



**“Sociotherapy has healed
our heartaches and now
we are without worries
and hard feelings”**

A RESEARCH SUMMARY



**The effect of Community
Based Sociotherapy on the
lives of women and men in
Kalehe, DR Congo**



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Community Based Sociotherapy (CBS) in Kalehe, South Kivu, DR Congo

ZOA is implementing the Addressing Root Causes (ARC) project¹ in Kalehe territory, Eastern Congo. For more than 20 years wars have been fought in Eastern Congo, leading to physical destruction but also to the destruction of social cohesion and to more conflicts and trauma. The overarching goal of this ARC project is to strengthen the democratic dialogue through civic participation so that the government and civil society actors can cooperate in addressing the root causes of conflict in Kalehe.

Community Based Sociotherapy (CBS) has been introduced in Kalehe not only to restore trust and relations at the individual, family and community level, but also to encourage community dialogues and civic participation. Paix et Développement Durable (PDD) is the Congolese expert organisation on CBS and has been responsible for the training and supervision of the CBS facilitators. In total 72 facilitators have been trained, and 3174 community members (52% women and 48% men) have participated in CBS groups.

¹Inawezekana ("It is possible") project, in collaboration with WarChild and VNG International, funded by the Dutch Ministry of Foreign Affairs, 2016 - 2021





1. Introduction

A war or natural disaster often disrupts the social fabric of society and damages trust between people. Broken communal bonds and traumatic experiences impact people's mental health and their ability to relate to others. Restoring trust in each other and creating hope for a peaceful future are prerequisites for rebuilding flourishing and stable communities.

"I had too many worries and negative thoughts about my life and I often had headaches. But thanks to the CBS meetings and the exchange of experiences with others I now manage my problems with less difficulty" (male participant).

To restore trust and to contribute to a more peaceful future, ZOA has introduced Community Based Sociotherapy (CBS) in conflict affected settings like Liberia and DR Congo. Key to this approach - and central to ZOAs way of working - is the fact that CBS is community led and driven. In CBS, participants from one village form small groups to discuss topics that are of daily concern. The groups consist of 12-15 men and women and are guided by two well-trained facilitators from the community. The groups meet during the course of 15 weeks on a weekly basis and the participants partake in the meetings without remuneration. The facilitators are trained and supervised by experienced CBS trainers². The aim of this approach is to enable participants to learn and experience new constructive behaviour. This learning process will ultimately have a positive influence on their personal life as well as on their environment. However, this process takes time. Taking this into account, CBS uses a six phase model (see figure 1) to guide the conversations in the small groups.



ZOA has commissioned a study in Congo in 2020 on the effect that the CBS sessions have on the participants and their interactions with others. Do participants experience less stress? Do they feel closer to their community members? Are they increasingly eager to participate in village level activities and/or local decision making? And do the CBS sessions have an impact on the (economic) well-being of families? This paper will present a brief overview of the methodology and most relevant findings of the study. It also provides some recommendations for CBS implementers in post-conflict settings.



Figure 1: Phases of sociotherapy

²Dekker, C. (2018). "Handbook Training in Community Based Sociotherapy, Experiences in Rwanda, East Congo and Liberia." Occasional Publication 32, African Studies Centre Leiden. See also: <https://www.ascleiden.nl/news/handbook-training-community-based-sociotherapy-experiences-rwanda-east-congo-and-liberia>

2. Research methodology

The main objective of this study was to evaluate to what extent participation in the sociotherapy groups affects the lives of the participants, including their well-being at the individual-, interpersonal- and community level, and what these effects are. Based on earlier CBS experiences in Rwanda and Liberia, the CBS approach is expected to have an effect on the following five outcome areas (see figure 2).

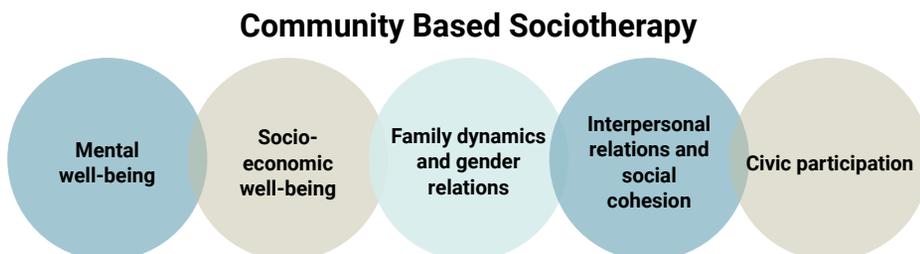


Figure 2: Five outcome areas of Community Based Sociotherapy

Three main hypotheses have been tested in this study:

1. Participants in Community Based Sociotherapy experience a higher level of individual, interpersonal and community well-being after participating in the socio-sessions;
2. Improved individual, interpersonal and community well-being correlates with higher levels of civic participation;
3. Participating in Community Based Sociotherapy will lead to more gender equal behaviours, thoughts, feelings and attitudes.

The participatory research is a mixed-methods study combining quantitative and qualitative methods. For the quantitative method, a pre- and post-intervention questionnaire was developed. Prior to the research, CBS participants formulated and selected **bottom-up indicators** outlining the change and/or success of the CBS approach. An example of a “bottom-up indicator” in the area of

mental well-being was the frequency of “**experiencing nightmares**,” “**feeling worried**” and “**feeling inner peace**.” These indicators were rephrased into questions and were added to the questionnaire for participants. In addition to the questions reflecting the bottom-up indicators, SRQ-20³ questions have been integrated into the questionnaire as well. The questionnaire was tested during a pilot phase, received feedback, and was adapted accordingly. The participants filled out the questionnaire at the start and three months after the end of the CBS trajectory. For the qualitative method, Focus Group Discussions (FGDs) and Key Informant Interviews (KIIs) were conducted with participants, family members and neighbours of participants, and local leaders (see table 1). As such, the study was able to measure not only the overall impact of the CBS approach, but also to learn how this approach affected the individual participant.

Data collection	Prior to CBS sessions january 2020	Post CBS sessions july 2020
Individual questionnaire	315 participants (157 women/158 men)	283 participants (144 women/139 men) ⁴ ;
Focus Group Discussions		24 Focus Group Discussions (192 participants): - 8 FGD with sociotherapy participants (4 all-male and 4 all-female groups) - 16 FGD with family and neighbours of participants (8 with men and 8 with women)
Key Informant Interviews		48 Individual Interviews: - 24 sociotherapy participants (12 men/12 women) - 12 family and neighbours of participants (6 men/6 women) - 12 local leaders (7 men/5 women)

Table 1: Respondents in the research

³The SRQ-20 is a validated self-reporting questionnaire used to identify a potential mental health disorder and to measure its prevalence. See: Scholte, W. et al. “Psychometric Properties and Longitudinal Validation of the Self-Reporting Questionnaire (SRQ-20) in a Rwandan Community Setting: A Validation Study.” BMC Medical Research Methodology 11:116.

⁴283 participants filled out both the initial and the final questionnaire. 315 participants filled out only the initial questionnaire. The reason that thirty-two participants did not also fill out the final questionnaire is that they dropped out of the CBS group or were unable to participate in the post sessions questionnaire for alternative reasons.



3. Research findings

3.1 MENTAL WELL-BEING

CBS sessions are meant to contribute to the improvement of the participants' mental well-being. Story sharing, active listening, mutual support and strengthening social relations are meant to restore the social fabric of the community and to enable the participants to experience peace of mind and to boost their self-esteem.

According to the research, CBS indeed has had a significant effect on the mental well-being of the participants. The SRQ-20, which is used to identify (potential) mental health disorders, showed a significant improvement: In the pre-intervention study 80% of the respondents had symptoms that indicated a potential mental health disorder before participating in CBS. The percentage was higher for women (85%) than for men (75%). After participating in CBS, a scientifically significant difference was observed: only 42% of women and 34% of men indicated symptoms relating to a mental health disorder (see table 2).

Respondents with symptoms indicating a potential mental health disorder

	Pre-intervention	Post-intervention
Men	75%	34%
Women	85%	42%
Total	80%	38%

Table 2: SRQ-20 indicating (potential) mental health disorders (N = 283)

After participating in CBS groups the participants graded their everyday life much higher than before. Before the average grade was 4.4 (on a scale from 1 – 10), while after CBS the average grade increased to 6.9. Women initially scored lower, but after their participation in the CBS group they scored equal to men. Participants also indicated an increase in their hope for the future: the percentage of people with nearly no hope for the future decreased (from 20% to 4%) while those with high or very high hope increased (from 79% to 96%).

“I could not sleep well and I worried so much about my life that I felt like I did not live. But now I see a change in how I live with myself. I even started having self-confidence and developed a taste for life. I now have hope for the future. Also I have started to sleep well; I don't have too many thoughts about problems” (male participant in CBS group).

Moreover, the participants experienced significant improvements in feeling inner peace, indicated less frequent nightmares, and reported feeling worried to a lesser extent.

3.2 SOCIO-ECONOMIC WELL-BEING

The assumption was that CBS would contribute to socio-economic well-being, as it helps participants to gain more self-confidence and collaborative skills. These traits are likely to enhance people's engagement in economic activities, which could potentially lead to increased savings and income. One of the bottom-up indicators that was formulated by the participants was "receiving support from others to improve one's socio-economic situation." A small positive change was observed here. Before the CBS sessions, 66% of the respondents indicated that they had never received any support from others. This percentage was reduced to 55% after the CBS sessions.

"Before participating in the CBS sessions many men did not show the money they earned to their wives. They preferred to use it as they wished. But now the men have started to show their revenues to their wives and they work together. Their income seems to have increased"

(male neighbour of participants).

The study shows that the CBS sessions contributed to improved economic well-being of the participants. When it comes to savings, in the pre-intervention study 27% of the respondents stated that their savings were "non-existent." After the CBS sessions only 19% of the participants indicated such. Moreover, 51% of the respondents mentioned before CBS that the family resources were not managed properly, while in post-intervention this reduced to 36% (see figure 3). Another indicator of improved economic well-being was that after the sessions 35% mentioned they had sufficient means to provide nutrition and schooling for their children; this used to be 22%. Overall, women in the initial survey were less positive than men, and while the post-intervention answers of women see a positive change, this change is less prominent than among men.

"We have set up a Village Saving and Loans Association where we save 2000 Franc Congolais per person every 2 weeks. We give the money to one of our members for an economic activity. This person pays back the amount with 1% interest and the money is put into our cash box. We have already bought 3 goats with this system" (FGD with participants).

Another positive effect of CBS was found in the participation in community associations. Before joining a CBS group, 65% of the community members indicated that they regularly participated, while after CBS this increased to 79%. In general, fewer women are participating in these associations and they play a less active role. After participating in CBS, their level of participation has increased but this increase is lower than that of the male participants. A total of 81% of participants stated that their CBS group initiated socio-economic activities together after 15 sessions of CBS. For example, some participants engaged in agricultural activities together and some formed saving and loan associations.

CBS was found to have a positive effect on the confidence of participants to take initiatives. In the pre-intervention study around 50% of the respondents felt capable to do so, while after participation this percentage increased to 70%.



How is the management of family resources helping the development of the family?

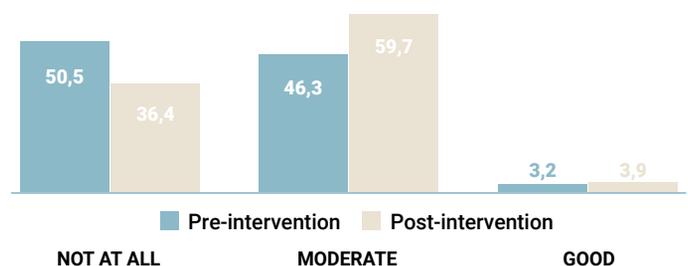


Figure 3: Opinion about management of family resources (N = 283)

3.3 FAMILY DYNAMICS AND GENDER

The hypothesis was that participation in CBS sessions could contribute to an improvement in family dynamics and gender relations. It was expected that CBS would contribute to a reduction of household violence. "Communication between spouses when there is a problem" was selected as one of the bottom-up indicators when capturing change in family dynamics. What has been observed from the pre-intervention study is that 43% of the respondents often shared family problems with their spouses, which increased to 53% after CBS. Those indicating that they never shared family problems with their spouses reduced from 9% to 5%. "Peace in the family" was another bottom-up indicator. Before CBS, 60% of the respondents indicated "a good or very good" level of peace in the family, this increased to 86% after their participation. Women are less positive on both indicators, but the post-intervention improvement for women is higher than for men. According to the participants, faithfulness to their spouses has increased since the intervention (76% to 97%). Moreover, in the KIIs and FGDs with the neighbours, family and friends the reduction of domestic violence was regularly mentioned as a positive result of CBS.

On other indicators the change is more ambiguous. After CBS, women scored slightly lower on the "gender attitude scale"⁵ (from 13.2 to 12.8 points out of 18 points), indicating that they are less positive about gender relations. For male respondents there was no change reported while the FGD and interviews conducted after CBS did show positive gender changes. One explanation could be that respondents gave more socially desirable answers preceding CBS. Following CBS, however, respondents might have been more inclined to give realistic answers. Another explanation could be that during the sessions women especially became more aware of unequal gender relations.

"My neighbour who participated in the CBS group was a very complicated man, and very mean to his family and the community. He would never cultivate the land together with his wife and he rarely helped her with household chores. But now we see that he has changed completely. This is really astonishing. He is even washing dishes and sweeping the floor. So I really want to find out what has changed him"
(FGD with neighbours and family members of participants).

CBS has also influenced the participants' leadership skills in general and attitudes towards gender equality in leadership in particular. Post-intervention more participants agreed that women could be elected for leadership positions in the community (increase from 78% to 92%). According to the questionnaire, women's confidence to express their opinion in public has not significantly increased post-CBS, while men's confidence has increased slightly. However, during the FGD and interviews both men and women gave examples of women now having more courage to participate and talk in meetings.

"Before it was very difficult for me to talk among men, and it was also not well-perceived in our community. But when I became a member of the CBS group we were together with men and we discussed our problems together. And that's where I started to feel confident and at ease discussing issues with men" (young female participant).



⁵ The gender attitude scale is based on nine statements about gender with a maximum of 2 points per statement if fully endorsed by the respondent.

3.4 SOCIAL COHESION IN THE COMMUNITY AND AMONG DIFFERENT ETHNIC GROUPS

The study also looked at interpersonal relationships and social cohesion at the community level in general and between different ethnic groups in particular. Many violent conflicts evolve around different ethnicities and armed (ethnic) groups. The study hypothesised that CBS would have a positive impact on interpersonal and intergroup relations.

When looking at the interpersonal relationships within the community, we focused on four topics: 1) visiting other community members 2) working together with other community members 3) sharing opinions with other community members and 4) getting the opportunity to share opinions with other community members. Participants of the CBS groups indicated improved relations with other people within their community. The total score reflecting all four topics increased from 7.2 to 8.0 (out of 12⁶), with a slightly larger improvement for women than for men.

“Before he joined the CBS group my neighbour did not like it when we visited him. But now he likes to have visitors and to share his food” (neighbour of participant).

CBS was also found to significantly improve the social cohesion between different ethnic groups. Here, the study focused on 1) level of participation in associations consisting of members with different ethnic groups 2) visiting members of other ethnic groups and 3) working together on a daily basis with members of another ethnic group. Before participating in the CBS groups the score was on average 7 (out of 9⁷) and after CBS it was 7.6. Before the intervention, women had lower scores than men. After participation,

however, women had similar scores to men. Intermarriage was also mentioned as one of the bottom-up indicators for inter-ethnic social cohesion. Before the CBS intervention 62% stated that their child would be able to marry a member of a different ethnic group. This increased to 82% after participation in the CBS group.

“Before CBS I saw the Pygmies as animals. When they came to sell charcoal here I did not even want to buy it from them. In my eyes they did not have any value. Even when they needed drinking water I could not share it with them. But during the CBS sessions I learned to value others regardless of their background and social status. I can buy from them or even give them space to sleep when it is too late for them to return home. If I would still be single I could even marry a Pygmy without any problem” (female participant).

The level of trust between members of other ethnic groups in the village also improved, as figure 4 shows.

Overall, this research shows evidence that CBS helped to improve interpersonal relations in the community in general and between members of different ethnic groups in particular. This is a significant finding, taken into account the mistrust caused by ethnic conflict.

How do you evaluate the level of trust between you and members of other ethnic communities in your village?

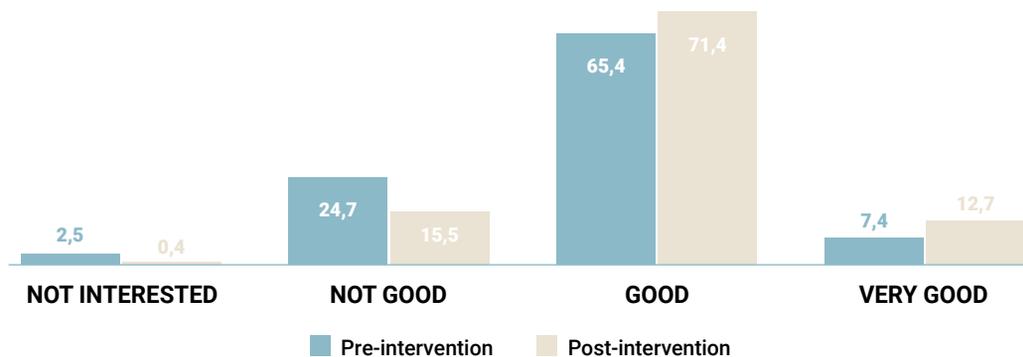


Figure 4: Levels of trust between respondents and members of other ethnic communities in the same village (N = 283)

⁶The maximum score per topic is 3 when fully endorsed by the respondents. ⁷The maximum score per topic is 3 when fully endorsed by the respondents.

3.5 CIVIC PARTICIPATION

In this study, civic participation refers to several formal and informal activities. The study findings show that CBS participants are now more involved in dialogue meetings with community leaders than before (from 46% to 59%). Women are still lagging behind when it comes to attending dialogue meetings, but they are clearly catching up with men. The percentage of women who never attended such meetings has seen a stronger reduction (16%) than that of men (10%) (see figure 5). CBS participants are more engaged in community work after they joined the CBS groups (improvement from 71% to 84%). We also see an increase of 26% of respondents who indicated that after CBS they became member of an organised community group (before CBS 63% was a member, but after CBS 89% is part of a group). CBS participants mentioned examples of fellow CBS group members or themselves becoming a leader in their village. Village leaders say that they are happy with the increased participation in their meetings as it helps them to come up with better solutions; it also gives them more legitimacy in the community, and an increased status among other leaders.

“I became a leader of 10 families after I participated in CBS. Before [CBS] I had good ideas, but I did not have self-confidence” (male participant).

“I’m very happy with these changes in my community and I don’t think this is a danger for my position. We feel more confident because we are assured that we are not taking decisions alone” (male leader).



However, overall the level of self-confidence to discuss issues with local leaders has not increased after CBS. Women on average have less self-confidence in approaching the local leaders than men, and this has not changed. Furthermore, CBS has not led to an increase in feeling free to report cases of harassment, corruption or rape to the relevant institutions.

These research findings show that the effect of CBS on civic participation is not straightforward. Participation in dialogue meetings with community leaders and in community work increased, but there was no improvement reported on other indicators measuring civic participation. Civic participation depends on trust in the authorities: their capacity to address issues and their legitimacy. These are topics that CBS alone cannot solve or improve, as it requires good governance on the part of local leaders and solid long-term commitment from government stakeholders.

In the last three months have you participated in dialogue meetings with the local leaders?

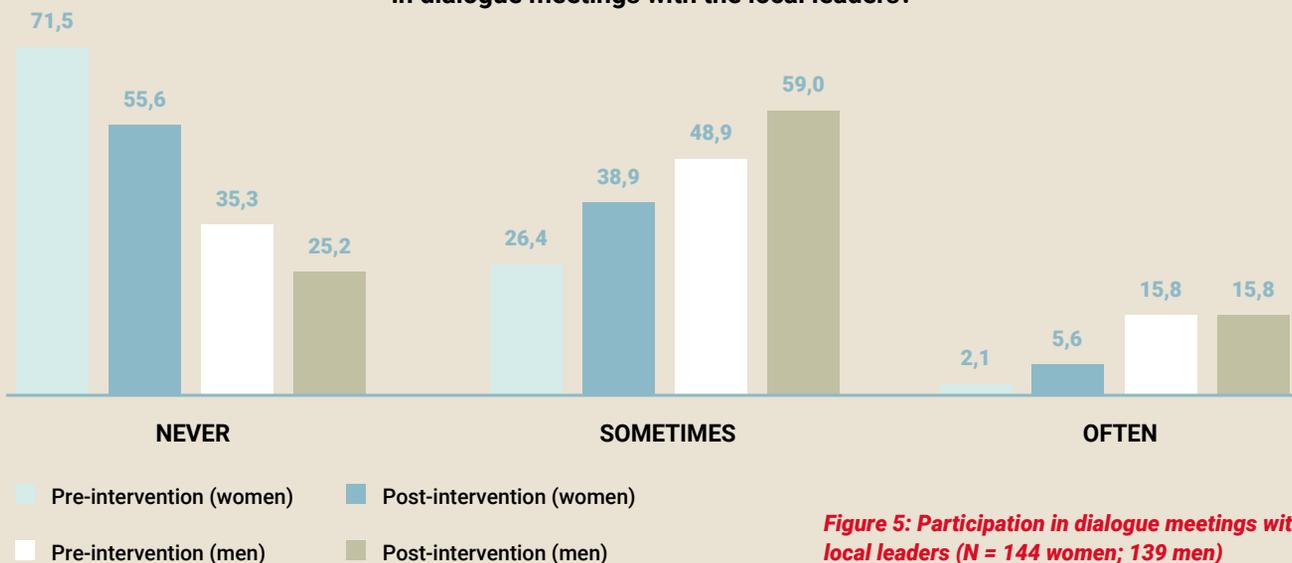


Figure 5: Participation in dialogue meetings with local leaders (N = 144 women; 139 men)

4. Conclusions and recommendations

Generally, our research confirms that CBS has significantly improved the mental well-being of the participants. Moreover, interpersonal relationships at the community level and social cohesion between ethnic groups has improved. CBS also has a positive effect on the socio-economic situation of the participants.

According to the research findings, the improved individual, interpersonal and community well-being does have a positive effect on informal civic participation, but our data does not show improvement in participation in formal activities. Participation in dialogue meetings and in community work has increased thanks to the CBS groups, but the trust and willingness to raise issues to authorities has not increased. These findings show that civic participation and community dialogue require committed citizens but also trust in the capacity and legitimacy of leaders and institutions, which is beyond the scope of CBS.

Regarding family dynamics and gender relations, the research has shown a positive impact of CBS on communication and trust within the family. There were some indicators on gender behaviour that indicated positive changes (e.g. communication within the family, peace in the family), but on other indicators on gender attitudes no change was reported (men) or a slight deterioration was seen (women). This might be due to increased awareness of women about gender roles in the family and community because of their participation in the CBS sessions.

Overall, CBS has had a very positive effect on the lives of the participants, but it is not the panacea for solving all the problems of a conflict-affected population. The CBS approach is a good foundation for sustainable change starting at the individual level with ramifications at the family and community level. In combination with other interventions focusing on structural change at governmental

level and the enabling political and economic environment, CBS is a powerful methodology.

Recommendations for upcoming CBS interventions:

1. Strengthen the contribution of CBS to civic participation:
 - Conduct further research on why people feel hesitant to discuss and report corruption and (sexual) harassment cases to the local government; include research findings in CBS discussions.
 - Combine CBS with interventions focusing on good governance, leadership, and mutual accountability between government and citizens.
 - Include government and customary authorities in CBS groups and/or design specific CBS interventions for this target group⁸
2. Strengthen the contribution of CBS to more equal gender relations:
 - Research what motivates CBS participants and what hinders them in changing gender related behaviour and attitudes; include these findings in the training of CBS facilitators and in the CBS groups, as well as in other interventions aiming for gender transformation.
3. Extend CBS to other areas in Congo and to other conflict-affected countries, while maintaining the quality of the CBS approach as this is crucial for achieving sustainable results.



⁸ZOA and PDD have started in 2020 a pilot focusing on local leaders.



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Full research report (in French) available with ZOA



The CBS activities and the research in DRC has been funded by the Dutch Ministry of Foreign Affairs, for which we are very grateful. We sincerely thank Germain Nyembo for coordinating the research, Angela Jansen and CBS Rwanda (with financial support of NUFFIC – Orange Knowledge Programme) for providing technical assistance.

