UN Security Council Resolution 1325 (2000), S/RES/2250 (9 December, 2015), available from http://unscr.com/en/resolutions/2042
[94] World Bank (2018)
[95] UN Women. (2015). *Preventing conflict, transforming justice, securing peace: Global study on the implementation of United Nations Security Council Resolution 1325.* New York: Author.
[96] UNEP, UN Women, UN PBSO & UNDP. (2013). *Women and natural resources: Unlocking the peace building potential.* Retrieved from: https://wedocs.unep.org/20.500.11822/8373
[97] Elman Peace. (2021). *Ocean therapy.* Retrieved from http://elmanpeace.org/our-work/ocean-therapy/
[98] Simpson (2018).
[99] Yoshida et al. (2021).
[100] Irish Consortium on Gender Based Violence. (2022). *Gender based violence and its intersection with climate change.*
[101] UN Women. (2022). *Tackling violence against women and girls in the context of climate change.* Retrieved from https://www.unwomen.org/en/digital-library/publications/2022/03/tackling-violence-against-women-and-girls-in-the-context-of-climate-change
[102] Yoshida et al. (2021).
[103] UN Security Council Resolution 2250 (2015), S/RES/1325 (31 October, 2000), available from https://undocs.org/S/RES/2250
[104] Simpson (2018).
[105] World Bank (2018).
[106] UN Secretary-General. (2020). *Youth and peace and security: Report of the Secretary-General.* New York: UN. Retrieved from: https://digitallibrary.un.org/record/3855975?ln=en
[107] Sanson, A. V., Van Hoorn, J., & Burke, S. E. (2019). Responding to the impacts of the climate crisis on children and youth. *Child Development Perspectives*, *13*(4), 201-207.
[108] Roesch, J.L., & Rahmaty, M. (2021, December 9). *Including youth in peace and climate decision-making.* International Peace Institute. Retrieved from: https://theglobalobservatory.org/2021/12/including-youth-in-peace-and-climate-decision-making/
[109] Duriesmith, D. (2017, December 15). *Engaging men and boys in the Women, Peace and Security agenda: Beyond the 'good men' industry.* London School of Economics Centre for Women, Peace and Security. Retrieved from: https://blogs.lse.ac.uk/wps/2017/12/15/engaging-men-and-boys-in-the-women-peace-and-security-agenda-beyond-the-good-men-industry-david-duriesmith-112017/
[110] Darwish, S. & Close, S. (2021). *Integrating masculinities in peacebuilding: Shifting harmful norms and transforming relationships.* London: Conciliation Resources.
[111] Darwish, S. & Close, S. (2021).
[112] Merkel et al. (2021).
[113] Solangon, S., & Patel, P. (2012). Sexual violence against men in countries affected by armed conflict. *Conflict, Security & Development*, *12*(4), 417-442.

[114] Sivakumaran, S. (2007). Sexual violence against men in armed conflict. *European Journal of International Law*, *18*(2), 253-276.
[115] UN Security Council Resolution 2467 (2019), S/RES/2467(2019) (23 April, 2019), available from https://undocs.org/S/RES/2467(2019)
[116] Women's Refugee Commission. (2021). *Addressing sexual violence against men, boys, and LGBTIQ+ persons in humanitarian settings: A field-friendly guidance note by sector.* New York: Author.
[117] Darwish et al. (2021).
[118] Simpson (2018).
[119] Duriesmith (2017).
[120] Simpson (2018).
[121] Merkel et al. (2021).
[122] Izsák-Ndiaye (2021).
[123] Darwish et al. (2021).
[124] Youth Consultation, trans-identifying young person, Sri Lanka
[125] Global Network of Women Peacebuilders. (2021). Philippines: Social media advocacy & human rights. Retrieved from https://gnwp.org/philippines/
[126] Merkel et al., K. & O'Neill, K. (2021).
[127] Key Informant Interview, young woman, Kashmir
[128] UNDP. (2022c).Uncertain times, unsettled lives: Shaping our future in a transforming world. Human Development Report 2021/2022. New York: Author. Retrieved from https://hdr.undp.org/content/human-development-report-2021-22
[129] IPPC. (2022). *Climate change 2022: Impacts, adaptation and vulnerability.* Retrieved from: https://www.ipcc.ch/report/ar6/wg2/
[130] Middleton, J., Cunsolo, A., Jones-Bitton, A., Wright, C. J., & Harper, S. L. (2020). Indigenous mental health in a changing climate: a systematic scoping review of the global literature. *Environmental Research Letters*, *15*(5), 053001.
[131] Smith, J. M., Olosky, L., & Fernandez, J. G. (2021). *The climate-gender-conflict nexus.* Washington D.C.: Georgetown Institute for Women, Peace and Security.
[132] Smith et al. (2021).
[133] MAIA Impact. (2019). *MAIA Impact – Home.* Retrieved from https://www.maiaimpact.org/home-impact
[134] MAIA Impact (2019).
[135] Contreas, R. (2021). *Women as actors for climate adaptation in Guatemala.* Medium. Retrieved from https://medium.com/una-nca-snapshots/women-as-actors-for-climate-change-in-guatemala-aea24142b1f6
[136] Pacific Conference of Churches. (2019). Statement to 3rd climate action Pacific partnership conference. *Pacific Partnership Conference.* Retrieved from https://www.pacificconferenceofchurches.org/resources/media-statements/
[137] Ruvalcaba A., & Kumskova, M. (2021, March 2). *Peacebuilding in the era of climate change: What are the most urgen needs?* Retrieved from https://www.gppac.net/news/peacebuilding-era-climate-change-what-are-most-urgent-needs
[138] Bird, C., Saiki, A., & Ratunabuabua. (2020). *Reweaving the ecological mat frakework: Toward an ecological framework for development.* Republic of Fiji: Pacific Theological College. Retrieved from https://www.pacificconferenceofchurches.org/resources/books-publications/
[139] Ide, T., Bruch, C., Carius, A., Conca, K., Dabelko, G. D., Matthew, R., & Weinthal, E. (2021). The past and future (s) of environmental peacebuilding. *International Affairs*, *97*(1), 1-16.
[140] Ken Conca, 'The case for environmental peacemaking', in Ken Conca and Geoffrey Dabelko, eds, *Environmental peacemaking* (Baltimore: Johns Hopkins University Press, 2002), pp. 1–22 at p. 9.
[141] Enviornmental Peacebuilding Association, UNEP, UNDP, UN Women, & UNDPPA/PBSO. (2020). *Gender, climate & security: Sustaining inclusive peace on the frontlines of climate change.* Geneva: Author. Retrieved from https://gender-nr-peace.org/gender-climate-security
[142] Rahmaty, M., & Roesche, J.L. (2021, December 9). *Including youth in peace and climate decision-making.* IPI Global Observatory. Retrieved from https://theglobalobservatory.org/2021/12/including-youth-in-peace-and-climate-decision-making/
[143] Yoshida et al. (2021).
[144] IOM (2021, September 17). *IOM's first psychosocial counselling master's degree in Nigeria aims to benefit victims of conflict.* Retrieved from https://unofficeny.iom.int/news/ioms-first-psychosocial-counselling-masters-degree-nigeria-aims-benefit-victims-conflict

[145] IOM. (2014, September 19). *Syria: Executive professional Masters in psychosocial support and dialouge* [Video]. YouTube. Retrieved from https://www.youtube.com/watch?v=Roat85n9n5s&t=283s&ab_channel=IOM-UNMigration
[146] IASC (2007).
[147] Juncos, A. E., & Joseph, J. (2020). Resilient peace: Exploring the theory and practice of resilience in peacebuilding interventions. *Journal of Intervention and Statebuilding, 14(3)*, 289-302.
[148] Ungar, M. (2021). Mapping the resilience field: A systemic approach. In J. N. Clark & M. Ungar (Eds.), *Resilience, adaptive peacebuilding and transitional justice: How societies recover after collective violence* (pp. 23-45). Cambridge: Cambridge University Press.
[149] Interpeace. (2016). *Practice brief: Resilience and peacebuilding. Using resilience to build peace*. Guatemala: Interpeace Regional Office for Latin America.
[150] IASC Reference Group for Mental Health and Psychosocial Support in Emergency Settings. (2019). *Community-based approaches to MHPSS programmes: A guidance note*. Geneva: Author.
[151] UNICEF. (2018). *Community-based mental health and psychosocial support in humanitarian settings*. New York: Author.
[152] IASC. (2015). *Guidelines for integrating gender-based violence interventions in humanitarian action*. Geneva: Author.
[153] Meinhart et al. (2021).
[154] Anderson (1999).
[155] Macinko et al. (2001).
[156] Mpanje, D., Gibbons, P., & McDermott, R. (2018). Social capital invulnerable urban settings: an analytical framework. *Journal of International Humanitarian Action, 3*, 4.
[157] The Psychosocial Working Group (2003). *Psychosocial intervention in complex emergencies: A conceptual framework.* Edinburgh: Queen Margaret University College.
[158] Flores, E. C., Fuhr, D. C., Bayer, A. M., Lescano, A. G., Thorogood, N., & Simms, V. (2018). Mental health impact of social capital interventions: a systematic review. *Social Psychiatry and Psychiatric Epidemiology, 53(2)*, 107-119.
[159] Galtung, J. (1969). Violence, peace and peace research, *Journal of Peace Research, 6(3)*, 167-191.
[160] Flores et al. (2018).
[161] Ehsan, A. Klaas, H. S., Bastianen, A., & Spini, D. (2019). Social capital and health: A systematic review of systematic reviews. *Social Science & Medicine, 8*, 100425.
[162] Burns, J. K. (2015). Poverty, inequality, and a political economy of mental health. *Epidemiology and Psychiatric Sciences, 24*, 107-113.
[163] Division of Diversity and Health Equity. (2017). *Mental health disparities: African Americans.* American Psychiatric Association. Retrieved from https://www.psychiatry.org/File%20Library/Psychiatrists/Cultural-Competency/Mental-Health-Disparities/Mental-Health-Facts-for-African-Americans.pdf
[164] Maternowska, M. C., Fry, D., Potts, A., & Casey, T. (2019). Beyond risk factors: Structural drivers of violence affecting children. In N. Balvin & D. J. Christie (Eds.), *Children and peace: From research to action* (pp. 141-156). Cham, Switzerland: Springer.
[165] Wessells, M. G., & Kostelny, K. (2021). Understanding and ending violence against children: A holistic approach. *Peace & Conflict: Journal of Peace Psychology, 27(1)*, 3-23.
[166] Abramsky, T., Devries, K., Kiss, L., Nakuti,J., Kyegombe, N., Starmann, E., Cundill, B., Francisco, L., Kaye, D., Musuya, T., Michau, L., & Watts, C. (2014). Findings from the SASA! study and cluster randomized controlled trial to assess the impact of a community mobilization intervention to prevent violence against women reduce HIV risk in Kampala, Uganda. *BMC Medicine, 12*, 122.
[167] Vernon, P. (2019). *Local peacebuilding: What works and why*. London: Peace Direct.
[168] Montero, M., & Sonn, C. C. (2009). *Psychology of liberation: Theory and applications*. New York: Springer Science and Business.
[169] Lykes, M. B. (2000). Possible contributions of a psychology of liberation: Whither health and human rights? *Journal of Health Psychology, 5(3)*, 383–397.
[170] Martin-Baró, I. (1994). *Writings for a liberation psychology*. (Edited by Adrianne Aron & Shawn Corne). Cambridge, MA: Harvard University Press.
[171] Suffla, S., Seedat, M., & Bawa, U. (2015). Reflexivity as enactment of critical community psychologies: Dilemmas of voice and positionality in a multi-country photovoice study. *Journal of Community Psychology, 43(1)*, 9-21.

[172] Anderson (1999).
[173] Macinko, J., & Starfield, B. (2001). The utility of social capital in research on health determinants. *The Milbank Quarterly, 79(3)*, 387-427.
[174] Mpanje et al. (2018).
[175] Hart et al. (2014).
[176] Hamber et al. (2015).
[177] Hertog (2017).
[178] Tankink, M., Bubenzer, F., & van der Walt, S. (2017). *Peacebuilding and mental health and psychosocial support: A review of current theory and practice.* Cape Town: Institute for Justice and Reconciliation and War Trauma Foundation.
[179] Al Ramiah, A., & Hewstone, M. (2013). Intergroup contact as a tool for reducing, resolving, and preventing intergroup conflict: evidence, limitations, and potential. *American Psychologist, 68(7)*, 527-542.
[180] Deutsch, M. (1975). *The resolution of conflict: Constructive and destructive processes*. New Haven: Yale University Press.
[181] Bar-Tal et al. (2014).
[182] Bandura, A. (2001). Social cognitive theory: An agentic perspective. *Annual Review of Psychology, 52*, 1-26.
[183] Hobfoll, S., Watson, P., Bell, C. et al. (2007). Five essential elements of immediate and mid-term mass trauma intervention: Empirical evidence. *Psychiatry, 70(4)*, 283-315.
[184] Wessells, M. G. (2015). Bottom-up approaches to strengthening child protection systems: Placing children, families, and communities at the center. *Child Abuse & Neglect: The International Journal, 43*, 8-21.
[185] Drury, J. (2012). Collective resilience in mass emergencies and disasters: A social identity model. In J. Jetten, C. Haslam, & S. A. Haslam (Eds.), *The social cure: Identity, health and well-being* (pp. 195-215). Psychology Press.
[186] Saul, J. (2013). *Collective trauma, collective healing: Promoting community resilience in the aftermath of disaster*. Routledge psychosocial stress series. New York: Taylor & Francis.
[187] Ide et al. (2021).
[188] Smith et al. (2021).
[189] Galtung (1969).
[190] Mazurana, D., & Mckay, S. (2001). Women, girls, and structural violence: A global analysis. In D. Christie, Wagner, R. V., & D. A. Winter (Eds.), *Peace, conflict, and violence: Peace psychology for the 21st century*. Englewood Cliffs, NJ: Prentice-Hall.
[191] Kelly, L. (1987). The continuum of sexual violence. In Hanmer, J. & Maynad, M. (Eds.), *Women, violence and social control* (pp. 46-66). London: Macmillan.
[192] Creswell, J. W., & Plano Clark, V. L. (2018). *Designing and conducting mixed methods research, 3rd ed.* Thousand Oaks, CA: SAGE.
[193] Lederach, J. P. (1996). *Preparing for peace: Conflict transformation across cultures*. Syracuse: Syracuse University Press.
[194] de Sousa Santos, B. (2014). *Epistemologies of the South: Justice against epistemicide*. London: Paradigm Publishers.
[195] Murithi, T. (2006). Practical peacemaking wisdom from Africa: Reflections on Ubuntu. The *Journal of Pan African Studies, 1(4)*, 25-34.
[196] Twikirize, J. M., & Spitzer, H. (Eds.). (2019). *Social work practice in Africa: Indigenous and innovative approaches*. Fountain Publishers.
[197] Wessells, M.G. (2015). Bottom-up approaches to strengthening child protection systems: Placing children, families, and communities at the center. *Child Abuse & Neglect: The International Journal,* 43, 8–21.
[198] Wessells, M. G. (2018). *A guide for supporting community-led child protection processes*. New York: Child Resilience Alliance.
[199] Ventevogel, P., Jordans, M., Reis, R., and de Jong, J. (2013). Madness or sadness? Local concepts of mental illness in four conflict-affected African communities. *Conflict and Health* 7 (3).
[200] Song, S. J., & Ventevogel, P. (2020). Principles of the mental health assessment of refugee adolescents and children. In S. J. Song & P. Ventevogel (Eds.), *Child adolescent and family refugee mental health* (pp. 69-80). Cham, Switzerland: Springer.
[201] Wessells (2018).
[202] Escobar-Tello, M. C., Ruette-Orihuela, K., Gough, K. V., Fayad-Sierra, J. A., & Velez-Torres, I. (2021). Decolonising design in peacebuilding contexts. *Design Studies, 73*, 101001

[203] Tunstall, E. D. (2020). Decolonizing design innovation: Design anthropology, critical anthropology, and indigenous knowledge. In *Design Anthropology* (pp. 232-250). Routledge.
[204] Escobar, A. (2017). Response: Design for/by [and from] the 'global South'. *Design Philosophy Papers*, *15*(1), 39-49.
[205] Escobar-Tello et al. (2021).
[206] Simpson (2018).
[207] UN Secretary General. (2020). *Youth and peace and security: Report of the Secretary General*. New York: UNSC S/2020/167.
[208] Lederach, J. P. (1997). *Building peace: Sustainable reconciliation in divided societies*. Washington, DC: United States Institute for peace.
[209] Lederach (1997).
[210] Kelman, H.C. (1997). Group processes in the resolution of international conflicts: Experiences from the Israeli-Palestinian case. *American Psychologist*, 52, 212–220.
[211] Fisher, R. J. (1997). *Interactive conflict resolution*. Syracuse, NY: Syracuse University Press.
[212] Meagher, K., Mkhallalati, H., El Achi, N., & Patel, P. (2022). A missing piece in the Health for Peace agenda: gender diverse leadership and governance. *BMJ Global Health, 7*, e007742.
[213] World Bank (2018).
[214] UN Peacebuilding Support Office. (2017). *What does "sustaining peace" mean?* New York: Author.
[215] IASC (2007)
[216] UNDP (2022b).
[217] United Nations. (2011). *United Nations Declaration on the Rights of Indigenous Peoples.*
[218] Page, M. J., McKenzie, J. E., Bossuyt, P. M., Boutron, I., Hoffman, T. C., Mulrow, C. D., et al. (2021). The PRISMA 2020 statement: an updated guideline for reporting systematic reviews. *Systematic Reviews, 10*, 89.
[219] Human Rights Watch (2021). *World Report2021*. New York: Author.
[220] López López, W., Pineda-Marín, C., Correa-Chica, A., Rincón-Unigarro, C., & Silva, L. M. (2021). Psychology of peace: Findings and challenges for the multidimensional transformation of violent social practices. In C. Zŭñiga & W. López López (Eds.), *Political psychology in Latin America* (pp. 133-150). Washington, D. C.: American Psychological Association.
[221] López López et al. (2021).
[222] Human Rights Watch (2021).
[223] WOLA. (2012, January 30). *"Consolidation," land restitution, and rising tensions in Montes de María.* Retrieved from https://www.wola.org/analysis/consolidation-land-restitution-and-rising-tensions-in-montes-de-maria/
[224] Human Rights Watch (2021).
[225] León-Giraldo, S., Casas, G., Cuervo-Sanchez, J. S., González-Uribe, Bernal, O., Moreno-Serra, R., & Suhrcke, M. (2021). Health in conflict zones: Analyzing inequalities in mental health in Colombian conflict-affected territories. *International Journal of Public Health, 66*, 595311.
[226] Villa-Gomez, J. D., et al. (2019). Social and political emotions in the construction and the obstruction of peace in citizens of middle-high social stratum in the City of Bogota. Ágora. *The USB Agora, 19*(2):352-371. Retrieved from https://doi.org/10.21500/16578031.4393
[227] Human Rights Watch (2021)
[228] López López et al. (2021).
[229] Kelly, J., & Davis, M. (2020). *Community-based trauma healing: Literature review and opportunities in Colombia*. Washington, D. C.: USAID.
[230] Fiore, B. (2021, September 8). *The arts collective landscaping the future of Medellín.* Agroarte Colombia. Retrieved from https://atlasofthefuture.org/project/agroarte-colombia/
[231] UN Women. (2020, October 13). *Indigenous women in Colombia-Ecuador border are leading community efforts to end violence against women.* Retrieved from https://www.unwomen.org/en/news/stories/2020/10/feature-indigenous-women-lead-efforts-to-end-violence-against-women-in-colombia
[232] Fundación CRAN. (2021). *The issue: Recruitment into armed groups and reintegration into society.* Retrieved from https://www.childrenchangecolombia.org/en/what-we-do/current-partners/fundacion-cran
[233] Interpeace. (2021). *Where we work: Colombia.* Retrieved from https://www.interpeace.org
[234] Pozzebon, S. (2021). Colombia's indigenous activists protect the environment. Now the too are under threat. *CNN*. Retrieved from https://www.cnn.com/2021/11/23/americas/colombia-environment-climate-activists-intl-latam/index.html

[235] López López et al. (2021).
[236] Rodríguez, S. S., & Montero, M. (Eds.). (2014). *Psychosocial approaches to peacebuilding in Colombia*. New York: Springer.
[237] Bouvier, V. M. (2016). *Gender and the role of women in Colombia's peace process*. Washington, DC: U. S. Institute of Peace.
[238] Human Rights Watch (2021).
[239] Bouvier (2016).
[240] Devia-Valbuena, N., Carlos Ramirez, C., & Vargas, D. (2021). Women build peace in Colombia's turbulent Pacific region. Retrieved from https://usip.org/blog/2021/10/women-build-peace-colombias-turbulent-pacific-region
[241] UNDP, UN Peacebuilding, UN Volunteers, & UNFPA. (2017). *Colombian national consultation for the progress study on youth, peace, and security*. New York: Author.
[242] USAID, Search for Common Ground, & ACDI VOCA. (2018). *Peacebuilding in Colombia: A Youth Perspective*. Washington, DC: Author.
[243] USAID et al. (2018).
[244] Human Rights Watch. (2021). *Philippines.* Retrieved from https://www.hrw.org/asia/philippines
[245] BBC (2018). Philippines profile – Timeline. Retrieved from https://www.bbc.com/news/world-asia-15581450
[246] Sanchez, M. J. (2021, February). *The People Power Revolution, Philippines 1986.* The Ohio State University. Retrieved from https://origins.osu.edu/milestones/people-power-revolution-philippines-1986
[247] Rubin, M. A. (2020). Rebel territorial control and civilian collective action in civil war: Evidence from the communist insurgency in the Philippines. *Journal of Conflict Resolution*, *64*(2-3), 459-489.
[248] Santos Jr., S.M. (2005). *Evolution of the armed conflict on the communist Front.* Human Development Network Foundation Inc. Retrieved from https://hdn.org.ph/wp-content/uploads/2005_PHDR/2005%20Evolution_Communist_Conflict.pdf
[249] Dwyer, L. & Cagoco-Guiam, R. (n.d.). *Gender and conflict in Mindanao.* The Asia Foundation. Retrieved from https://www.ndi.org/sites/default/files/Gender%20and%20Conflict%20in%20Mindanao.pdf
[250] Transitional Justice and Reconciliation Commission [TJRC]. (2016). *Report of the transitional justice and reconciliation commission.* Makati City, Philippines: Author. Retrieved from https://www2.unwomen.org/-/media/field%20office%20eseasia/docs/publications/2016/10/tjrc%20report.pdf?la=en&vs=4426
[251] UNDP Philippines. (2013, July 24). *Fast facts: Indigenous Peoples in the Philippines.* Retrieved from https://www.ph.undp.org/content/philippines/en/home/library/democratic_governance/FastFacts-IPs.html#:~:text=The%20Philippines%20is%20a%20culturally,groups%20in%20the%20Visayas%20area.
[252] International Crisis Group. (2016). *The Philippines: Renewing prospects for peace in Mindanao.* Retrieved from https://www.refworld.org/pdfid/577e22114.pdf
[253] Banlaoi, R., C. (2020, May 15). Terrorism in the Philippines during the pandemic: Persistent threats three years after Mawari Seige – Analysis. *EurasiaReview.* Retrieved from https://www.eurasiareview.com/15052020-terrorism-in-the-philippines-during-the-pandemic-persistent-threats-three-years-after-marawi-siege-analysis/#comments
[254] Abuza, Z., & Lischin, L. (2020). *The challenges facing the Philippines' Bangsamoro Autonomous Region at one year*. US Institute of Peace. Retrieved from https://www.jstor.org/stable/pdf/resrep24906.pdf?refreqid=excelsior%3A3610d113bd8f454e75c6f94b71501d64
[255] WFP Philippines. (2021). *Armed conflict in Midanao situation report #1.* Retrieved from https://reliefweb.int/sites/reliefweb.int/files/resources/EXTERNAL%20Situation%20Report%20%231%20BARMM%20Armed%20Conflict%20-%2030%20March%202021.pdf
[256] TJRC (2016).
[257] Lally, J., Samaniego, R.M., & Tully, J. (2019). Mental health legislation in the Philippines: Philippine mental health act. *BJPsych international*, *16*(3), 65-67.
[258] Malolos, G. Z. C., Baron, M. B. C., Apat, F. A. J., Sagsagat, H. A. A., Pasco, P. B. M., Aportadera, E. T. C. L., ... & Lucero-Prisno III, D. E. (2021). Mental health and well-being of children in the Philippine setting during the COVID-19 pandemic. *Health Promotion Perspectives*, *11*(3), 267.
[259] OCHA. (2021). *Philippines COVID-19 humanitarian response plan: Final progress report (June 2021).* Retrieved from https://reliefweb.int/report/philippines/philippines-covid-19-humanitarian-response-plan-final-progress-report-june-2021
[260] Pena, K. D. (2021). The crisis within: Suicides rise as COVID takes its toll on lives, livelihoods. *Inquirer.Net* Retrieved from https://newsinfo.inquirer.net/1506903/the-crisis-within-suicides-rise-as-covid-takes-its-toll-on-lives-livelihood
[261] OCHA (2021).

[262] TJRC. (2017). *Listening process report 2017.* Makati City, Philippines: Author. Retrieved from http://cdn.viiworksdemo.com/pdf/bjov-TJRC%20Listening%20Process%20Report.pdf
[263] TJRC (2016).
[264] Dwyer et al. (n.d.).
[265] Survey response, The Psychosocial Support and Children's Rights Resource Center
[266] Survey response, LGBTQIA+ young person
[267] ICRC (2021, May 26). *4 years since Marawi conflict: Families honor missing loved ones.* Retrieved from https://www.icrc.org/en/document/4-years-marawi-conflict-families-honor-missing-loved-ones
[268] UNDP Crisis Bureau. (2020). *Annual report on prevention of violent extremism.* New York: United Nations. Retrieved from https://www.undp.org/sites/g/files/zskgke326/files/2021-12/UNDP-Annual-Report-on-Prevention-of-Violent-Extremism.pdf
[269] Survey response, woman, International Association of Human Values Philippines.
[270] UNDP Philippines, and Bangsamoro Women Commission [BWC]. (2021, November). "MHPSS in Peacebuilding in the BARMM" joint-event by UNDP and BWC, Philippines.
[271] Pe-Pua, R., & Protacio-Marcelino, E. A. (2000). Sikolohiyang Pilipino (Filipino psychology): A legacy of Virgilio G. Enriquez. *Asian Journal of Social Psychology*, *3*(1), 49-71.
[272] Freire, P. (1968). Pedagogy of the Oppressed. *New York: Continuum.*
[273] Lawson, M. (1991). N.F.S. Grundtvig: Selected Educational Writings. *The International People's College and The Association of Folk High Schools in Denmark.* Retrieved from https://danishfolkhighschools.com/media/17341/grundtvig_selected_educational_writings.pdf
[274] Dela Torre, E. (2020, February 2). *To learn from life, for life, throughout your lifetime.* The Association of Folk High Schools in Denmark. Retrieved from https://danishfolkhighschools.com/stories/2020/to-learn-from-life-for-life-throughout-your-lifetime
[275]Dwyer et al. (n.d.).
[276] Kubato, M., & Takashi, N. (2016). *Case study on Mindanao the Philippines: Women's participation and leadership in peacebuilding.* Japan International Cooperation Agency and Georgetown Institute for Women, Peace and Security. Retrieved from https://www.jica.go.jp/jica-ri/publication/booksandreports/l75nbg00000697z9-att/JICA_MindanaoLO.pdf
[277] Philippine Commission on Women. (2020). *Gender equality and women's empowerment plan 2019-2025.* Retrieved from https://pcw.gov.ph/assets/files/2020/05/GEWE-Plan-2019-2025-Results-Matrices.pdf?x12374
[278] Amnesty International. (2019). *'They Just Kill': Ongoing extrajudicial executions and other violations in the Philippines' 'War on Drugs'.* London: Author. Retrieved from https://www.justice.gov/eoir/page/file/1180791/download
[279] TJRC (2016).
[280] Dwyer et al. (n.d.).
[281] Kubato et al. (2016).
[282] Dwyer et al. (n.d.).
[283] Kubato et al. (2016).
[284] Global Network of Women Peacebuilders. (n.d.). *Global appeal on the Marawi Siege, extra judicial killings, and human rights violations in the Philippines.* Retrieved from https://gnwp.org/wp-content/uploads/Global-Appeal-on-Philippines_December-7.pdf
[285] Lopez, E. (2017, October 31). A different Undas: Remembering the victims of the drug war. *Rappler.* Retrieved from https://www.rappler.com/nation/186897-different-undas-remembrance-victims-drug-war-sampaloc/
[286] Bangsamoro Women Commission. (2021, November 9). *Bangsamoro Women Commission: Developing An Integrated Approach to Peacebuilding and Mental Health Psychosocial Support.* Presentation at the "MHPSS in Peacebuilding in the BARMM" joint-event by UNDP and BWC, Philippines.
[287] UNDP. (2021, December 2). *The Netherlands and UNDP launch mental health and psychosocial support in peacebuilding initiative with Bangsamoro women leaders.* UNDP Philippines. Retrieved from https://www.ph.undp.org/content/philippines/en/home/presscenter/pressreleases/the-netherlands-and-undp-launch-mental-health-and-psychosocial-s.html
[288] UNDP. (2021). *Women insider mediators platform.* UNDP Asia and the Pacific. Retrieved from https://www1.undp.org/content/tolerance-and-diversity/en/home/WomenInsiderMediatorsPH.html
[289] TJRC (2016).
[290] Lelis Jr., R.P. (2021, November 09). *COPERS: A Snapshot.* Presentation at the "MHPSS in Peacebuilding in the BARMM" joint-event by UNDP and BWC, Philippines.
[291] Pe-Pua, R et al. (2000).

[292] ICRC. (2021, June 28). *Philippines: How we're helping build a stronger mental health workforce in Mindanao.* Retrieved from https://reliefweb.int/report/philippines/philippines-how-were-helping-build-stronger-mental-health-workforce-mindanao
[293] TJRC (2016).
[294] Britannica. (2022). South Sudan. Retrieved from https://www.britannica.com/place/South-Sudan/Sudanese-independence-and-civil-war
[295] Britannica (2022).
[296] BBC. (2018). South Sudan profile – Timeline. Retrieved from https://www.bbc.com/news/world-africa-14019202
[297] Britannica. (2022).
[298] Amnesty International. (2022). *South Sudan 2021*. Retrieved from https://www.amnesty.org/en/location/africa/east-africa-the-horn-and-great-lakes/south-sudan/report-south-sudan/
[299] ECHO. (2015, August 28). *Peace agreement brings new hope for South Sudan.*Retrieved from https://reliefweb.int/report/south-sudan/peace-agreement-brings-new-hope-south-sudan
[300] Clayton, J. (2015, August 28). *UNHCR welcomes signing of South Sudan peace deal.* Retrieved from https://reliefweb.int/report/south-sudan/unhcr-welcomes-signing-south-sudan-peace-deal-refugee-and-idp-numbers-surpass-26
[301] Murphy, M., Blackwell, A., Ellsberg, M., & Contrearas, M. (2017). *No safe place: A lifetime of violence for conflict-affected women and girls in South Sudan*. USA: IRC & GWI.
[302] UNMISS. (2015, August 31). *UNMISS "Protection of Civilians" (PoC) sites.* Retrieved from https://reliefweb.int/report/south-sudan/unmiss-poc-update-no-89
[303] Amnesty International (2022).
[304] BBC (2018).
[305] Liaga, E.A. (2021). *South Sudan's transitional government: Realities, challenges and opportunities.* South Africa: ISS. Retrieved from https://issafrica.org/research/east-africa-report/south-sudans-transitional-government-realities-challenges-and-opportunities
[306] World Bank. (2022). *The World Bank in South Sudan.* Retrieved from: https://www.worldbank.org/en/country/southsudan/overview
[307] Liaga (2021).
[308] Liaga (2021).
[309] OCHA. (2022a). *Humanitarian response plan: South Sudan.*
[310] SFCG. (2021). PBF/IRF-328: Strengthening young women's participation in local and national peace processes in South Sudan. Retrieved from https://mptf.undp.org/project/00119222
[311] OCHA (2022a).
[312] OCHA (2022a).
[313] Amnesty International. (2016). *"Our hearts have gone dark": The mental health impact of South Sudan's conflict.* Retrieved from https://www.amnesty.org/en/documents/afr65/3203/2016/en/
[314] SFCG (2021).
[315] Murphy, M., Blackwell, A., Ellsberg, M., & Contrearas, M. (2017). *No safe place: A lifetime of violence for conflict-affected women and girls in South Sudan*. USA: IRC & GWI.
[316] Amnesty International (2016).
[317] Atim, R. (2022, March 4). *Providing emotional support through remote mental health and psychosocial support.* IOM. Retrieved from https://southsudan.iom.int/stories/providing-emotional-support-through-remote-mental-health-and-psychosocial-support
[318] IOM. (2022). *Mental health and psychosocial support.* Retrieved from https://southsudan.iom.int/mental-health-and-psychosocial-support
[319] Nersisian, D., Ragueneau, M., Heide, R., & Schinina, G. (2021). Community-based approaches to MHPSS. *Forced Migration Review,* (66): 31-33.
[320] ACPHA. (2020). *Technical note: Girls associated with armed forces and armed groups: Lessons learnt and good practices on prevention of recruitment and use, release and reintegration.* Retrieved from https://alliancecpha.org/en/GAAFAG
[321] CRS. (2018, September 8). *Building peaceful, resilient communities in South Sudan.* Retrieved from https://catholicreliefservices.exposure.co/building-peaceful-resilient-communities-in-south-sudan
[322] Survey response, male, South Sudan
[323] HealthNetTPO. (2022). *Leaders of peace in South Sudan.* Retrieved from https://www.healthnettpo.org/en/project/leaders-peace-south-sudan

[324] IOM & UNESCO. (2021). PBF/IRF-328: Youth action for reduced violence and enhanced social cohesion in Wau, South Sudan. Retrieved from https://mptf.undp.org/project/00118940
[325] IOM, UNICEF, and South Sudan Ministry of Health, & South Sudan MHPSS Technical Working Group. (2021). *Symposium report: Dialogue on mental health needs and MHPSS services in South Sudan.*
[326] Tongun, A., Zingbondo, J., Lijnders, L., Yangi, R., Ameyu, S., Fai, S., Amal, V., & Malith, Z. (2018). Socio-cultural perceptions on violence, suffering, and mental health in South Sudan. *Justice and Peace Brief, (1).*
[327] Tongun et al. (2018).
[328] Consultation, male, South Sudan
[329] Key Informant Interview, male, South Sudan
[330] Key Informant Interview, women, South Sudan
[331] Tongun et al. (2018).
[332] Tongun et al. (2018).
[333] Tongun et al. (2018).
[334] Key Informant Interview, female, South Sudan
[335] Consultation, woman, South Sudan
[336] IOM et al. (2021).
[337] South Sudan Council of Churches. (2019). *Community based trauma healing manual: Training curriculum and tools for the South Sudan Council of Churches (SSCC) based on the SSCC capacity strengthening framework (CSF).* Juba: SSCC.
[338] Survey response, male, 2022
[339] Consultation, woman, South Sudan
[340] Bedigen, W. (2019). Youth (Monyomiji) and conflict resolution in the South Sudan Civil War. *Journal of African Cultural Heritage Studies*, *2*(1), 18-35.
[341] Bedigen (2019).
[342] Essien, E. (2020). Cultural Rituals and Symbol as a Paradigm for Conflict Intervention and Peacebuilding in Africa: Experience From Nigeria. In *Handbook of Research on the Impact of Culture in Conflict Prevention and Peacebuilding* (pp. 78-103). IGI Global.
[343] Stovel, L. and Valiñas, M. (2010). *Restorative justice after mass violence: Opportunities and risks for children and youth*. Florence: UNICEF Innocenti Research Centre. Retrieved from https://www.unicef-irc.org/publications/612-restorative-justice-after-mass-violence-opportunities-and-risks-for-children-and.html
[344] Bedigen (2019).
[345] Bedigen (2019).
[346] SFCG (2021).
[347] Kumalo, L. & Roddy-Mullineax, C. (2019). *Sustaining peace: Harnessing the power of South Sudanese women.* ISS. Retrieved from https://issafrica.org/research/east-africa-report/sustaining-peace-harnessing-the-power-of-south-sudanese-women#:~:text=To%20achieve%20peace%2C%20women%20must,representation%20in%20positions%20of%20power.&text=South%20Sudanese%20women%20have%20always,the%20front%20lines%20of%20negotiations.
[348] Murphy et al. (2017).
[349] Murphy et al. (2017).
[350] SFCG (2021).
[351] Murphy et al. (2017).
[352] Nyathon, J. H. M. (2015). *The role of women in peacebuilding in South Sudan*. Juba: The Sudd Institute. Retrieved from https://genderandsecurity.org/projects-resources/research/role-women-peace-building-south-sudan
[353] SFCG (2021).
[354] SFCG. (2021). *The women peacebuilders who are reshaping South Sudan.* Retrieved from https://www.sfcg.org/the-women-peacebuilders-who-are-reshaping-south-sudan/
[355] Herseth, S. K. (2021). *No peace without youth: Continued calls for change in South Sudan.* CMI. Retrieved from https://www.cmi.no/publications/7973-no-peace-without-youth-continued-calls-for-change-in-south-sudan
[356] World Vision. (2019). *Children associated with armed forces & groups: Programme brief, Yambio, South Sudan.* Retrieved from https://www.wvi.org/publications/report/south-sudan/children-associated-armed-forces-and-groups-caafag-programme-brief
[357] World Vision (2019).
[358] Key Informant Interview, female, South Sudan
[359] Sommers, M. (2015). *The outcast majority: War, development, and youth in Africa*. University of Georgia Press.
[360] Herseth (2021).

[361] Key Informant Interview, male, South Sudan
[362] Herseth (2021).
[363] Key Informant Interview, male, South Sudan
[364] IOM & UNESCO (2021).
[365] Survey response, woman, South Sudan
[366] UNDP. (2020). *National Unity Day in South Sudan 2020 report.* Geneva: Author. Retrieved from https://www.undp.org/south-sudan/publications/national-unity-day-south-sudan-2020-report#:~:text=The%20National%20Unity%20Day%20(NUD,been%20taking%20place%20in%20Juba.
[367] Furukawa, M. (2022). Sport events and social capital in conflict-affected country: A case study of National Unity Day in South Sudan. *International Journal of Sport Policy and Politics*, *14*(1), 19-36.
[368] Furukawa (2022).
[369] UNDP (2020).
[370] UNDP (2020).
[371] Bedigen, W. (2019). Youth (Monyomiji) and Conflict Resolution in the South Sudan Civil War. *Journal of African Cultural Heritage Studies*, *2*(1), 18-35.
[372] Simonse, S., & Kurimoto, E. (2011). Engaging 'monyomiji': Bridging the governance gap in East Bank Equatoria: proceedings of the conference 26-28 November 2009, Torit.
[373] Bedigen (2019).
[374] BBC. (2019, November 18). Sri Lanka profile – Timeline. Retrieved from https://www.bbc.com/news/world-south-asia-12004081
[375] Kearney, R. N. (1980). Youth protest in the politics of Sri Lanka. *Sociological Focus*, 293-313.
[376] International Crisis Group. (2017). *Sri Lanka's conflict-affected women: Dealing with the legacy of war.* Retrieved from https://www.crisisgroup.org/asia/south-asia/sri-lanka/289-sri-lankas-conflict-affected-women-dealing-legacy-war
[377] Amnesty International. (2021). *Sri Lanka.* Retrieved from https://www.amnesty.org/en/location/asia-and-the-pacific/south-asia/sri-lanka/
[378] Consultation Task Force on Reconciliation Mechanisms. (2016). *Final report of the Consultation Task Force on Reconciliation Mechanisms Vol I.* Retrieved from http://war-victims-map.org/wp-content/uploads/2017/02/CTF-Final-Report-Volume-I-Nov-16.pdf
[379] International Crisis Group (2017).
[380] Amnesty International. (2021, October 18). *Sri Lanka: Authorities must end violence and discrimination against Muslims.* Retrieved from https://www.amnesty.org/en/latest/news/2021/10/sri-lanka-authorities-must-end-violence-and-discrimination-against-muslims/
[381] Schenk, W. C., & Bui, T. (2018). Sri Lanka's post-tsunami health system recovery: a qualitative analysis of physician perspectives. *International health*, *10*(1), 20-26.
[382] Ibrahim, Z., Perera, N., & Galappatti, A. (2020). *Connections and trust in mental health and psychosocial support (MHPSS) communities of practice in Sri Lanka.*
[383] Wettasinghe, K., Emmanuel S., Samuels, F., & Galappatti, A., (2015). *Mental health and psychosocial support service provision for adolescent girls in post-conflict Settings: A culturally sensitive response – Country Report: Stage 2.* ODI and ReBUILD Consortium. Retrieved from https://assets.publishing.service.gov.uk/media/57a08994e5274a27b2000155/9771.pdf
[384]Candrasekaram, V., Basnayake, C. K., & Anthonees, N.G. (n.d.). *Whole school culture to foster social cohesion in Sri Lanka.* Save The Children & British Council. Retrieved from https://srilanka.savethechildren.net/sites/srilanka.savethechildren.net/files/library/Whole%20School%20Culture%20to%20Foster%20Social%20Cohesion%20in%20Sri%20Lanka.pdf
[385] Amnesty International (2021).
[386] OHCHR. (2021, January 25). *Sri Lanka: Compulsory cremation of COVID-19 bodies cannot continue, say UN experts.* Retrieved from https://www.ohchr.org/RU/NewsEvents/Pages/DisplayNews.aspx?NewsID=26686&LangID=E
[387] Fernando, S. M., Deane, F. P., & McLeod, H. J. (2017). The delaying effect of stigma on mental health help-seeking in Sri Lanka. *Asia-Pacific Psychiatry*, *9*(1).
[388] Samarasekara, N., Davies, M. L. M., & Siribaddana, S. (2012). The stigma of mental illness in Sri Lanka: the perspectives of community mental health workers. *Stigma Research and Action*, *2*(2), 93-99.

[389] International Commission of Jurists. (2020, July 29). *Sri Lanka: Lawyers, human rights defenders and journalists arrested, threatened, intimidated.* Retrieved from https://www.icj.org/sri-lanka-lawyers-human-rights-defenders-and-journalists-arrested-threatened-intimidated/
[390] Amnesty International. (2020). *Sri Lanka 2020.* Retrieved from https://www.amnesty.org/en/location/asia-and-the-pacific/south-asia/sri-lanka/report-sri-lanka/
[391] Consultation, multiple stakeholders, Sri Lanka
[392] Consultation Task Force on Reconciliation Mechanisms (2016).
[393] Fatima, I., & Kois, L. (n.d.). *Witnessing war, yearning for peace: Two documentary films from Sri Lanka.* Brandeis University. Retrieved from https://www.brandeis.edu/ethics/peacebuilding-arts/past-projects/recasting/gallery/war-peace.html
[394] Jayakumar, K. (2015, May 14). *Storytelling for peace.* Peace Insight. Retrieved from https://www.peaceinsight.org/en/articles/storytelling-peace/?location=&theme=culture-media-advocacy
[395] Consultation, multiple stakeholders, Sri Lanka
[396] The Asia Foundation. (2018). *Developing state sector counselling services in Sri Lanka*. Colombo: Author.
[397] Ministries of Social Services, Ministries of Child Development and Women's Affairs, The Asian Foundation, and Institute for Health Policy. (2013). *Mapping study on the capacity and work experiences of the counseling officers / assistants attached to the Ministries of Social services and Child Development and Women's Affairs.* Retrieved from https://www.ihp.lk/publications/docs/MSS.pdf
[398] Consultation, multiple stakeholders, Sri Lanka
[399] Siriwardhana, C., Adikari, A., Jayaweera, K. Abeyrathna, B., & Sumathipala, A. (2016). Integrating mental health into primary care for post-conflict populations: A pilot study. *International Journal of Mental Health Systems* 10**,** 12.
[400] Survey response, woman, Sri Lanka
[401] Consultation, youth practitioners, Sri Lanka; Key Informant Interviews, Sri Lanka
[402] Consultation, multiple stakeholders, Sri Lanka
[403] Key Informant Interview, male, Sri Lanka
[404] Key Informant Interview, male, Sri Lanka
[405] Aryasinha, R.P. (2015, April 02). *The Role of Women in Peace-building: A Sri Lankan Perspective.* Geneva Peace Conference: Mobilizing Civil Society for Building Peace. Retrieved from https://reliefweb.int/report/sri-lanka/role-women-peace-building-sri-lankan-perspective
[406] International Crisis Group (2017).
[407] Consultation Task Force on Reconciliation Mechanisms (2016).
[408] Key Informant Interview, woman, Sri Lanka
[409] Key Informant Interview, woman, Sri Lanka
[410] Consultation, young male, Sri Lanka
[411] Consultation, young male, Sri Lanka
[412] Consultation, young male, Sri Lanka
[413] Consultation, young woman, Sri Lanka
[414] Consultation, young woman, Sri Lanka
[415] Somasundaram, D. (2014). Addressing collective trauma: Conceptualisations and interventions. *Intervention*, *12*(1), 43-60.
[416] Somasundaram, D., & Sivayokan, S. (2013). Rebuilding community resilience in a post-war context: developing insight and recommendations-a qualitative study in Northern Sri Lanka. *International Journal of Mental Health Systems*, *7*(1), 1-25.
[417] The Asia Foundation. (2018). *A grassroots level toolkit for promoting psychosocially sensitive group dialogue among older participants.* Colombo: Author.
[418] Good Practice Group and Centre for Peacebuilding and Reconciliation. (2017). *Report on dialogue on healing 4th to 6th May 2017.*
[419] Key Informant Interview, woman practitioner
[420] Galappatti, A. (2019). *Working Framework for MHPSS and TJR in Sri Lanka (2015-2019).* Presentation [on the Consultation Task Force (2017) and submissions made to the CTF at a special consultation panel.]
[421] IEP. (2021*). Global Peace Index 2021.* Retrieved from: https://reliefweb.int/report/world/global-peace-index-2021
[422] OCHA. (2022b). *Humanitarian needs overview: Syrian Arab Republic.* Retrieved from: https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/hno_2022_rev-1.15.pdf

[423] British Council & Build Up. (2020). *Innovative peacebuilding in Syria II: An update on the strategic use of technology to build peace in the Syrian context.* Retrieved from https://howtobuildup.org/wp-content/uploads/2020/06/INNOVATIVE-PEACEBUILDING-IN-SYRIA-II.pdf
[424] British Council & Build Up. (2016). *Innovative peacebuilding in Syria: A scoping study of the strategic use of technology to build peace in the Syrian context.* Retrieved from https://creativeconomy.britishcouncil.org/media/uploads/files/Peacetech_Report_Web_En.pdf
[425] UN Security Council Resolution 2042 (2012), S/RES/2042 (14 April, 2012), available from http://unscr.com/en/resolutions/2042
[426] UN. (n.d.). Syria. Retrieved from https://dppa.un.org/en/syria
[427] Al-Kahwati, A. & Mannergren, J. (2021). *Addressing atrocity in Syria: New challenges for transitional justice.* Stockholm, Sweden: Utrikespolitiska Institutet. Retrieved from: https://www.ui.se/butiken/uis-publikationer/ui-paper/2021/addressing-atrocity-in-syria-new-challenges-for-transitional-justice/
[428] Kubai, A., & Angi, K. (2019). *"In The End No Winners, No Losers": Psychosocial support in peacebuilding and reconciliation for conflict affected societies.* Helsinki, Finland: Flem. Retrieved from https://felm.org/wp-content/uploads/2020/01/felm_psychosocial-support-in-peacebuilding-and-reconciliation-for-conflict-affected-societies_final.pdf
[429] Al-Kahwati et al. (2021).
[430] Simpson (2018).
[431] UN. (2022). *Syria.* Retrieved from: https://news.un.org/en/focus/syria
[432] OCHA (2022b).
[433] WFP. (2021). *Syria country office market price watch bulletin.* Retrieved from: https://reliefweb.int/report/syrian-arab-republic/syria-country-office-market-price-watch-bulletin-issue-82-september-2021
[434] WHO. (2023). *WHO in Syria: Mental health.* Retrieved from https://www.emro.who.int/syria/priority-areas/mental-health.html
[435] Kakaje, A., Al Zohbi, R., Aldeen, O. H., Makki, L., Alyousbashi, A., & Alhaffar, M. B. A. (2021). Mental disorder and PTSD in Syria during wartime: a nationwide crisis. *BMC Psychiatry*, *21*(1), 1-16.
[436] OCHA (2022c). *Humanitarian needs overview: Syrian Arab Republic. Retrieved from:* https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/hno_2023-rev-1.12_1.pdf
[437] OCHA (2022c)
[438] UNCHR. (2015). *Culture, context and the mental health and psychosocial well-being of Syrians.* Retrieved from https://www.unhcr.org/protection/health/55f6b90f9/culture-context-mental-health-psychosocial-well-being-syrians-review-mental.html
[439] British Council, & Build Up. (2016).
[440] British Council, & Build Up. (2020).
[441] ABAAD (n.d.). *BelSalameh.* Retrieved from https://www.abaadmena.org/documents/ebook.1476701604.pdf
[442] Key Informant Interview, woman, Syria
[443] Key Informant Interview, woman, Syria
[444] Aubrey, M., Aubrey R., Brodrick, F., & Simpson R. (2016). *Teaching peace, building resilience: Assessing the impact of peace education for young Syrians.* International Alert. Retrieved from https://www.eccnetwork.net/sites/default/files/media/file/Syria_PeaceEducationImpact_EN_2016.pdf
[445] Creative Memory of the Syrian Revolution. (2021). *Archives.* Retrieved from https://creativememory.org/en/archives/
[446] Matveeva (2021).
[447] UN Women. (2017) *"It Takes a Woman" to build peace in Syria.* PeaceWomen. Retrieved from https://www.peacewomen.org/resource/%E2%80%9Cit-takes-woman%E2%80%9D-build-peace-syria
[448] Key Informant Interview, woman, Syria
[449] Ghazzawi, R., Mohammad, A. & Ramadan, O. (2015). *"Peacebuilding Defines Our Future Now": A study of women's peace activism in Syria.* Badael Foundation. Retrieved from https://badael.org/wp-content/uploads/2020/09/Peacebuilding-defines-our-future-now-.pdf
[450] Key Informant Interview, woman, Syria
[451] Ghazzawi et al. (2015).
[452] Ghazzawi et al. (2015).
[453] Syrian Youth Assembly. (2021). *Syrian Youth Assembly*. Retrieved from https://www.syrian-youth.org/

[454] PeaceLens. (2021). *PeaceLens*. Retrieved from http://www.peacelens.com/
[455] Build Up. (2018, July 3). *Life in Syria, through a peace lens.* Medium. Retrieved from https://howtobuildup.medium.com/life-in-syria-through-a-peace-lens-e22dfc7fbc93
[456] Al-Kahwati et al. (2021).
[457] Syria Scope. (2018, April 8). *Syrian Youth Dancing in the Streets of Syria* [Video]. YouTube. Retrieved from https://www.youtube.com/watch?v=Fl4gDh16JPI&ab_channel=SyriaScope
[458] Euronews. (2017, April 29). *Syrian Youth Find Freedom in Parkour.* YouTube. Retrieved from https://www.youtube.com/watch?v=tOAecIa0ElY&ab_channel=euronews