Mental Health of Young Women Peace Practitioners in Nairobi

Who heals the healers? Experiences of young Kenyan women peace practitioners

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Key findings

- Peace work has both positive and negative effects on the mental health of young women peace workers in Nairobi.
- Supporting employee mental health is critical to the growth, productivity and innovation of peace workers; however, most of the workplaces of the respondents of this study do not have adequate measures in place to address mental health and psychosocial support (MHPSS).
- There is a need for various stakeholders to support MHPSS for both employees and the affected communities. The government should develop a framework that guides the integration of MHPSS into the peace and security sector. Peace organisations should establish a supportive and protective organisational culture and include providing basic psychosocial support to staff.

Introduction

"Violence lies not so much in action as in a state of mind: it is ultimately the violence of the heart rather than of the body which damages us" Adam Curle (1999). This assertion underpins the assumption that the majority of conflicts that sporadically degenerate into violence are largely generated by poor mental health and communication barriers, with all other factors acting as provocative agents. Victims of violent conflicts the world over not only suffer physical harm but are, to a great extent, also emotionally wounded. When not addressed, wounds and psychosocial needs have a far-reaching and long-term impact on people, their families, their communities and the whole society.

There are several factors, such as age and gender, that contribute to how different people are impacted by conflict. Research confirms that women are more likely to experience depression than men, and this likelihood increases with age (Charlson *et al.*, 2019). Further, during peace processes, women display their emotions when narrating their experiences to peace actors because of the distinct ways conflict affects them, for example, rape, forced marriage, forced impregnation, indentured labour and sexual enslavement. Women victims have found it easier to share their experiences with female peace actors than their male counterparts. Some of the ordeals women have gone through are highly emotional and emotionally affect the female peace actors too when shared with them. Although peace actors may occasionally put on a brave face to avoid 'a doctor becoming the patient scenario', peace actors are also mentally and emotionally affected by the gruesome stories of the survivors of violent

conflicts. They are often members of affected communities themselves and may, therefore, experience the same losses and stressors as the people they are supporting. They also work long hours under extremely challenging conditions, often with inadequate resources or limited training (Ministry of Foreign Affairs of the Netherlands, 2019). To compound their challenges further, there has been evidence that in their bid to promote a peaceful society, their efforts have been greeted with physical assaults and other forms of abuse capable of affecting them mentally[1].

Kenya exemplifies a state defined by an atmosphere of serenity and tranquillity on the one hand and a violent, toxic environment on the other. For instance, the Arid and Semi-arid Lands have witnessed conflicts more often than peace, necessitating regular interventions by peace actors. Communities from these regions have been adversely affected both physically and mentally by these conflicts. Women peace workers have been at the forefront of responding to conflict crises in challenging environments. Fatuma Abdulkadir Adan is one such woman, working as a peace and rights activist in northern Kenya, using football to engage women and youth to promote peace and campaign against female genital mutilation. Pokot women also wear *lenketio*[2] to protect their sons from being attacked when they go to war. While there are some advances in incorporating mental health into conflict and humanitarian situations globally, most of these attempts are geared towards the communities affected by conflict and not peace actors, especially not female peace actors. This brief, therefore, provides an overview of the effects of peace work on female peace practitioners' mental health. It further outlines recommendations for concrete policy actions and commitments by the government, employers and other stakeholders.

Methodology

The study used qualitative data collected through two focus group discussions and six key informant interviews. The focus group discussions targeted young women working in peace organisations based in Nairobi County. One focus group discussion brought together 10 respondents, while the other consisted of six respondents. The respondents were drawn from various regions in Nairobi County, including the informal settlements. The key informant interviews targeted both female and male peace organisation heads. Three male and three female interviews were carried out. In total, 22 respondents (19 women and three men) were engaged. Respondents' anonymity was observed, given the sensitivity of the topic of discussion.

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[1] The United Network of Young Peace Builders reveals that "According to the UN, in 2020, in 26 conflict-affected countries, at least 35 assassinations of women human rights defenders, journalists, and trade unionists were documented. Alarmingly, this figure surpassed reports from 2018 and 2019" (United Nations Security Council, 2022).

[2] A leketio is a pregnancy belt, which supports pregnancy, hence life. It is a powerful charm that protects children from harm worn by women from the Pokot community in Kenya.

Research findings

The study found peace work had both positive and negative effects on the mental health of young women peace practitioners, which affected their work productivity. Further, the majority of the respondents noted that there were no measures in place to address MHPSS in the organisations they worked for. "*There are no spaces to vent*", one respondent highlighted. Although most organisations provide medical cover for their employees, such cover only provides for physical and not mental health.
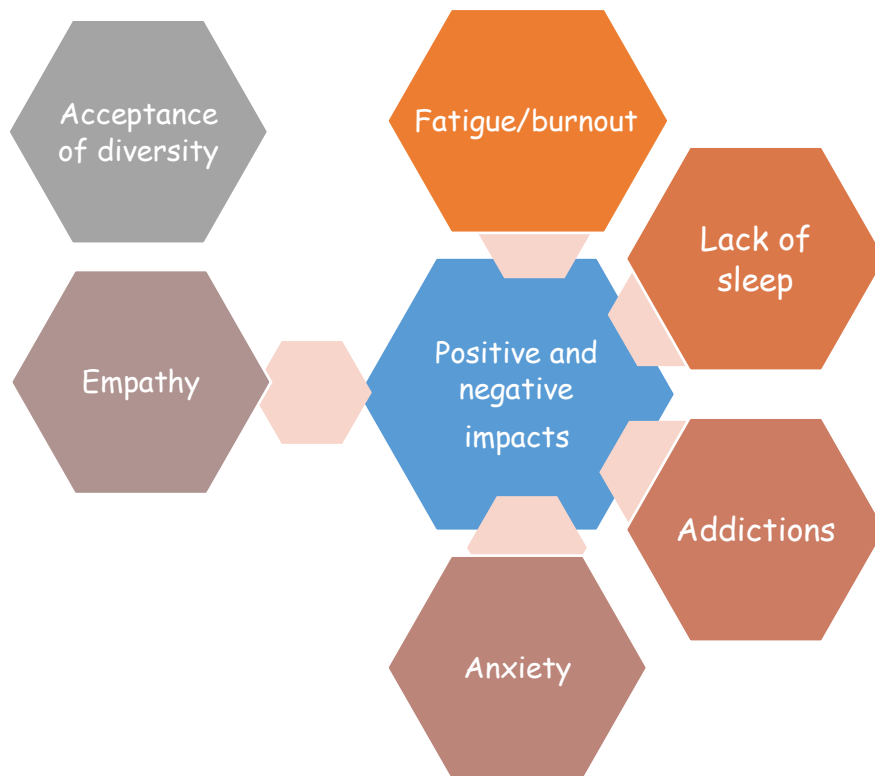
Positive impacts

Empathy

Empathy means that one can understand someone else's experiences. Empathy and listening are skills that most young women peace workers reported having acquired during their line of work. Listening to stories told by conflict-affected communities enabled them to become good listeners. It also helped in putting themselves in other people's shoes. *"I became keen on creating spaces for people to listen, be listened to and tell their story",* one respondent noted. And as Theodore Roosevelt said, *"Nobody cares how much you know, until they know how much you care"[3].* In line with this quote, respondents whose work involved some level of field travel improved their relationships with colleagues in the office and beyond. They became more empathetic through their peace work.

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[3] https://www.goodreads.com/quotes/652964-nobody-cares-how-much-you-know-until-they-know-how

Acceptance of diversity

Increased mobility in the 21st century has meant that we interact with people from diverse backgrounds and beliefs. This is particularly the case with peace practitioners who work to promote peaceful coexistence between communities and people of different ethnic and religious backgrounds. Acceptance of diversity means that people embrace every individual for who they are because people are different. Of the young women interviewed, 73% reported a willingness to spend time with persons of different religious and ethnic identities after their prolonged work in the peace sector.

Negative impacts

Fatigue/burnout

The months leading up to and after the elections have been the most violent periods in Kenya's post-independence history (Auma and Campbell, 2022). Given this assertion, Kenyans therefore prepared heavily to prevent any possible violence in the 2022 general elections. A lot of investment went into campaigns that promoted peaceful coexistence across the country. Of the young women interviewed, 99% reported having worked more than the previous years without a break. "*The last one year feels like three years*", one respondent noted. Another highlighted the relapse of conflicts in a border community where her organisation had invested a lot of work. She lamented the impact the relapse of conflict had on her mental health, "*I don't want to go back to the border again. I am tired*". The women's prolonged engagement in peace work without a break has had an impact on their physical and emotional well-being. Many respondents reported burnout and less desire to work. This has an impact on how employees interact with each other in the office as well as their productivity.

Alcoholism leading to addictions

As a way to cope with the job and home pressures, some young women reported increased alcohol intake. They said that drinking gave them positive feelings and helped them relax. A case in point was a young newlywed woman whose husband threatened to leave her due to her constant travels during the 2022 election period. Coupled with the very challenging peace- and conflict-focused work she was exposed to, the young woman mentioned that alcohol was her only solace. "*I am almost becoming an addict. I am, however, in contact with a therapist who is helping me,*" she concluded.

Lack of sleep and nightmares

As a result of their work in conflict zones, young women peace workers are at risk of exposure to intense psychological stressors. Young women reported having been impacted by the stories told to them during peace missions. Some of them could not sleep well, while others had nightmares. "*Sometimes I wake up in the middle of the night and wonder what happened to that woman? Did she ever find her son? Were the husband killers ever found?*" one respondent said.

> **"I carry those people in my mind, especially the women who share their experiences of conflict. Their images keep running through my mind for a long time. However, since I work in the support department, I am not involved in follow-up activities, and therefore the women's images disappear with time".**
>
> **A young woman respondent aged 34 years from Nairobi County.**

Anxiety disorders

Nairobi County hosts the majority of international and national peace organisations in Kenya. This therefore means that organisations with county outreach will see staff travel to the counties to implement projects. This happened a lot during the election period. During these activities, most young women were separated from their young families for prolonged periods of time. This caused a lot of anxiety and was a stressful experience for some. One respondent shared how their 4-year-old child kept crying whenever she would pack to travel. *"This affected how I delivered my work and interacted with colleagues. I was so irritable".* Such experiences have a long-term impact on how people view their work and relate to colleagues.

Conclusion

This study found that both the positive and negative effects of peace work have a personal, external and family impact on the peace worker. The mental health of women peace workers affects how they relate to themselves and those around them. It is therefore important for employers to bear this in mind because they have an organisational duty of care to their staff and people working for and under them in general (Ministry of Foreign Affairs of the Netherlands, 2019). This is more necessary when employees are working in high-risk situations, such as conflict-affected areas. By not addressing some of these stressors, employees are likely to experience an increase in sicknesses and low levels of work output. Any work on this issue must take factors such as gender and age into account to ensure that all peace workers receive the MHPSS they require regardless of their background.

Recommendations

Government

- Develop a National Framework to guide the coordination and integration of MHPSS into the peace and security sector. Such a framework should clearly stipulate how the well-being of peace workers will be addressed. Integrating coordinated MHPSS service provision within the peace and security sector will enable services to be provided at scale in a holistic manner for affected individuals, families and communities. It will also contribute to addressing the stigmatisation and discrimination often experienced by those with mental health and psychosocial needs in the sector.

- Map MHPSS and peacebuilding stakeholders countrywide. Regular mapping of available mental health stakeholders accessible to peacebuilding work is important to improve the

understanding of mental health needs and resources. By understanding MHPSS needs, service capacity issues, quality and training needs will be identified. Mapping stakeholders will also help with coordination and avoid the duplication of services.

Peacebuilding and security organisations

- Establish a supportive and protective organisational culture and provide basic psychosocial support to staff. This includes providing clear guidelines on reporting potentially stressful incidents. Taking into consideration that the supervisors receiving such reports should be well trained and people staff can trust with their information. Staffers spend most of their time in the office. As work stress is the top cause of mental health issues, the office is also the best place to improve and support employees' mental health. Supporting employee mental health is critical to the growth, productivity, and innovation of the workplace (Cooks-Campbell, 2021).

- Create awareness of what MHPSS is and the need to have support measures in institutions. Raising awareness will help eliminate the stigma associated with mental health, affording people an opportunity to seek help. It will also lead to focused MHPSS interventions.

- Facilitate training of peace practitioners on how to identify and address their own mental health needs as well as those of the local communities they work with. Such training would include but not be limited to debriefing sessions.

International partners and civil society organisations

- Prioritise building the long-term capacities of local government services, non-governmental organisations, local service providers and community actors to support MHPSS. Further, support the institutionalisation of procedures and systems developed to respond to MHPSS.

- Facilitate and encourage community-based MHPSS in which local actors are enabled to build resources and competencies to support the well-being of the affected people. Action by local community members is important for a contextual, low-cost, sustainable approach and can complement the work of civil society organisations and other stakeholders.

Communities

- Stop stigmatising people with mental health needs and calling them "*wenda wazimu*" (mad person). Instead, support members of the community with mental health needs by embracing them and helping them to get access to the help they need. The stigmatisation of mental health is a major factor that stops people from seeking help.

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About the Author

Regina is a highly motivated professional specialised in peacebuilding with thematic expertise on inclusion and social development issues. She has worked in Kenya for over 10 years on peace and gender as well as grassroots development.

She has an MA in Peace, Conflict and Development from the University of Bradford, UK and a BA in Development Communication from St Paul's University, Kenya. She is a member of FemWise, the African Union arm of women in conflict prevention.

"Work hard and play hard" is Regina's mantra. She believes a relaxed mind is able to deliver better.

About the Joint Learning Initiative on Faith and Local Communities

The JLI is a learning network of researchers and practitioners, building fair and equitable spaces to create and share evidence on religions in development and community work. The JLI aims to strengthen partner-ships between and amongst faith and non-faith actors, internationally and locally.

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