

To be well at heart: women's perceptions of psychosocial wellbeing in three conflict affected countries

Martha Bragin, Karuna Onta, Taaka Janepher, Generose Nzeyimana & Tonka Eibs

The devastating effects of armed conflict on women's psychological and social wellbeing have been documented and studied in recent years, leading to the inclusion of psychosocial programmes as standard practice in humanitarian intervention with conflict affected women. However, they have rarely been asked to define and operationalise psychosocial wellbeing in their own voices and within their own context, and thus it has been difficult to determine the effectiveness of such programmes. This has left the evidence base for effectiveness thin. This study utilised both participatory and ethnographic methods, using a purposive sample of 1,218 women, aged 18–65 in focus groups, and 79 key informants in Burundi, Nepal, and Northern Uganda. The study resulted in the development of interlinked constellations of positive and aspirational domains that comprise psychosocial wellbeing along with detailed examples. It suggests a replicable method to develop local indicators for the evaluation of future programmes for adult women affected by armed conflict, to include their views when planning programmes and policies for their benefit.

Keywords: conflict affected, participatory evaluation, psychosocial wellbeing, women

Introduction

Psychosocial programmes to support the wellbeing of women who have been affected by armed conflict form an essential component of post conflict, humanitarian assistance (Ager et al., 2011; Inter-Agency

Standing Committee (IASC), 2007). Recent studies indicate that both psychiatric interventions for serious and persistently mentally ill persons, and ongoing psychosocial interventions for those affected by adversity, are important during and after conflict (Ventevogel et al., 2013). While evidence supporting effective mental health interventions is growing, evidence to support the effectiveness of psychosocial interventions remains thin (Tol & van Ommeren, 2012). To be effective, such programmes should be informed by local understandings of the term 'psychosocial wellbeing', within the specific cultural context of the intervention. A number of studies have addressed this question with conflict affected children and adolescents (Ager et al., 2010; Bragin, 2005; Stark et al., 2009). However, comparable studies with adult women survivors have just begun (Bragin, et al., 2013).

This article presents the results of a participatory study utilising ethnographic methods to develop a phenomenological understanding of how women in three conflict affected settings understand, experience and operationalise the term 'psychosocial wellbeing'. The study was conducted in three countries (Burundi, Nepal and Uganda), where CARE Österreich (an international relief and development organisation) has been implementing the programme *Claiming Rights – Promoting Peace: Women's Empowerment in Conflict-Affected Areas*. The programme

integrates psychosocial components into activities for women's economic and political empowerment. The purpose of the study was to assist CARE Österreich, and its local partners, to develop indicators that could be used to evaluate the effectiveness of those psychosocial components through learning about how local women understood and operationalised psychosocial wellbeing within a local, cultural context.

Special challenges arise when studying local or culturally specific concepts of psychological and social wellbeing. Amongst these challenges is the fluid nature of cultures, a word best used in the plural. Cultures are constantly evolving, along with local thinking about them, in response to time and changing circumstance. This can be particularly true during the transition from conflict to post conflict, as disruptions and reconstructions are characteristic of this period (Akello, 2012).

Among cultures being studied is that of humanitarian assistance, which invents terms like *'psychosocial'* to describe aspects of the human condition that may carry complex and disparate meanings for disparate programme participants (Bragin, 2005). Therefore, the findings of the study are complex, multi-faceted and do not lend themselves to generalisation. The purpose of this article is to summarise what was learnt about how women in each location understood the concept of psychosocial wellbeing within their own context, what the results had in common, and how they were distinct from each other. Conflict affected women's conceptions of psychological and social wellbeing have important implications for planning programmes and policies aimed at ameliorating their lives. Improved knowledge and understanding of these local ideas in practical detail is essential to improving the effectiveness of interventions for women emerging from conflict.

Study settings and contexts

The study was conducted in three post conflict settings where CARE Österreich and

its local partners implement the *Claiming Rights-Promoting Peace programme*. Antagonists in all three settings had ended hostilities in 2006. The programme began in 2007, and the study was part of the programme's second three-year plan. The fieldwork was completed between June 2011 and December

Setting 1: Burundi: Gitega, Bujumbura Rurale and Mpanda Districts

Burundi is a small, landlocked country, with a strong agricultural tradition. Burundi's conflict began at independence and ended when the government signed a ceasefire agreement with the last of numerous rebel groups on 7 September 2006. Both during the conflict and after it, Burundian women and men have engaged in activities related to peacebuilding and reconciliation in the home and community, and between ethnic and political groups (Ntahobari & Ndayiziga, 2003).

All parties agree that the conflict is the result of colonial rule, followed by poorly prepared and conducted decolonisation. Violence, characterised by periodic massacres, erupted mainly in the years 1965, 1969, 1972, 1988 and 1993. Acts of genocide, war crimes, and crimes against humanity were perpetrated against all ethnic groups throughout the conflict (Niyongabo, 2013). Among the precipitating factors was a colonial history that turned different occupational groups in the country into *'ethnicities'*, creating a hierarchical structure through which the colonial powers ruled. Among the precipitating colonial actions were edicts that restricted access to education (Uvin, 2009; Daley, 2008).

Burundian women were specifically affected by the conflict, as well as the conditions that contributed to it (Iredale & Ntacobakinuna, 2009; Uvin, 2009). Documented negative effects of violence on the psychosocial wellbeing of Burundian women in the conflict and post conflict period led relief and development organisations to establish community based psychosocial programmes.

This study took place in rural and peri-urban parts of three districts, considered heavily affected by the conflict: Gitega, Bujumbura Rurale and Mpanda (CARE Burundi, 2011; de Boodt, 2007).

Setting 2: Nepal: Makwanpur, Chitwan and Kapilvastu

After more than 10 years of nationwide armed conflict, Nepal signed the *Comprehensive Peace Accord* (CPA) in November 2006, bringing with it new opportunities and challenges for women and men (World Bank & DFID, 2006). Studies on the effects of conflict on women revealed that they had suffered psychologically, socially and materially during the conflict (CARE Nepal & TPO, 2009; Shakya, 2009; United Nations Population Fund, 2007; Weyermann, 2006), as well as experiencing the results of historical inequities in the pre conflict period (CARE Nepal & TPO, 2009; United Nations Population Fund, 2007). This led to the establishment of psychosocial programmes to improve their wellbeing in the post conflict period (Singh, 2011). An active movement of Nepali women contributes to social change at all levels of Nepali society (Tamang, 2009; Women's Caucus Singhadurbar, 2011). The study took place in rural areas in three districts where continuing conflict and its effects on women were reported in baseline studies: Makwanpur, Chitwan and Kapilvastu (CARE & TPO, 2009; Singh, 2011).

Setting 3: Acholi sub region of Northern Uganda; Lamwo, Kitgum, Agago and Gulu

The 24-year war, waged by the Lord's Resistance Army (LRA) in Uganda, is one of Africa's longest running conflicts (Republic of Uganda, 2007). By the end of 2005, an estimated 1.6 million people, *the entire rural population*, were forced to leave their homes to live in internally displaced persons (IDP) camps, for fear of being attacked and/or abducted by the LRA. Twenty-six per cent

of females aged 14–35, and 47 per cent of males in that age range, were abducted. Although security incidents have steadily decreased since 2006, there is no peace accord to date (Annan, et al, 2011; Republic of Uganda, 2007). Numerous studies have documented the negative effects of the conflict on the psychological and social wellbeing of women and girls in the region. These studies have also been among those that pointed out the proactive stance of many conflict affected women in the region (Amone-P'Olak, 2005; McKay & Mazurana, 2004). The present study included affected sub-counties, Lamwo and Kitgum, as well as Agago, an area that is remote and hard to reach, and Gulu, the most heavily studied area in the region, where a peri-urban population could also participate (Bukuluki & Mugisha, 2010).

Methods

This is a qualitative, phenomenological study of women's subjective views of psychosocial wellbeing within a local cultural context. Two methodological approaches were adapted from the literature, *Stepwise Ethnographic Exploration* (SEE) (Nagpal & Sell, 1985), and aspects of the *Participatory Ranking Method* (Stark et al., 2009). These methods were adapted for the study because they had been used successfully to develop indicators of wellbeing in other development contexts.

Participants

The study included 1,218 participants, in 78 focus groups, and an additional 80 key informants. The researchers used purposive sampling in all three settings to ensure that those who were most affected by the conflict were included. The sampling included widows, women who had lost immediate family members, those who had participated in the conflict, and those who were disabled. We also sought out those in each country who were most marginalised or affected,

including members of minority castes, categories, or ethnic groups, and those who had suffered prolonged displacement. The sample was limited to those who had access to community based women's programmes, known to CARE or its partners, so that any urgent need for support or protection uncovered in the course of the study could receive immediate professional attention and ongoing follow-up as required by protocols for the protection of human subjects. The study received approval from the bodies protecting human subjects' research from the Institutional Review Boards of Hunter College, City University of New York, the Uganda National Committee for Science and Technology, and the Nepal Health Research Council (Table 1).

Composition of the study teams

The study teams comprised an international, principal investigator who participated in the entire study and was responsible for the overall study design, with support from an international co-principal investigator from CARE Österreich (who attended one round of the field work in each country). A principal investigator from each of the three study settings shared equal responsibility for the study in that location. Each team included one or more translators with experience in qualitative interviewing.

Procedures

The study was conducted in two separate rounds of field interviews, separated by an intervening period, during which research assistants who had not participated in data collection analysed the data. The flow chart in Figure 1 illustrates the process, which is explained below.

Step 1: Concept identification

In order to study the nature and meaning of a concept, within a local cultural context, the researchers must identify the concept to be studied so that all of the members of the research team are in agreement. To this

Table 1. Overview of study participants

Country	Total no. of focus groups (FGs)	Total no. of FG participants		Total no. of FG participants interviewed X1	Total no. of key informants	Total no. of study participants
		interviewed X2	interviewed X1			
Burundi	12	114	81	195	7F 7M	209
Nepal	30	300	100	400	21F 16M	437
Uganda	36	316	307	623	26F 3M	652
Totals	78	730	488	1218	54F 26M	1298

end, the study began with a workshop consisting of study team members, practitioners who worked with women in the field, and knowledgeable staff members from CARE and its partner organisations. Key informants included those in the community considered to be knowledgeable on psychosocial issues. The workshop introduced the study and then asked the framing question: how do you understand the term 'psychosocial wellbeing'? What language do you use to describe it? How would you define it for yourself and for programme participants?

Step 2: Concept clarification: focus group discussions (FGDs) and key informant interviews
Using the concepts, language, and possible ways to frame the question that had been developed in the interviews and in key informant meetings in step 1, the research team held semi-structured interviews with selected focus groups. These interviews included discussions on the concepts, and free listing to establish which questions were most useful to help women discuss the issue of psychosocial wellbeing. The women were asked three key framing questions: what

would it mean to be well in your mind and your heart? What words do you use to speak about being well? What questions should we ask to obtain this information? The women in the focus groups identified key informants, that is, people in the community who were considered knowledgeable on the subject. The framing questions were also put to each of them.

Step 3: Consensus on concepts

Interviewers' meetings Nightly group meetings among team members developed a consensus on concepts. This process corresponds to 'peer support/debriefing', a strategy for rigor utilised in qualitative research (Padgett, 2008). The team members checked methods, compared translation notes, and gathered required information from the days' discussions for recording, which the international principal investigator (PI) had completed overnight for the team members to read and approve the next day.

Data analysis

- The typed notes from the key informant interviews and focus group discussions were coded by two research assistants, who hand coded them, counting the number of focus groups in which the codes occurred.
- Domains that recurred were colour coded and reviewed for context.
- The typed notes from the interviews were coded by another research assistant using ATLAS.ti software (ATLAS.ti Scientific Software Development, Berlin, Germany), which also segregated terms by frequency and context.
- The results were disaggregated.
- The results of the three methods (interviewers' meetings, hand coding, and ATLAS.ti) were combined and synthesised in a workshop with the international PI and the research assistants.

Step 4: Qualitative concept validation: (Round 2)

In each setting the second round of fieldwork was undertaken following the completion of the data analysis at a time that was

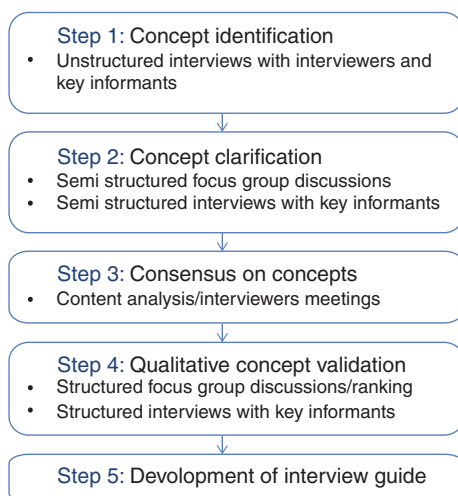


Figure 1: Steps in the stepwise ethnographic exploration. Adapted from Sell & Nagpal, 1985.

convenient for the participants on the ground. The round began with a workshop, in which the international PI presented the coded findings to the complete research team to obtain comments and revisions, as well as to discuss which questions needed further clarification from key informants.

Focus group discussions: (Round 2). The research teams presented the domains and operational definitions to focus groups consisting of the same women who had participated in round 1, plus additional women who had not participated. The purpose was to see whether the domains 'held up' with women who had not participated in the process.

Participatory ranking: (Round 2). The team used participatory ranking to add additional rigour to qualitative concept validation. The ranking method ensured that each woman in the group actively participated. When the team asked group members to formally rank the domains, each group member was seen taking time to consider, asking questions, and being engaged in the inclusion or exclusion of categories, as well as in the elements of each. This led to a review of whether low ranking domains should be included, and if so, why. This also provided opportunities to include any items that were added as separate domains. However, women in all groups, in all settings insisted that the ranking was not a realistic exercise, because psychosocial wellbeing was an integrated concept, in which each single domain interacted with others to develop a holistic view.

Key informant interviews: (Round 2). The purpose of these interviews was to provide an additional layer of validation for the domains that were established by the focus groups, correlating them to cultural ideas of psychosocial wellbeing and checking on the nature and meaning of important concepts. The study included well known national experts, experienced practitioners, and prominent leaders of conflict affected women.

Results

A series of affirmative, aspirational categories (domains) that described the components of psychological and social wellbeing in each setting emerged from the study. The domains were operationalised by a series of measurable factors that defined each one. In each setting the women considered these domains as interlinked and connected.

'All of these things are connected, don't you see? I may come sorrowful to the group, and feel down and alone at heart. The group members give me strength. . . they support me. Next meeting I come and I have cleaned up a bit. Slowly, with this help I find my voice. I may be looking "smart" and so I am a more effective advocate for my family because people are drawn to me. I may also be more effective because I feel better. Because I feel well and good about myself, and because I am effective in solving my children's problems, I am able to be helpful to others. Because I am so well perceived, I am loved by my husband and can get support from the others. This gives me strength to do good business and so the orphans are able to eat well and go to school. Then I have hope for the future.'

(Woman in FDG Northern Uganda)

We present the results with two diagrams for each setting, one illustrating the linked domains, and another listing the domains accompanied by operational definitions.

Burundi

In Burundi, the women designated eight domains of psychosocial wellbeing, each dependent upon and enabling the others. The domains were each operationalised by conditions of daily life. These domains are illustrated in Figure 2 and Table 2.

Nepal

In Nepal, participants designated six domains that were also interrelated and

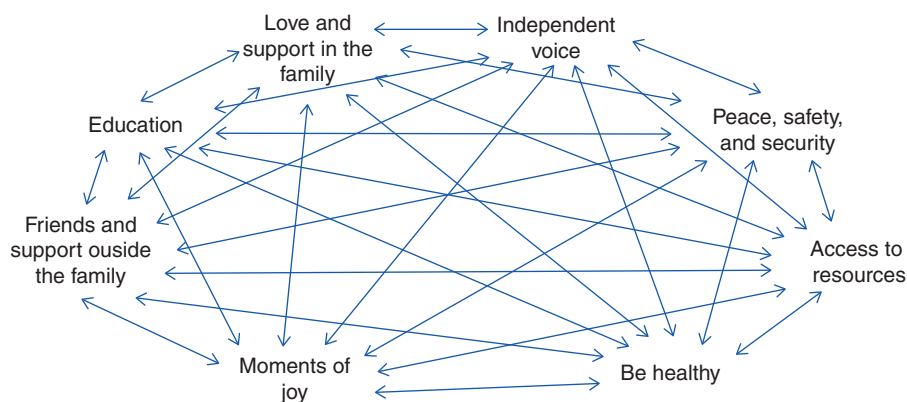


Figure 2: Burundi: domains of psychosocial wellbeing as an integrated constellation.

mutually dependent, as shown in Figure 3 and Table 3.

Northern Uganda

The study participants found 11 distinct domains in Northern Uganda. The inter-relationship is illustrated in Figure 4 and in Table 4.

Discussion

The domains of wellbeing from each setting were analysed to learn which could be combined, which were common to two out of three, and which were unique to each of the countries. Our purpose was to explore the construct of psychosocial wellbeing within conflict settings, from the viewpoint of grassroots women, to learn to what extent there is a common scope and range, and where specific local conditions dictate more locality based concepts. Our goal was to learn how to develop this concept and to use what emerges for programme design. Evaluation is strengthened by knowing what is common to more than one group and what is context specific (Mazurana, Gale, & Jacobsen, 2013). The diagram in Figure 5 illustrates the domain combinations.

Aspects of psychosocial wellbeing common to all three settings

After combining the results of each country case study, five common domains emerged: education; access to resources; love within the family; friendship and support outside the family; and voice at home, in the community, and beyond, as illustrated in Figure 6.

The following selected quotes from the study participants illustrate how these ideas were conceptualised by them.

Education

'If our daughter were to be educated, then she would be full of wisdom. Her face would shine like the moon. Everyone would respect her. Without even worry for a dowry, she would be married to a good man. He would love her and even her mother-in-law would love her. . . The family will be healthy and well. All of the community will respect her, for her knowledge and her wise council.' (Dalit woman in FGD Nepal)

Education had almost transcendent qualities in Nepal and Burundi, where access to

Table 2 Burundi: domains of psychosocial wellbeing operationalised

Domains of well being for conflict-affected women in Burundi	
Domain	Domain operationalised
Education	<ul style="list-style-type: none"> • <i>Be educated herself</i> • <i>Be able to educate her children</i> • <i>Have access to information</i> • <i>Have access to higher education</i> • <i>Have access to quality education</i>
Peace, safety, and security	<ul style="list-style-type: none"> • <i>To not be beaten or abused by her husband or family</i> • <i>To not need a husband or boyfriend</i> • <i>To be free of discrimination (widows, ethnic, disabled)</i> • <i>To “feel safe in my country and community”</i> • <i>To not fear for the future, especially the return of violence</i>
Love and support in the family	<ul style="list-style-type: none"> • <i>To have a husband with whom one can dialogue (kuganiraj)</i> • <i>To be loved by your husband's family</i> • <i>To be loved</i> • <i>Continued support and contact from your parents and family</i> • <i>To have children</i>
Independent voice	<ul style="list-style-type: none"> • <i>To be able to say what is in my mind at home</i> • <i>To be able to discuss without fear</i> • <i>To have my ideas respected by my husband</i> • <i>To be able to speak and to be heard in the community</i> • <i>To be able to decide laws and influence the rights of my children</i> • <i>To be able to participate in elections</i> • <i>To be able to hold positions of leadership and run for public office</i>
Access to resources	<ul style="list-style-type: none"> • <i>If her daughter is not married then through the capacity to earn through education, a job, training, commerce or the ability to save with an organisation</i> • <i>If she is married/through the ability to discuss, dialogue and influence the decisions of her husband</i> • <i>To have own income</i> • <i>To be educated (literacy)/access to information</i> • <i>To be able to share the fruits of her cultivation</i> • <i>To be able to determine how funds are spent</i> • <i>To be able to have the help of her husband in earning and cultivating</i>
Health	<ul style="list-style-type: none"> • <i>Her children should be healthy</i>

 Domains of well being for conflict-affected women in Burundi

Domain	Domain operationalised
Love and support outside the family	<ul style="list-style-type: none"> • <i>Have access to health care</i> • <i>To be well in mind and body</i> • <i>Be attended in childbirth and visited in sickness</i> • <i>Be respected in the community</i> • <i>Be regarded as useful to others</i> • <i>To sing and to dance together</i> (Akazehe, a Burundian tradition) • <i>Have someone to listen to troubles</i> • <i>Be part of an organisation that can bring about change</i> • <i>Have her children be part of an organisation</i> • <i>Be able to save together</i> • <i>Be able to do advocacy together</i> • <i>Be able to share together</i>
Moments of joy	<ul style="list-style-type: none"> • <i>To be able to see my children healthy, to laugh with them and play</i> • <i>To be able to laugh with husband</i> • <i>To have tea and time to sit and to drink it</i> • <i>To participate in religious ceremonies and festivals</i> • <i>To sing and to dance together with others</i>

education had been denied to the majority of the population for many years. On the other hand, in Northern Uganda, where education is available (although not completely free

of charge), it represents an obligation of good parenting, but was considered important for the restoration of farming and a response to climate change.

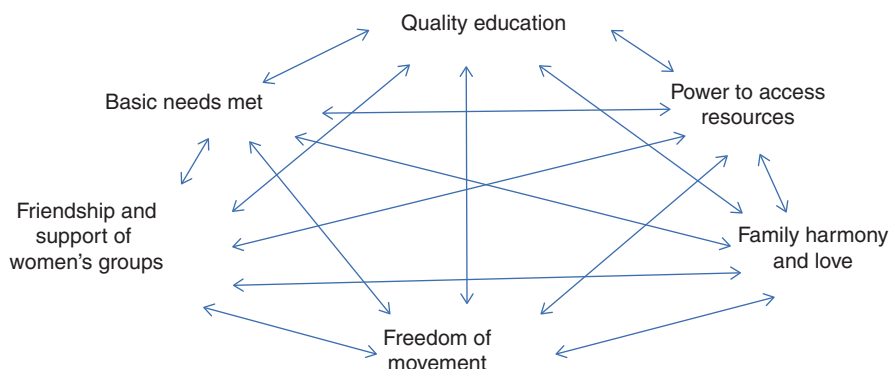


Figure 3: Nepal: domains of psychosocial wellbeing as an integrated constellation.

Table 3 Nepal: domains of psychosocial wellbeing operationalised

Domains of well being for conflict-affected women in Nepal	
Domain	Domain operationalised
Friendship and support outside the family	<ul style="list-style-type: none"> • <i>Meeting friends, discussing problems</i> • <i>Belonging to the women's group, and getting support there</i> • <i>Participating in festivals</i> • <i>Going to the fields (to see friends at work)</i>
Basic needs met	<ul style="list-style-type: none"> • <i>Enough food</i> • <i>Tasty food</i> • <i>Nice clothing</i> • <i>Dowry for daughter</i> • <i>House with a good roof and a good bed</i> • <i>Time to sit and relax, without working</i> • <i>Health care</i>
Freedom of movement	<ul style="list-style-type: none"> • <i>Go to the village development committee (VDC)</i> • <i>Go anywhere in the world at any time</i> • <i>Go to see mother at any time (especially at festivals)</i>
Power to access resources	<ul style="list-style-type: none"> • <i>Going to the VDC to demand rights</i> • <i>No discrimination (as women, as ethnicity, as caste)</i> • <i>To stand up for yourself and not back down</i> • <i>Knowing what you are entitled to and going to get it</i> • <i>Income</i> <ul style="list-style-type: none"> • <i>Employment, or if that is not possible, a skilled trade to market</i> • <i>Independent income to spend as one wishes</i> • <i>Land title (emphasised)</i>
Family harmony/love	<ul style="list-style-type: none"> • <i>Love of husband; husband shares and supports</i> • <i>Mutual understanding with husband and children</i> • <i>Mutual love with husband and children</i> • <i>Good relationship with mother-in-law/son-in-law</i> • <i>Harmony in the home</i> • <i>Equal love for son and daughter</i> • <i>The children are happy and healthy</i>
Quality education	<ul style="list-style-type: none"> • <i>To have quality education</i> • <i>To be able to educate the children</i> • <i>Have a profession that is respected</i> • <i>Having a voice and being able to speak well (comes from education)</i> • <i>Being able to speak and write one's name</i> • <i>To have knowledge and wisdom</i> • <i>To be learning all of the time</i>

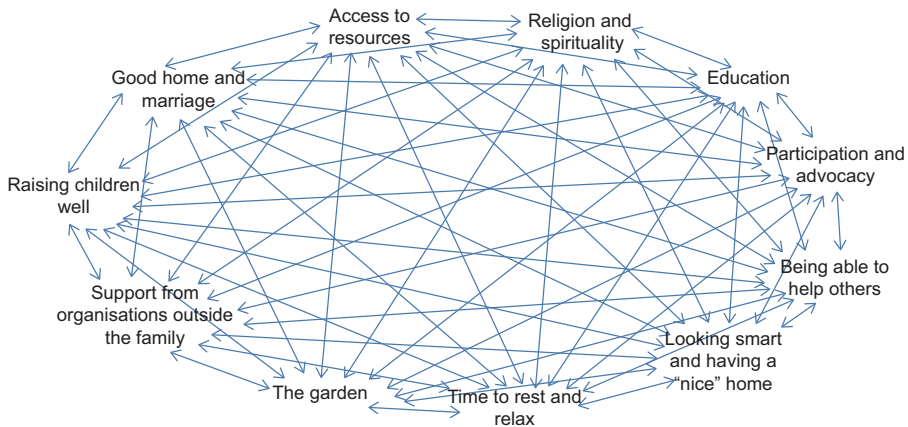


Figure 4: Northern Uganda: domains of psychosocial wellbeing as an integrated constellation

Access to resources

‘What makes me feel well in my heart? My goat. . . Every morning when I wake up the first thing that I see is my goat, tied up to the tree. Then I smile. I bought that goat with my savings in the solidarity group. Someone could come and kill that goat. Someone could steal her. But it would not matter. I could get another goat, because I bought the goat myself, with my savings. And now I have the power to solve my problems and take care of my daughter. I never have to be afraid again!’ (Woman in FGD Burundi)

Access to resources meant the ability to get what one needs when one needs it, rather than being dependent on others. It meant having the right to having one’s needs met, which freed participants from the fear of extreme want and its consequences. In all three cases it was differentiated from having one’s basic needs met, which in Nepal and Northern Uganda were represented by distinct domains.

Love and harmony in the family

‘In our culture, it is the love of the couple that is at the centre of the circle. The two who make the third, the child, are sacred and their happiness is sacred.’

Everything radiates outward from there. In our culture, men and women should cultivate together, and teach the children by the fireside together. The war distorted these things, made the men useless. . . now we must return to our culture, starting with the love between man and woman.’
(Key informant in Northern Uganda)

This most personal of the domains were operationalised in distinct ways for each setting, based on culture and context. In Uganda, where a woman has her own hut within the family compound, love included sexual love. The happiness of one’s children was a separate domain. In Burundi, the most important aspect of family love and wellbeing was *kuganira*, or dialogue. Sharing dialogue with one’s husband and teaching the children to dialogue were seen as key to getting along and to living well. In Nepal, where families live together with the husband’s parents, the relationship between the in-laws was most critical.

Friends and social supports outside the family

‘When the war ended, I was alone and in despair. I had a house full of orphans to care for and no one to care for me. If this disease did not kill me, I thought that I would die of misery. Then I was invited to join the solidarity group.’

Table 4. Northern Uganda: domains of psychosocial wellbeing operationalised

Domains of well being for conflict-affected women in the Acholi Sub-Region of Uganda	
Domain	Domain operationalised
Good home and marriage	<ul style="list-style-type: none"> • <i>Solve problems through discussion; peace reigns</i> • <i>Mutual love</i> • <i>Mutual understanding and trust</i> • <i>Good sex</i> • <i>Working together at home and in the garden</i> • <i>Officially recognised marriage</i> • <i>Freedom from alcoholism</i> • <i>Husband teaches children at the fireplace at night</i>
Access to resources	<ul style="list-style-type: none"> • <i>VSLA (Village Savings and Loan Association) provides financial security (access to emergency cash/investment funds)</i> • <i>Seeds and tools/drought and flood resistant crops</i> • <i>Access to health care including safe motherhood</i> • <i>Access to nutritious food</i> • <i>Support from the clan (emergency cash, emergency support)</i> • <i>Men also must have access</i>
Religion and spirituality	<ul style="list-style-type: none"> • <i>Connection to God</i> • <i>Connection to the land and the Acholi traditions</i>
Education	<ul style="list-style-type: none"> • <i>Acquisition of knowledge, skills</i> • <i>Access to information</i> • <i>Knowledge about agriculture for the soil and changing climate</i> • <i>Men must be informed and acquire knowledge</i>
Raising children well	<ul style="list-style-type: none"> • <i>When all of the children are well fed</i> • <i>When all of the school fees are paid and the children in school</i> • <i>Spending time with children laughing and talking</i> • <i>Children to support me when they grow</i> • <i>Children's good behavior throughout life reflects well upon me</i>
Looking smart and having a "nice" home	<ul style="list-style-type: none"> • <i>To look 'smart'</i> • <i>To bathe and be clean</i> • <i>To have a nice house</i> • <i>To have clean children</i>
Support from organisations outside the family	<ul style="list-style-type: none"> • <i>The opportunity to work together</i> • <i>Provides emotional support</i> • <i>Provides answers to difficult questions</i> • <i>Not to be alone/support from outside</i> • <i>Men must also have associations or be included</i>

Domains of well being for conflict-affected
women in the Acholi Sub-Region of Uganda

Domain	Domain operationalised
Participation and advocacy	<ul style="list-style-type: none"> • <i>To be seen and heard</i> • <i>To represent self and others</i> • <i>To advocate for own ideas</i>
Time to rest and relax	<ul style="list-style-type: none"> • <i>Time to rest on Sundays</i> • <i>We don't have this experience but to be well at heart, we should have it</i>
The garden	<ul style="list-style-type: none"> • <i>To plant in the garden</i> • <i>To see a good harvest</i> • <i>To work together with husband</i>
Being able to help others	<ul style="list-style-type: none"> • <i>Knowing that I can help</i> • <i>Being 'the best' at helping</i> • <i>Being known as one who helps</i>
Men's engagement	<ul style="list-style-type: none"> • <i>Men benefit from same supports women do; become engaged in peaceful progress</i>

I come to the group and talked about my problems. When I think that there is no solution the others help to advise me. We sing together. We embrace. Then my problems do not seem so heavy to me.
(HIV positive woman in FGD Northern Uganda)

demand my rights. I am learning to write my name so that I can get citizenship papers and vote in elections. This gives me great feelings of happiness.

(Indigenous woman in FGD Nepal)

In all of the three countries, having friends in order to be able to speak to someone outside of the family provided a source of emotional support and often joy. Talking about problems within the solidarity group was particularly prized. In all three countries the ex-combatant women found special solidarity in being included in groups with others, as well as meeting separately with others who had been part of the fighting forces.

The issue of having a voice came up in different ways within the different countries. All of the focus groups raised the idea that to be well, psychologically and socially, one had to find a way to be able to express oneself and one's wishes, both at home and beyond. Also, every focus group raised the issue of participation in elections. This phenomenon may be associated with the conditions of post conflict regions where there are large public campaigns to inform the population about elections and other changes in government.

Voice in the home, community and beyond

When I first came to the group I could not even say my name out loud. I felt like an animal, not a human being. Now I say my name at every meeting. My husband calls me by my name. I go to the VDC (village development committee) to

Aspects of psychosocial wellbeing

common to two of the three countries

Some aspects of wellbeing were shared by two of the three countries. It was interesting that Burundi and Nepal, separated by miles and cultures, had a great deal in common,

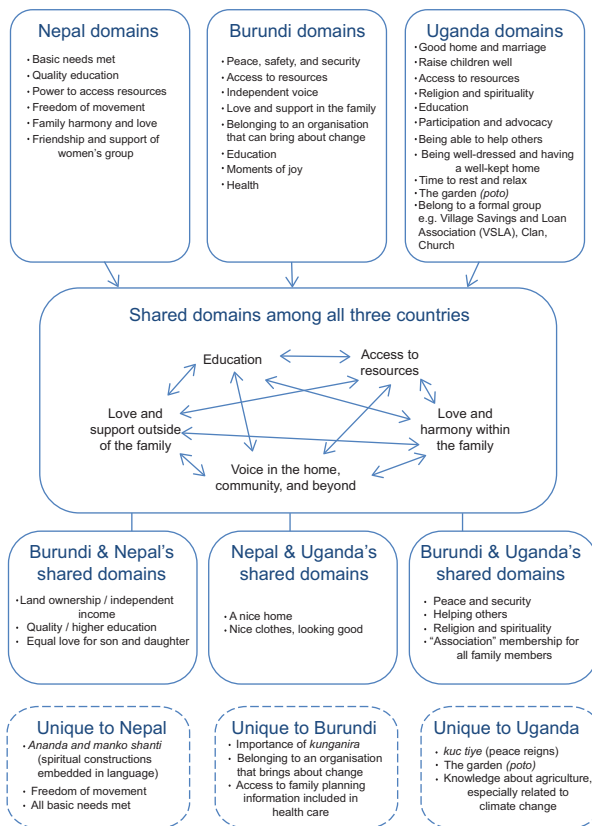


Figure 5: Domains operationalised, compared and contrasted among the three settings

based on a common struggle against inequality, the denial of education to marginalised groups, and the private ownership of land. It was less surprising that Northern Uganda and Burundi, neighbours in the lakes region

of Sub-Saharan Africa, had a great deal in common, based especially on the severity and longevity of violent conflicts with emerging survivors, and on their spiritual traditions rooted in Christianity and Islam.

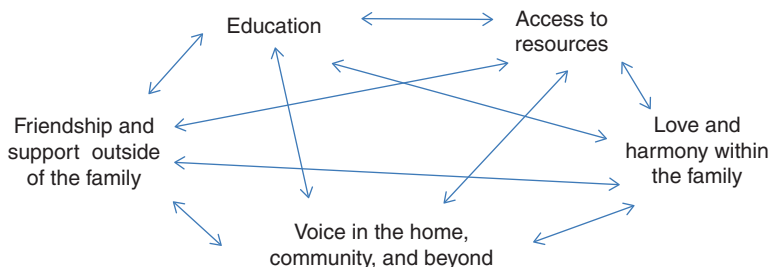


Figure 6: Domains of psychosocial wellbeing common to all three settings

Burundi and Nepal

Burundi and Nepal share a number of important characteristics critical to women's lives. In both countries, women attributed conflict as a main cause of inequality and injustice, including specific discrimination against women and girls within a broader context of discrimination in general. They operationalised domains with specific qualifiers that addressed these issues.

Freedom from all discrimination

'The way to end all of the violence around here is to end discrimination. All of it: against women, against unmarried women, against any ethnic group or political party. We should all be equal here as we are in our group.'

(Woman in FGD Burundi)

Equal love for sons and daughters

'No one is happy unless the children are happy. And we remember that when we were girls we were sad that our brothers were loved more than we. Our daughters will love their sons and their daughters equally.'

(Woman in FGD Nepal)

Historic and culturally embedded gender discrimination in both countries led women to determine that it must be eradicated at the most intimate family level, by equal love for sons and daughters.

Title to one's land for landless persons in Nepal, for women in Burundi – an independent income

'Because she can own nothing, a woman is completely dependent on her husband. You cannot leave a man who beats you; and when you are a widow you have nothing at all; you are completely insecure. . . To be well, our daughter must have property of her own. She should also have a job or a skill with which to earn her living.'

(Woman in FGD Burundi)

In both Nepal and Burundi, land is scarce and privately owned. Therefore, as part of

access to resources, women wanted both land title, as well as an independent income for their families and for themselves personally. These assets have been long denied to women by law, and while the law has now changed, custom has not. Women saw land and/or independent income as a defence against death by starvation in widowhood, or against the need to remain in a dangerously violent home where she is not wanted.

Higher education/quality education

'Education alone is not good enough. It must be the kind of high quality education that allows a person to know more than her name – that allows her to have wisdom. When she has higher education it will not matter about her caste, or her husband, she will be like Lakshmi-didi, who is always here to help and to advise us.'

(Woman in FGD Nepal)

Women in both countries viewed education as a great potential equaliser, leading to a life beyond discrimination. However, this would be true only if the education was of such quality that it led to success in higher education. Therefore, the women specifically insisted that the category 'education' be specified as 'quality education' and 'higher education'.

Burundi and Northern Uganda

Burundi and Uganda are both part of the Great Lakes Region of Sub-Saharan Africa, a region that has been subject to long term, armed conflict. The reasons for conflict within the two countries are distinct, as are their history, language, culture, and official language; however, they do share some important commonalities as well, delineated below.

Peace and security

'If we are at peace, and there is security for that peace; if there are no raids, no camps, no abductions; then we can begin to think about what it will mean to be well in our hearts, to have a

good life?

(Woman in FGD Northern Uganda)

The common aspect of the conflicts in Burundi and Northern Uganda include large numbers of deaths (uncounted in Uganda), wholesale massacres of civilians and complete destruction of homes, farms, and villages, over a prolonged period of time. Peace itself (*kuc* in Acholi, *amahoro* in Kirundi) is a requirement for psychological and social wellbeing. In Uganda, women insisted that peace be an umbrella category, without which psychosocial wellbeing was impossible, and did not want to make it a domain. In Burundi, it was its own domain coupled with security.

Helpful to others

'When we come to our meetings and someone has a problem, we all help her to solve it. Even me, who is HIV positive, I not only get help, I find ways to be helpful to others. I can even do some work for an elder person who cannot do it. . .'

(HIV positive woman in FGD Burundi)

The women in both countries saw their capacity to be helpful as connected to their sense of self-efficacy and self-worth. When women in Burundi and Uganda discussed psychological and social wellness tied to *'friendship and support outside the family'*, they included their own role in being helpful to others.

All family members should belong to an association

The women in all three settings valued their women's associations highly, and felt that the groups had changed their lives. However, in Burundi and Uganda, the focus group participants emphasised the fact that they also wanted men to participate.

In Burundi, a men's movement was changing the ways that men thought and acted, improving the quality of family life

dramatically. Based on the Burundian concept of *kuganira*, dialogue, family members prided themselves on dialogue as a source of resolving differences peacefully in the family, and taught the skills to their children, an aspect of women's lives that was traditional in Burundi. The power of this men's movement led women to want all of the family to belong to an association.

In Uganda, the women spoke of historically strong families and the specific dangers that men had experienced during the conflict years they saw as the root of their current family conflicts. In every group, in every domain, the women asked that men be included in associations so that they too could benefit.

Religion and spirituality

'When we are in despair we turn to God to help us. God has allowed us to live. God has connected us to this land, its fruits and its traditions and we are cleansing this land and returning to our lives with the help of God.'

(Key informant in Northern Uganda)

Both Uganda and Burundi are largely Christian/Muslim and animist countries. Praising God is deeply rooted in the cultural traditions of the communities and was mentioned frequently in both countries. It had its own domain in Northern Uganda, and was a part of other domains in Burundi.

Nepal and Northern Uganda

Nepal and Northern Uganda had fewest additional commonalities. While both cultures are old and deeply rooted, they manifest differently. Nepali culture is closely tied to the formal, hierarchical structure of Hinduism. The Acholi culture of Northern Uganda is collective and egalitarian, with a system of spirituality not officially tied to a specific scripture and compatible with many. The conflict in Nepal was part of a national liberation movement to abolish the monarchy, and with it, historic inequalities. The

conflict in Northern Uganda was an externally funded proxy war, in which the local population was victimised (CARE International, 2010). Both countries saw an end to conflict in 2006. In Nepal, it was the result of a *Comprehensive Peace Accord* (CPA) that ushered in an elected government (Shakya, 2009). In Northern Uganda, the violence ended when external donors withdrew support for the LRA's activities there, but there is no formal peace accord to date (CARE International, 2010).

Basic needs met

'Looking smart is very important to feeling well. It cannot be skipped. When a person looks smart, when her house is well kept, she feels better about herself. But she is also treated better by others!'

(Woman in FGD in Northern Uganda)

Separate from the domain of access was that of actually having one's basic needs met. In Nepal, this was a domain with many parts, whereas in Northern Uganda it was mostly about looking "smart" and having a clean, well-kept home. Plentiful, tasty and nutritious foods were also mentioned by both, but in Northern Uganda it was associated with access to resources.

Aspects of psychosocial wellbeing unique to each of the three countries

Each country had unique characteristics affecting the way psychosocial wellbeing was conceptualised, and the more detailed ways in which it was lived as an experience. This section highlights unique domains or details of how common domains were qualified in the individual settings.

Burundi:

The importance of kuganira (dialogue) for family relations and social change

'You are not secure in your community if you have won rights with force. People may come in the night to kill you, or to drive you out. If you are in dialogue with the neighbours, then

you will learn about their concerns and you will have the means to reach an understanding in time of trouble.'

(Widow in FGD Burundi)

'In our family, even the children dialogue. We all sit together and talk about our problems and even our dreams. We dialogue about what we shall tackle, who shall tackle it and how. We are all at the fireside at night and it is a very warm relationship. When things are well at home we can even dialogue about sex. . .'

(Woman in FGD Burundi)

Kuganira, dialogue, is an art that requires knowing what each person wants and being able to use that connection to keep both parties talking until they arrive at a conclusion. The important thing, however, is not that a conflict be well mediated, although that is the by-product, but rather that a process is developed throughout which problems are solved by discussion. This process involves being able to understand and empathise with the position of the other, even when it is difficult.

The women in the focus groups referred to a happy marriage and family as there being dialogue on all issues, even with the children. A men's movement, called *abatangamuco*, trains members to have a dialogue with their wives about important issues, from sexual relations to the distribution of household property.

However, women also discussed *kuganira* as being critical in the area of safety and security. Women pointed out that safety and security in the community cannot be imposed from without. *Kuganira* is a method of making it possible for all groups to live together. They also see this process as key to ending discriminatory and prejudicial practices, and to harmonious family life.

Belonging to an organisation that brings about change

'We cannot predict the future. We want our daughters to be part of an organisation that can bring about change. Then if things are not well in any moment, together with her organisation she can bring about the change that she

needs to be well in the future?
(Woman in FGD Burundi)

Women in the focus groups continually pointed out that to feel well in their hearts, they want to belong to a women's organisation that will bring about change, so that whatever problems they are facing can come to an end. One reason for this may be that in Burundi women are credited with moving the stalled peace processes forward through *Dushirahamwe*, or 'Let us Reconcile,' a women's peace-building organisation. Among the testimonies to the power of *kuganira* among women is the capacity of *Dushirahamwe* to include women from a range of political parties, poor, rural, urban, internally displaced people (IDP) and refugee women, and uneducated and educated women, into one umbrella organisation able to have dialogue together in order to agree on a platform and create a space to begin the discussion of peace.

Health care includes family planning

'To be well in her heart our daughter must have information about family planning. If my daughter will be healthy and know that her children will live, then she can plan to have only the number that she can care for well.'
(Woman in FGD Burundi)

Among the changes that Burundian women wanted to see was access to family planning information. With subsistence farming as the major source of family income, and individual land ownership the norm, women were concerned that their children will not be able to support themselves on limited amounts of land. This, accompanied by a high level of infant mortality, has led women to contest the tradition that values them more for having large numbers of children.

Nepal

Ananda and manko shanty – spiritual constructions embedded in language

'Happiness is fleeting, it is like playing in cold water on a hot day. It does not last. But to have

psychosocial wellbeing, this is ananda, it is entering a higher plane where the overall goodness is in your mind, not the minute to minute sort of pleasure.'

(Woman in FGD Nepal)

None of the participants in the focus group discussions, key informants, nor traditional and spiritual healers operationalised psychosocial wellbeing in terms of spiritual and cultural practice, yet the very language that women used to describe psychosocial wellbeing was based on the spiritual traditions of Nepal. The word *ananda* refers to a higher state of bliss that transcends practical matters. Participants in the focus group discussions used the term to describe their understanding of psychosocial wellbeing, or having the capacities and social supports that would allow a person to transcend suffering and experience a good life.

Freedom of movement

'I want to be free to go anywhere that I choose without anyone to stop me. I want to go to the VDC (village development committee) to demand my rights. I want my daughter to be free to visit me at festival time. You are old, and I am old and our children have left us. Maybe I should go to visit you and we will cook for one another.'

(Elder woman in FGD Nepal)

In Nepal, the custom of women's seclusion and exclusion, known as the *pardah*, has restricted women's movements. Women were subject to adverse public reactions when they walked about in the community or travelled from place to place (Shakya, 2009; United Nations Population Fund, 2007). Women participants in the focus groups described freedom of movement as essential to their feelings of wellbeing in a number of different ways. Landless women, despite heat and hard labour, looked forward to their time as day workers when they met their friends in the fields. For other women, the part that was essential to their psychosocial wellbeing

was a visit their mothers during festival times. For still others, what was important was to travel to the VDC with other female group members, to demand their rights. For some, it was the movement itself that gave a sense of wellbeing, just wanting to know that they could go out at any time for any reason without fear or harassment or violence. This was among the motivations for some young women to join the fighting forces during the conflict years.

*Northern Uganda
The garden (poto)*

‘Sometimes when I go to the garden in the morning to weed, I just sit there for a moment, and look around and breathe the air. I smell the earth and the rain. I feel very well indeed.’
(Woman in FGD Northern Uganda)

Land is directly related to Acholi spiritual traditions, and many who embrace the Christian or Muslim faith also derive comfort from the land and its spiritual qualities. Land is owned collectively by the traditional clans and apportioned to community members, male and female, to farm. When a woman is widowed, she retains her family’s portion and community members help her to farm, organised by the women’s traditional leader called the *Rwot Okoro*. Women described the benefit of peace to be their return to the *poto*, translated into British colloquial English as ‘the garden.’

Information on preserving the ecology and adapting to climate change

‘Now, sometimes there is too much water for the maize. Torrential rains have come and drowned them. The sun has burned the beans. These [mango trees] are old and were planted by our ancestors. We have lost that knowledge. We must now learn how to care for the land that has changed so much when we were away from it. We need to be informed of all of these things.’
(Woman in FGD Northern Uganda)

When Ugandan women spoke about education and information, they talked about the importance of knowing the proper crops to grow in order to adapt to changing climate conditions.

Limitations of the study

By its nature, qualitative studies are limited by the statistically small number of participants, the purposive sampling, and the specificity of the responses. Further, women who participate in solidarity groups may be different from those who do not participate, whether because they are influenced by the ideas of the group, or because of factors that cause them to join the group in the first place. Therefore, it is not possible to generalise the results beyond the population where the study is conducted. Furthermore, while every effort was made to ensure fidelity of translation, translation always involves some level of loss when fundamentally different ethno linguistic and intellectual traditions are involved.

Conclusions and implications for practice

The study provided insight into the aspirational views of psychosocial wellbeing among grassroots women affected by armed conflict, beyond the suffering they have experienced. It allowed the participants, in their own voices, to provide a clear way to understand what it means to them to be well at heart, and what conditions needed to be created in order for them to achieve that status. The study used a participatory method which could be replicated by other actors to set standards for the design, monitoring, and evaluation of future programmes.

Trustworthiness and connection to theory

The domains that the women delineated coincided with two well known theories of psychosocial wellbeing. One comes from the social ecological perspective on resilience, the other from the capabilities approach to

development economics. The coincidence with these theories enhances the trustworthiness of the findings and creates some avenues for application in practice.

Social ecological theories of resilience. Safety and calming could be seen in harmony in the home, in peace and security, where they were mentioned, but also in access to resources. A sense of self and community efficacy can also be seen in support outside the home in combination with voice at home, community and beyond, connectedness can be seen in love in the family and friendship outside of the family, and hopefulness was reflected in ideas regarding education.

The capabilities approach to wellbeing. Wellbeing has been studied extensively by economists, yet their studies are not often cited in the psychosocial literature. Economists divide wellbeing into two categories, 'objective,' involving measurable economic and social assets, and 'subjective,' involving thoughts, feelings, attitudes, and social relationships (Conceicao & Bandura, 2008). Amartya Sen is particularly concerned with the wellbeing of poor and marginalised people, including women (Sen, 1985; 1999). Sen's definition of subjective wellbeing as "*living a good life, now and in the future*" (Anand, Hunter, & Smith, 2005) is referred to as the capabilities approach (McGillivray, 2007). This approach suggests that human wellbeing can be studied in terms of 'capabilities,' that is, '*what people are able to do or able to be*' (Anand et al., 2005). Feminist scholars have taken up this approach (Nussbaum, 2003; Robeyns, 2003). Some of these scholars argue that the use of participatory methods to engage women in the measurement of capabilities is an essential factor in their experience of wellbeing (White & Pettit, 2007). Like the social ecological approach, the idea of a good life, now and in the future, with the capabilities to make that possible was seen in the aspirations for education for themselves and their children, access to resources, participation and voice. The idea of a good life was reinforced by their consistent idea of the value of human connections in and outside of the family.

Implications for practice

The connection of the findings to resilience and capabilities may guide practitioners wishing to use this study in developing future programmes. A review of the results could lead to integrated programme approaches that advance women's capabilities, along with their relationships, which in turn would move psychosocial work to address women's conflict related suffering from isolated silos toward mainstream development activities.

To make this possible within a specific cultural context, the authors hope that the methodology will be replicated by development actors and governments, prior to the design of future psychosocial programmes for conflict affected women so that those programmes are evaluated based on the voice and vision of intended participants. In the settings where the study has already been completed, its results can be used for monitoring and evaluation of existing programmes and design of future ones, as well as the creation of training and education materials. There were a number of findings in the study that were incomplete and were not included in this article, including the relationship of psychosocial wellbeing to the work of spiritual and cultural leaders. The authors will include these findings in future publications, however participatory methods used in the study can lead to further exploration of these and other issues by local authors.

The authors hope that the findings will be combined with the growing literature on psychosocial stressors in order to round out the picture of conflict affected women and their post conflict experience, leading to policies that reflect their aspirations as well as their distress. Furthermore, we hope that the study will be used toward measuring the effectiveness of psychosocial programmes for these women, so that effective practices can be replicated, ineffective ones discarded, and integrated, holistic psychosocial programmes that promote wellbeing can join the ranks of evidence based practice in humanitarian settings.

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Martha Bragin, PhD. Associate Professor Silberberman School of Social Work at Hunter, College City University of New York email: marthabragin@verizon.net

Karuna Onta, PhD. CARE International in Nepal

Taaka Janepher, MSc. Psychosocial Advisor Dan Church Aid, Uganda

Generose Nzeyimana, MSc. Psychosocial Advisor CARE Burundi

Tonka Eibs, MSc. Child Protection Specialist, UNICEF, Kosovo