Healing the Wounds of War: Victim Assistance in Post-conflict Burundi

Although violence in Burundi has subsided, the majority of the survivors still suffer from psychological trauma, including depression, poor self-esteem and anxiety. To manage these negative effects, the *Centre d'Encadrement et de Développement des Anciens Combattants* (Training Centre for Development of Ex-Combatants) initiated a peer-support program to help ex-combatants solve their challenges as a group. James Madison University's Center for International Stabilization and Recovery and Action on Armed Violence worked with CEDAC on this peer-support program. The program is funded jointly by the Stavros Niarchos Foundation and AOAV.

by Cameron Macauley [CISR]

Since its independence in 1962, Burundi has been plagued by periodic violence resulting from ethnic and political divisions, which reached a peak during the mass killings of 1993 and led to years of instability.¹ Violence subsided with the 2008 peace accord, but many Burundians are left with permanent scars, long-term poverty and few social services.² In a 2007 "satisfaction with life" study conducted with data from 178 nations, Burundi ranked last.³

In recent years international aid agencies, including World Vision and HealthNet TPO, a Dutch aid agency affiliated with *Medecins Sans Frontières*-Holland (Doctors Without Borders), have implemented new programs to help Burundians learn how to recover from past traumas and assist one another.⁴ Psychosocial support promotes autonomy and empowerment among survivors who may have spent years as forced conscripts, refugees or political prisoners—situations in which they had no control over their lives. For these survivors, psychological recovery is facilitated by engaging in new activities designed to enhance self-esteem while generating income and interacting with others in a positive environment.⁵

CEDAC

An example of this approach is the program operated by the *Centre d'Encadrement et de Développement des Anciens Combattants* (Training Centre for Development of Ex-Combatants), a Burundian nongovernmental organization established in 2005. Its founder, Eric Niragira, is a former child soldier with first-hand knowledge of the helplessness many ex-combatants experience upon demobilization. "You've spent so many years being told what to do and



A peer-support worker (right) talks to a survivor in a field not far from her home in Kiganda, Burundi. *All graphics courtesy of Cameron Macauley/CISR.*

when to do it that your own initiative disappears," he says. "Once demobilized, you find yourself in a country with few opportunities for education or employment, and that feeling of powerlessness persists."

Niragira himself struggled during the post-conflict years to learn English and find funding to start CEDAC.⁶ His goal was to unite ex-combatants to solve their problems as a group, so that they could support each other just as they had during the Burundian crisis—known in Burundi as *la crise*. This peersupport strategy is a central feature of many psychosocial support programs and is gaining wide acceptance as a cost-effective means of promoting recovery in post-conflict settings.^{7,8}

for solving problems, and problem-solving builds self-esteem.

Moreover, helping others is fulfilling. These peer-support

groups counteracted the humiliation and helplessness that

ants who were so depressed and withdrawn that they would

not attend group meetings. He sought to train survivors so

that they could offer not only friendship but individual coun-

seling as well. He also wanted to include survivors with dis-

abilities in his program. In 2010, CEDAC formed a partnership

with the Center for International Stabilization and Recovery

Niragira also wanted to provide assistance for ex-combat-

CEDAC began by gathering female ex-combatants into groups where they could discuss concerns and experiences. Very often these discussions focused less on psychological trauma and more on practical concerns such as poor housing, illiteracy, unemployment and illness.

people experienced during the war.

"No one showed much interest in my problems until the peer-support worker began to visit me. Now I have help in solving my problems, and I am thinking in new ways about the past. I have hope that the future will be better."

illiteracy, unemployment and illness. ~ Joseph Ntawanka Advice and information from peers suggest sensible options system of communica

program, CEDAC also created an administrative structure to ensure the provision of quality services. Peer-support workuch interest in my eer-support worker Now I have help in 5, and I am thinking he past. I have hope e better." Complex issues to resolve. Supervisors had to be familiar with other agencies and institutions that assist survivors in need of health care, education, employment and legal is-

sues. All of this required a reliable system of communication and transportation.

Additionally, a program of this kind needs monitoring and evaluation to learn what works and what does not. This depends on data collection by literate peer-support workers who record information about survivors for their supervisors to analyze, including periodic mental health assessments to determine if survivors are benefiting from peer support.

The training of peer-support workers was only the first

step. In order to implement a full-scale psychosocial support

In late 2011 another partner entered the picture: Action on Armed Violence, a London-based NGO formerly known as Landmine Action. Its work in Burundi began with an interest in controlling the large numbers of handguns, rifles and grenades that remained in the hands of citizens following the

Peer Support Programs

at James Madison University.

Starting in 2011, CISR trained peersupport workers and other CEDAC staff so they could in turn conduct their own trainings.9 One of the obstacles CISR faced was how to instruct peer-support workers who could not read or write. Literacy in Burundi is around 77 percent for the 15- to 24-year-old age group; however, it is significantly less for those over 24 and for persons with disabilities.¹⁰ This means that many survivors in their thirties and forties cannot read or write, especially those living in rural communities. CEDAC did not want to exclude peer-support worker candidates who are not literate; therefore, CISR developed a curriculum that did not rely on reading and writing. Exercises and presentations had to be entirely verbal while recognizing that the participants were adults with significant life experience.



Joseph Ntawanka shows CISR Trauma Rehabilitation Specialist Cameron Macauley and CEDAC Operations Coordinator Joël Nibigira the site of a mass grave in Kiganda, Burundi, where 32 people were buried after being shot by soldiers while drinking in a pub that Ntawanka owned. He was the only survivor.



CISR Trauma Rehabilitation Specialist Cameron Macauley rests for a moment with CEDAC Operations Coordinator Joël Nibigira on their way to visit peer-support workers in Bugarama, Burundi. A group of children want to see the *muzungu* (anyone who is not African) up close.

conflict.¹¹ These weapons contribute to violent crime and political instability.

AOAV identified psychological trauma as one of many motivations that lead to acts of violence and felt that CEDAC's peer-support program could help miti-

gate anger, bitterness and the desire for revenge—commonly felt by people experiencing unresolved traumatic stress. AOAV decided to conduct a baseline population survey to examine mental health indicators as well as socioeconomic conditions in the communities where

CEDAC works. AOAV also stepped in to provide mobile phones for all of CEDAC's peer-support workers and bicycles for supervisors, therein providing the communication and transportation necessary to facilitate the program. The results are impressive. Although quantitative data is still being compiled, interviews with 16 randomly selected survivors showed that participants have enthusiastically positive opinions of the services received.

"I have been lonely and sad since I lost my arm during the violence that devastated my community. A woman with one arm is nobody—people act as if she doesn't exist. But my peer-support worker cares about me, wants me to feel better. She has made me think about myself differently. When I talk to her, I feel as if my life has meaning once again."

~ Languide Nsabiyumva

For peer-support workers, work days are long and strenuous as many homes are remote and accessible only on foot. Yet, the rewards of helping others make every step worthwhile. "Even when I'm not working, I think about the people



Cameron Macauley, MPH, joined CISR in August 2010 as its peer support and trauma rehabilitation specialist. He holds a Master of Public Health as well as degrees in anthropology and psychology, and became a physician assistant in 1983. He has worked in a refugee camp on the Thai-Cambodian border, at a district hospital in Sumatra, as a Peace Corps volunteer in Guinea-Bissau, in Mozambique where he taught trauma surgery for landmine injuries, in an immunization program in Angola and in a malaria-control program in Brazil. Between 2005 and 2010, he taught mental health courses for Survivor Corps in Bosnia and Herzegovina, Colombia, El Salvador, Ethiopia, Jordan and Vietnam.

Cameron Macauley, MPH Peer Support and Trauma Rehabilitation Specialist Center for International Stabilization and Recovery James Madison University, Harrisonburg, VA 22807 / USA Tel: +1 540 568 4941 Email: macaulex@jmu.edu Website: http://maic.jmu.edu

that I'm trying to help," said Candide Nsabiyumva. "Knowing that I can make a difference in their lives is an inspiration for me."

CEDAC collected monitoring and evaluation data on hundreds of survi-

vors that will be analyzed during the next few months and used to improve program activities in 2013. "Each day brings new refinements to this program," says Eric Niragira. "We look forward to expanding into new communities and eventually helping the entire nation. We

are assisting each other to recover from Burundi's violent past." ®

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CISR Donates 200 Mobile Phones to Peer-support Workers

by Cameron Macauley [CISR]

n 11 June 2012, the Center for International Stabilization and Recovery at James Madison University donated 200 mobile phones to its partner organization IBUKA ("Never Forget" in Kinyarwanda), the largest support network for genocide survivors in Rwanda. Since 2009, IBUKA has operated a peer-support program for genocide survivors in Rwanda who suffer the psychological effects from the 1994 Rwandan genocide. More than 800,000 Tutsis and moderate Hutus were killed during the genocide between 6 April and mid-July 1994. Many more died in refugee camps during the following months.1

IBUKA trains genocide survivors to provide psychosocial support to traumatized survivors and their families in some 30 Rwandan communities. For these peer-support workers, communication is essential in order to obtain guidance and support from psychologists and program administrators. The phones help IBUKA staff handle emergencies such as suicide attempts and they enable peer-support workers to maintain contact with survivors over a wide geographic area.

In July 2012 IBUKA expanded its program from 25 to 65 peer-support workers with technical assistance from CISR. Since 2010, CISR has hosted five peer-support training workshops in Rwanda, including a training of trainers and a peer-

support training for Rwandan psychologists and counselors. Participants engaged in role-play and problem-solving exercises, as well as peer-support practice sessions. They were taught specific techniques of peer counseling, such as active listening and interpretive questioning. All training materials were in Rwanda's native language, Kinyarwanda. In addition to listening and questioning skills, the peer-support workers received technical guidance on monitoring and evaluating participants' progress.

"This support has been enormously useful for us to provide high-quality psychosocial services," said Janvier Forongo, executive secretary of IBUKA. "With CISR's assistance, IBUKA is rapidly becoming one of the foremost trauma survivor support programs in Africa. The profound level of damage inflicted by the genocide requires expertise in trauma rehabilitation, and we thank CISR for helping us respond effectively."

The Stavros Niarchos Foundation funded the trainings, providing a US\$100,000 grant to CISR to focus specifically on East Africa. Of the total grant, \$33,000 funded peer-support training in Rwanda and \$72,000 funded peer-support programs in Uganda and Burundi. The remaining \$5,000 of the grant bought the 200 mobile phones donated to IBUKA. @

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Newly trained peer-support workers hold their new phones. Photo courtesy of CISR.