

THE PREVENTION PROJECT



# Making **Prevention** a Reality

## Toward a Framework Approach to Prevention: Mental Health and Psychosocial Support

Personal Dispositions Workstream | June 2024

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# Project Overview

For the last three years, the Prevention Project hosted by the Center for Human Rights & Global Justice at the School of Law at NYU has been developing what it calls a “framework approach” to prevention that would correct some of the problems that have afflicted prevention thinking and practice heretofore. The main characteristics of this approach are:

- To take prevention out of the domain of crisis prevention, because as important as the latter might be, it narrows the scope of options, provides an incentive to concentrate on the role of international actors at the expense of other actors, and ignores both relevant causes and solutions. The project concentrates on broad and “upstreamed” preventive measures, consistent with ideas long expressed in various studies, reports, and resolutions—and, importantly, on empirical evidence.<sup>1</sup>
- To concentrate on *national initiatives*, since these are the ones that bear the brunt of the significant amount of preventive work that takes place on the ground on an everyday basis. Concentrating on national initiatives not only broadens the scope of options, actors, causes and solutions, it helps to “dedramatize” discussions about prevention, separating them from foreign interventions in internal affairs.
- The project has been articulating a “framework”—that is, it is trying to overcome the “siloization” and fragmentation of the important stock of knowledge accumulated through different

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<sup>1</sup> Thus, the so-called “twin resolutions” on sustainable peace: “*Emphasiz[e]* the importance of a comprehensive approach to sustaining peace, particularly through the prevention of conflict and addressing its root causes, strengthening the rule of law at the international and national levels, and promoting sustained and sustainable economic growth, poverty eradication, social development, sustainable development, national reconciliation and unity, including through inclusive dialogue and mediation, access to justice and transitional justice, accountability, good governance, democracy, accountable institutions, gender equality and respect for, and protection of, human rights and fundamental freedoms” A/74/976–S/2020/773. The UN-World Bank *Pathways for Peace* (Washington, D.C.: World Bank, 2018) made the “business case” for prevention now six years ago (available at: <https://www.pathwaysforpeace.org/>). The importance of broadening and “upstreaming” prevention measures had been the subject of consensus in the three important reviews of 2014–15. See the High-Level Independent Panel on Peace Operations (HIPPO), a periodic review of both DPKO Peacekeeping Operations and DPA Special Political Missions (A/70/95, S/2015/446, available at <https://peacekeeping.un.org/en/report-of-independent-high-level-panel-peace-operations>); the Advisory Group of Experts on the Review of the Peacebuilding Architecture (producing the so-called AGE Report) following ten years of work since the establishment of the Peacebuilding Commission and Support Office (*The Challenge of Sustaining Peace*, 29 June 2015 A/69/968–S/2015/490, [https://www.un.org/pga/wp-content/uploads/sites/3/2015/07/300615\\_The-Challenge-of-Sustaining-Peace.pdf](https://www.un.org/pga/wp-content/uploads/sites/3/2015/07/300615_The-Challenge-of-Sustaining-Peace.pdf)); and the 1325 Review evaluating 15 years of implementation of the 1325 resolution (*Preventing Conflict, Transforming Justice, Securing the Peace*, available at: <https://wps.unwomen.org/resources/>).



national experiences on prevention, making explicit the “horizontal” linkages between the various topics, so that “scattershot,” “project-based” approaches to prevention can be replaced by comprehensive policies the various dimensions of which mutually support one another and produce sustainable impact over time. That is, each of the thematic workstreams of the project are conceived of as “elements” of a framework (which does not mean that they must all be implemented simultaneously, but that they should be thought of holistically, as parts of a whole).

- The project rests on a universalistic presumption, meaning that it assumes that the challenges it addresses are challenges that all countries—North and South, East and West—at some point or another would face or would have faced, and that therefore, the framework would contain elements that would be relevant at some point or another for all countries—recognizing that a framework is not the same as a blueprint, and that therefore, context-sensitive design and implementation of the recommendations would be called for. The universalistic aspiration of the project has been operationalized in part by the selection of over 200 world-class academics and practitioners, globally dispersed (roughly 25 percent of participants from Africa, Asia, Europe, and the Americas, respectively, and with a very even gender distribution), who, distributed in the different workstreams, constitute both the “brain trust” of the project and a set of “communities of practice” that are ready to provide technical advice on the ways to maximize the preventive potential of the different elements of the framework.
- Finally, but very importantly, the project rests on an understanding of human rights that differs significantly from the current conception of rights, which emphasizes the *redress* function of human rights. While this *ex post* accountability function of human rights is crucial, the project tries to recover the more pragmatic, problem-solving function embodied in the Universal Declaration of Human Rights, for example, which 75 years ago was adopted by member states understanding that human rights were *ex ante* anti-grievance, and hence *preventive*, mechanisms.



# Methodology

Each of the workstreams of the project is composed of 15–30 experts, academics or practitioners, globally distributed, with diverse disciplinary backgrounds and different regional experiences. Once formed, each workstream met regularly to share knowledge and experiences of crafting, implementing, and testing preventive initiatives in the workstream’s thematic area. Following weeks of presentation, research, and discussion, the group narrowed its scope to a specific topic or problem, and participants worked together and with the Prevention Project’s research and program staff for over a year to craft policy recommendations based on the best available evidence of preventive efficacy—and to highlight areas in which additional evidence is needed.

These efforts culminate in a thematic report with policy recommendations reflecting multiple rounds of review, discussion, and revision based on feedback from the community of practice. While the final report is mainly the responsibility of the lead author(s), it reflects the contributions of the members of the workstream, without aiming at complete consensus from every expert on the report’s full contents and each particular recommendation.

The work of the Prevention Project thus serves to advance global prevention efforts in three ways: (1) through the production of peer-reviewed knowledge on evidence-based prevention strategies to be applied at the national level, informed by real-world expertise; (2) by the formation of groups of experts who in addition to their specific disciplinary or thematic expertise can provide advice specifically on preventive measures in their areas of work; and (3) by providing inputs for ongoing discussions about prevention in multilateral organizations and intergovernmental processes, as well as at the national level.



# Executive Summary

Despite emerging consensus on the need to upstream the efforts to prevent massive human rights violations, most prevention work still focuses primarily on times of crisis. In addition, prevention work mostly targets institutional reform, as if sustainable social change was merely a matter of clever institutional engineering, ignoring the importance of other key issues, including individual factors, such as the crucial role of mental health and psychosocial support (MHPSS). A broader, more systematic, and long-term approach is needed to sustain and ensure long-term prevention. Such an approach would build state and broader governance institutions, strengthen civil society and social cohesion, promote norms and capacities for peaceful co-existence, impact cultures, and also have an impact on individual dispositions. Although MHPSS is currently, at best, considered as a redress measure, **this report argues for the preventive potential of MHPSS on the basis that trauma is not an auspicious mindset for assuming the role of a rights-claimant, which is instrumental for prevention and non-recurrence.**

**Trauma is not an auspicious mindset for assuming the role of a rights-claimant, which is instrumental for prevention and non-recurrence.**

**Massive human rights violations and conflict have important individual mental health impacts**, including depression, anxiety, and PTSD, and **also higher levels of psychosocial distress**. Resultant suffering and harm are not limited to the direct victims, but can also be a collective experience, affecting many in geographic areas where massive human rights violations such as torture, various forms of violence, and severe and deliberate economic deprivation have taken place. Indeed, entire cultures can be disrupted and transformed, as mass violations and violence do not take place in a vacuum, but in concrete social, cultural, and political contexts. Furthermore, such impacts can be *intergenerational*—with traumas passing down generations—as well as *multigenerational*—affecting the direct victims differently from their children and grandchildren.

**The negative psychosocial impacts of mass human rights violations can hinder social cohesion, leading to cycles of violence and thus further human rights violations.** Collective trauma can lead to diverse effects, including low levels of trust, mutual suspicion, “conspiracies of silence,” deterioration in morals and values, loss of empathy, dependency, passiveness, despair, and superficial and short-term goals. Massive human rights violations can also produce cognitive impacts (e.g., on decision-making,

the experience of time, and rigid thinking) and negative consequences on the construction of identity (e.g., intolerance and enmity). Negative mental health and psychosocial impacts can also produce poor leadership and feed into grievances, which in turn can play an important role as drivers of violent conflict. However, while some psychosocial impacts can lead to more violent individuals and societies, this is not always the case, and victimization should not be equated with threat, as challenging circumstances sometimes lead to growth and resilience.

**MHPSS**, which aims to protect or promote psychosocial well-being and to prevent or treat mental disorders, **is a way to address the negative psychosocial impacts of human rights violations and to prevent further violations.** Thinking of harm and recovery as a psychosocial process, which considers the psychological and social dimensions of the manifestation and causes of violations, implies a multi-dimensional approach and offers a specific lens of analysis not necessarily linked to mental health as a clinical issue alone, but rather how mental health is linked to the social context—community, culture, and social life. MHPSS interventions can focus on different levels: on victims, to help them claim their rights and be active citizens; on bystanders, to overcome passivity in the face of human rights violations; on those who have the power to influence behaviors; and on the potential perpetrators, to address underlying attitudes and belief systems. These interventions should always be context-sensitive and, ideally, built from existing support structures and relationships.

MHPSS focuses on increasing community capacity by identifying naturally occurring psychosocial supports and sources of coping and resilience through participatory processes, rather than relying exclusively on individualized professional services. It seeks to strengthen and empower communities through, for example, teachers, civic leaders, or religious officials—in other words, through local resources—rather than depending mainly on external professionals. Relevant interventions can include: disseminating information to the community at large; strengthening community and family supports (e.g., recreational communal healing practices, traditional rituals, dialogue, sharing); creating safe spaces (e.g., child-friendly spaces); individual-focused psychosocial work (e.g., psychological first aid, linking vulnerable individuals/families to resources, health services, livelihoods assistance, community resources, etc., as well as follow-up to ascertain that support is provided); and psychological intervention (e.g., basic counseling, addressing alcohol/substance, preventing family violence, etc.).

MHPSS capacity-building can also increase civil society's capacity to reorient values, norms, and behavior. Finally, working with political leaders is important to prevent the instrumentalization of grievances. In thinking about MHPSS regarding leadership, special attention should be placed on youth-led organizations. While current leaders may be reluctant to engage in work that improves chances of prevention, social pressure on them—including from youth leaders—may help, and at the very least, educating youth in ways that increase psychosocial well-being is an important project.

**Adopting an upstream approach to MHPSS and integrating it into a broader prevention framework is critical.** This report identifies ten implementation issues that need to be addressed to ensure the appropriate development of such a framework:

1. Ensure the broadest participation possible, from members of local communities to, on the other extreme, elites and political leaders.
2. Address large-scale harm by seizing opportunities to heal together, bridging the gaps between individuals, organizations, communities, and leaders.
3. Focus on activities that can achieve change for entire social and cultural systems, in full awareness that these will, by necessity, be long-term interventions.
4. Develop a prevention landscape that includes both individual and collective approaches, rather than considering MHPSS only as an individual psychological phenomenon, which would produce a limited repertoire of interventions.
5. Consider scaling up MHPSS interventions by redirecting resources to prevention programming, leveraging community and civil society expertise, and engaging leadership to affect large swathes of individuals.
6. Support community- and family-level networks.
7. Ensure inclusive consultation, participation, and engagement to change entire systems.
8. Embrace risk-taking, adopt new initiatives, and pilot new approaches to rise to the challenge.
9. Raise awareness and train a range of organizations, including service providers, funders, and those building capacities, such as the UN, in psychosocial thinking.
10. Develop a more substantial evidence base for existing programs and activities.



# I. Introduction

1. Despite the emerging consensus on the need to broaden and upstream prevention, most international and local prevention work focuses on conflict and crisis prevention and interventions only in times of emergency.<sup>2</sup>
2. Such approaches to prevention have focused almost exclusively on institutional reform, as if sustainable social change were merely a matter of clever institutional engineering, thereby ignoring the importance of interventions in the cultural sphere, in the domain of mental health and psychosocial support (MHPSS), and the crucial roles that civil society and economic opportunities play in prevention.
3. A broader, more systematic, long-term approach is needed to ensure sustainable prevention. Such an approach should build state and broader governance institutions, strengthen civil society and social cohesion, promote norms and capacities for peaceful co-existence, and impact cultures and transform individuals.
4. This report considers how MHPSS may contribute to prevention within the context of human rights as anti-grievance mechanisms.

**A broader, more systematic, long-term approach is needed to ensure sustainable prevention. Such an approach should build state and broader governance institutions, strengthen civil society and social cohesion, promote norms and capacities for peaceful co-existence, and impact cultures and transform individuals.**

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<sup>2</sup> As with other parts of this project, this report focuses on preventing massive human rights violations and abuses and only through that connection on preventing conflict and some forms of violence.



## II. The Impact of Human Rights Violations

**B**efore considering how MHPSS may contribute to prevention, it is necessary to briefly outline the impact and nature of human rights violations that form the backdrop of this report.

### A. INDIVIDUAL IMPACTS OF MASSIVE HUMAN RIGHTS VIOLATIONS

5. **Massive human rights violations can take many forms**, from direct harm (e.g., murder, disappearance, torture, illegal detention) to less visible forms of harm (e.g., social exclusion, racism, gender discrimination, limited life opportunities, or inequitable access to resources).
6. At an individual level, trauma is often experienced when adverse events **overwhelm one's capacity to process them**. When a system cannot process its experiences, these experiences are fixed as trauma. **People who experience trauma are impacted physically, emotionally, socially, spiritually, and cognitively**. Moreover, they may experience a loss of interest in previously beloved activities or question their existence.
7. **Massive human rights violations generate psychological and physical impacts** throughout the life cycle<sup>3</sup> and are also transmitted intergenerationally,<sup>4</sup> often affecting different groups in various ways (e.g., women, youth, refugees) and at different moments in time (e.g., when fleeing as a refugee, when living in a society that is peaceful but highly exclusionary or hostile to specific groups).

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<sup>3</sup> United Nations and World Bank, *Pathways for Peace: Inclusive Approaches to Preventing Violent Conflict* (Washington, DC: World Bank, 2018).

<sup>4</sup> *International Handbook of Multigenerational Legacies of Trauma*, ed. Yael Danieli (New York: Plenum Press, 1998); Yael Danieli and Brian Engdahl, "Multigenerational Legacies of Trauma," in *Post-Traumatic Stress Disorder*, eds. Charles B. Nemeroff and Charles Marmar (New York: Oxford Academic Press, 2018), 497–512; Yael Danieli et al., "The Danieli Inventory of Multigenerational Legacies of Trauma, Part I: Survivors' posttraumatic adaptational styles in their children's eyes," *Journal of Psychiatric Research* 68 (2015): 167–75.

8. **Widescale individual-level impacts** such as depression, anxiety, and post-traumatic stress symptoms have typically been identified in populations affected by massive human rights violence and violent conflict.<sup>5</sup>
9. It is estimated that approximately **one in five people in post-conflict settings** have recognizable mental disorders such as depression, anxiety disorder, post-traumatic stress disorder, bipolar disorder, or schizophrenia. This contrasts with a mean global prevalence of one in 14.<sup>6</sup>
10. Mental health approaches that focus on diagnosis and categorization are **fundamentally Western in their orientation**, narrow how we understand the cultural and collective impacts of harm (see below), and miss the high prevalence of **general psychosocial distress that affects all aspects of life because of mass human rights violations**. Such categorization also misses the collective and cultural impacts of mass human rights violations.

**Approximately one in five people in post-conflict settings have recognizable mental disorders such as depression, anxiety disorder, post-traumatic stress disorder, bipolar disorder, or schizophrenia.**

## **B. COLLECTIVE IMPACTS OF MASSIVE HUMAN RIGHTS VIOLATIONS**

11. The nature and manifestations of psychosocial distress and the resulting violence—at an interpersonal level, between groups, in communities, and institutionally—can be a **consequence of colonialism, slavery, discrimination, endemic corruption, social injustice, and structural violence**.<sup>7</sup> Such political phenomena are disempowering, alienating individuals and undermining communities' work toward societal collectivity, which is essential to psychosocial health.

<sup>5</sup> R. Srinivasa Murthy, "Mass Violence and Mental Health—Recent epidemiological findings," *International Review of Psychiatry* 19, no. 3 (2007): 183–92; Wietse A. Tol et al., "Mental Health and Psychosocial Support in Humanitarian Settings," in *Global Mental Health: Principles and Practice*, eds. Vikram Patel, Harry Minas, Alex Cohen, and Martin Prince (New York: Oxford University Press, 2013), 384–91. Murthy notes that these problems are, in turn, linked to "complicated bereavement reactions, substance use disorders, poor physical health, fear, anxiety, physiological arousal, somatisation, anger control, functional disability," and developmental issues for children. Murthy, "Mass Violence," 183.

<sup>6</sup> Fiona Charlson et al., "New WHO Prevalence Estimates of Mental Disorders in Conflict Settings: A systematic review and meta-analysis," *The Lancet* 394, no. 10194 (2019): 240–48.

<sup>7</sup> Paige Arthur and Celine Monnier, "Mental Health and Psychosocial Support to Sustain Peace: Four Areas to Explore for Improving Practice," *Center on International Cooperation* (2020); European Union Agency for Fundamental Rights, *Experience of Discrimination, Social Marginalisation and Violence: A Comparative Study of Muslim and Non-Muslim Youth in Three EU Member States* (Vienna: European Union Agency for Fundamental Rights, 2010); Fundação Calouste Gulbenkian and World Health Organization, *Social Determinants of Mental Health* (Geneva: WHO, 2014), [http://apps.who.int/iris/bitstream/10665/112828/1/9789241506809\\_eng.pdf?ua=1](http://apps.who.int/iris/bitstream/10665/112828/1/9789241506809_eng.pdf?ua=1).



12. **Entire cultures and nations can also be the targets of massive human rights violations** that extend for long periods or a series of individual harms. In other words, violations occur in a context, damage entire social and cultural systems, and are seldom one-off events.
13. Any situation of **armed conflict or massive human rights violations is intensified by the social problems** linked to and often created by war, including but not limited to poverty, unemployment, social exclusion, poor education, inadequate housing, crime, environmental degradation, corruption, gender-based violence, and a general lack of personal and human security.
14. In these contexts, seeing harm as purely individual, as serious as the impacts of human rights violations are at the individual level, is a limiting perspective. Suffering and harm can be a collective experience—i.e., **grounded in geographical commonality** (e.g., where everyone from a single village is interned, tortured, and killed together)<sup>8</sup> or aimed at a wider collective, as in the case of genocide.
15. **In some societies, harm can be experienced collectively** (e.g., responding to harm and suffering as an extended family, community, or social unit, rather than as an individual).<sup>9</sup> For example, migrants in South Africa from a range of African countries, when faced with severe economic challenges and daily violence, understand such harm not only in material and psychological or emotional terms, but also as a social, community, and spiritual disharmony requiring ritualist strategies to address their precarity.<sup>10</sup> In Guatemala, indigenous communities experienced mass violations as a disruption to the entire culture and Mayan cosmovision.<sup>11</sup> Healing such harm is not about treating “symptoms” in a Western sense, but rather about reconnecting to the collective sense of community and Mayan spirituality via ceremonies and rituals.<sup>12</sup>
16. The cumulative effect of devastating events and their collective dimension **can be described as collective trauma**—that is, “in addition to the sum total of individual traumas, which can in itself be substantial given the widespread nature of the traumatization..., there are impacts at the supra-individual family, community and social levels that produce systemic changes in social dynamics, processes, structures and functioning.”<sup>13</sup>

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<sup>8</sup> Eugen Koh, “The Healing of Historical Collective Trauma,” *Genocide Studies and Prevention: An International Journal* 15, no. 1 (2021): 115–33.

<sup>9</sup> Daya Somasundaram, “Collective Trauma in Northern Sri Lanka: A qualitative psychosocial-ecological study,” *International Journal of Mental Health Systems* 1, no. 5 (2007): 2. Somasundaram makes this point about Tamil society, noting: “In collectivist societies, the individual becomes embedded within the family and community so much so that traumatic events are experienced through the larger unit and the impact will also manifest at that level. The family and community are part of the self, their identity and consciousness. The demarcation or boundary between the individual self and the outside becomes blurred. For example, Tamil families, due to close and strong bonds and cohesiveness in nuclear and extended families, tend to function and respond to external threat or trauma as a unit rather than as individual members. They share the experience and perceive the event in a particular way.”

<sup>10</sup> *Healing and Change in the City of Gold: Case Studies of Coping and Support in Johannesburg*, eds. Ingrid Palmary, Brandon Hamber, and Lorena Nunez (New York: Springer, 2015).

<sup>11</sup> M. Brinton Lykes and Alison Crosby, “Creative Methodologies as a Resource for Mayan Women’s Protagonism,” in *Psychosocial Perspectives on Peacebuilding*, eds. Brandon Hamber and Elizabeth Gallagher (New York: Springer, 2015), 147–86.

<sup>12</sup> Lykes and Crosby, “Creative Methodologies.”

<sup>13</sup> Somasundaram, “Collective Trauma.”



17. The breadth of such impacts is enormous, but **some of the impacts include**: mistrust, suspicion, “Conspiracy of Silence,”<sup>14</sup> brutalization, deterioration in morals and values, poor leadership, dependency, passiveness, despair, and superficial and short-term goals.<sup>15</sup>

## C. COGNITIVE AND IDENTITY CONSEQUENCES

18. Massive human rights violations and individual and collective trauma can have cognitive impacts. Thinking can become unitary and rigid. The experience of time often becomes distorted, and **the ability to make decisions** and seek help may be impaired.
19. Individuals can feel humiliation and shame,<sup>16</sup> particularly when violence is aimed at specific groups (e.g., women, ethnic minorities, specific gender characteristics). Those victimized may have **difficulty putting their experiences into words**, finding the appropriate channels to communicate them, or being easily manipulated.
20. From a psychosocial perspective, human rights violations and violence can produce a **lack of language**—i.e., difficulties finding meaning or making sense of what happened. Unitary narratives can also develop to explain massive violations. This can lead to a **lack of empathy for different groups** or assuming projected characteristics of “the other.”
21. **Coping strategies** developed during times of extreme violence may be functional and can linger but become unhelpful in different contexts. For example, the Tamil community has “learned to be silent, uninvolved and to stay in the background, which would have helped in survival. They have developed a deep suspicion and mistrust” of security forces and police.<sup>17</sup>
22. **Exclusive and conflictual constructions of identity contribute to intolerance and enmity**, which, far from helping in post-conflict recovery, can be a prelude to the escalation of deadly violence, often made worse by the absence of an inclusive, capable state.<sup>18</sup>

**Human rights violations and violence can lead to narratives that undermine empathy for different groups.**

<sup>14</sup> Yael Danieli, “Psychotherapists’ Participation in the Conspiracy of Silence about the Holocaust,” *Psychoanalytic Psychology* 1, no. 1 (1984): 23–42.

<sup>15</sup> Somasundaram, “Collective Trauma.” It is important to note these types of impacts as *cultural trauma* (keeping the term collective trauma for the direct shared experience of similar harm)—i.e., cultural trauma is the shared experience of trauma based on one’s identity, ethnicity, or culture. See Koh, “Historical Collective Trauma.”

<sup>16</sup> Jeffrey C. Alexander, “Civil Sphere and Transitions to Peace: Cultural Trauma and Civil Repair,” *International Journal of Politics, Culture, and Society* 35, no. 1 (2022): 85–93. As Alexander notes, “violence is physical, but it has its roots in cultural processes of shaming, polluting, and objectifying.” Alexander, “Civil Sphere,” 86.

<sup>17</sup> Somasundaram, “Collective Trauma,” 14. Somasundaram provides additional examples: the “Tamil people no longer trust the security forces, including the police. Their recent experiences have taught them otherwise. Thus, instead of trust, respect for Police, and a belief in their legitimacy, there is fear, even terror. Thus, when someone breaks the law, or there is a robbery or some other illegal activity, no Tamil would naturally report it to the Police.”

<sup>18</sup> United Nations Development Programme, *Strengthening Social Cohesion: Conceptual framing and programming implications* (New York: UNDP, 2020).

23. The psychological effects of violence “will have an **impact on the capacity to rebuild trust in society** and may lead to a normalization of violence, which in turn can generate more violence.”<sup>19</sup>
24. When, from traumatic experiences, narratives of victimhood and survival emerge, they are often instrumentalized by “ethnic entrepreneurs” who **can mobilize divisive identities, as well as by political leaders, to “fan the flames of social discord,”**<sup>20</sup> thereby distorting and undermining community cohesion.

## D. THE DRIVERS OF GRIEVANCE

25. From a psychological perspective, the individual and collective impacts outlined above can have dramatic social ramifications leading to **a vicious circle of social, cultural, and psychological degradation** and cycles of conflict.
26. The probability of violence increases **individual psychological impacts** and broader social and familial breakdown, and collective impacts manifest in **damaged community and socio-economic life.**<sup>21</sup> When this is linked with **unaddressed social and political issues, it can fuel resentment.**
27. The World Bank stresses the importance of **grievance as a driver of conflict**, especially when it is related to exclusion from access to power, natural resources, security, and justice.<sup>22</sup>
28. Evidence has shown that some **psychosocial risk factors make individuals more prone to violence**, e.g., if they feel they or their community have been unfairly harmed.<sup>23</sup> This can feed into cycles of grievance, creating cycles of violence.
29. **Higher exposure to trauma and weak social bonds**, and other risk factors such as inequality, government failure, poverty, discrimination, and marginalization, increase violent extremism.<sup>24</sup>
30. **A return of violence is also likely** to occur in post-conflict countries “where people have witnessed and experienced large-scale violence, destruction, displacement and personal loss,”<sup>25</sup> and these needs go unaddressed.

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<sup>19</sup> Arthur and Monnier, “Mental Health,” 3.

<sup>20</sup> UNDP, *Strengthening Social Cohesion*, 37.

<sup>21</sup> Somasundaram, “Collective Trauma,” 5. Somasundaram quotes The National Strategic Framework for Aboriginal and Torres Strait Islander Health to outline the impact of collective trauma: “The sense of grief and loss experienced by generations of Aboriginal and Torres Strait Islander peoples in relation to dispossession, to the disruption of culture, family and community and to the legislated removal of children has contributed to ongoing problems in emotional, spiritual, cultural and social well-being for Aboriginal and Torres Strait Islander individuals, families and communities.”

<sup>22</sup> UN-World Bank, *Pathways for Peace*.

<sup>23</sup> Arthur and Monnier, “Mental Health.”

<sup>24</sup> Dylan O’Driscoll, “Violent Extremism and Mental Disorders,” *Knowledge, Evidence and Learning for Development* (London: UK Department for International Development, 2018).

<sup>25</sup> Friederike Bubenzer and Marian Tankink, “Introduction to Special Issue: Linking mental health and psychosocial support to

31. The links between the suffering created by the experience of mass human rights violations, the grievances this suffering produces, and the potential for future violence **highlight the importance of MHPSS in supporting healing and recovery processes** (see below). The failure to address these links will lead to adverse long-term transgenerational impacts at individual, collective, and national levels.<sup>26</sup>

**The links between the suffering created by the experience of mass human rights violations, the grievances this suffering produces, and the potential for future violence highlight the importance of MHPSS in supporting healing and recovery processes.**

## E. INTERGENERATIONAL IMPACTS

32. The impacts outlined above, especially with regard to the experiences of the societal collective, are not limited to the lifecycle of human rights violations or the generations exposed to them.
33. **Grievances can continue and sometimes increase across generations** and over long periods (in some cases hundreds of years), thus not being restricted to recent experiences of harm.<sup>27</sup>
34. The impacts of **human rights violations are multigenerational**<sup>28</sup>—i.e., experiences manifest for direct victims and their children or their children’s children.<sup>29</sup>
35. **A conspiracy of silence emerges across generations** on all levels, starting from the outside and becoming internalized by the family and then by the individual, creating internal psychological ruptures.<sup>30</sup> Responses can be varied and lead to different ways generations

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peacebuilding in an integrated way,” *Intervention* 15, no. 3 (2017): 192–98.

<sup>26</sup> Eugen Koh and Tadashi Takeshima, “The Long-Term Effects of Japan’s Traumatic Experience in the Second World War and Its Implications for Peace in Northeast Asia,” *New England Journal of Public Policy* 32, no. 2 (2020).

<sup>27</sup> Friederike Bubenzer, Marian Tankink, and Yvonne Slied, *Guidance Note: Integrating Mental Health and Psychosocial Support into Peacebuilding* (New York: UNDP, 2022), 14, <https://www.undp.org/sites/g/files/zskgke326/files/2022-05/UNDP-Integrating-Mental-Health-and-Psychosocial-Support-into-Peacebuilding-V2.pdf>. “The concept of intergenerational trauma posits that when parents are deeply psychologically affected by their own experiences of war and violence, this can affect their child-rearing styles, attachment to their offspring, social relations, and outlook on the world. Intergenerational trauma can be both individual and collective (such as memories) and transferred from one generation to the next. When one generation is unable to reconcile or recover from the experiences of a difficult past, or to transform negative narratives, future generations can inherit their feelings of anger, pain, and resentment.”

<sup>28</sup> See Danieli, *International Handbook*; Danieli and Engdahl, “Multigenerational Legacies”; and Danieli et al., “Danieli Inventory.”

<sup>29</sup> Research on the radicalization of Islamic terrorism, specifically the radicalized young Muslim who was fighting for ISIS, shows that it was neither the fighters nor their parents who were traumatized directly, but rather their grandparents, giving room to a three-generation situation: the first generation is traumatized, the second one becomes depressed, and the third one becomes radicalized. The subsequent generations are delegates of the trauma of three generations ago. This could be considered for applications in terms of prevention policy development.

<sup>30</sup> Yael Danieli, “The Heterogeneity of Postwar Adaptation in Families of Holocaust Survivors” in *The Psychological Perspectives of the Holocaust and its Aftermath*, ed. R. L. Braham (New York: Columbia University Press, 1988), 109–28.

react to previous harm—e.g., feeling victimized or numb or choosing to fight back.<sup>31</sup>

36. There is “long-standing evidence of the **intergenerational effects of trauma on families and communities** (Holocaust survivors, survivors of residential schools for First Nations peoples in Canada), and related hypotheses that trauma can contribute to cycles of retribution and violence.”<sup>32</sup>
37. A global study on youth, peace, and security noted that “violence, uncertainty, and instability **discourage young people from investing in their future**. Unless addressed, they can lead to self-destructive coping mechanisms undermining young people’s positive resilience. Exposure to violence, especially at a young age and at the hands of the institutions that are supposed to protect young people, is a key factor in escalating cycles of violence across generations.”<sup>33</sup>

## F. HETEROGENOUS OUTCOMES, RESILIENCE, AND PREVENTION

38. Individual (and group) responses to adverse or overwhelming events are **heterogeneous**. **They do not always result in trauma**, cycles of violence, or other impacts in a linear or entirely predictable way.
39. Contrary to the idea that massive human rights violations lead to negative perceptions of others resulting in the victim seeking to harm their victimizers, the impact of such violations can lead to social exclusion and marginalization of victims.<sup>34</sup> This is important because **victimization should not be equated with threat**—an issue that often arises with perceptions of marginalized young men, in particular, who are viewed as a security concern rather than individuals in need of support.<sup>35</sup>
40. **Growth and resilience** are also common responses of people experiencing adverse conditions. There is a growing recognition of what is now termed **post-traumatic growth**—that is, traumatic events, despite their negative consequences, may result in positive psychological changes for some individuals.<sup>36</sup>

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<sup>31</sup> Amid these experiences, individuals can develop different adaptation styles. Danieli proposes different reactions, such as seeing oneself as the victim, being numb, and responding as a fighter or as a survivor. Prevention initiatives must also encompass these different adaptation styles to trauma to truly address its impact on an individual and community level. Danieli, “Heterogeneity of Postwar Adaptation.” These findings have been developed in numerous publications. See, e.g., Danieli and Engdahl, “Multigenerational Legacies”; Danieli et al., “Danieli Inventory”; and Yael Danieli, “Assessing Trauma Across Cultures from a Multigenerational Perspective,” in *Cross-Cultural Assessment of Psychological Trauma and PTSD*, eds. J.P. Wilson and C.Sk. Tang (New York: Springer, 2007), 65–89.

<sup>32</sup> Arthur and Monnier, “Mental Health,” 2. That said, the evidence of how multigenerational trauma manifests across diverse cultures requires further research.

<sup>33</sup> Graeme Simpson, *The Missing Peace: Independent Progress Study on Youth, Peace and Security* (New York: UNFPA, 2018), 104.

<sup>34</sup> Brandon Hamber and Conor Murray, *Voices from the Margins: Young men and post-conflict masculinities in Northern Ireland* (Geneva: Interpeace, 2022).

<sup>35</sup> Simpson, *Missing Peace*.

<sup>36</sup> See, e.g., Richard G. Tedeschi and Lawrence G. Calhoun, “The Posttraumatic Growth Inventory: measuring the positive lega-

41. Styles of response to adverse events are **culturally specific, gendered, and mediated** by other intersectional issues such as race, poverty, and identity.
42. Some of the factors outlined above can contribute to violence. However, **the opposite is also true**—i.e., inclusivity, integrated civil society and associational life, economic interdependency, a capable state, and networks for conflict and crisis prevention link to prevention.<sup>37</sup>
43. This also requires visions of a “social solidarity that can anchor and limit the state, and not the state alone: **an independent civil sphere also sets limits** on the economy, church, university, family, ethnic and racial communities, and voluntary associations.”<sup>38</sup>

**Inclusivity, integrated civil society and associational life, economic interdependency, a capable state, and networks for conflict and crisis prevention link to prevention.**

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cy of trauma,” *Journal of Traumatic Stress* 9, no. 3 (1996): 455–71; Richard G. Tedeschi and Bret A. Moore, “Posttraumatic Growth as an Integrative Therapeutic Philosophy,” *Journal of Psychotherapy Integration* 31, no. 2 (2021): 180–94.

<sup>37</sup> UNDP, *Strengthening Social Cohesion*.

<sup>38</sup> Alexander, “Civil Sphere,” 86.



## III. Mental Health and Psychosocial Support

### A. THE CONCEPT OF PSYCHOSOCIAL

44. To capture the individual and collective impacts of violence outlined above, such violence can be considered a “psychosocial” phenomenon. Simply put, it has psychological *and* social dimensions to its manifestation and causes. The **psychological and social dimensions cannot be divorced** from how we consider the impacts of the violations and how we might address them, for they become embedded in community, cultural, and social life.

45. **The psychosocial can be thought of as a site of crisscrossing forces** that transverse the individual, the context (i.e., community, country, political, social, and economic dimensions),<sup>39</sup> and a particular moment in history or time, which can refer to the present interpretations of the past or how personal experiences can distort the perception of time.

46. Thinking of harm and recovery as a psychosocial process implies a **multidimensional quality**<sup>40</sup> and offers a specific lens of analysis not necessarily linked to mental health as a clinical issue alone, but how these are linked to the social context.

**The psychological and social dimensions of violence and human rights violations cannot be divorced from how we consider the impacts of the violations and how we might address them, for they become embedded in community, cultural, and social life.**

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<sup>39</sup> Stephen Frosh, “Psychosocial Studies and Psychology: Is a critical approach emerging?”, *Human Relations* 56, no. 12 (2003): 1547–67.

<sup>40</sup> Inter-Agency Standing Committee, *IASC guidelines on mental health and psychosocial support in emergency settings* (Geneva: IASC, 2007), 19. According to the IASC, “the term psychosocial denotes the interconnection between psychological and social processes and the fact that each continually interacts with and influences the other.”



47. “Psychosocial” is a term that has become **linked (at least at an international level) with intervention or programming** that seeks to improve emotional well-being through a wide range of approaches, as it recognizes that the social, economic, spiritual, and psychological are deeply intertwined and inseparable.<sup>41</sup>

## B. DEFINING MHPSS

48. **The composite term Mental Health and Psychosocial Support (MHPSS)**<sup>42</sup> is widely understood 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.”<sup>43</sup>
49. Interventions should be appropriate for the cultural context, built from existing support structures and relationships,<sup>44</sup> avoid Western-external imposition,<sup>45</sup> and can include strengthening community and family supports, focused (person-to-person) non-specialized supports, and specialized services offered by psychologists, psychiatrists, and nurses.<sup>46</sup>
50. **A more specific definition defines MHPSS as any intervention and/or practice that promotes well-being**<sup>47</sup> through recognizing the link between the psychological and the social. These *interventions and practices*<sup>48</sup> can take place with a range of *constituencies*

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<sup>41</sup> At the same time, the term psychosocial is not perfect, as it can create a misperception of human experience—of the emotional and psychological (psycho) and the social and material (social) as separate entities. Psychosocial can also imply that one linearly affects the other. This does not conceptually grasp how people live their lives and how their sense of well-being is holistically understood. The so-called “psycho” and the “social” cannot be separated. See John Williamson and Malia Robinson, “Psychosocial Interventions or Integrated Programming for Well-being?”, *Intervention* 4, no. 1 (2006): 4–25, and Brandon Hamber et al., “Exploring How Context Matters in Addressing the Impact of Armed Conflict,” in *Psychosocial Perspectives on Peacebuilding*, eds. Brandon Hamber and Elizabeth Gallagher (New York: Springer, 2015), on the challenges of compartmentalizing psychological, social, and material issues. Palmary, Hamber, and Nunez, *Healing and Change*, also outline these challenges in Southern African contexts where the dislocation experienced by migrants in South Africa living in violent and dangerous contexts results in a state of ontological insecurity that manifests itself in economic, spiritual, psychological, and physical ways and, perhaps most importantly, refuses neat distinctions between these categories.

<sup>42</sup> This report uses the term MHPSS as it is recognizable within international development circles; however, it is important to acknowledge that the acronym has been met with significant opposition by some practitioners working in contexts where the inclusion of the reference to mental health remains. The term MHPSS runs the risk of disengagement. In these contexts, non-clinical language is important to prevent “misunderstandings, mistrust, stigmatization and incorrect assumptions.” Bubenzer, Tankink, and Sliep, *Integrating Mental Health*, 32.

<sup>43</sup> IASC, *Mental Health and Psychosocial Support in Humanitarian Emergencies: What Should Humanitarian Health Actors Know?* (Geneva: IASC Reference Group for Mental Health and Psychosocial Support in Emergency Settings, 2010).

<sup>44</sup> IASC, *Humanitarian Emergencies*.

<sup>45</sup> Bubenzer, Tankink, and Sliep, *Integrating Mental Health*.

<sup>46</sup> IASC, *IASC guidelines*.

<sup>47</sup> Most scholarship on MHPSS focuses on its outcome (extent to which well-being or psychosocial health is enhanced), rather than on the types of interventions. This is also important because often other terms are used for MHPSS-style interventions, such as people-to-people peacebuilding work, intergroup engagement, capacity-building, intergroup contact, or community development. See Hamber et al., “Exploring How Context Matters.”

<sup>48</sup> It is important to note that the above definition mentions *interventions and practices*. The project team who worked on this definition contends that thinking about psychosocial in the context of “programs” or “interventions” was limited, as it implied

(e.g., victims' groups, refugees, young people, women) that operate in *different spaces* (e.g., the courtroom, Indigenous healing rituals, the therapy room, churches, etc.) and are driven by *different practitioners* (e.g., mental health workers, local community, activists).<sup>49</sup>

51. **MHPSS interventions can be wide-ranging**, including among others: disseminating information to the community at large; strengthening community and family supports (e.g., recreational, communal healing practices, traditional rituals, dialogue, sharing); creating safe spaces (e.g., creating child-friendly spaces); person-focused psychosocial work (e.g., psychological first aid or PFA); linking vulnerable individuals/families to resources (e.g., health services, livelihoods assistance, community resources, etc.) and following up to see if support is provided; and psychological intervention (e.g., basic counseling, addressing alcohol/substance use, preventing family violence).<sup>50</sup>

### Essential Psychosocial Interventions (at different levels)<sup>51</sup>

Individual	Family	Social
Case identification	Psycho education	Awareness
Psycho education	Family counseling	Training
Counseling	Strengthening the family dynamics (e.g., talking and eating together)	Intervention for special groups (children, widows, widowers, youths, etc.)
Other psychotherapy	Family reunification	Encourage to do religious and ritual activities
Yoga and relaxation	Social support	Encourage to do cultural activities
Family & social support	Capacity-building and income generation	Forming and reactivating CBOs
Referral and network	Follow-up	Re-establishing relationships, social networks
Capacity-building and income generation		Network with other NGOs
Rehabilitation		Encouraging networking with other communities
Follow-up		Follow-up

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only formally funded projects. However, many communities affected by armed conflict engage in a range of practices aimed at well-being that are not run as projects or programs, but which exist within and as part of the community fabric (e.g., healing rituals, grieving processes, use of churches, ceremonies, and commemorations). The wider term *psychosocial practices*, rather than interventions, captures this more effectively. Hamber et al., "Exploring How Context Matters."

<sup>49</sup> Hamber et al., "Exploring How Context Matters."

<sup>50</sup> IASC, *Who is Where, When, doing What (4Ws) in Mental Health and Psychosocial Support* (Geneva: IASC Reference Group for Mental Health and Psychosocial Support in Emergency Settings, 2012).

<sup>51</sup> Somasundaram, "Collective Trauma."



## C. CRITICAL ISSUES IN MHPSS

52. **A single point of entry for preventive strategies should be avoided.** Although helpful at times for individuals, there remains a tendency to see mental health and medical interventions (e.g., counseling) as the entry point to addressing psychosocial issues (and even prevention). However, other broader interventions or those that use different entry points are equally important (e.g., livelihood projects, inter-community sharing, dialogue, arts and theater, sports, or human rights awareness).
53. Arguably these **wider interventions that seek to build social cohesion** and change attitudes of individuals while addressing direct mental health challenges may have **more of an impact on prevention.**<sup>52</sup>
54. The **concept of “mental health” is met with stigma and prejudice** in many parts of the world. Context-specific awareness of the origin and scale of such stigma is critical to ensure that strategies aimed at positioning MHPSS in prevention efforts are not thwarted from the outset.<sup>53</sup>
55. The **temporal dimensions of addressing human rights** also need to be considered, including its intergenerational dimensions. Therefore, no framework for prevention **should be seen as a quick fix**; rather, any such framework will need to have multiple entry points using a complex temporal perspective.
56. Emotional well-being is dependent on the social context; however, in contexts of mass human rights violations or their aftermath, **the situation is often volatile and dynamic**, changing rapidly over different time periods. **Prevention cannot be understood as a static process of uniform interventions, but rather needs to be continually adaptive** in the face of extremely challenging social contexts.
57. Thus, reconstructing individuals and society after massive human rights violations is **a multifaceted process that moves beyond addressing the individual needs** of those immediately impacted and cannot be thought of as a process of easily distinguishable short-term activities. **Those causing harm**, either by acts of commission or omission, are also part of the prevention process.

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<sup>52</sup> Flávia Carbonari, et al., *A Review of the Evidence and a Global Strategy for Violence Prevention* (Pathfinders for Peaceful, Just and Inclusive Societies, 2020), 72, [https://www.sdg16hub.org/system/files/2020-10/6c192f\\_f6036b2b1ecf4fd1a3d7687f-f7098a46.pdf](https://www.sdg16hub.org/system/files/2020-10/6c192f_f6036b2b1ecf4fd1a3d7687f-f7098a46.pdf).

<sup>53</sup> Bubenzer, Tankink, and Sliep, *Integrating Mental Health*.



## IV. MHPSS and Prevention

58. Although massive human rights violations and violence are experienced personally, they are **integrally linked to the social, cultural, and political context**.<sup>54</sup>

59. Although the context is vitally important, **focusing on individuals and their psychosocial well-being** and how they operate within groups and communities **has preventive value**. This is where MHPSS has a specific offering to make in the area of prevention.

60. Four broad groups of individuals can be identified where psychosocial impacts are linked to the prevention of violence and its perpetration:

- a. Individuals who experience and are impacted by human rights violations (those often characterized as **victims**). This is linked to prevention insofar as the experience of victimization may lead to how such individuals respond or are limited in their ability **to claim rights and be active citizens** and participate in preventive activity or be part of a functioning body politic. Without addressing the needs of those victimized, there is also a **risk that massive human rights violations may affect what is transmitted across generations** through reluctance or difficulty sharing experiences or developing negative attitudes and beliefs about others in society.<sup>55</sup>

**The experience of victimization may limit the ability to claim rights and be active citizens and participate in preventive activity or be part of a functioning body politic.**

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<sup>54</sup> Eran Halperin, *Emotions in Conflict: Inhibitors and Facilitators of Peace Making* (New York: Routledge, 2016), 7. In the words of Halperin, “emotions do not operate in a vacuum,” and this is what makes studying the psychological processes surrounding intractable conflicts different from considering such issues in other areas of life.

<sup>55</sup> Trauma has individual but also collective and multigenerational implications. In disaster or conflict scenarios, the individual may be too affected to claim rights and may turn to the collective for help. However, the collective is also traumatized: the social fabric has been eroded, and social networks can no longer support their members’ needs.

- b. The **general public** (civilians, who could also be considered **bystanders**)<sup>56</sup> who may support human rights violations either explicitly or by their inaction, or in some cases oppose or resist violence against others. Discourses, common knowledge, media, information, and education, among others, all play a critical role in opening up (or closing down) and sustaining imaginaries of bystander or civilian action. In prevention terms, the emotional register in society is vital in striking the right balance between informing bystanders of the gravity of the emerging violations and giving them agency to act against them.
  - c. Those who have the power to shape perceptions, beliefs, and attitudes held by others may influence their behavior. Of relevance here **are political leaders**<sup>57</sup> **who can shape discourses and perceptions** of different groups in society and stimulate exclusive identities,<sup>58</sup> confrontational behavior, and **cycles of violence or create a sense of powerlessness** among the general population that undermines preventive action.<sup>59</sup>
  - d. Individuals who, because of underlying attitudes and belief systems and the social and political contexts, may take part in **human rights violations as direct perpetrators** of violence.<sup>60</sup>
61. Although, for clarity, four groups have been identified as the focus of the prevention framework presented here, social roles and structures are more nuanced. Several such nuances are worth stating:
- a. Human rights violations are generally not a one-off event and are linked to complex histories; their occurrence and prevention are **best thought of across generations rather than as discrete moments in time**.
  - b. The **line between victim, perpetrator, and bystander is not always that clear** in some contexts, and sometimes even **leaders who advocate violence are themselves victims**. Individuals can play all the above roles at different times, some-

<sup>56</sup> Irene Bruna Seu, "Bystanders to Human Rights Abuses: A psychosocial perspective," in *Handbook of Human Rights*, ed. Thomas Cushman (London: Routledge, 2011), 533–47.

<sup>57</sup> Edward N. Drodge and Steven A. Murphy, "Interrogating Emotions in Police Leadership," *Human Resource Development Review* 1, no. 4 (2002): 428. The notion of the "wounded leader" is a constructive way to illustrate how a psychosocial perspective can inform preventive initiatives. Leaders who have been wounded during conflict have often normalized the violence they survived as a byproduct of the struggle and have little to no chance to emotionally process their experiences due to the pace of political demands. This can lead to whole experiences of the conflict being wholly disregarded and falling through the cracks during their efforts in policy building.

<sup>58</sup> Danieli, *International Handbook*, 7. This is not to say that the development of identities is a straightforward or one-dimensional process. Identity "involves a complex interplay of multiple spheres or systems. Among these are the biological and intrapsychic; the interpersonal-familial, social, and communal; the ethnic, cultural, ethical, religious, spiritual, and natural; the educational/professional/occupational; the material/economic, legal, environmental, political, national, and international."

<sup>59</sup> The flipside is also true—political leaders can be pivotal in preventing violence through negotiation with adversaries, reaching out to the out-group, or by how they publicly talk about different groups.

<sup>60</sup> Ervin Staub, "The Psychology of Perpetrators and Bystanders," *Political Psychology* 6, no. 1 (1985): 61–85.

times by choice but often because of social positioning (class, ethnicity, gender) and other circumstances. This dynamic process means the public can move into each of the three positions (victims, perpetrators, passive or active bystanders) and oppose or perpetrate human rights violations themselves depending on a range of factors.<sup>61</sup>

- c. Issues such as **identity**, which can be manipulated for political ends, **are not one-dimensional or static**. Identity “involves a complex interplay of multiple spheres or systems. Among these are the biological and intrapsychic; the interpersonal-familial, social, and communal; the ethnic, cultural, ethical, religious, spiritual, and natural; the educational/professional/occupational; the material/economic, legal, environmental, political, national, and international.”<sup>62</sup>
- d. **Actions of individuals associated with the groups outlined above are linked to the social, cultural, and political context** in complex ways. The actions of individuals (as victims, perpetrators, bystanders, etc.) are not easily disentangled from the social context.

62. Although the points above highlight the complications involved in thinking about MHPSS from a preventive perspective, drawing on the psychosocial approach, **perceptions, beliefs, and attitudes (as well as psychological health) are shaped by society** and are not simply internal psychological states that develop on their own. This means that psychologies (and emotions in particular) are not immovable intrapsychic phenomena, but “socially constructed and therefore flexible and subject to shaping.”<sup>63</sup> This opens the door for preventive approaches at a range of levels.

**Perceptions, beliefs, and attitudes (as well as psychological health) are shaped by society and are not simply internal psychological states that develop on their own. Psychologies (and emotions in particular) are not immovable intrapsychic phenomena, but “socially constructed and therefore flexible and subject to shaping.” This opens the door for preventive approaches at a range of levels.**

<sup>61</sup> Irene Bruna Seu, *Passivity Generation: Human Rights and Everyday Morality* (London: Palgrave, 2013). Perpetrators, victims, and bystanders exist on a continuum, rather than as distinct and separate positions. The crucial element of this continuum that makes it vital for prevention is that they are in a state of dynamic equilibrium. “Dynamic equilibrium,” according to Seu, refers to the unstable—and therefore amenable-to-change—quality of bystander phenomena, both in terms of switching from inaction to action (and vice versa) and the multiple factors influencing the shifts. Hence, as bystanders, the general public can move into each of the three positions (victims, perpetrators, passive or active bystanders) and oppose or perpetrate human rights violations themselves. Social, cultural, political, biographical, and emotional contexts play a key role in influencing the shifts within this continuum. Bystanders’ capacity to intervene diminishes the closer they are to becoming victims themselves. Therefore, it is essential to engage them as early as possible before the escalation of violence threatens them directly. Additionally, victims of violence, particularly from an early age, are more likely to repeat patterns of violence.

<sup>62</sup> Danieli, *International Handbook*, 7.

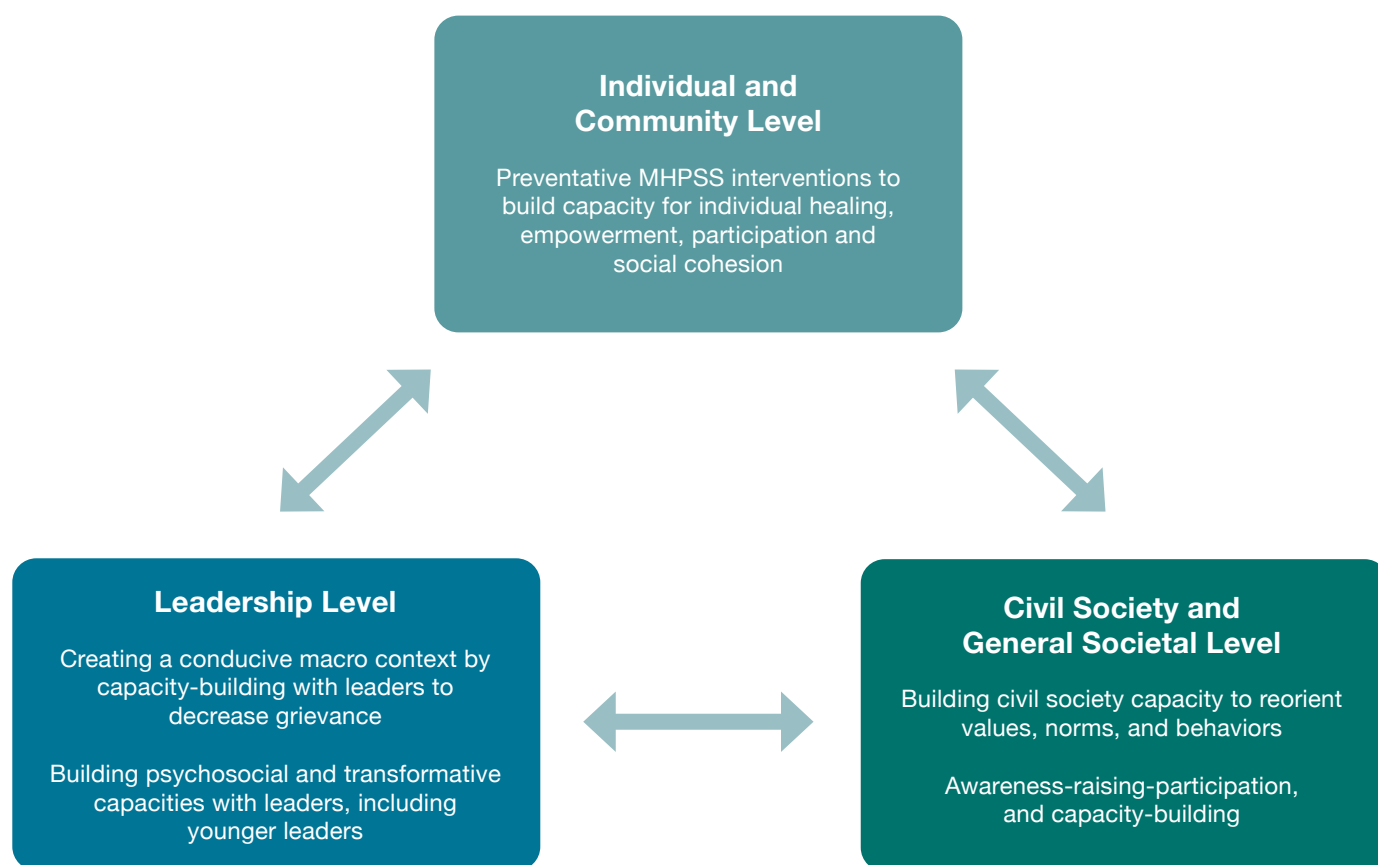
<sup>63</sup> Drodge and Murphy, “Interrogating Emotions,” 428.

## A. PREVENTIVE MEASURES

63. The overall approach to the numerous preventive measures that follow **is prevention through capacity-building**. Capacity-building is highlighted in the Sustainable Development Goals as a key component of development (see SDG 17, 17.9), and this thinking can be extrapolated to psychosocial well-being.
64. **Capacity-building** is defined as “the process of developing and strengthening the skills, instincts, abilities, processes and resources that organizations and communities need to survive, adapt, and thrive.” In this sense, capacity-building is understood as “**transformation that is generated and sustained over time from within; transformation of this kind goes beyond performing tasks to changing mindsets and attitudes.**”<sup>64</sup>
65. Thinking of prevention **in this transformative, capacity-generating way** allows more room to address the diverse, dynamic, and multigenerational impacts of mass human rights violations.
66. To enhance prevention through MHPSS, capacity-building is **necessary at three levels**:
- a. Individual and community level
  - b. Civil society and social level
  - c. Leadership level
67. **Capacity-building at the different levels entails diverse approaches.** At the individual and community level, the focus of capacity-building is to increase participation and empowerment to help people help themselves. The focus at the civil society and broad social level is to facilitate engagement and collective action. At the leadership level, the focus is to build capacity to ensure a psychosocial-informed ethical executive function and governance in society.

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<sup>64</sup> “Capacity-Building,” Academic Impact, United Nations, <https://www.un.org/en/academic-impact/capacity-building>.



## B. INTERVENTIONS

<b>Support</b>	Support individual and community MHPSS programming to address psychosocial harm and needs, promote active citizenship, participation, and engagement in preventive activities, and foster social cohesion and integration, especially through intergroup contact and attitudinal change between divided groups and with direct perpetrators.
<b>Create</b>	Build civil society capacity to reorient values, norms, and behaviors, including interventions with bystanders and human rights awareness-raising, and enhance social participation.
<b>Influence</b>	State and non-state actors can provide positive psychosocial contexts that decrease the drivers of grievance. Working with political and young leaders is key to creating conducive contexts for prevention.

## *i.* Individual and community level

### *a.* Support: Prevention through MHPSS interventions

Support individual and community MHPSS programming to address psychosocial harm and needs, promote active citizenship, participation, and engagement in preventive activities, and foster social cohesion and integration, especially through intergroup contact and attitudinal change between divided groups and direct perpetrators.

Capacity-building at the individual and community level is underpinned by **support**—support for individuals, for each other, and for the agencies that provide MHPSS.

68. Such interventions relate specifically to prevention insofar as they tackle the psychological impacts of massive human rights violations from the narrow (personal impacts such as fear, psychological harm, trauma, and stigmatization that decreases engagement in society) through to wider impacts (intergroup distrust, persistent cultures of violence, entrenched attitudes, cycles of violence) at both individual and community levels.
69. MHPSS interventions can have two main specific and interrelated impacts in terms of prevention:
  - a. First, MHPSS interventions can address psychological distress and harm and, in so doing, **assist individuals in engaging more fully in their communities**, ensuring their rights can be actualized and met and allowing them to engage more fully in society, thereby strengthening social cohesion as a preventive buffer. **Addressing psychosocial needs can impact prevention by promoting active citizenship**, despite the negative effects of psychosocial harm. In other words, building individual capacities to claim their rights and engaging those perceived as the “the other” to build trust at a local level. This can happen when MHPSS interventions deal with their trauma and hurt, develop complex thinking styles and emotional literacy, build self-esteem, and—through different entry points such as livelihood projects or sharing and collecting of stories (among others)—enhance community, social, and political participation.
  - b. Second, **MHPSS interventions can break cycles of grievance** that are integrally linked to current or future violence. In other words, MHPSS can help improve the **relationships between groups** at a wider social level and foster positive identities of out-groups. Such MHPSS can be wide-ranging—e.g., dialogue, storytelling, theater and art, memory work, **intergenerational work** and sensitization, prejudice reduc-



tion, intergroup contact,<sup>65</sup> and shared memorialization. It is reasonable to assume that the healing of the traumatic experiences of individuals within a collective will benefit the group as a whole. However, further interventions, building on the ideas of collective trauma outlined earlier, could include focusing on collective healing through engaging **in various forms of cultural work**. MHPSS programming should focus on remembering and the power of narratives in understanding the past and reorientating values, norms, and behaviors. Some interventions can also be narrower in focus, targeting specific perpetrators to prevent future violations through changing relationships and attitudes—i.e., perpetrator-focused programs aimed at restorative justice or addressing violent masculinities.

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<sup>65</sup> See Thomas F. Pettigrew, “Intergroup contact theory,” *Annual Review of Psychology* 49 (1998): 65–85; Thomas F. Pettigrew and Linda R. Tropp, “A Meta-Analytic Test of Intergroup Contact Theory,” *Journal of Personality and Social Psychology* 90, no. 5 (2006): 751–83; and Miles Hewstone, “Intergroup contact: Panacea for Prejudice?,” *The Psychologist* 16, no. 7 (2003): 352–54. See also Daniel Chirot and Clark McCauley, *Why not kill them all? The logic and prevention of mass political murder* (Princeton: Princeton University Press, 2006). Although not explored in depth in the examples, there is a substantial social psychology field on the benefits of contact between groups, known as the “contact hypothesis.” Pettigrew and Tropp, “Meta-Analytic Test.” As Chirot and McCauley note, “there is developing evidence that contact-based peace education has a small but significant effect on improving intergroup attitudes. Meeting and liking individual members of a group in conflict with one’s own group can make a contribution toward humanizing the enemy.” For contact to work, however, research shows specific conditions need to be met. Contact should be prolonged and adequate space should be given for people to get to know one another for intergroup contact to help change attitudes or affect the perception of the other. Hewstone, “Panacea for Prejudice?,” and Pettigrew, “Intergroup contact theory.” “Optimal intergroup contact requires time for cross-group friendships to develop” and needs to move beyond short-term contact. Pettigrew, “Intergroup contact theory,” 76. Groups also need to feel an equal status level when they engage, and the context matters. “Institutional support buttressed by civil society institutions and active interaction among community leaders, such connections are unlikely to resist polarization in politically tense situations.” Chirot and McCauley, *Why not kill them all?*, 191.



**b. Prevention through addressing psychosocial needs leading to active citizenship**

**CASE STUDY**

**A Holistic Approach to Survival in Syria**<sup>66</sup> represents a long-term engagement and psychosocial support process led by civil society partners Dawlaty and Women Now for Development (Women Now) consisting of a range of long-term initiatives. One of these involved the two organizations collecting stories of women to archive their narratives and visions of the conflict as part of building an oral history archive.<sup>67</sup> Based on the experience of Women Now and the women with whom it worked, the initiative focused on forced disappearances.

Between 2016–18, a total of 52 women relatives of forcibly disappeared persons were interviewed about the social, psychological, financial, and economic impacts of the enforced disappearances on their lives. The resulting *Shadows of the Disappeared* report sought to highlight the long-term “gendered” impacts of enforced disappearances on society and integrate the silenced voices of women into the dialogue on Syrian reconstruction. This report was a new beginning for many women family members of the disappeared, as it created counter-narratives based on the lived realities of marginalized women and confronted the propaganda by warring parties. The production of this knowledge became part of a struggle against forgetting. For the women interviewed in the *Shadows of the Disappeared* project, talking about their experiences and being heard helped break the silence about their experiences and led, through Women Now, to establishing a support system for the interviewees.

In addition to psychological support, the women interviewed were offered other support services, such as childcare and wider referrals. With the support of Women Now, Dawlaty and the wider Syrian campaign (a group called “Families for Freedom”) were formed. This women-led movement comprises the largest group of families of the disappeared, advocating for the rights of their families and demanding to know where their loved ones are.<sup>68</sup> From providing physical and psychological safe spaces to conducting feminist, ethical, and engaged research that includes providing psychosocial support and case management to interviewees, as well as fostering the formation of advocacy and psychosocial support groups, Women Now has supported women’s participation and leadership to create a new narrative about the conflict and lead the way to change.

<sup>66</sup> Nisren S.H., Helmut Krieger, Adriana Qubaiova, and Klaudia Wieser, *A Holistic Approach to Survival: Transforming Research Strategies in Contexts of War and Conflict Zones* (Vienna: KnowWar and Women Now for Development, 2022), <https://women-now.org/a-holistic-approach-to-survival/>.

<sup>67</sup> Dawlaty and Women Now for Development, *Shadows of the Disappeared: Testimonies of Syrian Female Relatives Left with Loss and Ambiguity* (Dawlaty and Women Now for Development, 2018), <https://dawlaty.org/publications/shadows-of-the-disappeared/>.

<sup>68</sup> Dawlaty and Women Now for Development, *Shadows of the Disappeared*, 49.

## CASE STUDY

**UN Women in Kosovo**<sup>69</sup> has supported initiatives to provide justice for survivors of conflict-related sexual violence. Between 2015 and 2018, with the support of the European Union, UN Women implemented a Gender Sensitive Transitional Justice (GSTJ) program in Kosovo. Through the GSTJ program in Kosovo, UN Women provided technical support to the Commission on the Recognition and Verification of the Status of Sexual Violence During the Kosovo Liberation War (the Commission), the Inter-Ministerial Working Group on Dealing with the Past, and civil society organizations on a range of transitional-justice-related areas.

After extensive consultation with survivors on the reparations process, supporting livelihoods was an expressed need of women.<sup>70</sup> Responding to this direct request, UN Women established a micro-grant project to assist survivors in starting or upscaling their own small businesses, intending to create synergies with future reparations through the Commission, which was established in 2017.<sup>71</sup> An evaluation of the program found that the economic impact, though varied from beneficiary to beneficiary and business to business, has been substantial for all survivors.<sup>72</sup> Physical and mental health impacts were also reported, including improved general well-being and a renewed sense of hope for life and the future. This, in turn, led to a commitment by survivors to see the Commission process through and ensure justice is done.<sup>73</sup> This demonstrates the power of the micro-grants and their broader psychosocial impact to boost self-confidence among survivors in accessing and exercising their right to reparations and assuage their fear of stigma and backlash.

<sup>69</sup> See Brandon Hamber, *Transitional Justice, Mental Health and Psychosocial Support: Renewing the United Nations Approach to Transitional Justice* (New York: 2023), <https://www.ohchr.org/sites/default/files/documents/issues/transitionaljustice/sg-guidance-note/SG-GuidanceNote-TJ-Mental-Health-digital.pdf>.

<sup>70</sup> Siobhan Hobbs, *The Conflict Did Not Bring Us Flowers: The need for comprehensive reparations for conflict-related sexual violence in Kosovo* (Kosovo: UN Women, 2016), <https://www.unwomen.org/en/digital-library/publications/2016/8/the-conflict-did-not-bring-us-flowers>.

<sup>71</sup> The case study details are taken from Siobhan Hobbs, *Bees of Change: The exponential impact of micro-grants for survivors of conflict-related sexual violence in Kosovo* (Pristina: UN Women, 2019). Much of the text is replicated directly from this report, although with some additions in the introduction.

<sup>72</sup> Hobbs, *Bees of Change*.

<sup>73</sup> Hobbs, *Bees of Change*.

### c. *Prevention through breaking the cycles of grievance*

#### CASE STUDY

**The European Community Humanitarian Office (ECHO)** provides one of the earliest and most interesting foundations of the impact of psychosocial interventions when it comes to prevention. In 1993, the international community joined together to fund and support NGOs offering psychosocial support to women and children in former Yugoslavia.

Following two years of experience of psychosocial support programs under war conditions, the European Community Task Force (ECTF) Psychosocial Unit undertook a large-scale evaluation of the supported projects run by a range of organizations. It drew on data from 2,291 beneficiaries (of about 25,000 who had received support via seven NGOs) and 167 staff members.<sup>74</sup> The range of MHPSS was vast, including socializing, simply talking with the staff, handicraft work, physical activities such as dancing, singing, or sports, various training courses, attending talks, and individual therapies. From a clinical perspective, trauma symptoms were reduced considerably, with 90 percent reporting being less lonely, in a better mood, and achieving a higher degree of inner peace.<sup>75</sup> Space for contact, care, and understanding seemed to be the primary need. In terms of prevention, what was interesting, however, was that 68 percent reported being less angry and bitter, which the authors note as important because these were the feelings associated with revenge or continuation of conflict.<sup>76</sup> Interestingly, the authors seem disappointed, noting that these changes were considerably less than others. They recommend that more work is needed to reframe anger positively (e.g., testimony work, advocacy). Nonetheless, this early pioneering study offers much promise in terms of MHPSS's contribution to addressing ongoing grievances, and a 68 percent reduction in anger and bitterness is substantial.

<sup>74</sup> Inger Agger and Jadranka Mimica, *ECHO psychosocial assistance to victims of war in Bosnia-Herzegovina and Croatia: An evaluation* (Brussels: European Community Humanitarian Office, 1996).

<sup>75</sup> Agger and Mimica, *ECHO psychosocial assistance*.

<sup>76</sup> Agger and Mimica, *ECHO psychosocial assistance*.

## CASE STUDY

**Action-Based Psychosocial Reconciliation Approach in post-Gacaca Rwanda (ABPRA)** was a program implemented in two rural villages of Rwanda in partnership with Prison Fellowship Rwanda (PFR) and the Rwanda National Unity and Reconciliation Commission in Between 2011 and 2013.<sup>77</sup> In summary, this program included eight dyads consisting of survivors and their direct perpetrators living in the same community. Together, for set periods, the dyads engaged in collaborative labor, including (a) harvesting corn, (b) harvesting ground nuts, (c) harvesting sorghum, (d) making clay bricks for a house renovation, (e) processing corn, (f) processing ground nuts, (g) seeding tomatoes, and (h) weeding a cassava plantation.

Through these activities and the conversations and interactions around them, all participants reported that they found them healing and helpful in strengthening their relationships. The pilot study showed that ABPRA offered a low-cost solution “to the stagnation of forgiveness-seeking; their courageous engagements opened the door to their new relationships through which they healed, forgave, reconciled, nurtured and transformed their relationships with each other, grew together and began to share lives together again in peace and harmony.”<sup>78</sup> Although only a pilot study, and one that raises many questions about notions of forgiveness and reconciliation, the study highlights the possibilities of engagement and contact (and cooperation) in transforming relationships through MHPSS interventions.

<sup>77</sup> Masahiro Minami, “Ubwiyunge Mubikorwa (reconciliation in action): Development and Field Piloting of Action-Based Psychosocial Reconciliation Approach in post-Gacaca Rwanda,” *Intervention* 18, no. 2 (2020): 129–38.

<sup>78</sup> Minami, “Ubwiyunge Mubikorwa,” 136.

## CASE STUDY

**THARS (Trauma Healing and Reconciliation Services) and Impunity Watch in Burundi** implemented a trauma-healing, psychosocial, and intergenerational support strategy at the community level.<sup>79</sup> Following a crisis in 2015 and widescale violence and demonstrations, Impunity Watch research showed that young people still often fell back on their ethnicity to understand and explain the political upheavals surrounding them, acting on the back of inherited traumas.<sup>80</sup> As a result, young people were also open to political manipulation, as shown by the political violence of 2015.<sup>81</sup>

The THARS and Impunity Watch program utilized pedagogical tools that served as memorials for the communities (memory books). Memory books of community histories were compiled into a resource that served as a memorial for the communities and ensured multiple narratives of the past were highlighted. In this initiative, youth were engaged as actors in addressing the past rather than merely passive recipients. Young people essentially drove intergenerational discussions and community-based justice/memory processes, thereby contributing to both youth and wider communities generating a more holistic understanding of the past and addressing ethnic misperceptions.<sup>82</sup> This program served to fill the gaps left by failed or weak transitional justice processes. However, the experience of Burundi shows the power of such initiatives as preventive tools if, for example, they were run in parallel with or as part of a more comprehensive and effective state-driven transitional justice process.

<sup>79</sup> The case is discussed in Brandon Hamber et al., *Youth, Peace and Security Psychosocial Support and Societal Transformation* (Geneva: Interpeace, 2022). This publication also stresses the intergenerational benefits of this program.

<sup>80</sup> Impunity Watch, “Burundi: Citizenship in crisis,” *Great Lakes Dispatches* 1 (Utrecht: Impunity Watch, 2015), [https://www.impunitywatch.org/wp-content/uploads/2022/08/ResearchReport\\_Burundi\\_Citizenship\\_in\\_Crisis\\_2015\\_eng-1.pdf](https://www.impunitywatch.org/wp-content/uploads/2022/08/ResearchReport_Burundi_Citizenship_in_Crisis_2015_eng-1.pdf).

<sup>81</sup> Impunity Watch and Oxfam, *Policy Brief: Citizens’ Perceptions of Conflict Transformation in the Great Lakes Region (Burundi, DRC, Rwanda)* (The Hague: Impunity Watch and Oxfam, 2015).

<sup>82</sup> Hamber et al., *Youth, Peace and Security*.

## CASE STUDY

**Interpeace with the Prison Fellowship Rwanda (PFR)** program in Rwanda, aimed at reinforcing community capacity for social cohesion and reconciliation through societal trauma healing, is a more recent program focusing on former perpetrators of violence.<sup>83</sup> As part of the initial Gacaca process in Rwanda, many individuals imprisoned due to their actions during the genocide are being released. This has created an urgent need to consider reintegration and prevent future tensions and violence.

In October 2020, the pilot project began in the Bugesera District, but it is not an isolated one-off NGO project. This program is unique because it is run by local organizations partnering with the official government and transitional justice processes. The program is a collaboration between Interpeace with the Prison Fellowship Rwanda (PFR) and in partnership with the National Unity and Reconciliation Commission (NURC) and other government institutions (mainly the Mental Health Division of the Ministry of Health, the Rwanda Correctional Service, and Bugesera District), and with funds from the European Union (EU). The program offers MHPSS structures and programs to communities and former prisoners to promote social cohesion, reduce trauma, and stimulate socio-economic development at the same time. These supports have been developed within a framework for coordinating MHPSS at the district level.

It is an extensive program, but some of the activities include, for example, “human libraries” where you can “borrow” a person (unemployed, ex-prisoner, refugee) instead of a book to listen to their life story for 30 minutes. The goal is to fight biases and prejudice through listening, storytelling, and humanization. Community-based sociotherapy that integrates psychological trauma healing with rebuilding community trust and resilience is also used.<sup>84</sup> This program offers an alternative as to how MHPSS can be integrated into reintegration programs.

<sup>83</sup> See Hamber, *Transitional Justice*, which outlines the details of this program.

<sup>84</sup> A full description of this program can be found in Hamber, *Transitional Justice*. Thanks to Frank Kayitare, Ernest Dukuzumuremyi, and Abiosseh Davis from Interpeace in drafting this case study and for the comprehensive information supplied, additions, and feedback.

## ii. Civil society and general societal level

### a. Create: Community and individual participation for prevention

Build civil society capacity to reorientate values, norms, and behaviors, including interventions with bystanders and human rights awareness-raising, and enhance social participation.

Capacity-building at the civil society and general societal level is demonstrated by the ability to **create** new values and norms and facilitate ways to achieve them through engagement, awareness, and collective action.

70. IASC has identified disseminating information to the community at large (e.g., raising awareness on MHPSS, such as through messages about positive coping and available supports), as well as facilitating **conditions for community mobilization, community organization, community ownership, or community control** over emergency relief in general as vital to any comprehensive MHPSS interventions.<sup>85</sup> Such levels of participation can include all efforts to involve community members (groups of people, families, relatives, peers, neighbors or others who have a common interest) in discussions, decisions, and actions that affect them and their future.<sup>86</sup>
71. Not only are **civil society structures essential to delivering MHPSS work in the first place**, but they can also serve to calm passions in times of political crisis and inter-communal conflict (of course, they can inflame them, too).<sup>87</sup> To this end, civil society is thought of as wider than organizations offering MHPSS, encompassing a broader range of groups operating in society (community groups, trade unions, religious institutions, etc.). Accordingly, “not all such institutions have as their explicit purpose to promote inter-communal tolerance and co-operation, but they can be encouraged to do so, whatever their original purpose may have been. If, on top of that, they bring together leading members of diverse communities, by the very act of existing and functioning, they provide mechanisms that can mitigate hostility and conflict.”<sup>88</sup> At the same time, MHPSS interventions and those who deliver them are also a crucial part of civil society. Arguably, **without strengthening civil society, MHPSS becomes impossible, and prevention limited.**

**Without  
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and prevention  
limited.**

<sup>85</sup> IASC, *Who is Where*.

<sup>86</sup> IASC, *IASC guidelines*.

<sup>87</sup> Chirot and McCauley, *Why not kill them all?*

<sup>88</sup> Chirot and McCauley, *Why not kill them all?*, 192.



72. Ashutosh Varshney has provided some of the most robust evidence of the role of civil society, noting that “the single most critical variable in determining which cities in India have or have not experienced intercommunal violence between Muslims and Hindus is the strength of their civil society institutions.”<sup>89</sup> Likewise, Alexander argues that civil society is key to addressing social injuries, and this requires a process of lifting the past “out of the symbolic frames that earlier had justified their imposition. New, more civil narratives must be created, stories that allow the weak and the powerful, the victims and their persecutors, to switch moral places.”<sup>90</sup>
73. Comprehensive **social processes of participation** (say, through local representation) arguably assist directly or create the context for individuals to claim rights and support individuals in claiming their rights (legal and access issues), along with offering the capacity-building to make sure people are capable of doing this (deal with their trauma, able to have an internal dialogue, emotional literacy), as noted above (see subsection i). **Human rights awareness-raising and public programs can sensitize the public to harm and its consequences** and address issues such as bystander apathy leading to an inability to act. Human rights education for mental health professionals / key personnel (e.g., UN) increases knowledge of the impact of past violence and makes such professionals more active participants in future prevention.
74. UN Women, for example, has developed a framework for addressing violence against women, outlining specifically the role of civil society groups as active participants in supporting prevention through a range of programs (e.g., community mobilization to change social norms; gender equality training for women and girls; economic empowerment through micro-finance plus gender-sensitive training).<sup>91</sup> They do not refer to such interventions as MH-PSS, but many of these interventions are just that.
75. Most importantly, **by engaging the wider public in prevention messaging, populations can be activated that seek to prevent harm**, and not just individuals. Key issues here include information sharing (for example, awareness-raising through sharing stories of victims in the general public increases the sensitivity of the public to the impact of political violence, decreasing support for more extremist positions) and the activation of and collaboration with civil society and localized leadership/influencers. Community participation could involve setting up effective communication channels and community consultation mechanisms, engaging local leadership, and establishing feedback loops and processes for evaluative feedback at a local level focused on prevention.

<sup>89</sup> Chirot and McCauley, *Why not kill them all?*, 190. It is further noted: “In cities where community leaders were in regular contact through integrated civic organizations and could reassure each other at times of heightened political tension that they would keep their communities quiet, and when they could use their organizational authority to tell their own people to remain peaceful, there was little violence, even when other nearby places were erupting in deadly ethnic riots.”

<sup>90</sup> Alexander, “Civil Sphere.” 88.

<sup>91</sup> UN Women, *A Framework to Underpin Action to Prevent Violence Against Women* (New York: UN Women, 2020).



## CASE STUDY

**Fambul Tok in Sierra Leone** came about to fill the gaps left by the Sierra Leone Truth and Reconciliation Commission (2002–04) to address the impact of the conflict at a community level.<sup>92</sup> It demonstrates how communities' psychosocial and transitional justice needs can be addressed through tradition-based approaches (truth-telling bonfires and traditional cleansing ceremonies) and how rooting such work in broader community participation processes creates more sustainable outcomes. However, Fambul Tok, in partnership with the US-based operating foundation Catalyst for Peace (CFP), has always embodied a larger vision of sustained whole-community engagement, rather than working with limited constituencies (e.g., those directly injured in the war). Therefore, although initially focused on addressing the direct wounds of war, the more comprehensive vision centers on local community creativity and agency, seeking to build structures and holding spaces for local people and communities to address their own needs.<sup>93</sup> This has meant that a more sustainable network has been developed across the communities with which they work.

This community process had significant impacts: “When Ebola struck Sierra Leone in 2014, many of the same patterns from the post-war period emerged—a short-term, massive influx of aid from the outside, hardly reaching local communities or creating space for them to lead. What aid did reach local communities was often met with such distrust as counterproductive, in contrast to the success of the trusted local networks Fambul Tok had established, which became effective prevention channels. As the crisis abated, Fambul Tok and Catalyst for Peace stepped up efforts to shift the national response and adapted their community-building methodology to post-Ebola recovery and development. The local level work was renamed the People’s Planning Process (PPP), which we built on by then creating district-level inclusive governance structures (Inclusive District Committees, or IDCs) as a space for all district development stakeholders to collaborate. These structures, in turn, were a bulwark against violence during the hotly contested national election of 2018.”<sup>94</sup>

<sup>92</sup> “Our Story,” Fambul Tok, [www.fambultok.com](http://www.fambultok.com). “Fambul Tok emerged in Sierra Leone as a face-to-face community-owned program bringing together perpetrators and victims of the violence in Sierra Leone’s eleven-year civil war through ceremonies rooted in the local traditions of war-torn villages. It provides Sierra Leonean citizens with an opportunity to come to terms with what happened during the war, to talk, to heal, and chart a new path forward together. Fambul Tok is built upon Sierra Leone’s “family talk” tradition of discussing and resolving issues within the security of a family circle. The program works at the village level to help communities organize ceremonies that include truth-telling bonfires and traditional cleansing ceremonies – practices that many communities have not employed since before the war. Fambul Tok drew on age-old traditions of confession, apology, and forgiveness, to address the legacy of the conflict.” A range of resources, including a film and teaching guides, as well as more details on the initiative are available at [www.fambultok.org](http://www.fambultok.org).

<sup>93</sup> Catalyst for Peace, *Constellating Peace from the Inside Out: A Global Gathering and Report from the Immersive Peer Learning Event* (Freetown: Catalyst for Peace, 2019).

<sup>94</sup> Libby Hoffman, *Community Healing, From the Inside Out—Systems Lessons from Fambul Tok in Sierra Leone* (Falmouth: Catalyst for Peace, 2019), 16.

## CASE STUDY

**Social Forum for Peace in the Basque Country** emerged in Spain in a context where, despite the cessation of violence in the Basque country following the Euskadi Ta Askatasuna's (ETA) renunciation of violence in 2011, no tangible steps or efforts towards peace and reconciliation were made.<sup>95</sup> The ETA retained all its weapons, and the Spanish government refused to engage in discussions or consider modifying its prison policies. Basque society stepped up to fill the gap left by the absence of a conventional peace process ongoing in Basque country. Civil society organizations mobilized thousands of people to stand against all forms of violence and created a social movement for dialogue and agreement in the Basque country. An opinion poll conducted by Euskobarometro indicated that 80 percent of the people wanted conversations between the Spanish government and the ETA. This movement led to the Social Forum of March 2013, which created the space for discussions and generated ideas to motivate progress. The Social Forum of 2013 drew up twelve recommendations which can be summarized in five main goals:

1. Reaching basic consensus to face the main challenges of the peace process;
2. Designing, developing, and culminating a disarmament and dismantling process;
3. Facilitating the reintegration of imprisoned persons and persons on the run;
4. Promoting and guaranteeing human rights;
5. Preserving truth and memory in order to face the past with fairness and set the basis for future co-existence.

Through the Social Forum for Peace organized in 2013, in the presence of international experts who shared their experiences of other DDR cases, Basque society—rather than governments—“opened up to a debate that, until then, had been relegated to the primary actors directly involved in the process. The Forum played a key role in putting disarmament on civil society’s agenda. In its final recommendations, the Social Forum promoted the design, development, and implementation of a controlled, orderly, and agreed process for the dismantling of structures and the disarming of ETA.”<sup>96</sup> In January 2016, the Social Forum went a step further by convening a new meeting with the aim of establishing a framework for the disarmament process. After that meeting, the Social Forum presented a document setting out the criteria on which a process of disarmament should be based, following international experience. In addition to establishing the basis on which disarmament should happen, the Social Forum conducted broad consultations with political and institutional actors. In an event held at the Aiete Palace on 22 October 2016, the newly restructured

<sup>95</sup> See Basque Permanent Social Forum, “ETA’s Disarmament in the Context of International DDR Guidelines: Lessons learnt from an innovative Basque scenario,” *Berghof Transitions Series No. 12* (Berlin: Berghof Foundation, 2017).

<sup>96</sup> Basque Permanent Social Forum, “ETA’s Disarmament,” 14.

Permanent Social Forum expressed its conviction that there was sufficient consensus on the need to move forward in completing disarmament through the destruction of ETA's arsenals. Following this and a wide range of processes, including the engagement of local and international interlocutors, ETA began a unilateral process of disarming on 7 April 2017. Since then, the Permanent Social Forum has brought together several civil society organizations and individuals to continue to pursue these goals and further the Basque peace process consistently up to 2022. In October 2021, the Forum also served as a vehicle for a wide-reaching apology from ETA.<sup>97</sup>

The goal of the Basque Social Forum is not to replace institutions and political parties, but rather to urge these groups to engage in dialogue to find new solutions and replace the informal space these civil society organizations and people have created with a formal arena for dialogue. By engaging the wider public on a large scale, and in the absence of a formal peace process, the Forum has significantly prevented ongoing violence. It provides a voice to those who are being ignored by state processes and sensitizes these groups to wider community demands, as well as giving voice to victims of conflict, thus serving a preventive function.

### iii. Leadership level

#### a. *Influence: Conducive contexts and transformative leadership*

State and non-state actors can provide positive psychosocial contexts that decrease the drivers of grievance. Working with political and young leaders is key to creating conducive contexts for prevention.

Capacity-building among the established and new leadership is underscored by its ability to **influence** the wider context by embracing ideas and ideals in public policies that can be implemented through psychosocial-informed and ethical executive function and governance.

76. The state and other influential social and political groupings (from armed non-state actors to wider civil society) significantly influence individuals. How they relate to, sponsor, or undermine attitudes or beliefs impacting why human rights violations persist or how they can be prevented influences the three groups above. Top leadership, for example, is important in **setting the tone on crucial issues of cohesion**, and civil society can reinforce new values,

<sup>97</sup> Sam Jones, "Basque leader says Eta terror deaths 'should never have happened,'" *The Guardian*, October 18, 2021, <https://www.theguardian.com/world/2021/oct/18/basque-leader-arnaldo-otegi-eta-terror-deaths-should-never-have-happened>.

norms, and behaviors that bridge or create links across different identities.<sup>98</sup> What is more, a failure in leadership can exacerbate further cycles of violence. As noted, “[d]iminished trust in their governments and the pervasive sense of hopelessness discourage young people from investing in their future and lead to a short-term outlook on life.”<sup>99</sup> Such outlooks invariably link not only to mental health problems (such as suicide or alcoholism) but can contribute to marginalization, alienation, and violence.

77. Although there is a tendency to see leadership as instrumental in institution-building or reconstruction during or after times of conflict, leaders can be an essential aspect of prevention from a psychosocial perspective. **Leaders can model specific language and interactions and support preventive interventions.** Leaders have long been associated with causing and preventing violence—as has been noted, “violence is rarely ‘spontaneous.’ It is directed and encouraged by leaders. The leadership may come from the very top, as it did when German Nazi or Rwandan Hutu leaders organized systematic genocides or when Serbian leaders encouraged genocidal ethnic cleansing in parts of Yugoslavia”<sup>100</sup> and “without leaders and elites who accept some of the right values, tolerance will ultimately fail. Adjusting institutions at both the national and the local level is important but not sufficient.”<sup>101</sup> Likewise, it has been noted that speaking the language of solidarity is key to addressing collective trauma, but this process entails significantly more than mere rhetoric; rather, “[i]t **depends on deeply emotional and highly symbolic social performances of reconciliation.** Only via such cultural performances can experiences of collective trauma become occasions for reconstructing collective identity, one in which antipathy gives way to mutual identification. If a new structure of feeling is constructed, then there can be civil comity and a more cosmopolitan constitution.”<sup>102</sup>
78. Of course, many leaders may not wish to engage or see their role in prevention directly in this symbolic and emotive way. However, to the degree possible, **direct engagement with leaders** (from political influencers and other leaders or engagement with civil society, mentors, and advisers) should form part of a comprehensive prevention strategy. Although a focus on political leadership and their role in peace processes—and also in terms of studies on transformative (emotionally informed) leadership,<sup>103</sup> for example—is not new, what is advocated for below includes a focus on what broadly could be termed **building the capacity in terms of the psychosocial aspects of leadership**, not merely the capacity of leaders to bring their followers with them, compromise, engage in transactional processes with former enemies, negotiate and have the technical skills to govern.<sup>104</sup> Further, psychosocial sensitivities that could be focused on with leaders include understanding the importance of emotions in pub-

<sup>98</sup> UNDP, *Strengthening Social Cohesion*.

<sup>99</sup> Simpson, *Missing Peace*, 104.

<sup>100</sup> Chirof and McCauley, *Why not kill them all?*, 192.

<sup>101</sup> Chirof and McCauley, *Why not kill them all?*, 202.

<sup>102</sup> Alexander, “Civil Sphere,” 92.

<sup>103</sup> Michiko Kuroda, “Application of Emotional Intelligence to Peacebuilding and Development Through Training and Capacity Building,” *Journal of Peacebuilding & Development* 15, no. 3 (2020): 366–71.

<sup>104</sup> See, e.g., Gordon Peake, Cathy Gormley-Heenan, and Mari Fitzduff, “From Warlords to Peacelords: Local Leadership Capacity in Peace Processes,” *International Conflict Research Institute* (2005), or more recently, Juliana Tappe Ortiz, “Political leadership for peace processes: Juan Manuel Santos – Between hawk and dove,” *Leadership* 17, no. 1 (2020): 99–117.

lic life, the negative influence of exclusionary identities, and the transformative capacity they can harness.

79. Such preventive psychosocial interventions should focus on building the capacity of transformation psychosocial leadership<sup>105</sup> in terms of:

- a. empathy for those harmed by political conflict;
- b. understanding the grievances and victimhood of those perceived as “the other”;
- c. developing messaging and approaches that instill positivity and hope, and alternative future visions;
- d. supporting initiatives that open public space for dialogue, truth-telling, and exploring competing narratives;
- e. encouraging acknowledgment and apology for harm caused;
- f. increasing emotional literacy among leaders and addressing their suffering that may impact their leadership styles.

80. A further area for development concerns **developing younger leaders’ skills** in terms of the issues outlined above. This links to the importance of multigenerational concerns outlined earlier. In Chirot and McCauley’s *Why not kill them all? The logic and prevention of mass political murder*, investigating strategies to prevent genocide, they conclude with these words: “Some leaders who can balance the need to mobilize support for just causes while avoiding deadly essentializing of enemies occasionally do emerge, and we tend to remember the most famous ones as exceptional heroes. The Abraham Lincolns, Jawaharlal Nehrus, and Nelson Mandelas of this world are rare. But educating substantial numbers of young potential elites about history in this manner would certainly increase the likelihood that there will be more, and at many different levels of leadership. It may seem utopian to even mention such a long-term project, but that, after all, is one of the functions of higher education.”<sup>106</sup> This is also needed at a community level and across the educational spectrum and should include sensitivities—for example, increasing leadership for prevention from a gendered perspective. **Youth-led organizations can be an important bulwark against tensions in society and critical to fostering trust and social cohesion.**<sup>107</sup> Youth leadership programs, as preventive mechanisms, are highlighted in a range of countries across the globe.<sup>108</sup>

**Youth-led organizations can be an important bulwark against tensions in society and critical to fostering trust and social cohesion.**

<sup>105</sup> Peake, Gormley-Heenan, and Fitzduff, “From Warlords to Peacelords,” 14. This is all of course, a tall order within the confines of complex political processes. Arguing for capacity-building with leaders of this kind should not be conflated with optimistically framed ideas of finding or cultivating the next Mandela figure or producing a new “box of tricks,” but rather seen as the gradual introduction and development of what has been called the psychosocial aspects of leadership in capacity-development processes.

<sup>106</sup> Chirot and McCauley, *Why not kill them all?*, 210.

<sup>107</sup> Simpson, *Missing Peace*.

<sup>108</sup> Including programs such as: Outward Bound Peacebuilding, organized by the Palestinian-Israeli Emerging Leaders Program; Transit Youth (Yemen), which works to connect young Yemeni forced migrants both inside and outside Yemen’s borders; and

## CASE STUDY

**Promoting Positive Relations in Amsterdam.** Although direct or documented psychosocial programming with leaders in societies in conflict is difficult to find, in many contexts leadership has been a key focus of peacemaking and building.<sup>109</sup> This is undoubtedly true of building support for peace processes or supporting transitional justice mechanisms.<sup>110</sup> All of which have preventive dimensions. However, adding more reflexive and psychosocial dimensions to such interventions is an addition to the standard engagement with leadership.

The aim of reducing intercommunity tension in Amsterdam motivated interventions with the Amsterdam city council and mayor following the 2004 assault on Theo van Gogh that led to violent acts against Muslims—257 in total. The mayor and city leadership engaged Ervin Staub, a social psychologist, in a range of interventions focused on better understanding the current context. The model helped develop an “alternate language to comprehend the new reality” and led to a “change in discourse,” as the mayor worked with Staub to break the conflict cycle.<sup>111</sup> The approach not only focused on the dynamics of conflict in the social and psychological space and working this through with local leaders, but was followed by a series of interventions, such as public debates, exhibitions, festivals, television, advertising through billboards, and new structures, such as the council of young Amsterdam Muslims.<sup>112</sup>

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My Friend campaign in Myanmar. See Simpson, *Missing Peace*, 52.

<sup>109</sup> See Mauro Galluccio, “Transformative Leadership for Peace Negotiation,” in *Psychological and Political Strategies for Peace Negotiation*, eds. Francesco Aquilarand Mauro Galluccio (New York: Springer, 2011); Nic Cheeseman, Francis Onditi, and Cristina D’Alessandro, “Introduction to the Special Issue: Women, Leadership, and Peace in Africa,” *African Conflict and Peacebuilding Review* 7, no. 1 (2017): 1–17; Vern Neufeld Redekop, “The Emergence of Integrative Peacebuilding: A Complexity-Based Approach to Professional Leadership Development,” *Journal of Peacebuilding & Development* 14, no. 3 (2019): 272–87.

<sup>110</sup> See Herbert C. Kelman, Philip Mattar, and Neil Caplan, *Transforming the Israeli-Palestinian Conflict: From mutual negation to reconciliation* (New York: Routledge, 2018). Some of most often cited examples in the social psychology literature are the numerous examples from the work of Herb Kelman, who runs numerous interactive problem-solving workshops with Israeli and Palestinian leaders using a psychological approach.

<sup>111</sup> Jeroen de Lange, “The Impact of the Staub Model on Policy Making in Amsterdam Regarding Polarization and Radicalization,” *Peace & Conflict: Journal of Peace Psychology* 13, no. 3 (2007): 362.

<sup>112</sup> Ervin Staub, “Preventing Violence and Terrorism and Promoting Positive Relations Between Dutch and Muslim Communities in Amsterdam,” *Peace & Conflict: Journal of Peace Psychology* 13, no. 3 (2007): 333–60; de Lange, “Impact of the Staub Model,” 361–64.



## CASE STUDY

**The Peace Impact Programme (PIP)**, supported by the International Fund for Ireland, aims to build sustainable peace and prosperity within communities of greatest economic and social deprivation, where there are low levels of engagement in peacebuilding and limited benefits from the peace process in Northern Ireland.<sup>113</sup> It commenced in early 2013 and supports projects in Northern Ireland and the border counties targeting the most disadvantaged and disaffected areas with high levels of conflict and still experiencing ongoing tension and violence.

Although PIP has a range of components and activities, leadership is a crucial factor. One of the challenges in the communities it targets is limited community development. Peacebuilding efforts are hampered by the weaknesses in leadership and the fact that existing structures are often dominated by gatekeepers and heavily influenced by political parties or paramilitary groups. In this scenario, it is difficult for people to voice their opinions and for new leaders to emerge. These four projects (in common with all PIP projects) create opportunities and a safe space for people to engage on important issues, and new leaders may emerge through this process. The projects have mainly provided space for both young people and women to engage more actively and express their views. Both these groups would have been previously under-represented in leadership and peacebuilding.

An evaluation of the program, referring to one of the many areas they work in, noted successes in how young leaders were “learning how to be a community association, learning the values of community work and being responsive to the community rather than personal /political agendas.”<sup>114</sup> Although this is one example, there are numerous examples across Northern Ireland where young leaders are being engaged to address the current leadership deficits and prevent young people from being recruited into paramilitaries.<sup>115</sup> That said, the degree to which this takes on the psychosocial aspects of leadership remains an area for development, although issues such as the challenge of exclusionary identities are tackled in most programs.

<sup>113</sup> Much of the information below is directly quoted from *Peace Impact Programme: Case Studies* (Belfast: International Fund for Ireland and USAID, 2015), <http://niopa.qub.ac.uk/handle/NIOPA/9334>.

<sup>114</sup> International Fund for Ireland and USAID, *Case Studies*.

<sup>115</sup> Jonny Byrne et al., “Political Violence and Young People: Exploring levels of risk, motivations and targeted preventative work,” *Co-operation Ireland* (2016).





## V. Recommendations

It is not possible to be prescriptive in terms of a catch-all MHPSS strategy for prevention, as all contexts are different and cultural and contextual sensitivity is required. However, below are a range of key implementation issues that would need to be addressed to ensure the appropriate development of a MHPSS framework for prevention:

1. For clarity, the three levels above (individual, civil society, leadership) have been treated as standalone objects of interventions. However, addressing the suffering created by mass human rights violations and promoting well-being in their aftermath requires **all three levels to come together to participate in a process whereby shared experiences can be addressed as a collective whole**: as a community, society, and nation. It is a process that requires the support of MHPSS as individuals, communities, civil societies, NGOs, governments, and leaders come together to work through their common experience of what happened.
2. One of the central features of mass human rights violations is that no sector of society is immune; the experience of harm and suffering (and often perpetration through omission or commission) can be generalized, although different groups might be impacted differently. To this end, **no one can isolate themselves from addressing such large-scale harm, including elites, political leaders, and even those intervening or offering support**. However, massive, shared traumas such as genocides and other human rights abuses are often too difficult to process and work through collectively, especially in the aftermath of conflict, when individuals withdraw, communities become isolated, and societies fragment. In such situations, the collective healing of shared experiences is needed more than ever. **The opportunity to *heal together* from these shared experiences is also an opportunity to bring people together**, bridging multiple levels: leaders, civil societies, individuals, and communities. Prevention and MHPSS **cannot be divorced from the macro-political processes of cooperation, promoting co-existence, and ultimately reconciliation**.
3. When addressing the psychosocial impact of massive human rights violations and conflict, using MHPSS approaches for prevention must be seen as **a long-term process**. This means **moving away from the “quick fix” mentality**. Focus on “upstream” long-term activities appropriate for each context—e.g., early years childhood development, youth leadership,

and many MHPSS programs that require long-term investment in fostering individual transformation and **changes in entire social and cultural systems across generations**. This is not to say that any activities could not be offset by setting short-, medium-, and long-term strategies that should be continually reviewed, taking the context into consideration.

4. Although the details of the approaches outlined above may seem overly theoretical to many practitioners and policymakers, the concept is important when **dealing with massive human rights violations**. Treating the impact of violence as an individual psychological phenomenon will produce a limited repertoire of interventions, such as counseling. However, **the complexity of how violence manifests, and its individual and collective consequences, cannot be ignored**. This creates **a more demanding landscape for prevention**, but one that is true to the genuine impacts being addressed.
5. There are many positive evaluations of MHPSS interventions, but this raises questions about **scaling up**. This can potentially be addressed in several ways:
  - a. The **redirecting of resources** to preventive programming from curative/tertiary preventive work and other areas (e.g., military, security spending). In other words, a shift in political agenda. This is necessary if sustained and sustainable MHPSS with a preventive effect on a wider societal level is the desired outcome.
  - b. Without community and civil society expertise, delivering MHPSS and enhancing individual well-being and social transformation would be impossible. The UN, for example, cannot provide these services. Instead, such bodies should serve as a catalyst to support their development.
  - c. The stress of this report has been on leadership. Although this presents its own challenges, changes in **leadership and approaches** offer the potential to affect large swathes of individuals.
6. Creating and animating existing supports, as well as community participation, **requires resources**. This would require local expertise but might also require external donor support. However, this needs to be deployed strategically, linking with a key principle of MHPSS—i.e., community and family-level supports exist in all contexts, even during times of violence and insecurity. That said, different levels of intervention might be needed to stimulate or build such networks, along with substantial support at the community and family levels.
7. **Consultation, participation, and engagement** wider than those directly affected by violence will be necessary. Existing frameworks, such as the United Nations Community Engagement Guidelines on Peacebuilding and Sustaining Peace, must be built upon.<sup>116</sup> More deliberative consultation, participation, and engagement strategies to enhance MHPSS and

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<sup>116</sup> United Nations, *United Nations Community Engagement Guidelines on Peacebuilding and Sustaining Peace* (New York: United Nations, 2020).

address particularly the collective impacts of violence, engaging more challenging issues, such as divided historical narratives, will be needed. These are not issues that will be addressed by a series of interventions alone, but which require **entire systems to engage**.

8. To implement the above, **significant amounts of risk-taking and new initiatives** would be necessary, and new approaches would need to be piloted. For example, although youth leadership programs abound globally, and interventions with politicians are common in terms of negotiation or mediation, developing a transformative psychosocial-focused training program would be completely new and encounter significant resistance due to its lack of focus on issues such as security in international contexts.
9. A range of challenges exists in terms of conceptualizing and operationalizing an MHPSS approach in a variety of spheres seeking to address issues of prevention. Although this report has focused on leadership at the political level, **psychosocial thinking can benefit a range of organizations**, including service providers, funders, and those building capacities, such as the UN. **A range of awareness-raising and training initiatives at a number of levels and entry points** will be necessary if MHPSS is to be linked to prevention.
10. **Developing a more substantial evidence base** for existing programs and activities, including data collection on the scale of mental health impacts of massive human rights violations and subsequent psychosocial needs to be addressed, is imperative. Issues such as distinctive impacts must be considered (e.g., gender, age, socio-economic status). This can help demonstrate the need, serve as a baseline for future research and evaluation, and raise awareness about the need for MHPSS.



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