

Guidance

INTEGRATING MHPSS AND PEACEKEEKING: A MAPPING AND RECOMMANDATIONS FOR PRACTITIONERS

IASC Reference Group on Mental Health and Psychosocial Support in Emergency Settings

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Integrating MHPSS and peacebuilding:

a mapping and recommendations for practitioners





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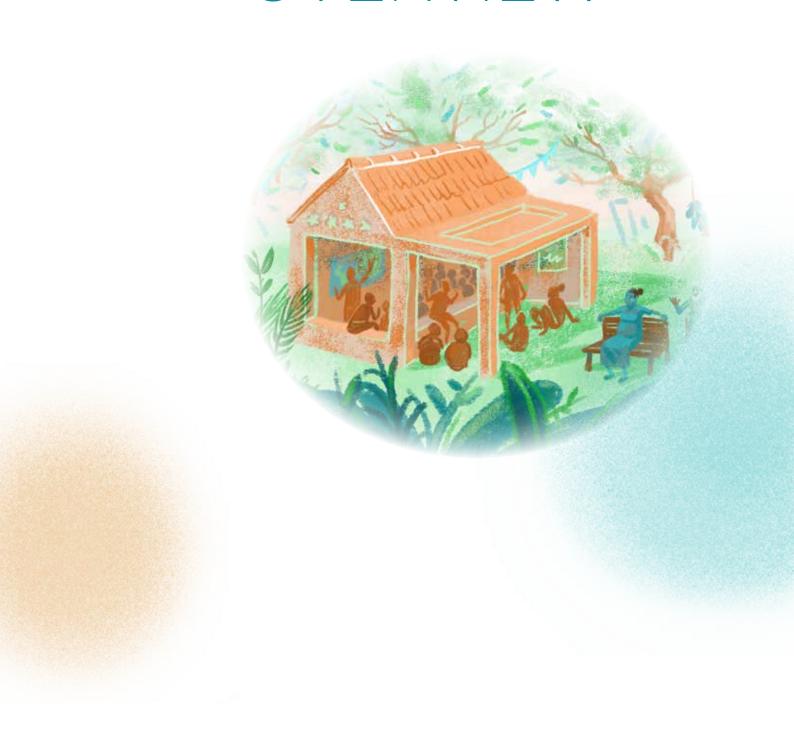
ABBREVIATIONS

CAAFAG	Children associated with armed forces and armed groups	
CIMIC	Civil-military cooperation	
СРР	Communist Party of the Philippines	
cso	Civil society organization	
CTF	Consultation Task Force on Reconciliation Mechanisms	
DDR	Disarmament, demobilization and reintegration	
DRC	Democratic Republic of the Congo	
ECD	Early childhood development	
FGD	Focus group discussion	
GBV	Gender-based violence	
GIZ	Deutsche Gesellschaft für Internationale Zusammenarbeit	
GSN	Green String Network	
IASC	Inter-Agency Standing Committee	
IDP	Internally displaced person	
ЮМ	International Organization for Migration	
IPV	Intimate partner violence	
KII	Key informant interview	
KQ	Kumekucha Quest	
SOGIESC	Sexual orientation, gender identity, gender expression and sex characteristics	
LMICS	Low- and middle-income countries	
M&E	Monitoring and evaluation	

MHPSS	Mental health and psychosocial support
MLI	MHPSS and livelihood integration
NGO	Non-governmental organization
ОСНА	Office for the Coordination of Humanitarian Affairs
PAR	Participatory action research
PFA	Psychological first aid
PBSO	Peacebuilding Support Office
PRISMA	Preferred Reporting Items for Systematic Reviews and Meta-Analyses
PTSD	Post-traumatic stress disorder
SPR	Skills for Psychological Recovery
τJ	Transitional justice
TSK	The Story Kitchen
TRC	Truth and Reconciliation Commission
UN	United Nations
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
UNSCR	UN Security Council Resolution
wcs	Women conflict survivors
UNICEF	United Nations Children's Agency
WFP	World Food Programme
WHO	World Health Organization
ZTF	Zonal Task Force

SECTION I

OVERVIEW



Executive summary

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



Why integration matters

To build peace, there is a strong need to integrate mental health and psychosocial support (MHPSS) with peacebuilding efforts. Broadly, peace cannot take root if conflict-affected

people are suffering from deep emotional impacts and grievances that blunt trust and willingness to support peace processes. Without peace and social cohesion, mental health and well-being are undermined by entrenched hatreds and fears, social divisions and stresses associated with ongoing insecurity.

Most integrative efforts and publications have focused on bringing MHPSS approaches into peacebuilding work. Although this is highly important, it is equally important to bring peacebuilding approaches into MHPSS work. In this sense, the integration of MHPSS and peacebuilding is bidirectional. Current evidence indicates that:

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

2. programmes and actions that interconnect MHPSS and peacebuilding are likely to have greater positive effect than could be achieved through a focus on either area by itself;

3. integrative efforts can help to reduce "do no harm" issues.

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

This report grows out of a related, convergent stream of work led by the Inter-Agency Standing Committee MHPSS Reference Group (IASC MHPSS RG), which in February 2019 reconvened the Thematic Working Group on MHPSS and Peacebuilding to bring together expertise from across the two fields and to develop a high-level framework for an integrated approach. The work of this thematic group, with an ongoing webinar series and global pre-survey in 2020 on integrating MHPSS and peacebuilding, provided a basis for this work. The report also aims to complement the UNDP guidance on integrating MHPSS into peacebuilding. Overall, it aims to enable and enrich the integration of MHPSS and peacebuilding in humanitarian, post-conflict and development settings. Based in part on a mapping process, and drawing on the insights from four global consultations, the report aims to describe the current state of work, analyse the connections between MHPSS and peacebuilding, examine commonalities and differences, identify challenges and areas for future development, enrich conceptualizations of integration and offer principles and recommendations for strengthening the practice of integration.

Key learnings from the mapping

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

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

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

The mapping found that most current work on integration spans diverse themes: addressing psychological and social impacts of armed conflict; transitional justice via the promotion of truth telling, reconciliation, reparations and memory; addressing GBV; conflict-sensitive programming; youth action; and reintegration of formerly recruited people. Other areas of focus included supporting empowerment and livelihoods; preventing violent extremism; mediation; community dialogues; and education, including peace education. In practice, there are often rich overlaps and interconnections across these diverse areas.

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

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

Participants identified three main types of entry point:

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

Facilitators of and challenges to integration faced most often by participants included areas such as:

- **1.** logistics and operations (e.g. commitment to integrative efforts, state actors' perception of "peacebuilding");
- **2.** approaches and practices (e.g. participatory processes, navigating culturally appropriate and conflict-sensitive language);
- **3.** practitioner capacities related to knowledge, skills, values and attitudes (e.g. programme team having expertise across both sectors, or opportunities for training, supervision and/or mentorship).

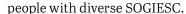
Five country case studies from Colombia, the Philippines, South Sudan, Sri Lanka and Syria offered more detailed understanding of how integration varies across contexts in response to diverse situations. The country case studies outlined main themes of work, programme examples and approaches, entry points,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

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

Grassroots actors in action

Grassroots actors are frequently invisible to outsiders, yet they are key agents who contribute in imaginative ways to strengthen social cohesion, well-being and resilience. Sincegrassroots actors may not describe their work as integrating MHPSS and peacebuilding, their contributions may be missed. Also, they often face significant challenges, such as discrimination, difficult economic circumstances and tokenized inclusion.

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



More broadly, grassroots actors largely use six modalities to catalyse MHPSS and peacebuilding integrative efforts: empowerment and livelihood processes; feminist movements; grassroots movements; Indigenous movements; policy-making and political processes; and social media and virtual programmes. Of note, these approaches tend to be unusually holistic, and the social movements from within them go well beyond the usual contours of NGO programming. Three modalities for expansion (i.e. ideas for further ways to

facilitate integrative efforts) are family and intergenerational support; strengthening "everyday" processes; and climate action.

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

Commonalities, differences and priorities for integration

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

Of course, differences also exist, and these are best regarded as opportunities for co-learning. Historically, work on peacebuilding has placed greater emphasis on the importance of power differences than has work on MHPSS. Significant differences arise in regard to terminology and also underlying conceptualizations. Some workers see "trauma healing" as foundational for work on peacebuilding, whereas other workers and the IASC Guidelines see a sole or dominant focus on this approach as pathologizing and as being an excessively clinical approach when applied to societies. Much needed are spaces for respectful dialogue, reflection and joint development of common frameworks and terminology. Currently, much more work has sought to weave MHPSS components into work on peacebuilding than the other way around.

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



Conceptualizations of integration

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

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

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

It may also be useful to think of integration as occurring across four different levels: at the level of programming (across all levels of the programme cycle), at the organization level (within an organization, agency or group), at the interorganization level (between two or more organizations, agencies or groups) and at a level related to conceptualizations (through different epistemologies, understandings of well-being and approaches to achieving political, social and psychological change). These four levels may develop separately, be brought closer together or braided together systematically, leading to light-touch linkage, partial integration or full integration respectively. In the braided approach, or full integration, for example, the people and organizations working to integrate MHPSS and peacebuilding in a particular region might form a community of practice whose members attempt to learn from each other about what is working and how toenable effective agency integration. The community of practice might also enable regular meetings and dialogues for purposes of co-learning, joint capacity-building and reflecting on complex issues such as how to support and learn from diverse cultural approaches or achieve better agreement on underlying conceptualizations of integrating MHPSS and peacebuilding.

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

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

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

Principles and recommendations

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

The six principles suggested for integrating MHPSS and peacebuilding are: 1) human rights and equity; 2) participation; 3) do no harm; 4) build on available resources and capacities; 5) integrated support systems; and 6) multilayered supports.

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

Background of the report



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

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

In 2020, the MHPSS agenda was raised in the context of the review process of the UN Peacebuilding Architecture. A Task Force, led by the MHPSS team at the Ministry of Foreign Affairs of the Netherlands, developed a set of core recommendations aimed at increasing interlinkages between MHPSS and peacebuilding. Also in 2020, the UN Secretary-General called for the integration of MHPSS and peacebuilding to be strengthened. Anticipating and contributing to these currents, in February 2019 the IASC MHPSS Reference Group convened the Thematic Working Group on MHPSS and Peacebuilding (co-led by Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) (Ananda Galappatti, Claudia Schraewer) and the United Nations Population Fund (UNFPA) (Henia Dakkak)) to bring together MHPSS and peacebuilding expertise to develop a more integrated approach. Even before the formation of the Working Group its members led diverse initiatives, including a

global survey (e.g. to understand what learning tools would be helpful for practitioners from both fields, and perceptions of key connections, complementarities, tensions and divergences of MHPSS and peacebuilding) and the hosting of webinars on topics of interest related to MHPSS and peacebuilding (e.g. integration with livelihoods, integration with climate change and highlighting the important role of young people). This report stands on the shoulders of these efforts and incorporates their insights.

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



How to use this report



This report is divided into three sections.

SECTION I: OVERVIEW provides readers with a concise summary and understanding of the findings (Executive summary) and information about the visionary leadership, processes and institutions that led to the making of this report (Background of the report).

SECTION II: TOWARDS INTEGRATION provides readers with evidence of why integrating MHPSS and peacebuilding is important and an overview of MHPSS and peacebuilding as separate fields and as fields coming together (Introduction and rationale); a summary of integration perceptions, approaches, programmes, facilitators, challenges, community engagement processes and lessons learned, including learnings from 11 programme case studies and 5 country case studies from Colombia, the Philippines, South Sudan, Sri Lanka and Syria (Key learnings from the mapping); a summary of more specific perceptions, challenges and areas of integrative action by grassroots actors, including women and girls, young people, men and boys, and people with diverse SOGIESC (Grassroots actors in action); and areas of convergence and divergence of MHPSS and peacebuilding and gaps and priorities for integration (Commonalities, differences and priorities for integration).

SECTION III: TOWARDS THE FUTURE OF INTEGRATION provides readers with an invitation to explore, reflect on and question conceptualizations of integration, including considering integration as a spectrum and as including multiple levels, such as programming and interorganizational levels (Conceptualizations of integration); and to consider principles and preliminary recommendations that can help to guide effective practice (Principles and recommendations).

At the end of each subsection, a "Key highlights" box is provided with core messaging and learnings.

SECTION II

TOWARDS INTEGRATION



Introduction and rationale

Armed conflict has devastating, long-term impacts on people and societies worldwide. Due to protracted conflicts in settings such as Syria, Colombia and the Democratic Republic of the Congo and new conflicts such as that in Ukraine, 2022 set an unacceptable precedent: for the first time, there were over 100 million forcibly displaced people in the world, including 48 million internally displaced persons (IDPs), 26.6 million refugees and 35 million children. Armed conflicts have become increasingly protracted, with many lasting a decade or longer. The protracted nature of conflicts and humanitarian crises has blurred the lines between humanitarian, post-conflict and development settings. As a result, many analysts now speak of a triple nexus between the humanitarian, development and peace sectors. 4.5

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

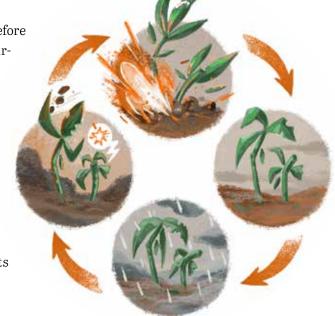
Why integrate MHPSS and peacebuilding?

Although peacebuilding and MHPSS have developed along separate lines,^{11,12} the two fields are inherently related and synergistic.^{13,14,15,16} Broadly, peace cannot take root if conflict-affected people are suffering from deep psychological and social impacts of war, armed conflict and destructive, intercommunal or intergroup conflict, which can impede peacebuilding and animate ongoing hostilities. Conversely, without peace, there are significant limits on people's mental health and psychosocial well-being. Fear, insecurity and ongoing violence impose enormous stresses, damage mental health and psychosocial well-being and shatter social cohesion and supports

such as social relations and networks.

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

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



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

Extensive evidence indicates that armed conflict increases rates of mental disorders such as post-traumatic stress disorder (PTSD) and depression. Significant psychosocial suffering in conflict settings comes from problems such as family separation, GBV, multiple losses, displacement, loss of livelihoods and disability-based discrimination, to name only a few. Suffering is often particularly intense for girls and women since armed conflicts amplify GBV (including rape and other atrocities used as weapons of war) and since GBV may continue or increase in prevalence even after ceasefires have been signed. People who have been the victims of conflict and have a mental health

condition are more likely to develop substance abuse problems and experience reduced functionality and ability to work, thereby reducing the ability of the community to recover economically and socially. Also, people who have been victims may become perpetrators themselves. This includes the experiences of children associated with armed forces and armed groups (CAAFAG), whose victimization at an early stage of life has significant consequences for their physical, mental and psychosocial well-being and takes a heavy toll on their relationships with their families and communities. The contribution to violence is also grounded in the underlying structural inequalities, culture and histories that constrain the lives of people, rendering conflict and violence an option among narrowing opportunities. Overall, mental disorders and psychosocial suffering are grievances that help to animate conflict and cycles of violence and block sustainable peace.

The harmful psychological effects of armed conflict can have significant intergenerational impacts. The emotional and social effects of war may accumulate and create a sense of victimization that becomes woven into the fabric of people's collective narratives, 30 which are subject to political manipulation, and social identities 11 that are passed down from one generation to the next, thereby inviting revenge and ongoing fighting. Parents' communications with their children can help to transmit traumatic memories and impacts, although this destructive pattern can be interrupted by appropriate social and therapeutic interventions. 12 Intergenerational impact is visible also in cycles of intimate partner violence (IPV), which is pervasive in many war zones, 33,34,35,36 directed primarily towards women and grounded in norms of male power and privileging. For children, exposure to IPV can lead to mental disorders, 37,38 conduct problems 39 and difficulties in learning at school. 40 Also, children who have been exposed to IPV are at greater risk of perpetrating IPV or suffering additional incidents of IPV, 41,42 thereby creating an intergenerational cycle that can increase the prevalence of violence in a society.



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

When work is done separately on peacebuilding only, or on MHPSS only, the positive effects are limited. For example, if peacebuilding were implemented by itself, its effectiveness would be reduced by the impact of unaddressed MHPSS needs. Civilians who have suffered emotional anguish or disorders such as PTSD are less likely to support peace processes. 43,44 In peacebuilding work to reintegrate CAAFAG and adult ex-combatants, MHPSS-related problems, including stigma, can block reintegration efforts, 45,46,47 increasing the risk that ex-CAAFAG will rejoin an armed group or become mercenaries. 48 Further, armed conflict carves deep social divisions that undermine social trust and cohesion and make it difficult for peacebuilding processes to take root or to become sustainable.⁴⁹ Settings that are presumed to be "post-conflict" frequently include psychological and social impacts, searing memories of injustices, humiliations and victimizations, and grievances that can lead to repetition and ongoing cycles of violence or claims to rights and desires.^{50,51} Children are socialized into these systems of violence and may see the violence as "normal".52 These settings often include psychological drivers of violence, such as entrenched hatreds and diabolical images of "the Other" that help to enable cycles of violence.53

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

For example, in one case badly stigmatized young mothers who had formerly been recruited into armed groups in Sierra Leone, Liberia and Uganda engaged in peer support and collectively decided to undertake livelihoods projects, while trusted community advisors advocated for them in the community. As a result, the young mothers and their children gained community acceptance and reported significantly increased well-being.⁶¹

Fortunately, these limitations can be overcome and better outcomes achieved when intentional steps are taken to integrate MHPSS and peacebuilding. Promising evidence suggests that it is possible to heal individual and collective impacts of war and genocide, with benefits to people's mental health, psychosocial well-being and willingness to support peace. 57,58,59,60 Effective interventions usually entail community-led dialogues about what has happened, reflection or education on the causes of the conflict, psychoeducation about "trauma" and effects of war,

storytelling with space for emotional expression and discussions of peace. However, the evidence in this area needs further development. For example, comparison groups are seldom included in programme designs, and a failure to use strong qualitative methods may obscure the voices and views of people in the community.

Although there is better documentation showing how MHPSS influences peacebuilding, peacebuilding efforts that strengthen social trust and social cohesion can have synergistic effects with community-based psychosocial supports, which also aims to strengthen relationships. Also, evidence indicates that work to support MHPSS can be more effective when it is integrated with truth telling, reparations and justice processes. ^{62,63,64} Box 1 provides further examples of how a peacebuilding approach can support MHPSS.

BOX 1

Examples of how a peacebuilding approach can support MHPSS

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

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

3. Integrating MHPSS and peacebuilding can help to reduce "do no harm" issues.

A lack of integration of MHPSS into peacebuilding processes can cause unintended harm. In general, people should not be encouraged to revisit painful memories unless

In Sierra Leone, where truth-telling processes led people to discuss painful memories without consideration of whether they were ready to discuss horrendous experiences and without MHPSS support, some people exhibited increased psychological suffering and vulnerability as a result.65 This do no harm issue could have been prevented through careful attention to the invasiveness of the questions, sensitivity to participants' readiness to talk and the availability of MHPSS support. Staff appropriately trained in MHPSS competencies (e.g. psychological first aid) could have prevented this issue from arising.

sufficient supports are available at the time of reawakening the memories and afterwards. Also, evidence from other contexts indicates that, for some people, talking and expression are less helpful than avoidance of the painful memories. ^{66,67}

A lack of integration of peacebuilding aspects into MHPSS work can similarly cause unintended harm. In humanitarian settings, where access to different areas is limited, MHPSS supports may be provided for the people who can be reached. Yet if those people come from only one side of the conflict, this could be perceived as favouritism and could worsen social divisions. This situation could be avoided by working in a conflict-sensitive manner, which is a foundational, evidence-based principle of peacebuilding. ⁶⁸ For example, during the Syrian crisis, some organizations facilitated a

region-wide response by providing MHPSS services to Syrian refugees and IDPs not only in Syria but also in Lebanon, Turkey and Jordan. ⁶⁹ A lack of attention to analysing how an intervention may play into the social, political and economic power relations and dynamics in a context may mean that an intervention unintentionally weakens connectors or strengthens dividers, which can undermine peacebuilding and reduce people's psychosocial well-being. Although the successful integration of MHPSS and peacebuilding does not prevent all do no harm issues, this integration can be a valuable step toward practice that is ethically appropriate and sensitive to both the conflict setting and the context.

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

A socio-ecological framework

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



Overview of the two fields

Considering the benefits of integration, it might be expected that there would be extensive integration between the areas of MHPSS and peacebuilding. Yet these two key areas have been and continue to be mostly separate. $^{70.71}$ Historically, peacebuilding and MHPSS have evolved in distinct manners, with differing histories, disciplinary roots, institutional homes, theories, methods, practices and problems of focus.

Peacebuilding

Working largely at macro and intergroup levels (e.g. to address tensions between competing political factions or ethnic groups), peacebuilding has sought to "prevent the resurgence of conflict and to create the conditions necessary for a sustainable peace in war-torn societies". 72 Work in this area has included addressing drivers of conflict; strengthening social trust, social cohesion and resilience; enabling peaceful approaches to managing conflict; promoting norms of nonviolence; enabling relational and conflict transformation at a societal level; disarmament, demobilization and reintegration (DDR) of armed forces and groups; human rights and election monitoring; and rehabilitation of national infrastructure, among others. Peacebuilding also includes transitional justice, the four pillars of which are truth telling, reparation, justice and guarantees of nonrepetition. Since peacebuilding is inherently interorganizational and multidisciplinary, peacebuilders have typically had ties with disciplines such as peace and conflict studies, political science, economics, international law and justice, international relations, human rights, sociology and development studies and also with areas such as African and cultural studies or women's and gender studies. Although it includes initiatives that address individual and small community group processes, 73 mainstream peacebuilding has focused more on societal issues and structural reforms than the MHPSS sector has.

MHPSS

MHPSS has emerged as part of humanitarian response in conflict and post-conflict settings and out of concern for the psychological and social impacts of war and conflict. The field of MHPSS is grounded primarily in disciplines such as psychiatry, psychology and social work, with connections also in anthropology, community development, child development, women's studies and the wider health field. MHPSS has been strongly influenced by Western psychiatry and psychology, which tend to focus on individual clinical disorders such as anxiety, PTSD, depression and schizophrenia. The field has also been influenced strongly by community-based psychosocial approaches that focus on relationships, the connections between emotional and social well-being, cultural understandings and practices and non-clinical forms of distress resulting from problems such as hunger, lack of livelihoods, family separation, discrimination, loss of social supports and living at risk of trafficking, GBV and recruitment into armed forces or groups.

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



Key peacebuilding actors at the United Nations include the Secretary-General, the Security Council, the General Assembly, the Department of Political and Peacebuilding Affairs, the Peacebuilding Commission, the Peacebuilding Fund, UN Women, the Department of Peace Operations, UNDP, UNFPA, UNICEF, IOM and WHO. GIZ has also been very active in supporting work that integrates MHPSS and peacebuilding. International alliances and networks include the Peace Alliance, the Global Coalition on Youth, Peace and Security, and Peace Direct. NGOs that are highly active on peacebuilding include Catholic Relief Services, Interpeace, Search for Common Ground and the International Association for Human Values (IAHV), among many others. Among

government actors, the Government of the Netherlands has led global conferences that connect MHPSS and peacebuilding and has helped to organize funding to support integrated work. Globally, the International Network on Conflict and Fragility (INCAF) serves as a coordination mechanism for peacebuilding within members of the OECD Development Assistance Committee (DAC). The g7+ also serves to support member countries to achieve transitions towards resilience and the next stages of development.

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

Key MHPSS actors at the UN include WHO, UNICEF, UNHCR, IOM, UNFPA, WFP, OCHA and the International Federation of Red Cross and Red Crescent Societies (IFRC), among others. Diverse governments in conflict-affected countries are active on MHPSS issues. Echoing the polarization mentioned above, mental health concerns are frequently addressed by a ministry of health, whereas psychosocial issues are addressed by a ministry of social welfare. The governments of the Netherlands and Germany have been strong advocates and supporters of the holistic MHPSS approach presented in the IASC Guidelines. Many different NGOs are active on issues of MHPSS.

Globally, the Inter-Agency Standing Committee (IASC) Reference Group on MHPSS (IASC MHPSS RG) coordinates diverse UN, (I)NGO and other actors in implementing the IASC Guidelines and enabling the holistic, multi-level approach that they envision.

The Reference Group has developed numerous resources and tools for conducting assessments and addressing different issues (see http://mhpss.net). It also oversees over 50 country-level Technical Working Groups (TWGs) that coordinate work on MHPSS.

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

Challenges to integration

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

Steps towards integration

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

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

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

Purpose

The purpose of this report is to enable and enrich the integration of MHPSS and peacebuilding in humanitarian, post-conflict and development settings. It aims to describe the current state of work, analyse the connections between MHPSS and peacebuilding, examine commonalities and differences, identify challenges and areas for future development and offer recommendations for strengthening practice that integrates these two fields. Building on the extensive work already done to connect MHPSS and peacebuilding, 81, 82, 83 this report is offered in a spirit of co-learning with many different people and of wanting to help develop a foundation for future work.

Introduction and rationale

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



Key learnings from the mapping

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

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

A draft report was prepared in January 2022. Between then and September 2022, feedback was sought from four global consultations, with the majority of the participants from low- and middle-income countries (LMICs). Suggestions from the global consultations helped to guide revision of this report. This revision also added a country case study from South Sudan and an additional programme case study. Additional information on the mapping is provided in Annex D.

Participant information

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

Views of integration

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



Why integration is important

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

- A peaceful society cannot exist if psychological impacts of war (such as grief, depression, stress and trauma) are left unaddressed in individuals, families and communities.
- The mental health and psychosocial well-being of individuals, families and communities cannot last if the social fabric is fragmented.
- Cycles of violence and armed conflict risk interrupting and damaging processes of healing.

Integration is important because it facilitates positive outcomes, such as individualand community-level well-being, resilience, social cohesion and attainment of rights and dignity; and larger-scale changes, such as a reduction in intergenerational conflict, breaking the cycle of violence, healing collective trauma and sustaining peace.

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

BOX 2

Some perceptions of why integration is important

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

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

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

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



The meaning of "integration"

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

BOX 3

Box 3. Some meanings of "integration"

Integration means:

- bringing the two sectors together to "create new awareness and change attitudes towards [the other sector]". Woman practitioner, global
- "using the tools, knowledge and practices of the peacebuilding sector and the MHPSS sector at the service of the contextual needs of communities and societies to enable them to move towards positive, sustainable peace [and] increased well-being". Woman practitioner, Nepal
- "identifying key joint elements to be shared and key elements to remain under [the] specific [sectors] while allowing for cross-reference". Woman practitioner, Uganda

Further, distinctive understandings emerged for women and girls and young people. These are explored in the "<u>Grassroots Actors in Action</u>" section (p. 48). Further examples can also be found in the country case studies for Colombia and Syria.

Levels of integration

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

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

The second type related to levels in other frameworks. For example, MHPSS and peace-building components might be integrated within the IASC Guidelines intervention pyramid.

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

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



Typology and diversity of programmes

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

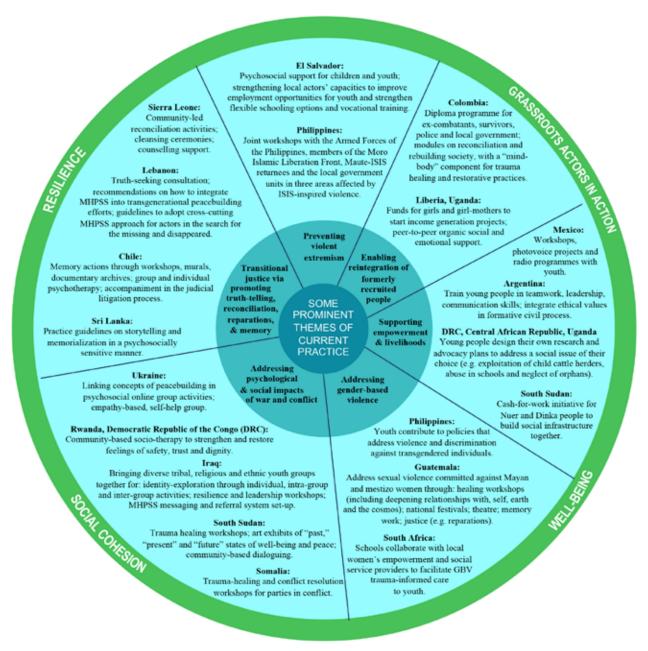
Frequent themes also included economics and empowerment, education (including peace education), community dialogues, mediation, memory and preventing violent extremism. Themes such as "health" or "human rights" appeared less frequently and were sometimes used as names for work that integrated MHPSS and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

To illustrate the diversity of work within some prominent themes of current integrative practice, Figure 1 (p. 24) indicates illustrative programme approaches for each theme. The six themes do not reflect the full diversity of themes, but rather showcase some of the main themes addressed in current integrative work. The size of the thematic area represents the prominence of that theme based upon the survey, interview and consultation data. The six themes, in order of prominence, are: addressing psychological and social impacts of war and conflict; transitional justice via the promotion of truth telling, reconciliation, reparations and memory; addressing GBV; supporting empowerment and livelihoods; preventing violent extremism; and enabling the reintegration of formerly recruited people. The themes and programme approaches are surrounded by the four cross-cutting themes of social cohesion, resilience, well-being and grassroots actors in action. Here, "grassroots actors in action" is understood as community-level people (including women and girls, young people, men and boys, and people with diverse SOGIESC) who champion positive change for well-being and peace at local, national and international levels. Table 2 in Annex D lists the organizations leading the work in each example in Figure 1.

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

FIGURE 1.

Some prominent themes of current practice and programme examples that link MHPSS and peacebuilding



Subgroups

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

BOX 4

Examples of subgroups addressed in current integrative work

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

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

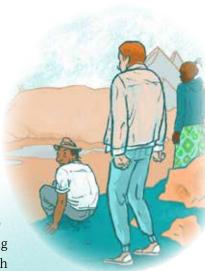
CHILDREN: Children are seen as moving through developmental stages such as early childhood (birth to school entry), middle childhood (6–10 years) and adolescence (early: 10–13 years and late: 15–18 years), with different cognitive, emotional, social and physical capabilities at different stages. For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

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

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

Programme case studies

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



Entry points

The participants identified three main types of entry point:

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

- 2 b Using programme approaches and/or leveraging networks or sectors that can act as a vessel for integrating MHPSS and peacebuilding. Cited approaches included: young people as catalysts for peace and well-being; the use of arts and cultural media; and working through the health sector, the education system or protection, safeguarding and inclusion arenas, which may seem more "neutral", for MHPSS and peacebuilding work. The latter was important in contexts in which terms such as "MHPSS" and "peacebuilding" had been politicized and hence were risky to use.
- **3** Building an MHPSS component into peacebuilding work. Much work at present focuses on this approach, which can, for example, build survivor-led processes and MHPSS into transitional justice processes. Of note, the entry point of building peacebuilding components into MHPSS remains underutilized.

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

Facilitators of and challenges to integrating MHPSS and peacebuilding

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



TABLE 1

Programme case studies – brief description, entry points, facilitators and challenges

LOCATION	DESCRIPTION OF PROGRAMME	ENTRY POINTS	FACILITATORS	CHALLENGES
COLOMBIA	Avoiding medicalized, outsider approaches, participatory action research (PAR) that respects Indigenous views is being used in Montes de María to develop a local approach to psychosocial care and strengthening social cohesion.	Do no harm Different associations (women's, youth, and Indigenous) Local activists	Creativity of local people Co-learning approach Long-term approach of pragmatic solidarity and mutual accompaniment	Political and transitional justice aspects (ongoing armed conflict, government corruption, failed reparations processes and challenging trials) Extreme poverty Intra-community conflicts
GUATEMALA	To rethread the social fabric, Indigenous Mayan women led photovoice and PAR activities to document root causes of the conflict, recover customs and beliefs and enable voice through supportive storytelling and economic empowerment.	Women in action Local ways of knowing, doing and being	Responsive to community members' material and cultural resources and insights and wisdom Long-term approach of pragmatic solidarity and mutual accompaniment	Political and transitional justice aspects (ongoing armed conflict, government corruption, failed reparations processes and challenging trials) Extreme poverty Intra-community conflicts
IRAQ	To address psychosocial needs, loss of livelihoods and tensions between returnees, IDPs and host community members, participants in livelihood projects have engaged in MHPSS well-being and social cohesion processes.	Leveraging livelihoods Assessments and evidence (leaning on needs assessment to demonstrate desire and need)	Opportunities for connection between community members Actors across the MHPSS and livelihood units had clearly defined responsibilities	Unpredictable security concerns and COVID-19 measures restricted staff movements Participants had difficulty in differentiating between MHPSS and livelihood services and staff
JORDAN & LEBANON	To prevent violent extremism, youth engaged in workshops on stress relief, resilience and human values; and led community service projects using the arts, addressing drivers of violence and promoting peace.	Understanding youth needs Working with those most at risk	Human connection and shared humanity of all was at the core of all processes Using a "psychosocial peacebuilding" approach Working closely with parents, teachers, community leaders awnd others of influence	Long-term funding Political parties and (I)NGOs promising benefits that did not materialize or were not culturally sensitive Reluctance of elder males in traditional communities to engage with non-traditional programmes

LOCATION	DESCRIPTION OF PROGRAMME	ENTRY POINTS	FACILITATORS	CHALLENGES
KASHMIR	To address human rights violations, participants attended culturally relevant safe spaces; engaged in creative expression and skills- building workshops; developed coping strategies and connectedness; and engaged in dialogues for peace.	Lack of appropriate support by the state Culture, spirituality and religion Understanding youth needs	Welcome local expressions Acknowledging experiences Creative, cultural, context-specific initiatives and processes (e.g. culturally sensitive language) Opportunities for connection	The controversial nature of being a "peacebuilder" Security concerns, stigma, lack of infrastructure and resources Lack of awareness of mental health challenges
KENYA	Youth at risk of violent extremism engaged in peer support groups and creative avenues (e.g. music, storytelling, sports) to address past trauma, build resilience and learn how to promote peace and justice.	Understanding youth needs Youth in action	Years of experience working with the communities Engaging local youth volunteers Opportunities for connection and mentorship	Time and effort to teach about ways that move beyond biomedical approaches and Western-/Eurocentric frameworks A subpar integrative approach may not fully unpick root causes of injustice, marginalization and violence
LEBANON	Young people from host and refugee communities collectively participate in climbing activities to build inclusive communities, improve mental wellbeing and address social cohesion challenges.	Understanding youth needs Physical health	Trained members on MHPSS-informed climbing and positive intergroup relations Network of partners that are aware of integration benefits Listening to, learning from and addressing needs of the community	Limited availability of climbing professionals with background in relevant fields for integration Lack of adequate financial resources, knowledge and skills in connecting peacebuilding and MHPSS Limited resources to sustain diverse network of actors who are familiar with integration
NEPAL	Women survivors of conflict and civilians with disabilities conducted locally designed collective memory work and advocacy efforts (e.g. network building, travelling photo exhibition) to support reconciliation and acceptance.	Lack of appropriate support by the state Women in action Mobilizing those "left behind"	Victims and survivors eager to receive MHPSS training Programme team that has experience in both MHPSS and peacebuilding Training peacebuilding staff in narrative practices to integrate psychosocial support (PSS) Provision for self-care, PSS or counselling for staff	MHPSS and peacebuilding sectors operate within different organizational networks MHPSS services largely restricted to two major cities, limiting access to those in other areas

LOCATION	DESCRIPTION OF PROGRAMME	ENTRY POINTS	FACILITATORS	CHALLENGES
NIGERIA	Amidst the Boko Haram insurgency, mobile MHPSS services were provided and community members engaged in capacity-building workshops (e.g. on conflict mitigation) and community-based peace committees.	Assessments and evidence (leaning on needs assessment to demonstrate desire and need) Intergroup conflict Cross-sectoral and multistakeholder collaboration	Building on strategic priorities of government and local and international NGOs Listening to, learning from and addressing the needs of survivors Building capacity of credible community stakeholders and structures	Unresolved emotional issues of participants Limited availability of professionals with clinical MHPSS skills Lack of adequate knowledge and skills in connecting peacebuilding and MHPSS Limited amount of time for counsellors to stay in the community
SRILANKA	Grassroots survivors and members of civil society integrated MHPSS such as psychosocial supports for participants into government-commissioned public consultations to shape national transitional justice mechanisms.	Do no harm Historic opportunity (to include government through a democratic process, led by grassroots movement)	Grassroots community members led core efforts – increasing social cohesion and trust Desire and capacity of staff to support the work Expertise available on how best to interweave PSS into transitional justice mechanisms	Some members perceived as representatives of the government, causing public to be sceptical Ethnicized faultlines prevalent in society were reflected in composition of some member groups Lack of qualified psychosocial personnel Confusion about what "PSS" actually means
UKRAINE	With community leaders, police and excombatants, a multistakeholder team used somatic methods with individuals and groups to stabilize well-being and support social cohesion.	Adverse mental health and psychosocial well- being Open-mindedness	Good collaboration among partners Working with influential people in the public sphere Advocacy campaign	Evidence-based impact analysis is necessary to scale up, yet funding is limited Ongoing hostilities pose a threat to civilian peace processes



Country case studies

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

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

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

Mapping limitations

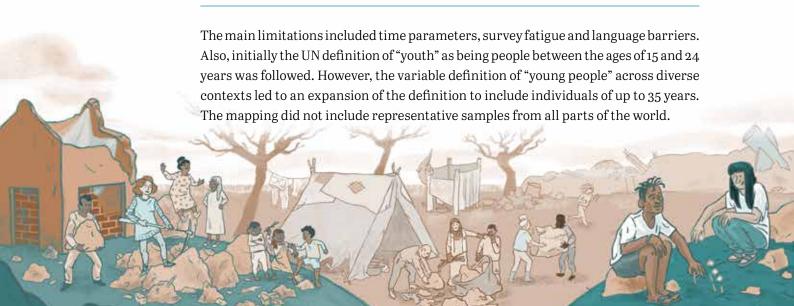


TABLE 2

Overview of the five country case studies (Colombia, Philippines, Sri Lanka, South Sudan and Syria) – country context, main themes of work and highlights of integration

COUNTRY	COUNTRY CONTEXT	MAIN THEMES OF INTEGRATION	SELECTED HIGHLIGHTS
COLOMBIA	 >50 years of conflict with mass displacement Limited 2016 peace agreement Drug trafficking, ongoing inequities, land contestation, attacks on local leaders 	 Addressing psychological and social impacts of conflict Gender-based violence Reintegration Police reform and citizen relations Indigenous activism 	Women, youth and Afro-Colombian activism Engaging men to help address GBV and toxic masculinity Indigenous views and action, with links to climate change Use of laws that support MHPSS
PHILIPPINES	Legacy of colonialism Two protracted conflicts Struggles over land and other resources Toxic masculinity Rido conflict	 Preventing violent extremism Reintegration of ex-combatants Addressing discrimination Inter-ethnic/-religious cohesion Justice and reconciliation Women and youth action 	 Youth action and solidarity with people with diverse SOGIESC Strong Filipino identity and Indigenous psychology Women mediators, peacebuilders Value of using the arts
SRILANKA	Protracted conflict between Tamil militants and Sinhalese-dominated government Discrimination against ethnic and religious minorities Riots, pogroms, repression, forced mass displacement, massacres, torture, disappearances	Building MHPSS and peacebuilding into the work of the national Consultation Task Force on Reconciliation Mechanisms Psychosocially sensitive storytelling Integrating conflict-sensitive MHPSS services into state systems Advocacy and provision of supports for marginalized people Building community capacities Changing institutional culture	Focus on "health" to avoid the use of politicized terms Value of using creative modes by youth activists Grassroots action Advocacy for including marginalized people, including people with diverse SOGIESC Value of an ongoing community of practice Peace-positive leadership
SOUTH SUDAN	Two civil wars leading to the country's independence Inter-ethnic crisis Power-sharing government as of 2020 Struggles over land, water, cattle and other resources; mass displacement Violence against women and girls	 Addressing inter-ethnic conflict Addressing GBV Preventing violent extremism and gang violence Working with leaders 	 Focus on trauma healing Religious leaders, women activists and young people as enablers Cultural ceremonies and rituals highly visible in everyday efforts for peace and well-being
SYRIA	11-year Syrian crisis Diverse actors, including government, non-state armed groups and extensive international involvement Social and economic challenges, human rights violations, displacement Deliberate attacks on health and education centres and cultural sites Extensive GBV	 Addressing psychological and social impacts of war and conflict Addressing inter-ethnoreligious conflict Improving host/IDP relations Preventing violent extremism Women as mediators Promoting collective memory Infrastructure development 	Use of the education system during the war helped to avoid politicized terms Inter-religious processes Women's action, defying prejudices and using stereotypes of womanhood to their advantage Youth activism and spontaneity

Key findings from the mapping

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



Grassroots actors in action

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

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

Grassroots actors, however, may be invisible to outside actors, and may describe their work as "promoting good relations" rather than as connecting MHPSS and peacebuilding. Grassroots actors frequently express the view that they are without voice, as even if their voices are "heard", their ideas and insights are carried forward in rigid, inauthentic and tokenized manners. They also face challenges such as structural barriers limiting participation and decision-making; violations of human rights; insufficient investment for empowerment; aggravated mental health conditions; unmet basic needs, including livelihoods; and insecurity (including displacement and increased violence) due to climate change. ^{86,87,88} Their agency and practical expertise have seldom been acknowledged, much less validated and appreciated.

While it is not possible to consider all groups who could be described as "grassroots actors", this section focuses on four groups that emerged from the mapping and litera-

ture: women and girls, young people, men and boys, and people with diverse SOGIESC. Their value as peacebuilders has often been diminished by stereotypes such as those depicting young people as "victims", "perpetrators" or a "lost generation". In reality, however, grassroots actors defy dualities and stereotypes and exhibit considerable diversity and complexity. Although they face challenges related to oppression, GBV, mental health and psychosocial well-being and climate change, they can also show remarkable resilience in the face of adversity.

BOX 5

Grassroots actors in action

THE PHILIPPINES

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

SOUTH SUDAN

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

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

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

Women and girls

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

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

Women's and girls' approaches to peacebuilding and well-being are highly holistic. In Somalia, a mother-daughter team aimed to improve psychosocial well-being and social connection for girls and boys through "Ocean Therapy", which included waterside meditation and water-based dialogue circles. ⁹⁷ Other efforts included exploring the role of bodies and sexualities (Mayan Indigenous people with diverse SOGIESC, Guatemala); addressing the restoration of land as a cultural identity and healing necessity (woman, Colombia); and embracing prayer and other religious and spiritual ceremonies (young woman, Kashmir region, programme case study).

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



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

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

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

BOX 6

Considerations for MHPSS and peacebuilding integrative efforts

with and for women and girls

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

Young people

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

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

Young people's perceptions of MHPSS and peacebuilding integrative efforts are grounded in a strong desire to have a positive impact and to work with others to co-create positive relations and well-being. They reject the idea of being "passive consumers" of programming, limitations on their agency and being instrumentalized by INGOs. For young people who are

curious, creative and in a liminal space of being and becoming, integrative efforts serve to address a complex reality and help to build a more positive future.

Many understand integration as helping themselves and others to turn inwards and cultivate inner wisdom for internal peace that embodies forgiveness, compassion, empathy, respect for self and for others and a strong sense of being and acting in solidarity with others. This inner transformation ignites them to drive societal transformation. Realizing that they have a choice, they choose to be change-makers "today" so that they and others can see and reap the benefits "tomorrow".

Many young people are also cognizant of colonialism and histories of exploitation and are acutely aware of the systemic injustices they face. They see themselves as being best positioned to deconstruct oppressive systems and shape practices that acknowledge diverse experiences. This includes addressing the plight of people with diverse young SOGIESC (e.g. <u>Philippines country case study</u>) and advocating for climate action policies that promote well-being and peace. ^{107,108}

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

The diverse challenges that young people face include questions about their motives and legitimacy; higher levels of harassment towards young women; being targeted by government and other groups for speaking out; scepticism in communities due to youth-led violence or insurrections; and intergenera-

tional power dynamics. The security risks and emotional burdens are high, and many express a desire for emotional and social (MHPSS) supports. Their capacities to engage in integrative efforts are further diminished by a lack of access to material goods, technologies and networks and mentors. For many, basic needs are a priority, as without these participating in MHPSS and peacebuilding becomes either impossible or futile.

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

BOX 7

Considerations for MHPSS and peacebuilding integrative efforts with and for young people

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



Men and boys

The significance of men and boys in promoting peace and achieving the WPS architecture is acknowledged in UNSCRs 2106 and 2242.109 Men and boys, too, face formidable challenges in working to integrate MHPSS and peacebuilding. They are often perceived as perpetrators, combative, domineering and/or a privileged subgroup, without a full understanding of how violent or militarized masculinities have led to male dominance and reinforced discrimination against women and other marginalized groups. ¹¹⁰ In

conflict, men and boys may perform aggressive acts in order to uphold an image of "the protector", to earn rewards for certain behaviours (including financial incentives) and avoid being branded as a "coward" or "useless". 111 Moreover, although women and girls are most frequently affected by gender-based and sexual violence and are the main focus of efforts to address GBV, evidence indicates that men and boys are also affected and in need of support. 112,113,114 Although gender-based and sexual violence against men and boys is recognized in UNSCR 2467, 115 there is still a need for this scope to be understood and for frontline workers to be given clarity on how to care for them. 116 Integrative efforts are needed to address both masculinities and gender-based and sexual violence faced by men and boys. For example,

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

Young male practitioner, Jordan/Lebanon

a Fijian NGO prioritizes "trauma healing" and personal transformational work with men, works with leaders and chiefs to address culturally entrenched gender stereotypes and addresses how security institutions influence militarized masculinities.¹¹⁷

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

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

BOX 8

Considerations for MHPSS and peacebuilding integrative efforts with and for men and boys

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

People with diverse SOGIESC

The well-being and peace needs of people with diverse SOGIESC in development and humanitarian settings are largely unmet. Many young people with diverse SOGIESC suffer from discrimination, high levels of stigma, dehumanization, family exclusion and homelessness, ineffective legal means for reporting violations and seeking accountability, and gender-based and sexual violence. Por example, a trans-identifying young person from Sri Lanka shared their experience of the difficulties faced by trans people in accessing care in a psychiatric hospital. In particular, they could receive only 15 minutes of care, and if they asked for more time they were seen as needing to be admitted. 124

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

An people with diverse SOGIESC-inclusive understanding of the WPS agenda can also draw attention to overlapping forms of oppression, make root causes of violence more visible and encourage new and innovative programming. 126

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

BOX 9

Considerations for MHPSS and peacebuilding integrative efforts with and for people with diverse SOGIESC

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



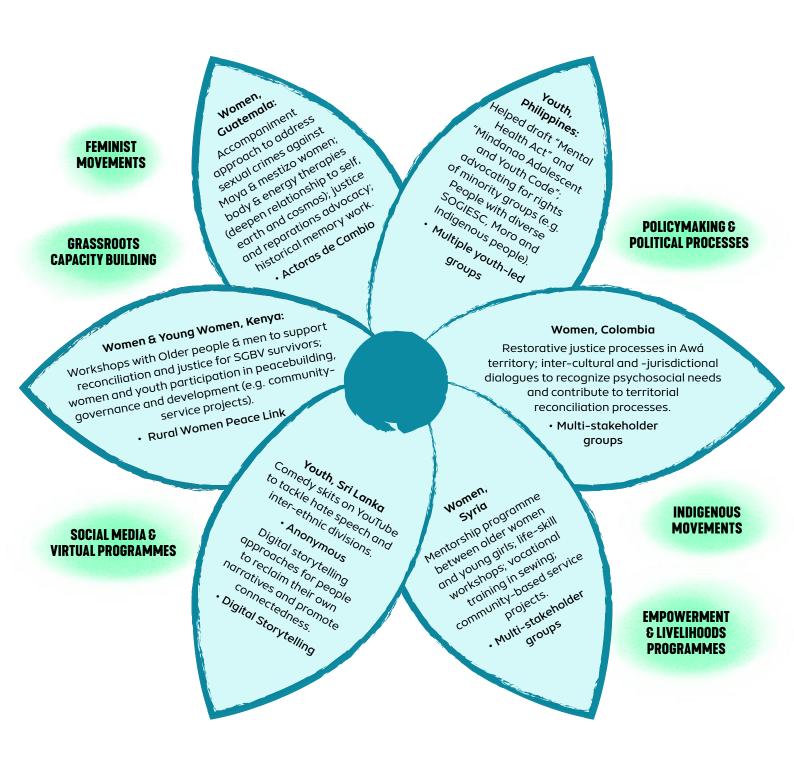
Areas of integrative action

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

One expansion modality – family and intergenerational support – reflects the importance of parenting and intergenerational family processes. Recognizing the intergenerational impacts of violent conflict, many practitioners see the family as a means of establishing positive attitudes and behaviour that can later transfer to positive capacities in society. A Syrian woman shared the idea of using parenting workshops to interweave concepts related to MHPSS and peacebuilding. Of course, intergenerational tensions often arise in families and households, as older generations may be unwilling to change their prejudices towards particular groups or be unwilling to face their own suffering. Practitioners in transitional justice contexts also shared that the younger generation may be unaware of and/or uninterested in "the past". Fortunately, these differences can motivate constructive action. For example, young people (including trans- identifying) from the Philippines and women from Rwanda and Guatemala suggested hosting intergenerational dialogues to promote co-learning, healing and brainstorming about integrative efforts on which they could cooperate together.

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

Six modalities used by women and youth to catalyse integrative efforts



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

BOX 10

Actions by grassroots actors to address climate change, MHPSS and peacebuilding

- ▶ Globally, climate change has contributed to mass migration and displacement, intercommunal violence and security risks, loss of livelihoods and subsistence and eco-distress, eco-anxiety and traumatization. The impact of climate-induced devastation is amplified among populations facing marginalization and inequities, including women, young people and Indigenous people. Many Indigenous cosmologies embody a deep respect for and connection with the land, nature, earth and other natural resources. The degradation of the environment can create a loss of identity, cultural practices and traditions, relationships with other people and the natural world and spiritual well-being and healing. 130
- ▶ Yet grassroots actors have emerged as a powerful voice for climate action, while simultaneously addressing peace and well-being needs. In Colombia, Afro-Colombian women took leadership roles in developing ethno-territorial plans and decisions regarding land use. ¹³¹ Trained in GIS/GPS technologies, land titling procedures and alternative dispute resolution methods, the women facilitated mediation processes, formalized state land title applications by women-headed households and transferred ownership of land to rural Afro-Colombian families. Many women also joined community councils and advocated for women to lead efforts on managing natural resources and addressing land disputes, which ultimately increases resiliency to respond to climate shocks and mitigate the risk of conflict. ¹³²
- ▶ In Guatemala, a grassroots school run by Indigenous women for low-income Indigenous girls led a project on sustainable farming practices for students and their mothers. The process included teaching them about Indigenous spices and the value of practices and designing organic gardens to harvest food, while also providing the regular school curriculum to students, which involved mentorship on topics such as civic participation, trauma mitigation and leadership skills. The project reaffirmed the confidence and agency of mothers and the girls to address societal-level concerns, contributed to shifting societal norms related to women working, enabled community-level mutual support and re-instilled Indigenous knowledge that could help to mitigate potential climate-induced risks. 134,135
- ▶ Meanwhile the Pacific Conference of Churches, a network of grassroots religious and local leaders who support communities across the Pacific islands, has been addressing climate-related security concerns through a variety of approaches. These have included hosting a Youth Consultation in 2019 for young people to worship, sing, study climate change and draft recommendations to address climate-induced challenges¹³⁶ and the creation of security policies that promote social cohesion and collective well-being between host communities and people who have been displaced by climate drivers.¹³⁷ Members have also drafted a culturally and contextually relevant ecological framework that considers theology, economics, cultures and spiritualities to promote well-being, wholeness, resilience and connectedness to all strands of life.¹³⁶

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

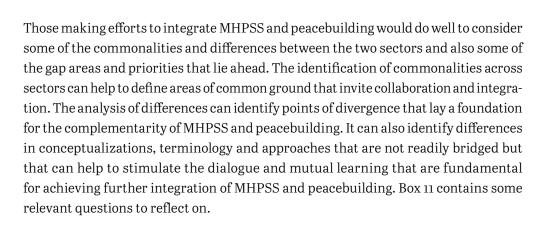
Although grassroots actors frequently demonstrate resilience and creativity, supportive actors (e.g. governments, INGOs, funders, research and academic bodies) are needed to fulfil their rights and enable their work as change-makers. For example, some academic bodies in Nigeria and Syria offer such support.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



Grassroots actors in action

- It is essential to acknowledge and validate the significant contributions, lived experiences and expertise of grassroots actors.
- ▶ Grassroots actors may not describe their work as integrating MHPSS and peacebuilding and they often face significant challenges, such as discrimination and difficult economic circumstances.
- Women and girls and young people have unique perceptions of integration. Some women envision a type of integration that calls for the deepening of relationships between self, others and all beings; and young people who are in a liminal space of being and becoming understand integrative efforts to address a complex reality and make an unknown future better.
- There is a need to address violent or militarized masculinities and provide supports for healing and reducing stigma for men and boys who have been sexually violated.
- Young people with diverse SOGIESC are often at the forefront of integrative efforts by challenging discrimination faced by their own community and other minority groups, yet more efforts by all groups are needed to address the MHPSS and peace needs of people with diverse SOGIESC.
- ▶ Grassroots actors largely use six modalities to catalyse integrative efforts in MHPSS and peacebuilding: empowerment and livelihood processes; feminist movements; grassroots movements; Indigenous movements; policy-making and political processes; and social media and virtual programmes. Three modalities for expansion (i.e. ideas for further ways to facilitate integrative efforts) are: i) family and intergenerational support, ii) strengthening the "everyday" processes, and iii) climate action.
- Supportive actors (e.g. governments, INGOs, funders, research and academic bodies) are needed to fulfil grassroots actors' rights and enable their work as change-makers.





BOX 11

Questions to consider for integration of MHPSS and peacebuilding

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

Commonalities

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

Social cohesion and socio-ecological approaches are also points of commonality. Psychosocial support strengthens supportive networks and enables the attitudes, caring, outreach and functionality that are essential for well-being and also for healthy relationships and social cohesion. Focusing on violent societal and international conflict,

mainstream peacebuilding has focused more on preventing and transforming conflict between groups and building social cohesion on a large scale than the MHPSS sector has done. The complementarity of these approaches is noted above and is highlighted by socio-ecological approaches. Both the MHPSS and peacebuilding areas agree on the need for supports and processes at levels such as the individual, family, community, societal and international levels.

Community engagement and community resilience provide further areas of commonality



and a frequent entry point in both sectors. The IASC Guidelines call for the enabling of collective self-help and support, which are processes that both draw upon and strengthen social cohesion. Community-based psychosocial support processes entail communities mobilizing themselves around a common goal, with community members who are positioned in different ways working hand in hand to achieve that goal. Similarly, the peacebuilding sector includes a wealth of work aimed at community empowerment, reducing intra- or intercommunity tensions and strengthening social

trust, social capital and social cohesion at community level. Both sectors recognize the importance of working with and through local leaders, natural leaders such as women and youth and existing social networks. The peacebuilding sector, with its strong orientation towards social justice, invites careful analysis of power relations and attention to social inclusion in community discussions and actions. Attention to the latter issues can do much to strengthen inclusive participation and empowerment, which MHPSS practitioners also view as highly important.

In addition, both MHPSS¹⁴⁶ and peacebuilding¹⁴⁷.¹⁴⁶ aim to strengthen resilience at multiple levels. Resilience entails the ability to navigate and cope with adversity, respond to stressors in an adaptive way and engage in problem-solving that manages conflicts constructively and promotes well-being and social cohesion. Both sectors recognize the importance of collective agency and action as integral parts of strengthening resilience. These may be evident in work that communities or particular groups (including youth) do in truth telling, addressing psychological and social impacts of war and conflict, enabling economic empowerment for survivors of GBV, addressing discrimination based on sexual orientation or preventing violent extremism, among others. They are also evident in efforts to reduce societal-level stresses caused by inequities and discrimination and to enable peaceful relationships across groups and geographic regions. The fact that the MHPSS sector aims to strengthen resilience more at a micro level, while the peacebuilding sector focuses mostly on strengthening resilience at a macro level, could provide a win-win option for both sectors by developing a more systemic approach that bridges these two levels.

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

Differences and ongoing questions

The MHPSS and peacebuilding sectors also have many differences in areas such as training and background, disciplinary affiliations, conceptualizations, methods and terminologies. Until recently, the peacebuilding sector has emphasized work with former perpetrators more than the MHPSS sector, which had focused primarily on supporting people affected by armed conflict. As discussed above, significant differences between the MHPSS and mainstream peacebuilding sectors (e.g. in their micro- vs. macro-level emphases) can be a source of complementarity and strength. However, it is natural for different sectors to have differences that are not clear points of complementarity and are more challenging to address. Still, discussions of these differences may offer new opportunities for growth, collective insight and enrichment of integration.

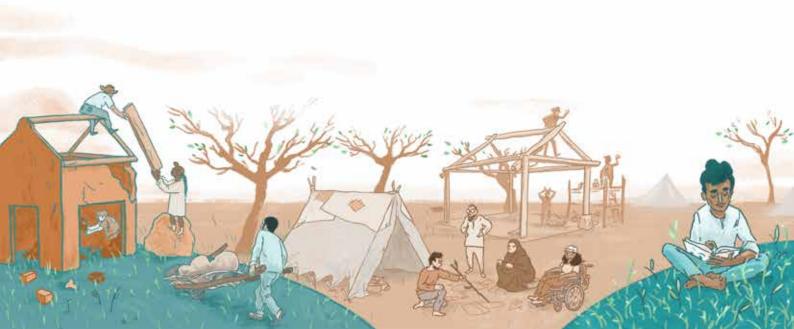
The two sectors have varied in regard to how much attention they devote to power differentials. Peacebuilders have long regarded political and other power differences as being of central importance since they contribute to armed conflict and need to be addressed in resolving or preventing it. By contrast,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

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

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

Current conceptual differences in work to integrate MHPSS and peacebuilding relate also to the priority of learning more fully from insights from work on peacebuilding. As discussed above, much more work has sought to weave MHPSS components into work on peacebuilding than the other way around. Bidirectionality is key, as there is much to be learned and stronger outcomes to be achieved by integrating peacebuilding elements into work on MHPSS. For example, the conflict-sensitive approach to programming¹⁵⁴ that has been prominent in peacebuilding would also strengthen work on MHPSS. MHPSS staff would benefit from trainings on different areas of peacebuilding such as transitional justice DDR and preventing violent extremism. In addition, work in the peacebuilding sector has been strongly influenced by conceptualizations of social capital, ^{155,156} which is closely connected with social cohesion. Although such conceptualizations have guided some work on MHPSS, ^{157,158} the latter been less prominent overall in the MHPSS sector. Similarly, attention to structural violence¹⁵⁹ has been more extensive in the peacebuilding sector than in the MHPSS sector.

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



A systemic approach

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

TABLE 3

A socio–ecological, systems approach to integrating MHPSS and peacebuilding

LEVEL	EXAMPLES OF INTEGRATION OF MHPSS AND PEACEBUILDING
INDIVIDUAL	 Skills development in self-awareness, empathy, caring and developing positive relationships Strengthening mental peace, including self-calming and self-regulation, and reflection on one's attitudes, values and behaviour MHPSS supports for individuals who have suffered violence, torture, sexual abuse, etc. Supporting men's and women's emotional sensitivity and empathy, development of non-toxic masculinity and non-violent, gender-equitable identities
FAMILY	MHPSS supports for family members of torture survivors or people who have been "disappeared" Family-based supports to help reduce destructive family conflict and create an enabling environment for children, adolescents and youth Programmes such as "SASA!" in Uganda 166 which help to change men's and women's attitudes on the normality of GBV and reduce intimate partner violence Family support for members who participate in processes of truth telling or reconciliation
COMMUNITY	 Processes of collective acceptance and support for formerly recruited people and people with warrelated disabilities Constructive dialogues between people holding divergent political and other views Cooperative projects to reduce tensions and improve community cohesion Collective burial or cleansing rituals that support collective mourning, well-being and peace Community-led processes that reduce violence, including GBV, improving livelihoods and promoting climate action Infrastructure initiatives to rebuild social areas of healing and enjoyment, such as planting gardens or painting school walls
SOCIETAL	Societal planning of reparations guided by discussions with affected people to learn what they need most Justice and reconciliation policies that reduce economic inequities and severe daily stresses Memorialization processes to acknowledge loss, develop shared collective narratives and help restore trust Societal campaigns (including digital ones) and actions to combat racism, sexism, militarism, climate change and other drivers of violence and armed conflict Widespread processes of non-violent conflict transformation that reduce stresses and enable societal well-being.

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

Gaps and priorities

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

1.Documenting, learning from and supporting grassroots, bottom-up initiatives:



Extensive, highly promising work on integrating MHPSS and peace-building is being done by grassroots actors, including women and youth, who are not allied with national or international NGOs or other agencies. Although these actors lack the power and visibility of international NGOs and large-scale projects, it is important to document their work, listening to and dialoguing with local actors. ¹⁶⁷ Externally supported efforts should build on and avoid causing harm to grassroots initiatives.

2. Diversifying and strengthening conceptualizations relevant to integrating MHPSS and peacebuilding:

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

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

Also potentially relevant are conceptualizations of conflict-sensitive programming;¹⁷² social capital;^{173,174} psychosocial approaches to peacebuilding;^{175,176,177,178} social psychological approaches to reducing intergroup hostility through contact;¹⁷⁹ enabling cooperation;¹⁸⁰ transforming conflict-supporting narratives;¹⁸¹ strengthening human agency;^{182,183} enabling community agency¹⁸⁴ and collective resilience;^{185,186} and environmental peacebuilding,^{187,188} among others. In regard to the inequities and institutionalized sources of destructive conflict that simultaneously animate conflict and damage mental health and psychological well-being, theories of structural violence^{189,190} and feminist work on a continuum of violence¹⁹¹ are highly relevant.

3. Strengthening documentation and the evidence base on effective means of integrating MHPSS and peacebuilding:

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

In addressing this priority, the use of mixed methods¹⁹² is highly valuable, as a combination of qualitative and quantitative data affords the richest insights. Qualitative methods give voice to people's lived experiences and avoid the limits that come with asking mostly preconceived questions. Posing elicitive questions is a useful way to learn what is most important to people.¹⁹³ Qualitative methods may also enable higher levels of participation with local people and can engage with diverse cultural media such as storytelling, song and proverbs. Also highly valuable are quantitative methods such as surveys, which need to be validated in the local context. Culturally grounded surveys can be developed through approaches such as using qualitative methods to identify key local concepts and idioms, which become the basis for the subsequent development and use of surveys.



4. Learning from Indigenous processes that interconnect work on well-being and social cohesion:

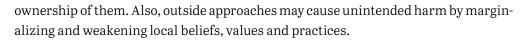
Indigenous actors typically lack the power and access to privileged platforms of governments and large development actors, and are often made invisible. Relatively little work has engaged with Indigenous actors, who may have epistemologies and cosmologies that are very different from those that are dominant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



5. Enriching approaches to community engagement:

As noted above, both the MHPSS and peacebuilding sectors assign a high priority to community engagement. Yet the peacebuilding sector has done more work with communities that is locally guided and owned and therefore is more sustainable. In the MHPSS sector, as well as in the allied child protection sector, ¹⁹⁷ many NGO projects are top-down and driven mostly by experts, with people in the community being "implementing partners" or "beneficiaries". In this approach, the NGOs hold the power, and they typically lead the assessment, analyse which problems need to be addressed, select an intervention based on international standards or guidelines, lead and oversee implementation of the intervention and then conduct or guide an evaluation.

This way of working has its place and seems necessary in acute emergencies or in settings in which group gatherings and participatory approaches could be seen as forms of political organizing and could put people in danger. Still, in many settings this top-down approach causes problems, such as poor sustainability, creating dependency or keeping local people in a position where they have little voice or power. Local people might see predominantly Western ideas and categories related to MHPSS as alien or as belonging to the outside agency, since they may not align with local understandings and idioms of distress. Segret to address urgent issues, outside agencies may not listen closely to or learn about the local idioms of distress and modalities for supporting well-being which are present in every society. This approach runs a relatively high risk that outside approaches will not be sustainable, since local people feel little or no





An important priority is to make increased use of community-led approaches in which communities or other collectives decide which issues to address, design an action plan for addressing the issue(s), mobilize the community for inclusive action and take stock of their accomplishments and challenges, making any adjustments needed.²⁰¹ This process is similar to what many youth groups, women's groups and Indigenous communities are already doing. A key point, though, is that governments, UN agencies, INGOs and development agencies and actors can help to support this approach by playing a facilitative, co-learning role. This approach itself includes peacebuilding elements because it is highly inclusive of all people, including those who have been marginalized. It also engenders high levels of social cohesion, which increases as people define a common goal or interest and then act together to achieve it. This approach is highly consistent with the IASC Guidelines, which call for extensive self-help and mobilization from within the community.

A promising approach is the facilitation of "design" tools and techniques (sometimes known as "human-centred design" or "design thinking"), in which community members lead creative problem-solving processes to reimagine their realities and catalyse positive change in their lives and environments. However, it is important to avoid the imposition of design methods without adequate attention to social, cosmological, ecological and spiritual realms that can enrich innovation processes and outcomes²⁰² and to use decolonized design methods that are led by and with local people.^{203,204} This way of working has been shown to be useful in peacebuilding contexts.²⁰⁵

6. Strengthening engagement with and support for young people on integrating MHPSS and peacebuilding via channels such as sports, arts and social media:

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

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

7. Enriching integration across humanitarian, post-conflict and development phases:

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

TABLE 4

Examples of MHPSS–peacebuilding integration across different phases

HUMANITARIAN	POST-CONFLICT	LONGER-TERM DEVELOPMENT
Conflict-sensitive MHPSS programming	Addressing individual and collective psychological and social impacts, with links to dealing with the past, social cohesion, justice and attitudes towards peace	Change social norms that discriminate based on gender, ethnicity, disability, etc.
Reducing conflict between displaced people and host communities	Reintegration of formerly recruited children or adults, with supports for stigma reduction and social cohesion	Strengthen MHPSS care and access for marginalized people
Addressing land and economic issues in a way that reduces stresses and builds social cohesion	Work on transitional justice with attention to MHPSS supports and material improvements	Early childhood development, child protection and education aimed at socializing children for constructive handling of conflict
GBV supports (including MHPSS), with attention to stigma and social integration	Memory work done in a manner that includes MHPSS	Structural reforms to address institutionalized racism, sexism and social inequities

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

8. Strengthening intersectoral work that integrates MHPSS and peacebuilding:

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

9. Supporting integrative work with leaders:

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

10. Emphasizing MHPSS-peacebuilding integration in conflict prevention:

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

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



Commonalities, differences and priorities

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

SECTION III

TOWARDS THE FUTURE OF INTEGRATION





Conceptualizations of integration

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

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

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

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

Levels of integration



Programming

It is useful to think of a spectrum of integration between MHPSS and peacebuilding in programming (see Figure 4). At one end of this spectrum are light-touch linkages that juxtapose MHPSS elements and peacebuilding elements in particular projects, but with little conceptual integration and no theory of change in which elements from both areas are necessary for the achievement of project outcomes. For example, an NGO implementing a peacebuilding project on strengthening social cohesion might also provide staff care that includes MHPSS supports. Yet the staff care could arise more from human resource or ethical concerns (e.g. over burnout) than from an integrated conceptualization of how staff's mental health and psychosocial well-being are an integral aspect of the peacebuilding processes used to strengthen social cohesion and how they contribute to positive outcomes.

FIGURE 4

Different levels of programme integration of MHPSS and peacebuilding



LIGHT-TOUCH LINKAGES

Little/no conceptual framework or theory of change (ToC) for joint processes and outcomes.

Juxtaposed elements.

Added on or done as an afterthought.



PARTIAL INTEGRATION

Some conceptual framework but no ToC for joint processes and outcomes for the programme. Unidirectional: e.g. MHPSS elements integrated into a peacebuilding programme



FULL INTEGRATION

Clear conceptual framework and ToC for joint processes and outcomes for the programme. Bidirectional: MHPSS and peacebuilding elements are interwoven, complementary and mutually synergistic in their outcomes

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

Mid-spectrum interventions may also include both MHPSS and peacebuilding elements, but not indicators and measures of each. Similarly, assessments may focus more on one sector than the other, and the design of the intervention may not have a strong conceptualization of how peacebuilding and MHPSS elements will interact to produce

meaningful change. Here, programmes might have multiple components but lack a clear theory of change or articulation of which components will do the heavy lifting.

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

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

BOX 12

Questions to consider for higher levels of integration of MHPSS and peacebuilding at the programming level

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

Organization level

It may be useful also to imagine how different levels of integration relate to organizational processes, where the organization could be a UN agency, an international NGO, a government ministry or agency, a national NGO or a community-based organization (CBO). To avoid the privileging of formal organizations, this should also include non-formal groups such as women's groups or youth groups that work on integrating peace and well-being.

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

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

BOX 13

Questions to consider for higher levels of integration of MHPSS

and peacebuilding at the organizational level

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

Interorganizational level

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

Box 14 presents questions to consider in order to achieve higher levels of integration of MHPSS and peacebuilding at the interorganizational level.

BOX 14

Questions to consider for higher levels of integration of MHPSS

and peacebuilding at the interorganizational level

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

Conceptualizations

Efforts to integrate MHPSS and peacebuilding may also be guided by conceptualizations, such as different epistemologies, understandings of well-being and approaches to achieving political, social and psychological change. Some actors often have high regard for scientific inquiry as a path to knowledge, whereas some other actors may instead privilege ways of knowing that come from religious experience or spirituality. For example, Indigenous people may see well-being as being inherently interconnected with land, animals and spiritual balance, whereas actors in the global arena tend not to primarily conceptualize well-being in this way. Those who work on integrating MHPSS and peacebuilding may cause unintended harm by marginalizing or weakening conceptualizations and practices that may be at the centre of collective well-being, identity and dignity for local people. Even across specialists in peacebuilding or MHPSS, people may have divergent understandings of core terms such as "psychosocial" or "MHPSS". Both scientific inquiry and other ways of knowing are important and can be used in complementary ways. Processes of dialogue, mutual respect, and negotiation of language and ways of being, knowing, and doing are therefore crucial between these respective paths.

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

BOX 15

Questions to consider for integration of MHPSS and peacebuilding

at the conceptualization level

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

A broader view of integration

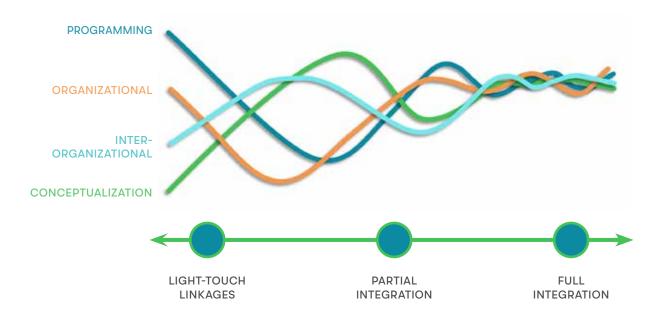
Having outlined these diverse aspects, it is useful to consider how they might work together to promote the integration of MHPSS and peacebuilding or how, conversely, they might develop separately, without benefiting from the synergies between them. Figure 5 depicts each of these elements as strands that can be separate and have only light-touch interconnections or that can be intentionally woven together into a united braid. Although the strands in the braid are depicted as being separate, there is in fact overlap and interaction across strands. For example, programming involves conceptualization and also organizational and interorganizational processes.



FIGURE 5

How the elements of programming, organizational processes,

interorganizational processes and conceptualizations of integration may develop separately or be brought closer, or braided, leading to light-touch linkage, partial integration or full integration



In the light-touch area of the spectrum, it is possible to imagine programming work that integrates MHPSS and peacebuilding well but involves few interagency efforts to learn together and guide future work, or few discussions about how to incorporate diverse conceptualizations into the work.

In the area of partial integration, efforts may help to bring the different strands together by, for example, enabling interorganizational discussions about what is working and how to avoid causing unintended harm, or by learning from different agencies how they are integrating MHPSS and peacebuilding and using different conceptual frameworks or models.

In the area of full integration, the strands are recognized as being inherently interconnected and complementary and are woven together fully into a braid. For example, people and agencies working to integrate MHPSS and peacebuilding in a particular region might form a community of practice where each attempts to learn from the others about what is working and how to enable effective agency integration. The community of practice might also enable regular meetings and dialogues for purposes of co-learning, joint capacity-building and reflecting on complex issues such as how to support and learn from diverse cultural approaches or achieve better agreement on underlying conceptualizations of integrating MHPSS and peacebuilding.

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

integrative programming, there need to be interorganizational processes of learning, reaching agreement on issues such as useful guidance and frameworks for M&E. It also underscores the importance of addressing conceptual issues and differences in a deliberate manner that promotes further integration and more comprehensive, higher-quality supports for the people who need them.

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

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

BOX 16

Questions for wider discussion on integration

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



Conceptualizations of integration

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

Principles and recommendations

Work on integrating MHPSS and peacebuilding should be consistent with the *IASC Guidelines on Mental Health and Psychosocial Support in Emergency Settings* (referred to below as the IASC Guidelines)²¹⁵ and also good practices developed in the peacebuilding sector. The principles section below fits with core peacebuilding principles such as conflict sensitivity, "do no harm" and the full participation of women, girls and young people (as per the WPS and YPS agendas). Following the "Principles" section are recommendations regarding how to integrate MHPSS and peacebuilding. These complement and are consistent with the IASC Guidelines and the UNDP guidance note²¹⁶ and peacebuilding principles. The recommendations are best regarded as working rather than final, since much remains to be learned about how to integrate MHPSS and peacebuilding in an appropriate manner and in diverse countries and contexts.



Principles

- **1. Human rights and equity**: Promote the human rights of all affected persons and protect and provide redress for people who have suffered or are at heightened risk of human rights violations. Work to reduce the inequities that damage mental health and psychosocial well-being, impede social cohesion and contribute to cycles of violence.
- 2. Participation: Follow a localization approach and maximize the meaningful participation, representation (including strengthened voice) and leadership of affected people and of local and national actors. Include subgroups that have been discriminated against such as women, youth, people with disabilities or people who identify as People with diverse SOGIESC. Integrative work should support people's agency and dignity. Rather than regarding people as passive victims or beneficiaries, facilitate their active engagement during the assessment, design, delivery and evaluation stages of programming. In this manner, individuals and communities become active co-producers of knowledge and impact.
- **3. Do no harm**: Be context- and conflict-sensitive and avoid worsening social divisions and damaging mental health and psychosocial well-being. Truth-telling work should avoid reawakening painful memories prematurely and should include appropriate MHPSS supports. Recognize and prevent the damage that can be done by reparations or truth-telling processes that support some survivors but not others. Excessive or uninformed use of trauma language should be avoided, as should individualized, medicalized approaches that focus primarily on mental disorders that risk pathologizing populations. Consider the stigma and other harm that could be caused by imposing the technical language of MHPSS. While avoiding stigmatizing labels, however, it is essential to provide specialized care for people with mental disorders. Be gender-sensitive in designing programmes, both to support survivors and to avoid stigmatizing people. In work on gender, attend both to women and girls and also to men and boys who have experienced GBV, including a mindful approach to supporting those who have been sexually abused. Take a resilience approach that enables individual and collective resilience, self-reliance and problem-solving. In addition, consider the importance of environmentally friendly operations, materials and approaches, in order to mitigate and prevent environmental damage caused by humanitarian or development work.
- **4. Build on available resources and capacities:** Identify, respect and prioritize building upon the peacebuilding and MHPSS assets, networks and resources that local people have, enabling self-help, including community-led processes and local resources such as cultural, linguistic, intellectual, monetary and material resources.
- **5. Integrated support systems:** The proliferation of stand-alone services, such as those dealing only with rape survivors, formerly recruited people or people with a specific disorder such as PTSD, can create a fragmented care system and a non-holistic approach to peacebuilding. Activities that are integrated into wider systems of health, economics, education and social support (both non-formal and formal) often reach more people, are more sustainable and carry less stigma. This integrative approach requires appropriate capacity-building on issues such as making appropriate referrals.

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

FIGURE 7

Examples of processes and activities that connect MHPSS and peacebuilding at each level of the IASC pyramid

LEVEL OF PYRAMID	EXAMPLES OF PROCESSES AND ACTIVITIES THAT CONNECT MHPSS AND PEACEBUILDING	
SPECIALIZED SERVICES	Specialized services for formerly recruited people, survivors of torture, survivors of GBV and other people (including MHPSS and peacebuilding workers) who need specialized care. Provide this care in a way that increases social cohesion (such as pairing specialized care with group dialogues that address topics of healing and receptivity towards peace).	
FOCUSED, NON- SPECIALIZED SUPPORTS	Psychological first aid (PFA) in peacebuilding contexts; skills building on self-awareness, understanding feelings, meditation, methods of calming and self-regulation, sensitivity to inequities and discrimination and non-violent handing of conflict; supportive assistance for participants in truth-telling or justice processes; supports for mediators who help to manage disputes at different levels and handle conflicts over land, water access and other resources; case management of (land) conflicts that include stress reduction and a non-violent approach. Non-clinical MHPSS supports for leaders.	
FAMILY AND COMMUNITY SUPPORTS	Collective efforts (including arts and cultural media) to address mental and psychosocial impacts of armed conflict and to enable social cohesion through education, dialogue, truth telling, etc.; dialogues and cooperation across lines of conflict; collective self-help activities that reduce stigma towards formerly recruited people, rape and GBV survivors and individuals with disabilities, among others; use of cultural rituals and networks to bring opposing communities together and reduce tensions; collective, non-violent approaches to memory processes; safe spaces for survivors of GBV; reduce stresses from insecurity; locally driven processes of restorative justice that reduce stresses and social isolation; non-specialist training for peacebuilders who work on DDR gender transformative approaches to achieve gender equality; supports for preventing family violence and intimate partner violence.	
BASIC SERVICES AND SECURITY	Conflict-sensitive and climate-sensitive approaches to work in all sectors; work in all sectors designed to both reduce stresses and social divisions and enable social cohesion and positive relationships; integrating an MHPSS lens (e.g. enabling survivors to help design work on truth telling, justice, memory and reconciliation).	

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



Recommendations

A. GENERAL RECOMMENDATIONS

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

■ Integrate MHPSS and peacebuilding at all stages of the pro-

gramme cycle: Assessments, including joint assessments, should examine issues of both MHPSS and peacebuilding, considering issues such as idioms and sources of distress and well-being, social trust, social cohesion and resilience. Programme design should intentionally integrate MHPSS and peacebuilding components, such as describing a joint theory of change with a clear idea of the expected outcomes that reflect the synergies between them. Monitoring, evaluation, accountability and learning systems should be established jointly and should include measures of both MHPSS and peacebuilding outcomes. Capacity-building efforts should focus on both MHPSS and peacebuilding, with clear attention to the different kinds of expertise and skills needed within each field (e.g. based on the levels of the IASC pyramid for MHPSS) and across both fields (e.g. at different socio-ecological levels, and capacities such as empathy, active listening and non-violent communication skills).

In integrating MHPSS and peacebuilding, include a mix of focused MHPSS work and work in other sectors: As emphasized by the IASC Guidelines, MHPSS work includes a mix of psychologically focused work and work that integrates MHPSS into multiple humanitarian sectors. Efforts to integrate MHPSS and peacebuilding frequently involve elements of economics, health, education and land and the environment. It is essential to take intersectoral approaches to supporting social cohesion and well-being, and livelihoods in particular should be prioritized. Otherwise, local people may be unable, or unwilling, to participate in and/or lead integrative efforts.

Adapt integration approaches to fit different stages of conflict:

Recognize that integration of MHPSS and peacebuilding is important and possible during active conflict (humanitarian), post-conflict and longer-term development phases (see Table 6, p. 35). In each phase, adjust work according to current needs, emerging opportunities and considerations of feasibility and ethics. For example, in a particular active conflict area, it might be feasible but not ethical to enable public, cross-conflict dialogue (i.e. dialogue between people or representations of communities/populations in conflict), since mutual fears and hostilities may be too strong and could lead to additional violence. In contrast, it might be both feasible and ethical to enable well-timed, cross-conflict dialogue in a post-conflict environment.

Adopt an approach of co-learning and systematic documen-

tation: Have regular dialogues about how to identify whether an intervention has been effective and use mixed methods in measuring effectiveness, with an eye toward ensuring that both qualitative and quantitative data receive adequate attention. Work to strengthen the evidence base regarding the integration of MHPSS and peacebuilding, and do so using a respectful approach that shares learning in an accessible manner with local people, avoiding extractive processes. Recognize that in the name of strengthening evidence-based practice, it is possible to cause unintended harm by imposing outside approaches that do not fit the context.

Take a respectful approach that is flexible with regard to ter-

minology: Recognize that many young people and women practitioners at grassroots level may not describe their work as "MHPSS" or as "peacebuilding". In some cases, using these terms may put people at risk or stigmatize them. In connecting with them, it can be useful to learn to speak their language, use their local concepts and idioms or use less specialized terms such as "well-being" and "improving social relations", at least on an interim basis

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

BOX 17

Considerations for donors

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

B. NETWORKING, DIALOGUE AND COORDINATION

Develop and strengthen networks that include people and expertise from the MHPSS and peacebuilding sectors: Integration requires knowledge and technical expertise from both sectors. Since few individuals have the requisite knowledge and expertise in both sectors, it is important to reach out to counterparts in the other sector for advice and collaboration. Networks that bring together MHPSS workers and peacebuilding workers (with sector- specific expertise or with experience of implementing integrated approaches) in particular areas or even globally could help to develop improved assessments, theories of change in integrative work, advice on and means of implementing integrative work, clear ideas about integration outcomes and integrated systems of M&E and careful attention to ethical aspects of the work and to do no harm issues. Cross-cutting networks flourish when they are guided by underlying values of mutual respect and trust, equity, reciprocity, co-learning and humility.

Enable constructive dialogue about complex issues and the way forward in work to integrate MHPSS and peacebuild-

ing: Recognize that integration work presents complexities that no single agency or individual can resolve effectively on their own and that differences of conceptualization, approach, terminology and ethics are best addressed through processes of dialogue. Develop and nourish spaces for dialogue that honour different voices and perspectives, avoid pressure for premature consensus and take a reflective, non-didactic approach. Such dialogues work best when there is mutual respect, deep listening, openness to different ideas and values and a spirit of co-learning.

who work on MHPSS and peacebuilding should connect with the coordination groups in both sectors and enable cross-sectoral dialogue to define joint strategies, roles and responsibilities, common or complementary activities and other processes. Consider organizing a common meeting for open discussion and co-learning, with consideration of the possibility of forming a working subgroup on MHPSS and peacebuilding that could enhance cooperation, reduce duplication and enable a comprehensive approach.



C. CONSIDERING SPECIFIC POPULATIONS, PHASES OF CONFLICT AND ACTORS

- Attend to and work with highly vulnerable people: In each conflict-affected setting, particular subgroups such as older people, people with disabilities, young children, former perpetrators, displaced people or particular ethnic or religious groups may be strongly impacted yet may be relatively invisible. In integrating MHPSS and peacebuilding, it is important to include highly vulnerable people, who may vary by conflict, in processes that simultaneously strengthen social cohesion and promote mental health and psychosocial well-being.
- In displacement settings, support positive relations between returnees, host and displaced people: The provision of aid only to displaced people can undermine social cohesion and incite violent conflict and fears that harm mental health and psychosocial well-being. Help returnees, host and displaced people to find common ground by, for example, focusing on children and developing cooperative efforts to support the well-being of all children.
- Integrate MHPSS and peacebuilding at all phases of conflict, including before the outbreak of armed conflict: Recognize that the integration of MHPSS and peacebuilding is a priority not only in post-conflict settings but before, during and after armed conflict. The wider goal of building sustainable peace and well-being should be kept in mind during all phases, yet the particular objectives, modalities, processes and priorities should be adapted to the context, including the phase of the conflict. An essential part of this priority is to address the drivers of armed conflict, such as political and social exclusion, mistreatment of particular groups of people, resource scarcity and climate change.
- Consider how best to engage with state and non-state armed actors, and other security actors: Partnering with state and non-state armed actors and other security actors (e.g. police) is often critical to implement, legitimize and sustain integration initiatives and outcomes. Yet in many contexts, engagement may pose challenges such as the risk of increasing the legitimacy of or appearing to be complicit with actors who systematically violate human rights. Scan for appropriate opportunities to engage with different actors, paying close attention to human rights and drawing where possible on lessons learned from past experiences of engagement and collaboration. Be cautious and sensitive about the language used, recognizing that understandings and terminologies of "MHPSS" and "peacebuilding" can have implications for how integration is perceived and accepted.

Integrate aspects of MHPSS into work on transitional justice

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



D. PRACTITIONER CARE AND DEVELOPMENT

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



E. COMMUNITY ENGAGEMENT

Support narrative and other processes of collective healing

and social cohesion: In work on addressing the psychological and social impacts of violent conflict, recognize the power of peer supports, acknowledge people's suffering and learn about and support cultural modes of healing through storytelling, rituals, song, dance and other arts and media. Since the sources of suffering are diverse and may include problems such as stigma or being unable to feed one's family, avoid a singular focus on "trauma". Recognizing that diverse views have value, create safe spaces in which people can share their views but avoid pressuring them to do so. In some contexts, expression may be harmful. Recognize also that people may see talking alone as inadequate for healing and well-being. Where justice concerns are strong, take contextually appropriate steps to link healing dialogues with inclusive reparations, and support ways for these justice concerns to be addressed through all relevant processes, including restorative, legal and community processes. Also help people to reflect on the past and the present, as well as on how they would like their future to be.

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

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

- childhood development (ECD) at community level: Dialogue with teachers, school administrators, school management committees and people in the community about how to bring themes of peace and well-being into schools. Provide training and support for teachers and education staff on how to make schools supportive learning spaces for all children. Working with natural helpers (e.g. teachers, social workers, community leaders, mothers and grandmothers), enable communities to support ECD activities for children of 0–8 years and their caregivers. Include age-appropriate activities that promote empathy, caring, turn-taking, teamwork, supportive communication, self-regulation and modelling of non-violent approaches to handling conflict. Engage with caregivers about what it means to have peace in the community, and how it relates to peace in the family.
- Support participatory processes in the design, implementation and evaluation of integrative work: Bottom-up methodologies such as PAR can reconfigure power and enable affected people to develop and implement their own culturally and contextually appropriate approaches to integration. These may also help to innovate and solve local problems.



F. WORKING WITH GRASSROOTS ACTORS, INCLUDING YOUNG PEOPLE, WOMEN AND GIRLS, AND INDIGENOUS PEOPLES

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

CONCLUSION

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

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

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

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

ANNEXES

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Annex A. Socio-ecological framework of MHPSS and peacebuilding

The socio-ecological framework shown in Table A1 gives examples of how MHPSS and peacebuilding can interact at different levels and can either damage well-being and peace or enable them.

TABLE A1

Examples of how MHPSS and peacebuilding can interact at different levels

and can either damage well-being and peace or enable them

LEVEL	DAMAGING TO MENTAL HEALTH, PSYCHOSOCIAL WELL-BEING AND PEACE	SUPPORTIVE OF MENTAL HEALTH, PSYCHOSOCIAL WELL-BEING AND PEACE
INDIVIDUAL	Unaddressed psychological and social impacts block desire for peace Machismo, harmful masculinities and unhealthy gender stereotypes, and limited self-awareness and management of feelings Bullying and intimidation Feelings of fear, hostility and exposure to from mistreatment and discrimination Substance abuse, often coupled with lashing out, fighting and impulsivity Youth feelings of alienation Suicidal ideation	Peace in one's mind Empathy and caring for other people Awareness of one's feelings and how they can affect behaviour and other people Self-regulation and self-care Non-violent orientation and skills Appreciation of the value of diversity Non-patriarchal orientation Values of reciprocity and interdependence Youth activism for peace and human rights
FAMILY	Fear, distrust, bullying, humiliation or marginalization within the family Intrafamily hostility and negative dynamics Witnessing or direct victimization by violence in the family Male privileging with subjugation of girls and women Teaching of machismo and support for being tough and fighting	Role modelling of empathy, love and caring Modelling of gender equality and nonviolence by caregivers Constructive handling of family conflict Safety and encouragement in discussing one's feelings and how to have better relationships Modelling and encouragement of helping and pro-social behaviour
COMMUNITY	Exposures to threats and violence Lack of safe spaces Gang activity, with active bullying and recruitment of children and youth Social divisions between groups, with hostilities and fears on all sides Modelling of violence Young people socialized for violence Norms of toughness, intolerance and discrimination	Social trust Collective care for vulnerable people Management of cross-group tensions Collective problem-solving and resilience Processes of reciprocity, respectful dialogue and relationship-building Access to mental health services Cultural practices for truth telling, forgiveness, restorative justice Resistance to gangs, paramilitaries, etc.

LEVEL	DAMAGING TO MENTAL HEALTH, PSYCHOSOCIAL WELL-BEING AND PEACE	SUPPORTIVE OF MENTAL HEALTH, PSYCHOSOCIAL WELL-BEING AND PEACE
SOCIETAL	Oppression and discrimination against particular groups Collective impacts and narratives of grievance that promote ongoing conflict Inequities across groups Extremist images and messages about the demonic "Other" flourish, along with calls to violence Mass media, including social media, encourage division, fear and hatred	Policies and leaders promote equity National policies integrate MHPSS and peacebuilding and provide inclusive supports and services Civil society works to strengthen tolerance, inclusivity and well-being Media promote peace and well-being Wider collective identity, values and social cohesion provide common ground and enable peaceful co-existence
INTERNATIONAL	Fear, animosities and enemy imaging between countries The climate crisis Intergenerational narratives of suffering and grievance between countries Arms trading and stockpiling of weapons by adversaries Spread of weapons of mass destruction Intercountry mass killings, torture, genocide or policies of oppression and exclusion Weak international restraints on the use of violence Global trade and finance policies that enable resource extraction, ongoing poverty Geopolitics of power, threat, dominance and exclusion	International collaboration to address problems such as climate change International diplomacy and efforts to resolve destructive conflict through peaceful means International norms and treaties that limit the spread of and prohibit the use of weapons of mass destruction Strengthening tools such as international law and prosecution of perpetrators of war crimes and crimes against humanity Promotion of human rights at all levels

Annex B. Methods

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

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

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



Global mapping

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

The global survey (see Annex C) asked 10 open-ended questions about six themes: (1) the importance of linking MHPSS and peacebuilding; (2) conceptualization of the linkage between MHPSS and peacebuilding; (3) entry points for connecting MHPSS and peacebuilding; (4) facilitators of and challenges in integrating MHPSS and peacebuilding; (5) promising practices and lessons learned in integrating MHPSS and peacebuilding; and (6) resources and supports for integrating MHPSS and peacebuilding. These questions draw and build upon on the survey conducted by the IASC Thematic Working Group on MHPSS and Peacebuilding in 2020. Translators Without Borders translated responses in French, Spanish and Arabic, and the Syrian point person translated the Arabic responses from Syria.

KIIs explored similar questions to the global survey. Additional questions were asked, including on the acceptability and relevance of terms such as "mental health" and "peace-

building", the influence of culture, intersectoral considerations such as livelihoods and education, and the role of women and youth as change-makers. KIIs were 45–60 minutes in length and were conducted via Zoom. Key practitioners were selected purposively based on their extensive experience in connecting MHPSS and peacebuilding in one or more geographic regions. KIIs were also conducted with country-level practitioners and grassroots practitioners,

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

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

Programme case studies

The programme case studies were selected based on: their unique contexts; the high level of detail provided in the survey, through interviews, and/or in online resources; and ensuring a balance across the case studies, which could broadly help illustrate the space of MHPSS and peacebuilding integration, as it relates to goals, activities and processes, entry points, community engagement strategies, facilitators and challenges, and lessons learned.



Country-specific mapping

In consultation with the Inter-Agency Steering Committee that, which helped to guide this work, five countries – Colombia, the Philippines, South Sudan, Sri Lanka and Syria – were selected for country-specific mapping and the development of country case studies. Since previous mappings had had an emphasis on sub-Saharan Africa, effort was made to include other regions and also a diversity of active conflict, post-conflict and longer-term development settings. Sri Lanka, where the armed conflict ended in 2009, probably fits most closely the category of long-term development. Both the Philippines and Colombia are complex mixtures, as both have the stability of long-

term development settings yet both are affected by ongoing, though limited, armed conflicts. Having just emerged from its horrendous war, Syria is probably closest to being a humanitarian setting and continues to be affected by conflict. South Sudan, too, has elements of a humanitarian setting mixed with protracted conflict and with progress toward implementing a peace agreement. The mixed nature of these settings indicates the difficulties involved in drawing sharp distinctions between conflict, post-conflict and development settings.

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

For each country, a case study was developed based on a selective review of relevant literature, a review of responses to the global survey by participants from that country and also responses from country-relevant KIIs, focus group discussions (FGDs) and consultations. In the Philippines and Syria, additional information came from youth consultations, which explored questions similar to those used in the surveys. The youth consultations consisted of 60-90-minute discussions by youth participants with the consultants (in the case of the Philippines) or with the relevant point person (in the case of South Sudan and Syria). Women's and mixed consultations were also held in Syria. The data from this work, coupled with significant advice and inputs from the country point person, were used to develop a five-page synthesis that outlines the context, provides an overview of the different kinds of work being done to connect MHPSS and peacebuilding, and brings forward key lessons learned.

Ethics

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

Limitations

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

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

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

Annex C. Global survey

GLOBAL SURVEY: ENGLISH

- **Q1.** Full name (first and last):
- Q2. Email and/or phone number:
- **Q3.** How did you hear about this survey? Please specify organization, communication platform and/or social media platform:
- **Q4:** Do you identify as someone who works primarily in:
 - · Mental health and psychosocial support (MHPSS)
 - · Peacebuilding
 - Both equally (MHPSS and peacebuilding)
 - I work in a different way and address issues of well-being, social cohesion, trust and resilience (please specify below)
 - Other (specify):
- **Q5.** Please check all that you identify with being:
 - · A woman
 - A man
 - People with diverse SOGIESC (refers to a person who identifies as (but not limited to) lesbian, gay, bisexual, transgender, queer, intersex, asexual or other gender or sexual orientation)
 - Youth (refers to a person who identifies as 15-24 years old)
 - A person with a disability (refers to a person who identifies with a physical, developmental, psychosocial and/or learning disability)
 - Other (includes identity elements such as religious affiliation, caste or tribe and/ or other elements of identity that are important to you in your context):
- **Q6.** What is/are your location(s) of work (specific town/city, region and country):
- **Q7.** What is the name of the organization you currently work for?
- **Q8.** What type of organization do you currently work for? Select all that apply:
 - · Community organization
 - National nongovernmental organization (NGO)
 - · International NGO
 - Local government (low- or middle-income country)
 - National government (low- or middle-income country)
 - · Local government (high-income country)
 - National government (high-income country)
 - · Intergovernmental, bilateral or multilateral organization
 - · Donor agency

- · Research organization or think tank
- · Academic institution
- · Other:
- **Q9.** How many years of experience have you had with connecting MHPSS and peacebuilding into your work?
 - o-3 years
 - 4-8 years
 - 8+ years
- **Q10.** Why do you think it is important to connect MHPSS and peacebuilding?
- **Q11.** Thinking of a project you have been involved in or know fairly well that successfully linked MHPSS and peacebuilding, please describe:
 - Q11a. the project's goals
 - **Q11b.** the project's main processes and/or activities (e.g. what did you/your team do)
 - **Q11c.** the project's main outcomes to date (e.g. how did participants benefit/improve)
 - Q11d. If applicable and available, please include website links.

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

- **Q12.** What observations, considerations and/or problems to be addressed led you and your colleagues to want to connect peacebuilding and MHPSS in this project?
- **Q13.** Please describe briefly how the community engaged in this project, and whether and how community engagement helped to open the door for connecting peacebuilding and MHPSS.
- Q14. What facilitated the connection between peacebuilding and MHPSS?
- Q15. What challenges arose in connecting peacebuilding and MHPSS?

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

- **Q16.** What are three good practices or lessons learned in connecting peacebuilding and MHPSS?
- **Q17.** What does "integrating" peacebuilding and MHPSS mean to you? Further, are there levels to "integration" and, if so, what might they be?
- **Q18.** How could efforts to integrate peacebuilding and MHPSS become sustainable?
- **Q19.** What resources and supports would you like to see to support your efforts in integrating peacebuilding and MHPSS?

Further information/contact

- **Q20.** Please share anything else that you feel could be helpful to the work of connecting MHPSS and peacebuilding, including but not limited to relevant initiatives, existing resources in the field or other relevant technical groups and practice networks that you are aware of. Please share web links or contact details for these where possible.
- **Q21.** As mentioned at the start of the survey, the findings will be publicly shared in an aggregate form in a report, which will be available in early 2022. Would you like to be informed when the report is available?
 - Yes
 - No
- **Q22.** Can the consultants of the IASC Thematic Working Group on MHPSS and Peacebuilding Steering Committee contact you for further information and/or for an interview, if needed? We will only contact you regarding follow-up from this survey and will not share this publicly or with other initiatives without your consent. Please select all that apply.
 - · Yes to connecting via email for further information, if needed
 - · Yes to connecting for an interview, if needed
 - · No to connecting.

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

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

Thank you very much for your input and support!

Annex D. Mapping results

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

Participant information

Survey

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

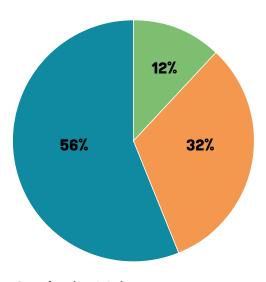
Overall, of 165 responses considered, 56% of participants identified as women, 32% identified as men and 12% identified as unspecified (selecting both genders or selecting neither). Of 164 responses considered (as one response was missing), 15% identified as youth (between the ages of 15 and 24), 7% as people with diverse SOGIESC and 10% as having a disability. Asked about their primary area(s) of work (n=163, two responses were missing), 36% of participants indicated MHPSS and peacebuilding equally; 31% indicated a primary focus on MHPSS; 17% indicated that they worked in "a different way [that] addresses issues of well-being, social cohesion, trust and resilience"; and 10% indicated a primary focus on peacebuilding. In terms of practitioners' organization types (n=161, four responses were missing), most participants worked at an international NGO (34%), followed by working at a national NGO (24%), academic institution (9%) and community organization (8%). Additionally, the top three regions (as per the WHO categorization of regions) of fieldwork were (n=163) the African Region (41%), Eastern Mediterranean Region (17%) and Western Pacific Region (15%). Finally, in terms of practitioners' years of work in this field (n=163), 37% of participants had 8+ years of work, 28% had 4-8 years of work and 35% had 0-3 years of work. Figure D1 (see below) includes pie charts that provide information on participants' gender, professional background, type of organizational affiliation and locations of work.

Key informant interviews (KIIs) and focus group discussions (FGDs)

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

FIGURE D1

Information on participants in the global survey

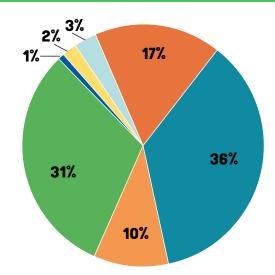


Gender (n=164)

Men

■ Women

Unspecified



Professional background (n=163)

Primarily in MHPSS

Primarily in peacebuilding

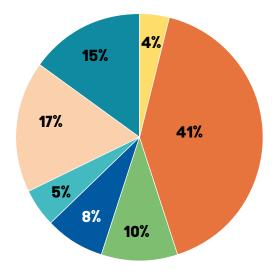
Equally in MHPSS and peacebuilding

■ Work in different ways

Primarily in MHPSS and work in different ways

Primarily in peacebuilding and work in different ways

■ Equally in both and work in different ways



Locations of work (n= 163)

African Region

Region of the Americas

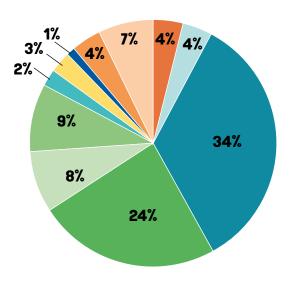
■ South-East-Asian Region

European Region

Eastern Mediterranean Region

■ Western Pacific Region

Global



Organization type (n=161)

UN agency

■ International NGO

National NGO

Community organization

Academic

Donor agency

Research institute or think

tank

Local government

National government

Intergovernmental,

bilateral or multilateral

organization

Other

Youth consultations

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



Typology of programmes

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

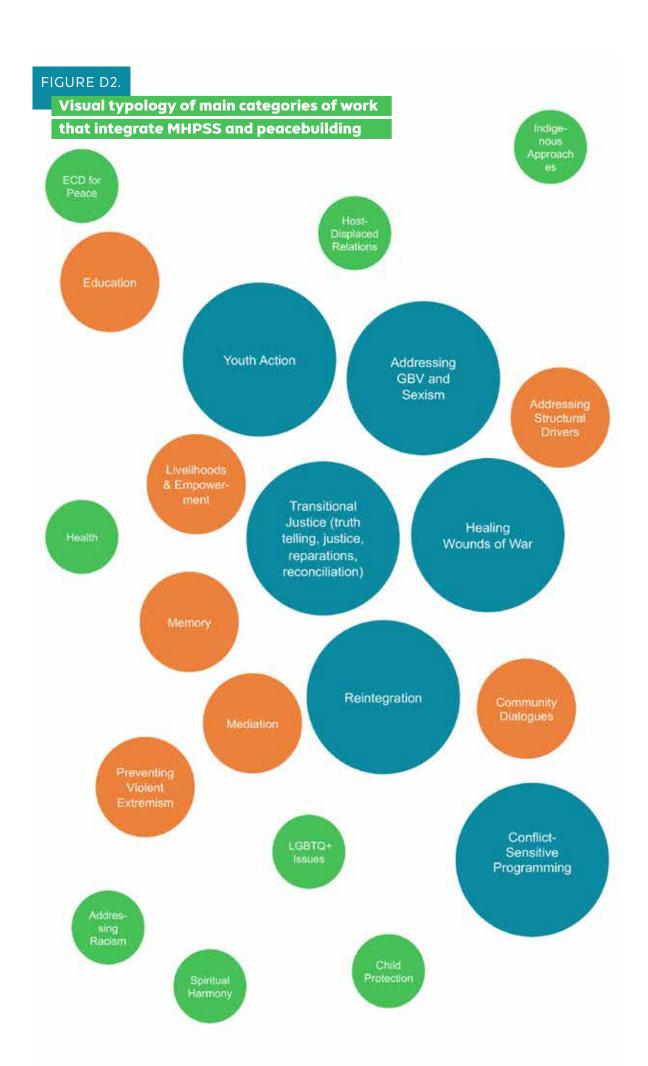
- · addressing GBV and sexism;
- conflict-sensitive programming, which is likely to be more widely used in the peace-building sector than in the MHPSS sector;
- addressing psychological and social impacts of war and conflict, which is often referred to as "trauma healing";
- reintegration of formerly recruited people, including children formerly associated with armed forces or armed groups;
- transitional justice, including sub-areas such as truth telling, justice, reparations and reconciliation;
- youth action, including youth-led work on discrimination, social justice and People with diverse SOGIESC issues.

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

Frequent themes also included economics and empowerment, education (including peace education), community dialogues, mediation, memory (memory work often involves dealing publicly with the past, memorialization, narratives and commemorations of what happened, etc.) and preventing violent extremism. Themes such as "health" or "human rights" appeared less frequently and were sometimes used as names for work that integrated MHPSS and peacebuilding. In some contexts, terms such as "peace",

"mental health" and "psychosocial support" were reportedly seen as being too political or contentious, leading practitioners to group the relevant work under more acceptable labels such as "health". Also, youth activists frequently spoke of their work in terms such as "human rights" without using terms such as "mental health" or "peacebuilding," though their work had implications for both.

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



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

TABLE D1

Facilitators of and challenges to integrating MHPSS and peacebuilding

FACILITATORS CHALLENGES LOGISTICS AND OPERATIONS • Volatility of the region • Actors who are committed to and interested in • Additional crises (e.g. COVID-19, climate crisis) pursuing integrative effort aggravating an already difficult situation • Funding for pilot and longstanding programmes • Inability to reach community members living in remote • Having a clearly stated purpose for the integration programme, and clearly stated programme goals and • State actors' perception of "peacebuilding" as a threat activities • Lack of long-term, flexible funding **APPROACHES AND PRACTICES** • Leveraging participatory processes with community members • The separation of sectors, including by donors • Learning about and using people's ways of knowing • Limited time to contextualize programmes and doing • Lack of effective measurement and evaluation tools to • Including livelihoods efforts, which was seen as understand the impact of integrative efforts needed by community members for participating in • Navigating the complexities of culturally appropriate

PRACTITIONER CAPACITIES (KNOWLEDGE, SKILLS, VALUES AND ATTITUDES)

• Practitioners have a strong understanding of why integration is necessary

• In regard to transitional justice, including MHPSS

within truth seeking and reconciliation commissions

and processes, with provision of MHPSS as part of

- Programme team has a balance of expertise across the MHPSS and peacebuilding sectors (and/or ongoing training is available to learn about work in the other sector)
- Clearly stated roles and responsibilities of practitioners across MHPSS and peacebuilding
- Prioritization of practitioner self-care

and/or co-leading integrative efforts

reparations

• "Mental health" is stigmatized

and conflict-sensitive language

decolonizing approaches

 Uncertainty about what "integration" means or perception that MHPSS and peacebuilding have different conceptual frameworks

• Difficulties in influencing decision-makers to use

• Lack of training, supervision and/or mentorship on the competencies required of practitioners

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

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

TABLE D2

Organizations running programmes across the six most prominent themes of integration

THEME OF INTEGRATION	COUNTRY/ COUNTRIES OF WORK	ORGANIZATION/NETWORK
Preventing violent extremism	Philippines	IAHV Philippines
	El Salvador	GIZ
Enabling reintegration of formerly recruited people	Colombia	Dunna – Creative Alternatives for Peace
	Liberia, Uganda	10 international NGOs + four international consultants
Supporting empowerment and livelihoods	Mexico	Juventudes por la Paz
	Argentina	Nuestra Agenda
	DRC, CAR, Uganda	War Child UK
	South Sudan	Catholic Relief Services (CRS) – South Sudan
Addressing gender-based violence	Philippines	Society of Trans Women of the Philippines (STRAP); Bahaghari; Psychological Association of the Philippines (PAP)
	Guatemala	Colectiva Actoras de Cambio
	South Africa	International Organization for Migration (IOM) – South Africa
Addressing psychological and social impacts of war and conflict	Ukraine	Development Foundation, Center Voskhozhdeniye
	Rwanda, DRC	Community Based Sociotherapy (CBS) Rwanda
	Iraq	CRS – Iraq
	South Sudan	Independent consultant through Green String Network and Whitaker Peace Development Initiative
	Somalia	Vision Corps Initiative
Transitional justice via promoting truth telling, reconciliation, reparations and memory	Sierra Leone	CRS – Sierra Leone
	Lebanon	GIZ – Lebanon
	Chile	Programa de Reparación y Atención Integral en Salud y Derechos Humanos
	Sri Lanka	The Asia Foundation

Annex E.

Programme case studies



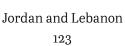














Kashmir 126



Kenya 129



Lebanon 132



Nepal 135



Nigeria 138



Sri Lanka 141



Ukraine 144

COLOMBIA

Enabling a community-led approach in Montes de María with long-term co-learning and accompaniment



Colombia has endured 60 years of armed conflict. Montes de María, located near the Caribbean coast, consists of 15 municipalities (counties) and includes Afro-Colombian communities, Indigenous communities and farming communities where land has been hotly contested. Montes de María has been the site of over 70 massacres, thousands of murders and cases of disappeared people, paramilitary and guerilla actions and political polarization. Although the number of homicides in the region decreased following the 2016 peace agreement, drug trafficking through the region continues, generating strong tensions over land control and fear, anguish and terror among the general

population. Local people have strong feelings of distrust toward government institutions, including the health system.

Programme goals:

The programme goal was to co-construct with communities in Montes de María a model of psychosocial care; this term was used to avoid the reductive, medicalized implications of the term "mental health". The model recognizes and builds upon the extensive resilience and practices of care and self-care that communities have developed over decades of adversity.

Programme activities:

Collaborative approach: A multi-disciplinary team from Colombia and the UK have enabled this work. People from outside of Montes de María have teamed up with collaborators who have in-depth understanding of and strong relationships with communities in the region.

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

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

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

Entry points:

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

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

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



Process outcomes:

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

Facilitators of integration:

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

Challenges to integration:

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

Lessons learned:

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

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

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

Dr Wilson López López

GUATEMALA

Indigenous voices and images Mayan Ixil women of Chajul



Background:

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

💶 Programme goals:

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

Programme activities:

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

Bearing witness: Using self-selected creative modalities (e.g. photography, dramatization, collective drawings, collages, storytelling), women told stories of their losses and violations and also documented how they were responding in the present to the complex challenges they faced. Integrating photography processes ("photovoice" and "talking photography") with PAR, the women became co-researchers in "photoPAR". They documented root causes of the conflict; engaged collaboratively in critical reflection and analysis of these understandings; recovered customs and beliefs that had been

threatened by the military; and highlighted their persistence and resistance during a continuum of violence. Reflecting on their losses, grief and sorrows, they heard, acknowledged and supported one another in sharing their stories.

Entry points:

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

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

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



Outcomes:

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

Facilitators of integration:

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

Challenges to integration:

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

Lessons learned:

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

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

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

Dr M. Brinton Lykes

IRAQ

MHPSS and Livelihood Integration Programme

Background:

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

Programme goals:

The MHPSS and Livelihood Integration (MLI) programme in Iraq aimed to strengthen the mental health and emotional well-being of

livelihood programme participants, equip them with work-related life skills, social and soft skills and the ability to address work-related stressors using positive coping mechanisms. In addition, the MLI programming promoted social cohesion and peacebuilding at the community level, by bringing together returnees, IDPs and members of the host community.

Programme activities:

MHPSS awareness sessions: MHPSS concepts were shared and explored with participants. An intake assessment was also facilitated to understand what the mental health and psychosocial needs were, and what skills the participants wanted to develop.

Life, social and soft skills sessions: Topics included coping with stress and building resilience; positive thinking, patience, adapting to change, perseverance and motivation; teamwork and conflict resolution skills; self-confidence and self-esteem; time management and prioritization skills; communication skills; problem-solving skills; and leadership skills and relationship-building. These sessions were often interwoven into peer support group meetings.

Peer support group meetings: Participants shared work-related challenges, ideas and opportunities with other members who were in a similar situation with their livelihoods work (e.g. starting a new business). The meetings provided a space to build relationships that enhanced positive coping, skills building and problem-solving, and helped build a strong social network and social cohesion.

Individual counselling: This additional support was available for participants who requested it.

Staff training: Trainings were provided on the concept of MHPSS and livelihood integration and on the programme itself.

MHPSS and Livelihood Integration (LMI) Manual: The manual outlines the MLI approach and implementation to inform combined programming across different contexts. It provides detailed guidelines for hosting the MHPSS awareness sessions and the life, social and soft skills sessions.

Entry points:

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

Assessments and evidence: An MHPSS and livelihoods needs assessments across north, centre and centre-south regions highlighted a significant need for this integrated work. Nearly all the participants found it a good idea to combine both sectors, noting interest in taking part in programming that combined MHPSS and livelihoods support.

Community engagement:

Activities were contextualized to fit the participants' priorities and needs. Additionally, some MLI programmes included peer mentors. The mentors were people in the community who owned businesses and who joined the peer support group sessions to discuss work-related topics, ideas and challenges, answering questions from participants and providing business advice and support. The mentoring approach was seen as valuable in helping to restore the social fabric and strengthen solidarity.



Outcomes:

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

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

Facilitators of integration:

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

Challenges to integration:

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

Lessons learned

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

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

JORDAN & LEBANON

Nonviolent Empowerment and Preventing Extremism for Children Impacted by Armed Conflict

Background:

In Jordan and Lebanon, both host and refugee communities experience ongoing vicious cycles of poor mental, emotional and physical well-being and of direct, structural and cultural violence.

Adverse outcomes disproportionately impact children and youth, which has turned schools, camps and neighbourhoods into fertile breeding grounds for extremism and recruitment amongst young people.

Programme goals:

The Healing, Nonviolent Empowerment and Preventing

Extremism for Children Impacted by Armed Conflict in Jordan

and Lebanon programme, by the International Association for

Human Values (IAHV), aimed to provide a comprehensive and innovative

programme with a psychosocial approach to building peace. Active between 2016 and 2019, the overall objective was to enhance the well-being, resilience and psychological reintegration of children impacted by armed conflict and to reduce the risk of violent behaviour.

Programme activities:

Psychosocial peacebuilding for youth:

- Stress relief and resilience workshops: These workshops were intended to address stress, reactivity and violence, release stress and fears, and improve sleep.
- *Trauma relief, healing, resilience and human values trainings:* These provided "deeper trauma relief", empowerment and human values training for children most at risk of self-harm, suicide, aggression or recruitment.
- Youth anti-violence and peace ambassador trainings: These combined physical, emotional, mental and social empowerment with peacebuilding skills training for youth to become change agents in their communities. Youth designed and implemented peacebuilding projects to address the driving factors of violence, enable social cohesion and promote peace in their families, schools and communities through forms of creativity (e.g. theatre plays, sports, campaigns and graffiti work).

Psychosocial peacebuilding community approach:

This approach provided strengthened trainings for teachers, staff, parents and caregivers and created new local capacity to provide preventive and rehabilitative support to children and youth. Trainings included workshops on learning how to release stress, how to develop resilience and professional self-care, and a train-the-trainers programme was developed for teachers and frontline workers.

Entry points:

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

Working with those most at risk: The most vulnerable and least supported children and adults were identified, particularly those suffering from sleep problems, anxiety, depression and PTSD and those struggling with the widespread issues of school dropout, child labour, early marriage, drugs, crime, safety concerns and lack of educational and employment opportunities. The programme was delivered through public and private schools, unofficial Syrian schools, orphanages, juvenile centres, refugee camps, community centres and local NGOs.

Community engagement: At the design stage, consultations were held with key stakeholders in Amman and in refugee camps in Jordan, as well as in Tripoli, Lebanon, including with representatives of ministries, municipalities, local and international NGOs, UN agencies, youth and families. During the programme, youth designed, organized and implemented actions to improve the safety, well-being and resilience of (other) children in their communities and to prevent and reduce radicalization.



Outcomes:

In total, 16 249 Syrian, Jordanian and Lebanese children received basic training in stress relief and resilience tools and reported improvements in their sense of hopelessness (-44%), sleeping problems (-40%), PTSD (-37%) and sense of well-being (+49%). Additionally, 167 youth anti-violence and peace ambassadors designed 15 peacebuilding projects of importance to them. These included a soccer competition with mixed Jordanian and Syrian teams to strengthen intercommunity cohesion; a project in which girls with experience of early marriage wrote a script for and produced a theatre play (broadcast on a regional TV channel) to raise awareness about the violence and reduced life opportunities they experienced; and an anti-bullying flashmob campaign that reached tens of thousands of people live and online during the Lebanon protests. Furthermore, 2811 parents and caregivers and 477 frontline workers participated in trainings to provide support to youth and improve their personal resilience; and 99 local frontline workers graduated from the train-the-trainers programme.

Facilitators of integration:

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

Challenges to integration:

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

Lessons learned:

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

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

LEBANON

Climbing for Peace

Background:

The collapse of the economy and accompanying hyperinflation have had serious consequences for the majority of the country's population. Shortages in social services, lack of employment opportunities and poverty among refugees and the Lebanese population have led to increasing, and sometimes violent, tensions. Syrian refugees often experience violence, abuse, exploitation, family separation and severe levels of stress. Support to address well-being and conflict issues between refugee and host populations facing marginalization is limited.

Programme goals:

Since 2017 the <u>Climbing for Peace</u> project, run by the Swiss non-profit organization ClimbAID, has been using climbing to build inclusive communities, improve mental well-being and promote social cohesion with young people from host and refugee communities in Lebanon. The project includes a mobile climbing wall, a permanent facility in Taanayel and outdoor climbing trips to local areas.

Programme activities:

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

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

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

Beqaa bouldering competition: An annual event which promotes healthy competition and brings together climbers from host and refugee communities from all over Lebanon to foster friendship and a sense of belonging to the climbing community.

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

Entry points:

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

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

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

Outcomes: Since 2017, more than 2,400 children and young people have benefited from ClimbAID's programmes. Periodic evaluations demonstrate the positive impacts, including self-reported improvements in mental well-being. In collaboration with the University Clinic Erlangen (Germany), UNSW Sydney (Australia) and Antonine University (Lebanon), ClimbAID is currently conducting a two-arm wait list controlled study on the impact of the YouCLIMB programme on mental and psychosocial well-being.



Facilitators of integration:

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

Challenges to integration:

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

Lessons learned:

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

Acknowledgement: Beat Baggenstos, Founder and Managing Director, ClimbAID

"Climbing is my way of challenging myself.

I love the strong mental component that requires planning, thinking and visualization.

Climbing has also taught me to put myself in others' shoes, knowing how they feel in certain positions on the wall."

- Wissam (spotter back)

"For me, climbing is a medium to express myself and show myself what I am capable of."

– Sabine (climber)

"It is a different place than outside, there is no segregation, discrimination or racism."

- Ahmad (spotter front)

KASHMIR

Zuun-è-Daeb with Ufra Mir

Background:

The territorial dispute between India and Pakistan over Kashmir dates back to 1947 and persists today. Challenges such as the deprivation of human rights, daily killings, a mental health crisis, a growing drug menace and tensions between rebel, civil society and government groups continue to exact a heavy toll on individuals and communities.

Programme goals:

Using a traditional, culturally relevant and decolonized approach and sensitive symbolism, the <u>International Center for</u>
Peace Psychology's Zuun-è-Daeb with Ufra Mir programme focuses

on creating community safe spaces in a context of extreme censorship, distress, fear and shrinking spaces for expression in Kashmir. The name of the centre's founder, Ufra Mir, was intentionally included in the title of the programme, as suggested by community members, who felt that she was a trusted person and that this would make women feel comfortable in attending. Through the programme, community members share their emotions, stories, struggles, hopes and pain related to mental health, conflict, crisis and daily fears related to living in a conflict zone, taking charge of their own narratives. Zuun-è-daeb is a Kashmiri term that refers to a room where one can gaze at the moon. Such rooms are traditional spaces in homes, and can represent safety and connection. In modern architecture, zuun-è-daebs are not as prevalent and thus the name has even more significance for community members, as it creates an inviting undertone to the work being done.

Programme activities:

Facilitate experiential activities:

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

Knowledge exchange:

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

Entry points:

Lack of appropriate support by the state: There was a discrepancy between the support being recommended and provided by state actors as opposed to what was needed and requested by the community (including addressing the failure by state actors to acknowledge the conflict and suffering). This led to a grassroots approach to provide the desired support and to create spaces for listening and dialogue that acknowledged all experiences arising from the conflict.

Culture, spirituality and religion: Some community members were hesitant about engaging in the programming due to a lack of contextual and culturally relevant services, stigma and polarizing perceptions of MHPSS and peacebuilding. Therefore, spirituality and religion were interwoven into the activities, along with mindfulness techniques for developing coping skills that were related to how Kashmiris offer prayer. Also, teachers and school staff were trained in peace and well-being concepts and taught to incorporate these into curricula. In addition, the programme worked with journalists to create social media strategies to destigmatize MHPSS.

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

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

Outcomes: Participants feel empowered, confident, calm and less lonely. The programme has also helped to create a sense of community and meaning in their lives. The activities have promoted destigmatization and care-seeking behaviour. For some individuals, this was the first and only space where they could share their stories of trauma, mental health, abuse and violence, and hence they reported feelings of liberation.

Facilitators of integration:

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

Challenges to integration:

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

Lessons learned:

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

Acknowledgement: Ms Ufra Mir, Peace Psychologist and Founder of the International Center for Peace Psychology

KENYA

Kumekucha Quest



Kenya continues to face violent extremism from radical militant groups. In recent years, the Somali-based Al-Shabaab group has radicalized Kenyan Muslims and members of the Somali diaspora, in particular recruiting students and youth who have experienced marginalization, unemployment and human rights abuses (including by local officials). This has led to youth experiencing severe trauma, and an increase in tensions and divisions for them along intergenerational and ethnic and religious lines.

Programme goals:

<u>Kumekucha Quest</u> (KQ) is a two-year project by the <u>Green String Network (GSN)</u> focused on children and youth (aged 10–24 years) in Nairobi and Kwale County, Kenya. KQ works as a youth-led consortium to address conflict, injustice and the impacts of trauma, and focuses on trauma awareness, the resilient strengths arising from trauma and social healing as an effort towards peacebuilding and conflict transformation. It has adapted processes taken from an existing community-led social cohesion programme (Kumekucha: It's A New Dawn) for the prevention of violent extremism.

Programme activities and processes:

Healing-centred peacebuilding approach: The approach centres on pillars of: inclusion (e.g. inviting multisectoral and multidisciplinary actors, individuals with lived experience and local and traditional healers to contribute to design and delivery processes); customization and contextualization (e.g. ensuring that the programme is culturally adapted and utilizes and strengthens community resources); breaking the cycle of violence (e.g. by engaging with both victims and perpetrators); systems thinking (e.g. leveraging ecological healing and collective healing approaches); and trauma-informed tools (e.g. utilizing neuroscientific concepts to ground practices, embodied practices to help regulate the nervous system and arts-based practices to encourage creativity).

Stage 1: Kumekucha Quest

• Peer support groups: In a 12-week peer support group process, young people (aged 18–24) highlighted their lived experiences, learned to address past trauma, built resilience to daily stressors and challenges and learned about how to promote peace and justice. Creative avenues were used to facilitate this work through music, story-

telling, sports and the arts, and to develop skills for emotional regulation and coping with emotional distress. Additional activities were designed to improve connections amongst children, youth and adults.

Stage 2: Kumekucha Watoto ("Children") and Vijana ("Teens")

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

Entry points:

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

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

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

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



Facilitators of integration:

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

Challenges to integration:

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

Lessons learned:

- **1.** Facilitate an inclusive process to culturally contextualize programme design and delivery and invite leadership from people with lived experiences and others with diverse experiences and expertise (e.g. traditional healers). This approach values the knowledges, cultures and healing practices of local and Indigenous peoples.
- **2.** Focus on how to engage both victims and perpetrators. In chronic violence, there is often no clear distinction between victim and perpetrator, and everyone affected by trauma should have access to a support system to break the cycle of violence.
- **3.** Programming should go beyond just treating the individual to also enabling systems change. This includes understanding how broader agendas influence justice, development and governance and perpetuate legacies of colonialism and structural issues, enabling violence, abuse and neglect.

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

NEPAL

Dealing with the Past



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

Programme goals:

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

Programme activities:

Story sharing and documentation - in partnership with The Story Kitchen (TSK):

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

Training and mentoring:

• Conflict victims/survivor groups and networks: Through workshops on memory work, victims/survivors reflected on local and national memorialization practices. They developed localized Memory Work Charters articulating what was important and meaningful for them regarding memory work to guide local processes.

• Civilians with disabilities: Civilians with disabilities caused by the conflict met through a Story Workshop and engaged in a process to co-develop a public education and advocacy campaign, sharing their stories in a travelling photo exhibition.

Co-creating spaces for public witnessing and acknowledgement:

- · Locally designed commemoration processes: These supported planning with district-level Conflict Victims Committees to design commemorative, public acknowledgement events for families of conflict victims who had been forcefully disappeared and killed and for survivors of torture.
- "Living Memories" photo exhibition: Photo stories of civilians who now have a disability as a result of the conflict by the conflict were exhibited in co-organized public events in collaboration with local victims' groups. Organizers invited local government officials and civil society leaders, who gave public acknowledgement and commitments of support. The general public and schoolchildren met and engaged with the storytellers. The exhibition aimed to challenge the stigma of disability and emphasized the need to avoid the recurrence of violence.

Entry points:

Lack of appropriate state support: The lack of follow-up and very slow progress by Truth and Reconciliation Commission (TRC) mechanisms left community members feeling disempowered, unheard and unsupported. Community-led narrative practices were used to create local spaces for acknowledgement and to enable victims/survivors to share their stories in ways that were meaningful and supportive to them.

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

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

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

Outcomes: A core group of 14 WCS trained as "Justice Reporters" by TSK collected more than 1,000 stories and now train and mentor other women. These approaches helped to establish these women as local leaders and supported the development and strengthening of local and national networks of WCS. Additionally, civilians with disabilities formed the National Network of Disabled Conflict Victims, which is now recognized and regularly consulted as a national victims' association. During the second wave of the COVID-19 pandemic in 2021, the network made referrals and advocated for its members to receive psychosocial support (PSS) from local government and from CSOs. Moreover, the locally designed commemoration processes motivated local government actors to organize events to acknowledge and honour families of victims on a yearly basis.

Facilitators of integration:

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

Challenges to integration:

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

Lessons learned:

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

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

NIGERIA

Counselling on Wheels



Background:

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

Programme goals:

Since 2017, the <u>Counselling on Wheels</u> project, by the <u>Neem Foundation</u>, has provided "doorstep" mental health and psychosocial rehabilitation services to underserved and hard-to-reach populations affected by the insurgency, and has worked to build resilience and support conflict prevention in order to prevent violent extremism across Borno State.

Programme activities and processes:

Counselling and therapy:

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

Peacebuilding:

• Community engagement: Monthly community-based peace meetings and regular capacity-building workshops (to train key community stakeholders on peacebuilding and conflict mitigation) helped community members to define the type of post-conflict society they wanted to build, ultimately creating a sense of ownership. Stakeholders included Bulamas (District Heads), women leaders, religious leaders, members of the security services and other credible influencers.

- Community-based Peace Committees: Trained stakeholders worked in Peace Committees to support government and NGO peacebuilding processes of reintegration, reconciliation and conflict mitigation.
- Peace messaging and sensitization: This included a documentary on the project; a series of short clips with positive messages from key community influencers; and booklets and flyers educating individuals on how to manage conflicts at the community level and psychological symptoms, such as coping techniques and self-care.

Entry points:

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

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

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

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

Outcomes: Between 2017 and 2019, the programme engaged more than 20 000 people in therapy services and reached nearly 2000 people through its peacebuilding initiatives (which included 22 social cohesion community stakeholder meetings and two capacity-building workshops for peacebuilding leaders). Additionally, five peace murals were created with over 500 community members to convey their support for shared values, such as forgiveness, tolerance and unity.

Facilitators of integration:

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

Challenges to integration:

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

Lessons learned:

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

Acknowledgement: Dr Fatima Akilu, Executive Director, Neem Foundation

SRILANKA

Consultation Task Force on Reconciliation Mechanisms



Background:

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

Programme goals:

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

Programme activities:

Consultation processes led by civil society (with grassroots network support) on the TJ mechanisms:

Zonal Task Forces (ZTF): Ninety-two ZTF members (civil society persons, including those from the grassroots network) hosted the consultations across the 15 zones. ZTF members ensured public legitimacy, ownership and participation, and gave a voice to victims from various ethno-religious communities.

Sectoral consultations: These gathered perspectives from major national-level actors (e.g. religious groups, militaryforces and police, political and media). One consultation was held specifically with organizations providing psychosocial support to affected people.

Documentation: Written submissions (e.g. personal statements, letters, reports) were welcomed.

Network efforts on psychosocial support to participants and implementing personnel:

Training of ZTF members: Training emphasized sensitive facilitation; competent responses to participants in distress or, if needed, referral to an MHPSS practitioner; self-care and monitoring of their own (and colleagues') levels of stress in response to the consultation work; and engagement in regular peer group support and meetings with MHPSS supervision.

Consultation zone MHPSS focal point: One MHPSS focal point per zone was trained to accompany and support consultation activities, and to receive referrals and follow-up on persons in need.

Psychosocial first aid (PFA) or MHPSS practitioner: Trained PFA persons or an MHPSS practitioner were available at all consultations.

Post-consultation follow-up: Those found to be experiencing distress during the consultation were followed up with.



Entry points:

Do no harm: Since the process of consultation can reawaken painful memories of violence and loss, and implementing personnel may also experience distress or be required to respond to persons who need support, psychosocial workers called for interweaving psychosocial support (PSS) throughout the consultation process. Similarly, the TJ process itself can have considerable psychosocial impacts on those who participate in different mechanisms (e.g. re-traumatization); thus, integrative approaches beyond the consultation process were understood as necessary.

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

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

Outcomes: The CTF demonstrated how grassroots and civil society members could mobilize a large-scale movement for TJ and MHPSS. A total of 7,306 submissions were received for how the TJ mechanisms should be designed and function, including many that outlined the need for psychosocially sensitive TJ mechanisms. These submissions contributed to the country's first report on learnings and recommendations on TJ

mechanisms and reconciliation (<u>Volume I</u>), including a dedicated section on PSS. Additionally, a strategy and operational framework was created for PSS provision by the Office on Missing Persons (developed in its initial years, but yet to be implemented); and the Office for Reparations acknowledged PSS provision in its policies and guidelines and developed the publication <u>Support Programmes for Aggrieved Persons: Manual for Training of Case Managers Delivering Psychosocial Support.</u> Finally, the number of women involved as participants and implementors (e.g. 50% of ZTF members were women) demonstrated the critical role that grassroots and civil society women can play in TJ and MHPSS efforts.

Facilitators of integration:

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

Challenges to integration:

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

Lessons learned:

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

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

UKRAINE

Vitality Project Donbas



Background:

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

Programme goals:

The <u>Vitality Project Donbas</u> programme is a collaboration between the NGO Development Foundation, Wesleyan University and conflict-affected community leaders, ex-combatants and mental health professionals throughout Ukraine. Focusing on somatic methods of MHPSS, it aims to stabilize conflicts in stress-ridden communities experiencing ongoing threats in the Donbas region.

Programme activities:

Intermixing individual and interpersonal well-being, with attention to peace-

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

Training: The project launched with an eight-day online training of trainers for MHPSS care providers working in Donbas. Project leaders shared somatic methods and Skills for Psychological Recovery (SPR) that they had refined over five years of collaborative research and pilot programmes in Ukraine working directly with conflict-affected people in and around Donbas. Each MHPSS care provider participating in the ongoing project received a tablet computer with specially designed software for guiding movements. They also received resources for working with clients, including Ukrainian-language recordings of the project's evidence-based individual and group movement methods.

All the therapeutic approaches were adapted to follow the health and safety precautions necessitated by the COVID-19 pandemic.

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

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

Entry points:

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

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

Community engagement: The work began in smaller group settings, such as family homes, schools, community centres, treatment centres, police precincts and armed forces training centres, but was intentionally designed to apply to and encompass broader social settings that range from the municipal to the national levels. Additionally, as trained people interact with and reach out to others, they model peace and well-being, and help to share the somatic approach with others in the community.

Outcomes: The Wesleyan University Quantitative Analysis Center has helped to analyse the impact of somatic methods in individual and group contexts, ex-combatants and civilian populations, and family environments. Mental health indicators related to functionality, anxiety, depression, alcohol use and social connection are assessed through a screening tool in the Ukrainian language that was developed and validated by Johns Hopkins University. Initial data show a statistically significant positive improvement in participants' functionality. The main positive impact has been on clients' functionality, with the greatest benefits seen in people who initially had the hardest time functioning in daily life. The project is operating at scale and in its first year (2020-2021) reached over 1600 people, with 47 people having received intensive training and supervision as providers.

Facilitators of integration

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

Challenges to integration:

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

Lessons learned:

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

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Annex F.

Country case studies

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COLOMBIA



Context

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

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

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

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

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

Integration of MHPSS and peacebuilding

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

Views of integration

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

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

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

Holistic conceptualizations included:

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

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

Areas of integrative work and approaches

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

TABLE F1

Some of the main areas of work in Colombia that interconnect MHPSS and peacebuilding, with examples

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

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

Women and youth peacebuilders

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

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

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

Facilitators and challenges

 $Key facilitators \, of \, and \, challenges \, to \, integrative \, efforts \, in \, Colombia \, are \, shared \, in \, Table \, F2.$

TABLE F2

Facilitators of and challenges to integrative efforts in Colombia.

FACILITATORS	CHALLENGES	
Programme approaches that connect fully with the human dimension, learn from local people about their needs, priorities and aspirations and build on their local resources, including cultural resources. Indigenous activism and grassroots mobilization for holistic action. Intersectional, multidisciplinary approaches that interweave work on issues of social inequity, land and climate change. Government efforts such as the Unified Victims Registry and laws and policies that support MHPSS and peacebuilding.	Extensive use of top-down approaches that do not connect with the lived experiences of people in diverse areas and afford little space for locally led and owned approaches. An ongoing climate of fear, with killings of or threats against social leaders (including youth and women), drug trafficking and extensive guerilla and gang activity. Discrimination against Indigenous and Afro-Colombian peoples. Large landowners and international corporations continue to take land from poor farmers and Indigenous people.	
Engagement of religious actors, who have local legitimacy and can help to mobilize communities to improve holistic well-being and social relations and follow their moral vision. School reconstruction as a means of rebuilding the social fabric. Activation of schools and teachers around strengthening MHPSS and social cohesion, engaging also with parents and communities to bridge school, family and community efforts for peace and well-being. Territorial reconciliation processes. Solidarity among victims/survivors. Strong agency by Indigenous and Afro-Colombian people.	Relatively low levels of public support for the peace process. Ongoing societal normalization of violence. Developing strong indicators and measures of impact, as the evidence base in Colombia remains underdeveloped. Fragile state presence in rural areas. Perceptions of work on MHPSS and peacebuilding as being political. Ongoing recruitment of children by gangs. Lack of stable employment opportunities for youth. Discrimination against people with diverse SOGIESC. Highly patriarchal societal norms. The COVID-19 pandemic.	

Colombia

- An overemphasis on clinical approaches to MHPSS is pathologizing and not very helpful in improving social relations, which are key to healing, transitional justice and conflict prevention.
- Pay close attention to and support the use of Indigenous understandings and approaches, recognizing that they may differ significantly from those of more global work on MHPSS and peacebuilding. Recognize also that patriarchy remains strong among Indigenous peoples.
- Learn from, accompany and support grassroots, bottom-up processes that are locally owned, contextually appropriate and sustainable in integrating MHPSS and peacebuilding.
- Make work with youth and women central in efforts to integrate MHPSS and peacebuilding, while recognizing that they may use different terms and approaches in describing their work.
- Address gender issues at levels ranging from the family to the societal level as part of work on integrating MHPSS and peacebuilding.
- Work on climate change is an indispensable part of wider efforts to integrate MHPSS and peacebuilding.
- ▶ Use existing government laws and policies to leverage support for MHPSS.
- Work is needed to reform the mass media and reduce symbolic violence and societal narratives that undermine emotional well-being and social cohesion.

PHILIPPINES



Context

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

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

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

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

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

Integration of MHPSS and peacebuilding

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

Areas of integrative work and programme or action examples

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

TABLE F3

Areas of priority and programme work that integrates MHPSS and peacebuilding

AREAS	PROGRAMME OR ACTION EXAMPLES AND APPROACHES
Inter-ethnic conflict	• In school forums and dialogues, Christian and Muslim youth discussed prejudices and how to reduce them and als o organized joint activities. ²⁶⁵
Discrimination against people with diverse SOGIESC	A youth-led initiative enabled discussion of issues faced by trans people (e.g. stigma and trauma), trans rights and the societal responsibility to transform prejudices and harmful behaviour. ²⁶⁶
Memory work	The Accompaniment Programme organized peer supports, health and legal supports and MHPSS sessions for people with missing relatives; the participants created commemoration spaces. ²⁶⁷
Prevention of violent extremism (PVE)	PVE programming was restructured entirely to integrate MHPSS, with an emphasis on positive transformation. Faith-based, women and traditional leaders and civic groups were involved to accompany programming, given the positive psychosocial impact they have for programme participants. ²⁶⁸
Deradicalization and reintegration	The Youth Peacebuilding Leadership Training programme taught former youth IDPs and out-of-school youth affected by the Marawi Siege breathing, relaxation, trauma and stress relief techniques; the youth implemented a community service project related to promoting peace and well-being. 269
Multistakeholder action	The Integrating MHPSS into Peacebuilding event enabled cross-sectoral connection and exchange of ideas and experiences for people from the BARMM government, civil society and academia. ²⁷⁰

Mobilizers of MHPSS and peacebuilding

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

Sikolohiyang Pilipino (Filipino Indigenous psychology)

Decolonizing efforts in the Philippines aim to reclaim elite-dominated power, demand justice for human rights abuses and land dispossession, provide healing and support to victims and survivors and acknowledge, preserve and revive Indigenous and minority group wisdom, ways of being, identities and cultures. An important conceptual foundation of grassroots movements is *Sikolohiyang Pilipino*, or Filipino Indigenous psychology. *Sikolohiyang Pilipino* aims to foster national identity and consciousness, ignite social awareness and involvement and bring to centre stage Indigenous languages and cultures, including Indigenous healing approaches. It also broadens the application of psychology beyond the "clinical" sphere to take account of all areas of prominence in Filipino life, leading to, for example, "psychology for the arts", "rural psychology", "livelihood psychology" and "psychology for agriculture". The collective orientation of *Sikolohiyang Pilipino* also rejects the Western, individually oriented nature of psychology. In doing so, *Sikolohiyang Pilipino* aims to decolonize the Filipino mind.²⁷¹

An example of *Sikolohiyang Pilipino* in practice is the "*Paaaralang Bayan*" ("School for People, School for Life") programme by Education for Life. Between 1992 and 2004, over 2,000 grassroots leaders, including farmers, women and teachers, participated in six-week residential courses. The courses aimed to develop "holistic" capacities for shaping and mobilizing movements that address challenges in society. The holistic education programme adapted insights and methods from *Sikolohiyang Pilipino*, Paulo Freire's "Pedagogy of the Oppressed"²⁷² and Grundtvig's philosophy of learning for life. ²⁷³ Participants developed skills in communication, negotiation and peaceful conflict resolution, alongside explorations in Filipino psychology, culture, family relations, neighbourliness and spirituality. Learning from their own life experiences, observations and reflections, the participants were better able to champion change for peace and well-being in their communities. ²⁷⁴

Women in action

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

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

Yet, against this backdrop, women leaders have been instrumental in championing integrative efforts. At the grassroots level Baigani, a feminist solidarity group, provides psychosocial and financial support for those widowed or orphaned by extrajudicial killings to overcome trauma, fears and stigmatization and enable them to realize their strengths and capacities. ²⁸⁴ Calling themselves "women warriors", they draw on each other's strength and create spaces of connection for widows and children experiencing isolation and grief, enabling them to unite, remember and celebrate the lives of their loved ones. ²⁸⁵ At the national level, in 2021 the Bangsamoro Women Commission (BWC), which supports women's political and economic empowerment, rights and social protection and family development, conducted psychological first aid (PFA) training for 30 of its employees, and provided PFA to community members during the South Upi armed conflict. ²⁸⁶ Additionally, the Women Insider Mediators – Rapid Action and Mobilization Platform, which trains women (especially Moro, Indigenous and ex-MILF women) as peacebuilders and mediators, is launching an initiative to strengthen these women's capacities for facilitating MHPSS in conflict-affected communities. ^{287,288}

Youth in action

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

Youth have distinctive characteristics that make them well suited for their roles as peace-builders. In comparison with older generations, they see themselves as change-makers and not automatically bound by old ways of knowing, doing and being. They are keenly aware of intersectionality and as such have greater capacity to empathize with, be open-minded about and "walk in solidarity" with all youth. Attuned to the impact of colonial legacies on their generation and previous generations, they seek to nourish well-being and peace that are grounded in Filipino identity, culture and ways of being together. One youth shared that Sikolohiyang Pilipino is quintessential for meaningful and sustainable peace and well-being in the Philippines, as it brings forward a distinct sense of "community" and "connectedness" that is at the heart of the Filipino way of being together. At the same time, youth recognize

that the imposition of a monolithic Filipino identity and culture could be disrespectful and could cause harm by, for example, perpetuating the assimilation strategies that had previously been imposed on Moro and Indigenous communities. ²⁸⁹ Many young people value learning from and incorporating insights from diverse philosophies, sources of knowledge, languages and spiritual and religious traditions that help to transform the colonial mindset.

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

Youth can also be drivers of change where no change had seemed possible. In the policy arena, youth took a strong advocacy stance together, enabling them to contribute to the 2018 Mental Health Act. Youth reported that at present, they are helping to draft the Mindanao Adolescent and Youth Code. Willing to challenge hierarchical political structures and antiquated beliefs about sexual orientation, youth have become strong voices of support for addressing stigma and discrimination against minority groups, especially people with diverse SOGIESC, and also for enabling social cohesion between different ethno-religious groups. In this respect, Filipino youth embody the spirit of "bahala na!", which from the Sikolohiyang Pilipino perspective entails the willingness to take on any task with courage and determination, applying oneself to the best of one's ability.²⁹¹

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

Challenges

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

TABLE F4

Challenges to integrative efforts in the Philippines

CHALLENGES

- Community members cannot lead/participate in integrative efforts because basic needs are not met.
- Services for addressing mental health disorders are limited (~1200 practising psychiatrists, psychologists and psychiatric nurses).²⁹²
- A culture of toxic masculinity and religious beliefs limit women's full participation and leadership.
- A culture of violence has become the norm.²⁹³
- Rido conflict can cause the rest of a province or country to "other" the clans in conflict, who are then not invited or permitted to participate in matters of peacebuilding.
- Providing support to individuals and communities in remote regions.

Philippines

- Contextualize integrative efforts based on the diverse needs of communities, with close attention to dimensions such as gender and sexual orientation, ethnicity, religion, language, political affiliation and geographic region.
- Ground integrative efforts within Filipino wisdom, identity and culture; and ensure that such embedding moves beyond a monolithic understanding of wisdom, identity and culture.
- Learn from and strengthen the inclusive participation and capacities of grassroots actors, women and youth (including people with diverse SOGIESC) in mobilizing integrative efforts.
- Strengthen alliances with men and religious leaders to secure and expand gender equality, including to eliminate discriminatory cultural and social practices that limit participation or leadership by girls and women in MHPSS and peacebuilding integrated efforts.
- Address the violence associated with rido conflicts and the disproportionate impact it has on Moro and Indigenous communities, and especially on women.

SOUTH SUDAN



Context

The context of South Sudan is best seen in the wider context of Sudanese history. Situated in northeast Africa, Sudan was for centuries a fertile mixing point of African and Arab peoples. Islam and Arabic culture dominated the northern part of Sudan, while African traditional religion (animism) and Christianity dominated the southern part. In the 19th and 20th centuries, Egyptian and British rule employed differing tactics in northern and southern Sudan, fuelling discrimination and ethnic tensions between the two areas. Following Sudan's independence in 1956, tension between southern separatists and the north culminated in the First Sudanese Civil War (1955–1972), followed by the Second Sudanese Civil War (1983–2005). The eventual signing of the 2005 Comprehensive Peace Agreement laid the groundwork for South Sudan's independence from Sudan in 2011. Yet the oil-rich Abyei Administrative Area continued to be a contested district. Page 2015

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

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

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

Integration of MHPSS and peacebuilding

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

Areas of integrative work and programme or action examples

Table F5 illustrates work done on connecting MHPSS and peacebuilding in South Sudan. Other valuable work includes strengthening social cohesion by providing displaced and host communities with community-based services $^{317,\ 318,\ 319}$ and supporting the reintegration of girl CAAFAG. 320

TABLE F5

Areas of priority and programme work that integrates MHPSS and peacebuilding

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

Trauma healing

Trauma healing is widely viewed by practitioners in South Sudan as a central component of integration efforts and as essential in promoting mental well-being, resilience and social cohesion. While not all South Sudanese people have been traumatized, a widespread perception is that most people have experienced traumatic events. ³²⁶ The term "trauma" is usually associated with mental disorders ³²⁷ that require specialized care, yet practitioners recognize the paucity of specialized care services. ³²⁸ A local artist who was trained by an international NGO in trauma healing subsequently facilitated "art-based trauma healing" programmes in order to encourage inter-tribal social co-

hesion. He paints inter-tribal rituals and marriages and shares these at community exhibitions, while simultaneously hosting trauma healing workshops.³²⁹

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

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

Enablers and mobilizers of integrated approaches to MHPSS and peacebuilding

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

Religious leaders

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

Cultural ceremonies and rituals

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

In some communities where a killing has been committed by an unknown perpetrator, a "funeral dance" and associated mourning songs are organized to "invite" the unknown perpetrator(s) to reveal themselves. ³⁴⁰ Upon hearing the songs, neighbouring communities seek to find out whether the unknown perpetrator(s) are one of their community.

Often, the perpetrator(s) reveal themselves out of fear of being cursed or punished severely. In contrast to formal investigations or mediation processes, ceremonies can help to address inter-/intra-community challenges in a culturally relevant and effective manner. Ultimately, identification of the perpetrator(s) increases the sense of collective security, and the mourning songs enable a sense of healing.³⁴¹

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

Women leaders

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

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

Young people

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

Nevertheless, young people are deeply motivated to be agents of change. ³⁶⁰ For example, a former child soldier, now an artist and practitioner, uses an arts-based and trauma healing approach with at-risk youth to prevent violent extremism. ³⁶¹ Although young people desire to inspire change, it can often be difficult for them to do so. ³⁶² One participant stated, "If you are a young person, you don't have a voice. If you are a young

person, you don't have a position, you don't own anything. This is the mentality that we want to break – [the idea that] we are only poor."363 To address this kind of situation, one consortium holds forums for young people to lead discussions on issues of concern with community and government leaders, and simultaneously provides psychosocial support activities (e.g. mindfulness-based stress reduction) and dialoguing activities to explore power, violence, identity and social norms that underpin violence and privilege. 364,365

Young people also utilize sports as a modality for reducing tribalism and gender discrimination and for promoting differences as a source of enrichment and strength in communities. For example, National Unity Day in South Sudan brings young women and men athletes together to strengthen inter-ethnic social ties, address harmful gender norms, encourage ideals of peace, tolerance and unity, and foster forgiveness and collective healing. In 2020, National Unity Day featured nine days of sports events (e.g. wrestling, volleyball, football), community peacebuilding events and gender workshops.

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

Challenges

Table F6 highlights key challenges to integration in South Sudan.

TABLE F6

Challenges to integration in South Sudan

CHALLENGES

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

South Sudan

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

SRILANKA



Context

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

In response to growing civilian protests to address the grievances of the civil war, in 2016 the government set up the Consultation Task Force on Reconciliation Mechanisms (CTF). Led largely by a civil society network and grassroots actors, the CTF hosted public consultations across 15 zones (eight districts across the Northern and Eastern provinces, and seven across the other provinces) to understand how four proposed transitional justice (TJ) mechanisms (namely an Office on Missing Persons; an Office on Reparations; a Truth, Justice, Reconciliation and Non-Recurrence Commission; and a judicial mechanism comprising a Special Court and an Office of the Special Counsel) should be designed and should function.³⁷⁸ However, many of these proposals are yet to come to fruition.³⁷⁹

In addition, since 2013 the frequency of violence against Muslims has risen, notably through anti-halal campaigns and anti-Muslim riots. The 2019 Easter Sunday attacks on three churches and three hotels in major cities including Colombo, linked to ISIS, increased hostility towards and marginalization of Muslims. State regulations have regularly discriminated against Muslims.³⁸⁰

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

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

Integrating MHPSS and peacebuilding

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

Views of integration

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

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

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

Entry points for integration

There are several entry points for integration: 1) community-based and grassroots-led initiatives; 2) culture, storytelling, entertainment, music, arts, comedy, social media engagement; 3) education and health care systems and services; 4) humanitarian assistance and development interventions; 5) TJ, reconciliation and peacebuilding initiatives, and 6) prevention of violence efforts for GBV, child protection, domestic violence and extremism.

Areas of integrative work: approaches and processes

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

TABLE F7

Approaches and processes of integration in Sri Lanka

APPROACH	SELECTED PROCESS ELEMENTS
Public consultations through the CTF ³⁹² Psychosocial support, accompaniment and risk management were interwoven into public consultations for developing TJ mechanisms; the Final Report included MHPSS issues as a standalone chapter and across the proposed mechanisms	Acknowledged potential for distress among participants and staff Selection of credible, representative taskforce members from the grassroots level Aware of intra-/intergroup power dynamics Listened empathically to all groups affected by conflict/political and communal violence
Psychosocially sensitive storytelling Provided opportunities for people to share stories of their experiences Stablished humane counterpoints to prevailing stereotypes and misinformation about people's experiences, lived realities and intentions and aspirations	"Do no harm:" acknowledged scope for distress and alienation when sharing Disarmed defences by challenging prejudices and misconceptions through creative modes Acknowledged and validated experiences and cultural attributions of others (e.g. language) People connected over shared elements
 Integrating conflict-sensitive MHPSS services into state systems Integrating MHPSS into the Ministry of Education's social cohesion policy³⁹⁵ Building capacities of counsellors within health care, social services and women's development services^{396,397} Incorporating PSS approaches in mental health policies and action plans^{398,399} Incorporating PSS approaches into reconciliation mechanisms⁴⁰⁰ 	Enabled MHPSS-related capacities amongst state officials, personnel and systems Supported design of policies and services that are sensitive to MHPSS needs of the community Created multistakeholder teams (e.g. health and, education; humanitarian actors across INGOs, NGOs and policy) whose members do not often collaborate and may be wary of each other Focus on "health" avoided the use of politicized terms
Advocacy for provision of supportive services to all groups affected by conflict, particularly those commonly marginalized ⁴⁰¹ e.g. people with disabilities, perpetrators of violence, people who are people with diverse SOGIESC	Acknowledged discrimination, oppression, marginalization and violence as antithetical to mental health, well-being and peace at all levels Provided MHPSS services to all people Helped people understand the perspectives, pain and suffering of other group(s)
Building community and capacities Developed capacities of people who have experienced violence to support others ⁴⁰² "Manohari" programme: storytelling (using animals rather than humans) to counter bias, enable self-reflection and develop emotional literacy ⁴⁰³ Established support groups for connection and solidarity, learning and coping skills; platforms for advocacy and activism	Indirectly challenged biases/assumptions, by providing new/alternative perspectives on ingrained prejudices and hostilities Used everyday terms rather than "loaded" language and terminology Helped people to manage emotions such as guilt, shame, anger, fear, betrayal and outrage Provided safe and neutral spaces for people to "unpack" their experiences, emotions, biases and assumptions and sustain change
Transforming institutional culture and providing peace-positive leadership ⁴⁰⁴ Made institutional spaces multicultural, safe and welcoming for diverse people Leadership initiatives helped staff reflect on inclusive practices and created natural opportunities for connection (e.g. eating together, participating in joint festivals)	Integrated "regular" concepts related to human relationships and interaction into the work environment (e.g. decency, conflict management, making people feel safe) Framed culturally and conflict-sensitive practices as improving quality of services Showed openness and appreciation of practices of other religions and communities (e.g. Zakat)

Women in action

For decades, women have spearheaded justice, reconciliation and well-being efforts in Sri Lanka. ⁴⁰⁵ They organize efforts at community, regional and national levels, seek accountability for human rights violations, seek information about disappeared family members and protest against violence and inaction. ⁴⁰⁶ For example, during the CTF process, 50% of those facilitating the consultations as zonal task force members were women, and many suggestions for addressing psychosocial support within TJ mechanisms were shared by women activists and women-led organizations. ⁴⁰⁷

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

Youth in action

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

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

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

Facilitators and challenges

Table F8 highlights key facilitators of and challenges to integration in Sri Lanka.

TABLE F8

Facilitators of and challenges to integration in Sri Lanka

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

Sri Lanka

- Provide leadership that enables peace-positive institutional cultures. Leaders should encourage inclusivity and be self-aware, reflective, open-minded and sensitive to nuance.
- To transform institutions that have socialized staff into patterns of inhumane conduct, invest in peace-positive leadership and staff support to help change policies and practice, enforce humane regulations and enable peer norms and capacity-building.
- To introduce and sustain psychosocially and peace-sensitive policies/practices in institutions, be sensitive to terminology and focus on how the policies/practices provide benefit to institutions.
- Advocate for long-term, flexible funding models, as transformation takes time.
- Reconciliation processes should be guided by the views and needs of diverse conflict-affected people, including Tamils, Muslims, Sinhala people and others.
- Create safe spaces for people to explore themselves, unlearn prejudices, process perspectives and transform emotions. Approaches that promote points of connection are essential.
- ▶ Develop integrative frameworks and ensure conceptual coherence among practitioners.⁴²⁰
- Address intergenerational impact, supporting people across time and over generations.
- Strengthen interpersonal relationships within homes, schools and communities and in service delivery, especially when interacting with people who are in positions of relatively less power.
- To address the costs/burdens of long-time work on MHPSS and peacebuilding, invest in supportive efforts for individuals (e.g. self-care and self-regulation practices) and systems change

SYRIA



Context

Since the onset of the Syrian crisis in 2011, the country has experienced one of the world's most complex humanitarian emergencies. Globally, Syria has been considered one of the three least peaceful countries for 10 consecutive years. ⁴²¹ Despite an overall decline in large-scale hostilities, the security situation remains highly dynamic and prone to escalation, particularly in areas of mixed or contested control and in the northwest, northeast and southern regions. ⁴²²

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

Peace negotiations have been attempted, including the 2012 Six-Point Proposal, ⁴²⁵ the UN-backed Geneva Communiqué (talks between the regime and the opposition) and UNSCR 2254 (2015), which called for a peaceful political transition. ⁴²⁶ None of these succeeded, though the latter two continue to be pushed forward by the UN. ⁴²⁷

Currently, the unavailability of health services, poor access to clean water, the social and economic impacts of COVID-19, continued disease outbreaks including cholera and localized hostilities cause significant death and injury, human rights violations and displacement. Deliberate attacks on civilian infrastructure, such as on health and education centres and cultural sites, have decimated social and community cohesion and spaces of recovery. A28,429,430 More than 350 000 people have been killed since the start of the crisis and almost one in every 13 people is estimated to be a woman or child. The crisis continues to have a disproportionate impact on women and girls, significantly restricting their freedoms, such as freedom of movement and the ability to seek employment, trapping them in cycles of vulnerability, subordination and GBV. Since the onset of the crisis, the Syrian economy has shrunk by more than half, and sharp macroeconomic deterioration continues unabated. Over the same period, the Syrian pound has undergone a 70-fold depreciation, which has accelerated since the onset of Lebanon's financial crisis in late 2019. The implementation of new unilateral coercive measures in June 2020 further exacerbated depreciation pressure. The Syrian pound has now lost at least 36% of its value since September 2020 alone.

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

Integration of MHPSS and peacebuilding

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

Perceptions of integration

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

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

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

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

Areas of integrative work and programme or action examples

In Syria, work on connecting MHPSS and peacebuilding has often focused on the areas described in Table F9 below.

TABLE F9

Areas of priority and programme work that integrates MHPSS and peacebuilding in Syria

AREAS	PROGRAMMES OR ACTION EXAMPLES AND APPROACHES
Addressing psychological and social impacts of war and conflict	The "Bel Salameh" programme trains MHPSS professionals on psychotherapy; frontline workers on PFA, art-based psychosocial support and referral systems; and medical experts and case managers on GBV support. It also organizes recreational and artistic activities such as youth-led projects, documentary films and public events on peace messaging. 441
Addressing inter- ethnoreligious conflict	 A programme hosted in rural Damascus schools taught children of different ethno- religious groups social and emotional skills and used films to support dialoguing activities.⁴⁴²
Improving host/ IDP relations	 A programme brought returnees and host community members together to collectively identify a challenge in the community and to co-create and implement a solution. A similar programme was hosted for young people and framed through an entrepreneurship lens.⁴⁴³
Preventing violent extremism	 A peace education project implemented five approaches: mainstreaming peace concepts into formal education curricula; using arts-based psychosocial approaches; leading faith-based resilience and interfaith dialogues; mobilizing children as agents for positive change; and developing a network of youth social leaders across Syria and southern Turkey.⁴⁴⁴
Promoting collective memory	 Supports initiatives that document and archive all forms of art and cultural expression (graffiti, murals, photographs, poems, songs, theatre performances); and engages in dialogue and commentary to establish networks and support between people.⁴⁴⁵
Infrastructure development	Rehabilitation of damaged infrastructure fosters morale, and communal clean-up initiatives act as a "mood booster" in the cities of Aleppo and Homs. **46** **The cities of Aleppo and Homs** **1.54** **The cities of Aleppo and Homs** **1.54**

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

Women in action

Women face many hurdles to their meaningful participation. These include overall safety and security concerns, limited opportunities to engage in international-level peacebuilding processes, oppression by patriarchal practices and religious norms, strong challenges to their mental health and psychosocial well-being and staggering levels of domestic violence and sexual abuse.447 Also, many men have enrolled in military service or have left the country, leaving women to take on the burdens of being primary caregivers and breadwinners.⁴⁴⁸

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

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

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

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

Youth in action

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

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

Youth also have positive impacts through the work that they do quietly in everyday settings and on a small scale. A young male practitioner shared that at his university there is a programme in which students give items they no longer need (such as a book) to a student who is in need. This promotes a sense of well-being for the receiver, and also fosters a sense of belonging to a greater community for both the receiver and the provider. As described by another young male practitioner, well-being and peace can manifest in the «simple» and «spontaneous» activites of Syrian youth.» Through dancing in the middle of impoverished streets, 457 parkour-style jumps through bombed buildings and flips off of tanks, 458 Syrian youth reclaim spaces of destruction and devastation as spaces of freedom, joy and connectedness.

Challenges

Key challenges to integrative efforts in Syria are outlined in Table F10.

TABLE F10

Challenges facing Syrian practitioners for integrative efforts

CHALLENGES

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

Syria

- ▶ Use language, idioms and expressions that are culturally sensitive to the context, and consider dimensions such as gender, ethnicity, religion, tribal affiliation and political affiliation.
- Train and build the capacity of psychosocial support providers and mental health care specialists.
- Prioritize support for basic needs, and interweave livelihoods into integration efforts.
- Leverage the formal and informal education system for integrative efforts.
- Strengthen and support grassroots initiatives, including by creating alliances between religious leaders, women and youth leaders to further accelerate efforts locally and nationally.

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

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

Annex H.

Policy Brief:

bi-directional, holistic integration of mental health & psychosocial support (MHPSS) and peacebuilding

Policy Brief:

Bi-Directional, Holistic Integration of Mental Health and Psychosocial Support (MHPSS) and Peacebuilding

This Policy Brief is derived from the report on "Integrating MHPSS & Peacebuilding: A Mapping and Recommendations for Practitioners", developed by the IASC MHPSS Reference Group



INTRODUCTION

Armed conflict has devastating, long-term impacts on sustainable peace and on people's mental health and well-being. As a result of conflict and violence, by the end of 2022 there were over 108 million forcibly displaced people worldwide, including 62.5 million internally displaced people and 35.3 million refugees. An estimated 40% of all forcibly displaced people were children.¹ Armed conflict can create shattered, divided societies that perpetuate cycles of violence and inequity. An estimated one in five people who live in a war zone will likely develop a mental disorder,² and many others suffer from painful everyday stresses associated with multiple losses, family separation, gender-based violence (GBV), disability and ongoing insecurity. The COVID-19 pandemic has exacerbated these impacts, and climate change fuels additional significant risks and challenges.^{3,4,5}

A new era of conflict and violence has also seen armed conflicts become increasingly protracted, with many lasting a decade or longer. ⁶ The protracted nature of conflicts has blurred the lines between humanitarian, post-conflict and development settings. As a result, many analysts now speak of a triple nexus between the humanitarian, development and peace sectors. ^{7,8} Adding complexity to the evolving nature of conflict and violence are issues such as nuclear threats that can cause fear and instability, online-driven extremism that fuels misinformation and division and new technologies that can enable cyber, physical and biological attacks. ⁹ These conflicts and challenges and the deep grievances they cause make it necessary to prioritize and strengthen efforts toward integrating mental health and psychosocial support (MHPSS) and peacebuilding.

In 2020, the UN Secretary-General called for the integration of MHPSS and peacebuilding to be strengthened. ¹⁰ The call reflected the extensive work of the UN Peacebuilding Architecture Review and the Sustainable Peace Agenda, which highlighted the significant role of MHPSS in achieving and sustaining peace.

This policy brief aims to support stakeholders, primarily policy-makers, donors and other decision-makers, in integrating MHPSS and peacebuilding. It describes the inextricable links between the two sectors, provides examples of current integration efforts, outlines a bi-directional, holistic approach to integration and identifies strategies that stakeholders can take to integrate MHPSS and peacebuilding.



Key Messages

- Armed conflict has devasting, long-term impacts on sustainable peace and on people's mental health and well-being.
- Efforts that integrate mental health and psychosocial support (MHPSS) and peacebuilding can enhance positive outcomes and limit negative, unintended outcomes for well-being, resilience, social cohesion and peace.
- Bi-directional, holistic approaches to integration can lead to enhanced, sustainable outcomes.
- Integration should occur across all conflict phases and can contribute to response, recovery and prevention processes.
- Integration can be strengthened by enabling multi-stakeholder and intersectoral engagements, learning about and supporting the work of grassroots actors, encouraging self-care of all actors, establishing research mechanisms, facilitating dialogues and co-learning events, and increasing and reorienting investments for integration.

BENEFITS OF INTEGRATION

MHPSS and peacebuilding are inherently complementary and synergistic. 11,12 Current evidence supports three points that demonstrate the inextricable connections between and the significance of integrating MHPSS and peacebuilding:

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

Armed conflict increases the rates of mental disorders and psychosocial suffering. 13,14 This can reduce functionality and ability to work and impair relationships, thereby limiting the ability of the community to recover economically and socially. 15 These social and emotional effects can accumulate and become woven into individual and collective narratives of suffering 16 and grievance, which may contribute to intergenerational cycles of violence. 17



2. Efforts that connect MHPSS and peacebuilding have greater positive effects than can be achieved through a focus on either area by itself

If peacebuilding is implemented without attention to MHPSS, conflict-affected people suffering from emotional impacts and grievances may be unable or unwilling to support peace processes. If MHPSS isimplemented without attention to peace and social cohesion, people's well-being can become undermined by hatreds and fears, social divisions and stresses associated with ongoing insecurity.

Although research and practice to date have emphasized how MHPSS influences peacebuilding, peacebuilding efforts that strengthen social cohesion and trust can have synergistic effects on MHPSS, such as with community-based psychosocial supports, which are based on strong relationships. For example, stigmatized young mothers who had formerly been recruited into armed groups in Sierra Leone, Liberia and Uganda engaged in peer support and collectively decided to undertake livelihoods projects, while trusted community advisors advocated for them in the community. As a result, the young mothers and their children overcame stigma, gained community acceptance and reported significantly increased well-being. Evidence also indicates that work to support MHPSS can be more effective when it is integrated with truth-telling, reparations and justice processes. 19,20,21

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

Integration is a valuable step towards ethical and sensitive practice, as a lack of integration may cause unintended harm. For example, in Sierra Leone, where truth-telling processes led people to discuss painful memories without consideration of whether they were ready for such discussions and without having access to MHPSS services, some people exhibited increased psychological suffering. ²² Peacebuilders trained in basic MHPSS competencies (e.g. psychological first aid and communication skills) can strengthen the facilitations of truth-telling and peace dialogues by sensitivity towards participants' readiness to talk and participants' rights and access to MHPSS sevices. Similarly, a lack of integration of peacebuilding aspects into MHPSS work may cause unintended harm. For example, in humanitarian settings where differing ethnic groups co-exist amidst resource scarcity, the provision of MHPSS services to, or the use of MHPSS services by, largely one group may be perceived as favouritism that could worsen social divisions. MHPSS staff trained in peacebuilding competencies (e.g. conflict-sensitive approaches²³) can improve outcomes by analyzing power relations and social, political and economic inequities to address and avoid deepening social divisions.

Overall, current evidence indicates that integrating MHPSS and peacebuilding enhances positive outcomes and limits negative, unintended outcomes.

GLOBAL STEPS TOWARD INTEGRATION

Although peacebuilding and MHPSS have developed historically along separate lines,²⁴ numerous steps toward integrating the two sectors have been taken in recent years.

In 2018, the United Nations and World Bank published a joint report, Pathways for Peace, ²⁵ which highlighted how conflict causes grievances, including those owing to psychological impacts, that help to animate ongoing conflict. In 2020, the MHPSS agenda was raised in the context of the UN Peacebuilding Architecture Review, and a Task Force (led by the MHPSS team at the Ministry of Foreign Affairs of the Netherlands) developed core recommendations for increasing interlinkages between MHPSS and peacebuilding. Also, in a landmark step, the UN Secretary-General wrote in his 2020 report on Peacebuilding and Sustaining Peace that "the further development of the integration of mental health and psychosocial support into peacebuilding is envisaged with a view to increasing the resilience and agency of people and communities" (p. 11).²⁶

Calls for integration have also noted that linking MHPSS and peacebuilding contributes to the implementation of the Sustainable Development Goals (SDGs), especially SDG 3 ("to ensure healthy lives and promote well-being for all at all ages") and SDG 16 ("to promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels").²⁷ In addition, in 2022, UNDP published a report²⁸ and a guidance note²⁹ on integrating MHPSS into peacebuilding.

Since its inception in 2007, the Inter-Agency Standing Committee (IASC) Reference Group on MHPSS has consistently called for the integration of MHPSS into multiple sectors. The IASC MHPSS Reference Group reconvened the Thematic Working Group on MHPSS & Peacebuilding in February 2019, to advance these synergies and develop a cohesive approach to integration.



SPOTLIGHT ON INTEGRATION THEMES & POPULATIONS OF INTEREST

Prominent Themes of Integrating MHPSS and Peacebuilding

MHPSS and peacebuilding integration efforts are diverse, and often cut across many themes and approaches. Understandings and terminologies, such as for "MHPSS", "peacebuilding", and "preventing violent extremism," vary across contexts and organizations and add to the diverse ways of working. Table 1 highlights six prominent themes of integration and programme examples of each theme.

TABLE 1

Prominent themes of integration and an associated programme example

THEME	PROGRAMME EXAMPLE		
Addressing psychological and social impacts of war and conflict	Rwanda: Using community-based sociotherapy, people healed wounds of the past and developed social cohesion. Using a restorative process, victims, perpetrators and the community shared experiences and discussed how to support reconciliation. Victims shared their painful memories, alleviated trauma and received validation and justice. Perpetrators shared their experiences, acknowledged wrongdoing and sought and received forgiveness.		
Transitional justice via promoting truth-telling, reconciliation, reparations, and memory	Sri Lanka: A civil society network of victims, grassroots actors and others led efforts to integrate psychosocial supports for participants into government-commissioned public consultations aimed at shaping national transitional justice mechanisms. Efforts included training consultation facilitators in sensitive facilitation and self-care capacities, and having one MHPSS focal point at each consultation.		
Addressing gender- based violence	Philippines: Young people with diverse SOGIESC mobilized themselves and others to contribute to well-being and peace policies at the local and national levels. These policies addressed violence and discrimination against transgendered individuals, and advocated for the fulfilment of their human right to positive mental health.		
Preventing violent extremism	Lebanon: At-risk young people participated in stress relief and resilience workshops and human values training to improve their well-being and address their trauma. They also led arts-based, community service projects to address drivers of violence and promote peace in their families, schools and communities.		
Supporting empowerment and livelihoods	Guatemala: Indigenous Mayan women led photovoice and participatory action research to document root causes of the conflict, recover customs and beliefs, and enable voice and agency through economic empowerment initiatives. Reflecting on their losses, grief and sorrows, they acknowledged and supported one another, creating a supportive storytelling space for healing and resilience.		
Enabling reintegration of formerly recruited people	Colombia: Ex-combatants, survivors, police and local government representatives collectively participated in a diploma programme focused on reconciliation and rebuilding the social fabric of the community. Through this shared learning space, participants engaged in "mind-body" practices to support trauma healing processes and utilized restorative practices to address relational issues.		

Populations of Interest for Integration Efforts

Integration efforts have often focused on people who are seen as vulnerable, owing to their experiences of violations such as genocide, GBV, forced displacement or recruitment into armed forces or groups, or their status as marginalized people such as people with disabilities or older people. However, people who have experienced suffering can also be key agents who help to strengthen social cohesion, well-being and resilience. Therefore, grassroots actors may hold dual positions as conflict-affected people and as agents of change.

Armed conflict has frequently targeted women and girls who experience GBV and discrimination, and they carry heavy burdens of suffering and responsibility for their children and families. However, women and girls are also highly effective peacebuilders (legitimized by UNSCR 1325³¹ and reaffirmed by the Women, Peace and Security (WPS) agenda) and carry unique conceptualizations of and meaningful cultural traditions for healing and well-being. Men and boys may experience violent or militarized masculinities³² and stigma from sexual violence, 33 yet may also contribute to high-level peace and security processes. 4

Young people often experience marginalization, unemployment and risk of recruitment, and young people with diverse SOGIESC face severe levels of discrimination and violence. ^{35,36} Nevertheless, young people are creative change agents and peacebuilders (legitimized by UNSCR 2250³⁷ and reaffirmed by the Youth, Peace, and Security (YPS) agenda), and young people with diverse SOGIESC people are often at the forefront of dismantling discriminatory practices that affect them and other minority groups.

Indigenous People are frequently made invisible or exoticized and suffer land theft and damaging resource extraction, and their wisdom and traditional practices are severely undervalued. ³⁸ Yet, they are at the heart of complex work that integrates peace, well-being and climate action.

Forcibly displaced people are often seen as people without agency and as mere recipients of aid, underestimating the role that returnees and displaced populations, including diaspora populations, can play following displacement. Displaced people are often engaged in strengthening individual and collective psychosocial well-being and social cohesion in areas of return and in host communities.³⁹ As such, quality integration efforts are often both protective and empowering, and they promote opportunities for positive changemaking that align with individuals' cognitive, emotional, social and physical capabilities.



INTEGRATION LEVELS AND SPECTRUM

Work on integrating MHPSS and peacebuilding has occurred mostly at programme level. However, the integration of MHPSS and peacebuilding can occur across at least four levels: the programme level, the organization-level, the inter-organizational level, and the level of conceptualizations.

Within each level, integration can vary on a spectrum from light-touch linkages at one end, to partial integration, to full integration at the other end. Table 2 shows examples of integration across the three levels and the spectrum of integration.

TABLE 2

Examples of integrating MHPSS and peacebuilding across programming, organization and inter-organizational levels and the spectrum

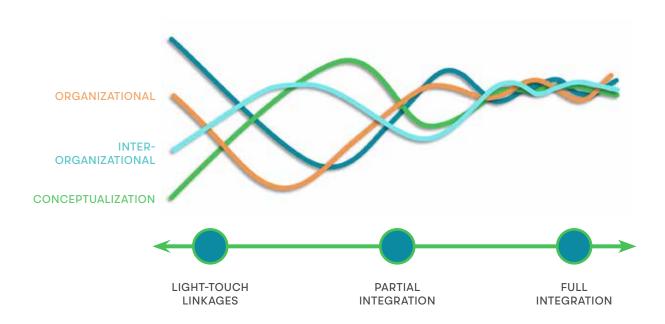
INTEGRATION LEVELS	INTEGRATION SPECTRUM			
	LIGHT-TOUCH LINKAGES	PARTIAL INTEGRATION	FULL INTEGRATION	
PROGRAMMING	Little/no conceptual framework or theory of change (ToC) for joint processes and outcomes of MHPSS and peacebuilding Integration is an afterthought	Some conceptual framework but no ToC Integration is unidirectional (e.g., only MHPSS elements are integrated into peacebuilding)	Clear conceptual framework and ToC Integration is bidirectional (i.e. MHPSS and peacebuilding elements are interwoven)	
ORGANIZATION	Little/no strategy or standard operating procedures (SOP) for integration MHPSS and peacebuilding specialists are working on separate efforts, with little/no collaboration Little/no staff capacity strengthening in both sectors or an emphasis solely on one sector	Some strategy but no SOPs for integration MHPSS and peacebuilding specialists are sometimes working on the same efforts, with some collaboration Some staff capacity strengthening in both sectors, but not ongoing	Clear strategy and robust SOPs for integration MHPSS and peacebuilding specialists are involved across efforts, with much collaboration Regular staff capacity strengthening in both sectors based on the needs initially identified and as they evolve	
INTER- ORGANIZATIONAL	Low/no levels of joint sector coordination and resource-sharing between organizations Low/no integration of research and knowledge dissemination	Moderate levels of joint coordination and resource-sharing for integration Moderate efforts for integration of research and knowledge dissemination	Extensive levels of joint coordination and resource-sharing for integration Extensive efforts for integration of research and knowledge dissemination	

An additional level, not included in Table 2 above, is that of conceptualizations. Conceptualizations refer to approaches, frameworks and epistemologies that embody the importance of both MHPSS and peacebuilding, and guide understandings for achieving political, social and psychological change. For example, some actors may emphasize scientific inquiry as a path to knowledge, whereas some other actors may instead emphasize ways of knowing that come from cultural, religious or spiritual orientations. Both are important and can be used in complementary ways. Processes of dialogue, mutual respect and negotiation of language and ways of being, knowing, and doing are therefore crucial between these respective paths. Conceptualizations are cross-cutting, and can influence practices within programming, organizational and inter-organizational levels. Light-touch linkages adopt conceptualizations that primarily focus on a single sector as essential for achieving well-being and peace, and have limited openness to embracing diverse perspectives of integration. Full integration entails the use of conceptualizations that recognize the inherent complementarity and synergy between MHPSS and peacebuilding, and there is a continuous willingness to learn about and from other ways of knowing and doing integration.

A holistic approach to integrating MHPSS and peacebuilding considers all four integration levels and the integration spectrum together. Elements of programming, organizational processes, inter-organizational processes and conceptualizations of integration may develop separately, be brought closer, or braided, leading to light-touch linkage, partial integration or full integration (Fig. 1).

FIGURE 1

Different levels of integration may develop separately, be brought closer together, or become tightly interwoven, as in a braid



Achieving increased integration requires time and careful attention to collaboration between the MHPSS and peacebuilding sectors. Much needed are spaces for cross-sectoral learning, development of collaborative guidance and frameworks on issues such as monitoring and evaluation, and dialogues that analyze and promote agreement on definitions and conceptual issues.

■ The Vision: Moving Towards Bi-Directional, Holistic Integration

The overarching goal should be moving towards utilizing bi-directional, holistic approaches to integrating MHPSS and peacebuilding. Uni-directional approaches, such as only bringing MHPSS components into work on peacebuilding, have considerable value yet will not reap the full benefits of integration. Since MHPSS and peacebuilding are inextricably linked, a bi-directional approach to integration is key. However, as there is no "one size fits all" approach to integration, it is important to work within the integration level(s) and along the integration spectrum in a manner that is most reflective of the needs and capabilities of people and communities, the capacities of actors and the demands of feasibility within the context. This lays the groundwork for progressively moving towards full integration over time.

Utilizing holistic approaches is also essential for integration. A central focus should be on developing and connecting integration efforts across the socio-ecological levels, which can lead to more positive and sustainable outcomes. The mainstreaming of contextualized, conflict-sensitive and inclusive practices is also important. This includes using local concepts and idioms, understanding the drivers behind ongoing and future conflict, and using an intersectionality lens to be sensitive to people's gender, sexual orientation, and other intersectional characteristics.

Although further research on integration across the levels and spectrum is needed, there are already sufficient experience and evidence to guide immediate action.



RECOMMENDED ACTIONS

The recommended actions support policy-makers, donors and other decision-makers to work towards the vision of applying bi-directional, holistic approaches to integrating MHPSS and peacebuilding. The recommended actions align with the IASC Guidelines on Mental Health and Psychosocial Support in Emergency Settings⁴⁰ and also core peacebuilding principles such as conflict sensitivity, Do No Harm and the full participation of women, girls and young people as reflected in the WPS and YPS agendas.

1. Apply a multi-stakeholder, multi-sectoral, and coordinated approach to integration

Peace and well-being are shared responsibility, and all stakeholders should therefore drive the vision, process and outcomes for integration. Encouraging multi-stakeholder engagement through the whole-of-society approach and effective partnerships is essential since the integration of MHPSS and peacebuilding requires diverse actors working collaboratively to share information, expertise and resources.

Integration efforts should link with other sectors, including health, education, livelihoods, and land and the environment, which often carry less stigma, can act as entry points for integration and strengthen the sustainability of the outcomes. Additionally, good coordination and governance practices for integration will benefit from transparency, inclusiveness, and accountability measures, and will aim to continuously learn from experiences and evidence.

2. Promote MHPSS and peacebuilding integration in all phases of conflict

Prioritizing integration across all phases of conflict can help to build back better by strengthening resilient systems and communities that can address issues such as mutual fears, desires for revenge, psychosocial challenges and trauma, and insecurity.

In humanitarian settings, integration processes that promote healing and reduce tensions, for example between displaced people and host communities, can increase well-being and social cohesion. In post-conflict environments, integration efforts can, for instance, enable public, cross-conflict dialogues to support transitional justice processes that also provide access to community-based MHPSS services. In longer-term development settings, integration can change social norms and help establish protective mechanisms. For example, schools may adopt a psychosocial-based, peace education curriculum which promotes the transformation of discriminatory attitudes and behaviours while enhancing student well-being through diverse practices.

3.Include integration of MHPSS and peacebuilding in prevention strategies

Incorporating integration within prevention strategies can address underlying wounds and narratives that perpetuate discrimination, erode social cohesion and harm well-being. Prevention-focused integration efforts should prioritize coordinated actions that reinforce protection and empowerment. For example, fostering diverse voices in decision-making arenas can address power inequalities and promote inclusive governance, while also driving forward plans and policies that dismantle discrimination and inequity, and strengthening interpersonal relationships. Building the capacity of people and leaders in political, academic, religious and community spaces should be a central focus and can reinforce their ability to act on their own behalf and drive positive change.

In addition, proactively equipping governments and institutions with the tools to develop and implement prevention-oriented integration efforts should be prioritized. This includes providing support to create early warning mechanisms that monitor and help to mitigate the impact of psychological, social, economic, environmental and other drivers of conflict, and to identify entry points and scale affordable, community-based interventions for integration efforts that reinforce healing and positive behaviours.

■ 4. Build on MHPSS and peacebuilding integration efforts by grassroots and other local actors

Significant integration work is done by grassroots and local actors, though they may not use technical terms such as "MHPSS" or "peacebuilding." A collective effort should be made to learn from them, engage in dialogue about appropriate language, document their work and impact, and strengthen and sustain their local networks and resources, including cultural, linguistic, intellectual, monetary and material assets. Additionally, grassroots and local actors should be provided with opportunities to contribute to policy-making and governance initiatives at local, national and international levels. Their voices, agency and priorities can help to shape relevant, strategic and long-term directions for peacebuilding and MHPSS. It is also important to promote the full participation of people who are usually excluded, such as people with diverse SOGIESC, Indigenous Peoples, people with disabilities, displaced populations and older people. Non-tokenistic, participatory approaches enable ownership and accountability for making and sustaining positive change, thereby reducing the risk of grassroots and local actors engaging in violence.

5. Enable self-care for all actors involved in integrating MHPSS and peacebuilding

Enabling self-care for all actors can improve efforts for integration by addressing the high stress levels and burnout often associated with both peacebuilding and MHPSS work and life in fragile, conflict and post-conflict settings. Opportunities to learn about and engage in self-care should be provided to staff of organizations and also to grassroots practitioners who may work alone or in small groups. Plans and policies should acknowledge the importance of self-care, promote and establish training programmes that provide self-care strategies and allocate resources to establish support systems, such as counselling services or peer-to-peer networks. Investing in research to better understand the impact of self-care by staff and grassroots practitioners on organizational and community outcomes can help identify areas that require further attention and guide policy adjustments.

6. Promote collaborative dialogue, research and evidence strengthening on integration

A strengthened focus on dialoguing, documentation and developing a rigorous evidence base on effective means of integrating MHPSS and peacebuilding is required to set research priorities, understand promising practices and learn from innovations. Multistakeholder engagements and dialogues about research agendas and evidence should take into account the power imbalance between grassroots and Western-based actors and the differences in their ways of being, knowing and doing. Evidence strengthening should use mixed methods that take advantage of the power of quantitative methods and the richness of qualitative methods. Participatory, qualitative methods are particularly important in bringing forward the voices and perspectives on well-being and peacebuilding of grassroots actors, including those who are typically marginalized. Evidence should be gathered on local understandings and expressions of MHPSS, peacebuilding and integration, as well as on the efficacy, acceptability and feasibility of integration interventions for prevention, response and recovery.



7. Strengthen co-learning and networks that include people and expertise from the MHPSS and peacebuilding sectors

Regional and global multi-stakeholder dialogues and co-learning events for knowledge dissemination and partnership opportunities should be established to move processes of integration forward. These should enable learning from the Global South, complementing the more typical North, South flow of knowledge. A central focus should be on documenting the work and impact of local actors, which can identify unique entry-points, facilitators, barriers and innovations to integration. As well, encouraging dialogues, knowledge sharing and network-building between MHPSS and peacebuilding workers (with sector-specific expertise or with experience in implementing integrated approaches) can lead to the development of joint and improved assessments, theories of change, integrated outcomes, monitoring and evaluation systems and accountability mechanisms. Careful attention should be given to appropriate translation of results from research to practice.

8. Dedicate funding for the integration of MHPSS and peacebuilding

Dedicated funding promotes the prioritization of integration, which achieves its fullest form in bi-directional, holistic integration such as utilizing joint MHPSS and peacebuilding strategies across the project cycle, conducting rigorous research and helping to sustain and scale positive outcomes for both well-being and peace. Financing should be dedicated to bi-directional, holistic integration in the long run, and should also support exploratory collaborations of a more limited nature between the peacebuilding and MHPSS sectors. Consideration should also be given to incentivizing investments in sectors that are protective and act as entry points for integration through demonstrating shared value and leveraging public-private partnerships. Also, establishing innovative financing mechanisms, as in an incubator model, can encourage the prototyping, sustaining or scaling of evidence-informed integration efforts.



9. Increase flexible and long–term funding for integrating MHPSS and peacebuilding

Adopting a multi-year, flexible funding mechanism can promote sustainability and long-term impact.

With flexible funding, grassroots and local actors can work according to "community time," respond to ever-changing demands in their context and allocate funds to human resources and operational costs to retain talent and critical organization infrastructures. Long-term financing is needed to complement urgent responses with work that takes more time, such as addressing the root causes of conflict. Donors should also enable the sharing of indirect costs between leading agencies and downstream partners, and lighten conditions that require pre-financing, co-financing and rigorous needs assessments, such that local actors can compete with highly resourced organizations and agencies. To bring in local actors, donors should consider using less technical jargon, simplifying proposal templates and guidelines and having longer submission timeframes.

■ 10. Promote and finance initiatives that foster sound policy–making for integrating MHPSS and peacebuilding

Initiatives that work to develop and enhance public policies are essential for the implementation and sustainability of integration efforts. Following initial dialogues between actors from both sectors, including grassroots actors, these initiatives include establishing national and regional joint coordination mechanisms between sector specialists, hiring integration specialists to join headquarters-level and sub-regional/national-level teams, and establishing alliances of integration professionals to serve as advisory bodies. Strengthening research mechanisms to establish foresight processes, strategic coordination and develop open-data sharing platforms should also be prioritized. In addition, leadership trainings for, and policy dialogues with, governments, donors and institutions should help them appreciate the value of bi-directional, holistic integration, the importance of supporting and learning with grassroots actors, and how to develop evidence-based integration policies for ongoing and future shocks. All stakeholders should also be involved in advocating for political commitment, resource allocation, laws, regulations and systems to achieve the objectives of integrating MHPSS and peacebuilding.



CONCLUSION

Within this new era of expanded conflict and violence, the time is ripe for reframing discussions on integrating MHPSS and peacebuilding. For the most part, integration has been viewed as useful, but not as a necessity. Yet for people impacted by armed conflict, acting on a single issue is not sufficient. The integration of MHPSS and peacebuilding is a necessity, and it is best achieved through a bidirectional, holistic approach. There is a defining opportunity now to bring the two sectors together. Working together, the integration of MHPSS and peacebuilding can fulfill our obligations to enable human well-being, social cohesion and sustainable peace.



NOTES

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