Contextualizing Psychosocial Knowledge

Experiences, challenges and recommendations from a cross-contextual reflection process at the Mastura Institute of Applied Science in Psychosocial Work, Slemani, Kurdistan Region of Iraq

Authors:

Luqman Saleh Karim, Mam Polla (Jamal lbrahim), Niyaz Salih Fatah, Suren Abubaker Abdullah, Sawen Hawre Yasin, Jihad Omer Fatah, Aram Tofiq Hamasaiid, Rawezh Nasralddin Baqr, Peshin Abdalstar Salih, Nabaz Azwar Ahmed, Nechirvan Anwar Abdulla, Dyari Sabir Hama amin, Murshid Ahmed Mustafa, Lalas Omer Muhammadamin (all of the above based in Slemani, Kurdistan Region of Iraq), Berenice Meintjes (based in South Africa), Kyra Gawlista, Karin Mlodoch (based in Germany)

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* Note: The authors use *Slemani* for transcribing the city's name from Kurdish (Sorani) to English. When referring to the *University of Sulaimani*, the university's own transcription is used.

List of Abbreviations:

CBT	Cognitive Behavioral Therapy
DCVAW	Directorate of Combating Violence against Women, Kurdistan Regional Government, Iraq
FH	Faith Healer
GIZ	Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) GmbH
IASC	Inter-Agency Standing Committee
IDPs	Internally Displaced Persons
ISIS	Islamic State of Iraq and Syria
KRG	Kurdistan Regional Government
KRI	Kurdistan Region of Iraq
MHPSS	Mental Health and Psychosocial support
NET	Narrative Exposure Therapy
NGO	Non-Governmental Organization
PTSD	Post Traumatic-Stress-Disorder

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CHAPTER ONE

Introduction

1 INTRODUCTION

This paper documents a reflective process of a group of academics and practitioners from the Kurdistan Region of Iraq, South Africa, and Germany on the contextualization and decolonization of psychosocial knowledge. It reflects on a series of workshops conducted at the Mastura Institute of Applied Science in Psychosocial Work, Slemani, Kurdistan Region of Iraq in cooperation with the German based NGO HAUKARI – Association for International Cooperation and funded by the German Federal Ministry for Economic Cooperation and Development (BMZ) through Gesellschaft für Internationale Zusammenarbeit (GIZ).

1.1 The rise of Mental Health and Psychosocial Support (MHPSS) in humanitarian aid and development programs

In the last two decades, against the background of multiple protracted wars and conflicts around the world, and the currently 114 million people forcibly displaced due to violence, war and persecution[1], there has been within humanitarian aid and development programs an increasing focus on psychosocial support to people in conflict, war and crisis situations. The World Health Organization, UN agencies and international aid and development organizations coined the umbrella term of Mental Health and Psychosocial support, MHPSS, to address the specific psychological and psychosocial challenges faced by people in war, (post)-conflict and crisis regions. The first comprehensive guidelines of MHPSS were published in 2007 by the United Nations General Assembly's Inter-Agency Standing Committee. This is a structure that was created in 1991 for strengthening interagency coordination in the humanitarian sector (IASC, 2007). Under slogans like Rebuilding lives[1] or Mind the Mind Now[2], international donors, policymakers, humanitarian aid specialists and psychosocial practitioners successfully advocated for making MHPSS a standard component of humanitarian aid interventions and development programs.

Today, MHPSS programs are implemented on mass scale throughout conflict and crisis regions and embrace individual psychiatric and psychotherapeutic interventions, the establishment of trauma and psychosocial counseling centers, strengthening community-based psychosocial programs, the mainstreaming of MHPSS services in local governmental services and the qualification of local professionals. The Middle East is a focus region of international MHPSS programs and Iraq is the fifth among the countries with the largest investment in MHPSS by international donors (Hillel, 2023).

The increasing focus on MHPSS has great merits, as it finally recognizes that war, conflict, and violence do not only produce physical harm but also psychological and social destruction; which thus acknowledges the relevance of emotional and relational suffering. Although this has brought relief to countless survivors of violence throughout the world, there are also problematic aspects.

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[1] United Nations Security Council, Press release 9641st Meeting (PM) SC/15713 30 May 2024. Available at https://press.un.org/en/2024/sc15713.doc.html

[2] UNICEF and BMZ: Rebuilding Lives: Addressing needs, scaling up and increasing long-term structural MHPSS interventions in protracted and post-conflict settings. (Report from the expert meeting in Berlin, 4 – 5 July 2018, pp. 17-21). Available at https://www.unicef.de/blob/190328/783fd057e51a7e971fa0186ce037052d/report-rebuilding-lives-expert-meeting-berlin-4-5-july-2018-data.pdf

[3] The Government of the Netherlands, International Conference on Mental Health and Psychosocial Support in Crisis Situation, 7-8. October 2019.Amsterdam. Conference Paper Available at https://www.government.nl/documents/publications/2019/10/18/mind-the-mind-now-conference-special

Despite various appeals for and commitments to the localization of MHPSS[4], only 3% of MHPSS programs are effectively implemented by local actors while the lion's share of MHPSS service implementation lies with international, mostly Western[5], donors and organizations (Hillel, 2023). Though the MHPSS concept foresees the integration of psychiatric and psychotherapeutic interventions on the one side, and community-based psychosocial interventions and the strengthening of social and family networks on the other side, there is still a vast focus on biomedical perspectives and individualized clinical interventions in the implementation of MHPSS projects (Marshall, 2022; Hillel, 2023). Looking through a biomedical MHPSS lens at regions of conflict and war, there is a tendency to diagnose whole populations as "traumatized" and in need of treatment. Such mass diagnosis tends to individualize and pathologize them and turn them into passive victims and patients rather than agents.

Relatedly, the knowledge that travels within MHPSS programs is largely shaped by Western psychological schools of diagnosis and treatment. It often fails to address the specific local cultural, political, and social context and marginalizes or over-writes local experts' knowledge and expertise, thereby reproducing colonial mechanisms of knowledge production and transfer.

Against this background, calls for the contextualization of MHPSS knowledge and programs have become louder recently. On MHPSS exchange platforms, contextualization is highlighted as a key issue in delivering MHPSS programs[6]. International donors and agencies have developed contextualization guidelines to address contextual challenges in the implementation of MHPSS programs[7]. Responding to the specific request for this in the Middle East, the GIZ on behalf of BMZ undertakes efforts to strengthen local researchers in addressing psychosocial challenges in their contexts, and to develop tailor-made approaches for the implementation of MHPSS projects.

1.2 | From contextualization of MHPSS to the decolonization of psychological and psychosocial knowledge

Yet, the very impetus to contextualize MHPSS knowledge bears its own ambivalences, as it does not question the given set of MHPSS knowledge, but rather strives to "adapt" it to specific contexts with the goal to increase the effectiveness of MHPSS interventions.

To be more than just the adding of some 'coloring' of local practices to existing MHPSS concepts, strategies, and guidelines, contextualization processes require more fundamental, and further, questioning of which knowledge are we building on, and which schools and concepts are shaping the MHPSS framework.

In addition, there is a need to interrogate and address the dominance of Eurocentric and Western knowledge within the section of MHPSS knowledge, the colonial mechanisms in North-South and West-East knowledge transfers, the political interest behind the rise of the MHPSS framework, and the power relations between international donors and agencies on the one hand, and local stakeholders on the other.

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[4] See for example the Task Force 5 on localisation of humanitarian aid, established by the Inter Agency Standing Committee. https://www.google.com/search?client=firefox-b-d&q=Task+force +localisation

[5] Though we are aware that terms like 'West', 'East', 'gobal North', 'global South' reflect a largely Eurocentric and colonial geographical division of the world, in our discussion we continued to use them. This is mostly due to the hitherto lack of jointly agreed upon alternative terms

[6] https://www.mhpssmsp.org/en/activity/key-consideration-contextualization#page-1

[7] See for example: UNICEF (2022). Mental health and psychosocial support in children associated with armed forces and armed groups: Contextualization guidance. https://alliancecpha.org/ sites/default/files/technical/attachments/Contextualization-Guidance-MHPSS-in-CAAFAG-programs.pdf and USAID (2023). Contextualization of metal health interventions in global mental health. https://mhpssknowledgehub.sph.cuny.edu/resourcehub/contextualization-of-mental-health-interventions-in-global-mental-health/.

The MHPSS framework itself has been developed within the humanitarian and development sector: a sector which addresses the impact and consequences of global inequalities, but at the same time risks perpetuating them, for example through the economic and power relations inherent in donor funding. Thus, processes of contextualization of MHPSS must embrace the fundamental questioning of the MHPSS framework itself, its historical development, its assumptions, concepts, and the interests behind it.

In summary, a serious engagement with the contextualization of MHPSS knowledge leads to more fundamental questions on the decolonization of knowledge production in the psychological and psychosocial field.

The debate on the decolonization of knowledge production is not new at all. For example, Frantz Fanon (1952) in questioning and transforming psychoanalytical theory, elaborated on how scientific, and specifically, psychological knowledge is a central pillar of colonial power and oppression. He showed how colonized people internalize colonial assumptions and attributions to their identities, and thus marginalize their own roots of knowledge. Postcolonial theorists like Gayatri Spivak (1988) and Edward Said (1978) have shown the close interrelation between knowledge and colonial power in constructing the other. They took a radical stance against the Western and Eurocentric hegemony in knowledge production, uncovering its central role in perpetuating colonial power structures and its character as epistemic violence (Spivak, 1988).

Latin American psychologists who worked under the conditions of dictatorship in Argentina or Chile in the 1970s and 1980s, challenged Western clinical paradigms in addressing traumatic experience of violence and oppression, and laid the foundation to the school of liberation psychology (e.g. Martín-Barò, 1990), which closely links concepts of trauma and healing to the liberation from oppression, exploitation and poverty. South African colleagues dealing with the impact of dehumanization, extreme violence, and poverty in post-Apartheid South Africa, developed psychological and psychosocial approaches rooted in the South African understanding of the inseparable intertwinement of individuum and community, known by the term Ubuntu. Here, the focus is on restoring dignity and respect (Khuzwayo et al., 2011). Others refer to psychoanalysis, the psychology of racism, postcolonial theory, and critical social psychology, to theorize a critical psychology of the postcolonial (Hook, 2005). These experiences and approaches are strong points of reference in debates and platforms on decolonizing psychology which have gained momentum more recently.

A crucial question in processes of the decolonization of psychological knowledge is that of, "Who drives them?" or "Who can be part of it?" In 2022, colleagues from the project MHPSS in the Middle East at the German development agency GIZ engaged in debates with partners from the Middle East on how to develop a decolonial framework of MHPSS. Soon after, they self-critically withdrew from the process due to reflections on their own role as a Western donor in the MHPSS field, and the related power relations and dependencies in regard to local partners, their own embeddedness in Western shaped MHPSS frameworks, and their conviction that the process of decolonization 'belongs' to partners from the Global South[8].

In regard to psychological research and practice, Adams et al. (2015) reflect in their publication "Towards decolonial psychology" on the range of possible roles of Western psychologists in decolonizing processes: from claims that indigenization of knowledge requires the complete absence of Western psychologists and influences, to more collaborative approaches where Western psychologists accompany colleagues from the Global South in the process of decolonization, or even collaboratively work together. For the functioning of the latter, key competencies like the denaturalization of own perspectives, assumptions, and concepts, and the normalization of the perspectives of others, are crucial. In this context, the here presented paper represents reflections from a cross-contextual exchange between Southern, Eastern and Western psychosocial researchers and practitioners.

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[8] GIZ – MHPSS in the Middle East (2024). Why we decided against developing a decolonial MHPSS framework as GIZ Regional Project. MHPSS in the Middle East: Discussion Paper.

1.3 | The Mastura Institute of Applied Science in Psychosocial Work

As a group of Kurdish, German and South African academics, and practitioners with joint working experience in psychosocial projects in the Kurdistan Region of Iraq, we jointly founded the Mastura Institute of Applied Science in Psychosocial Work in the city of Slemani, Kurdistan Region of Iraq, in 2022.

The institute brings together researchers, university teachers, students, and practitioners in the realm of psychosocial work and offers spaces of debate, reflection, and research. It works to address the challenges faced in psychosocial theory and practice in the region. It aims at strengthening locally developed contextualized concepts and practices of psychosocial work through research and debate, establishing cross-contextual, transnational exchange platforms on psychosocial knowledge, and contributing to the international debate on decolonizing psychosocial knowledge and practice.

One of our activities was a workshop series on the contextualization of psychosocial knowledge held between May 2023 and June 2024 in Slemani and funded by GIZ. Participants were some fifteen academics and practitioners, from the Kurdistan Region of Iraq, Germany, and South Africa, and from various disciplines: Psychology, Sociology, Social Work, Philosophy, Political Science, Education, Law, and Arts. Some who participated are mostly engaged in academic research and teaching, others mostly in practical psychosocial counseling work. However, most combine both academic research with psychosocial practice within government or civil society psychosocial projects, which are for the survivors of political, social, and gender-based violence and for refugees.

With this fascinating, multidisciplinary, and trans-contextual group, we have dived into a one-year journey of intense exchange, which resulted in the collaborative authorship of the here-presented paper, and which is intended to be continued in future.

In our discussions, we found that for engaging seriously and deeply in cross-contextual exchange without reproducing hierarchies, we first have to understand each other's positioning. So, we delved deep into knowing each other's contexts and biographies: where we come from, our educational backgrounds, our basic values and ethics, and the theoretical schools and practical experiences that have shaped our understanding of psychosocial work. We carefully reflected on each other's understanding of what knowledge is, what Western and/or Eastern is, and what we mean when we talk about local, global, and/or international. We dedicated time and careful thinking to the problem of language as a core challenge in cross-contextual exchange: going beyond technical translation of psychosocial terminology, to in-depth exchanges on assumptions, meaning, and emotions, related to psychosocial terms.

We found that before elaborating on specific psychological or psychosocial concepts and schools, we must train the core competencies which are crucial for cross-contextual exchange: critical thinking, self-reflection, and the readiness to denaturalize own assumptions and normalize the perspective of others. We must learn epistemic modesty (Teo 2019).

We also found that for a process of contextualizing and decolonizing psychosocial knowledge, it is not sufficient to name and blame Eurocentrism and search for locally rooted knowledge and practices. Doing so merely acts to deepen dichotomies between Western and local knowledge, or said another way, to culturalize local colleagues' concepts and practices.

Instead, we set out to unpack psychological concepts and psychosocial practices from both Western and Eastern contexts, understanding their historical and contextual embeddedness, and their underlying assumptions and values. We carefully reflected on what works and does not work in the specific Kurdish context for developing context-tailored approaches of psychosocial support to people in situations of violence, conflict, and crises.

For such processes to evolve, safe spaces and long-term-commitment are needed. Our own exchange has only just started and will continue. We hope it will result in joint research and practice projects.

It proved to be crucial that our discussion process was not output-oriented. Indeed, the paper does not offer recipes nor guidelines for the contextualization of psychosocial knowledge. The paper focuses first and foremost on documenting our group's specific discussions about the specific context in the Kurdistan region of Iraq. It summarizes some of the topics we addressed and want to deepen in further discussions, and some of the ingredients we consider fundamental for engaging cross-contextual exchanges.

It is meant to encourage academics and practitioners in other contexts to engage in in-depth cross-contextual debates in their own contexts, which shall ultimately contribute to the development of tailor-made, context-sensitive, holistic, and empowering, concepts and practices of psychosocial support to people in situations of conflict and violence.

In Chapter 2, we give a brief introduction to the historical and political context in the Kurdistan Region of Iraq, and the challenges psychosocial researchers and practitioners are facing in the region.

In Chapter 3, we introduce in more detail the approach of the Mastura Institute of Applied Psychology in Slemani, Kurdistan Region of Iraq.

In Chapter 4 we summarize some of the topics we addressed in our workshops. We try to come up with definitions on what we mean by knowledge; by the ideas of Western, Southern and Eastern; and we try to unpack relevant concepts for psychosocial work – trauma, wellbeing, and MHPSS. We also summarize our reflections on coloniality and the decolonization of knowledge.

In Chapter 5, we summarize what we consider to be key issues for engaging in meaningful, cross-contextual, exchange: key competencies; safe space; long-term commitment; multidisciplinarity; and the careful consideration of the problem of language.

In Chapter 6, we ultimately summarize our lessons learnt and propose some basic recommendations for engaging in cross-contextual exchange on the contextualization and decolonization of psychosocial knowledge.

From Chapter 2, summary boxes have been included in an attempt to crystallize the reflections and emerging recommendations on each topic. Quotes from workshop participants result from interviews for an internal evaluation of the discussion process.

Acknowledgements

The workshop series and writing of this paper were an intense collaborative process of fourteen authors. We thank all workshop participants for their time and commitment to the process, and their openness in sharing the richness of their experience. Before being published, the paper has been shared with local and international audiences in various occasions[9]. We thank the colleagues involved for their feedback and advice.

We ultimately extend our thanks to GIZ for funding and supporting our discussion process.

CHAPTER TWO

Context: the Kurdistan Region of Iraq

2 CONTEXT: THE KURDISTAN REGION OF IRAQ

The following chapter gives a very brief contextual introduction to the historical and political context in the Kurdistan Region. It focuses on the last five decades to illustrate the complex context of repression, violence and displacement and the related psychosocial challenges faced by the Kurdish population in Iraq. It then elaborates on the state of the psychosocial sector in the Kurdistan Region of Iraq, and the institutional and societal challenges faced by the sector.

2.1 The Kurdistan Region of Iraq - a history of violence and conflict

Historically, the Kurds have been subject to multiple forms of violence and oppression: From the experience of Islamization and the occupation by world invaders (such as the Ottoman Empire and British colonialism in the last centuries) to the 1923 Treaty of Lausanne after World War I, which scattered 30 million Kurds across five countries (Iraq, Iran, Syria, Turkey and the former Soviet Union) and made them once again the subject of violence, persecution and oppression by various national governments.

2.1.1 The Baath-regime's reign – chemical attacks and Anfal operations

From 1979 to 2003, the Baath-regime under Saddam Hussein spread a net of terror, repression, and control over the country (Human Rights Watch, 1994; Makiya, 1998) and led the population into an eight-year war with Iran from 1980-1988. There was a death-toll of more than one million victims on both sides. At the end of the war the Baath-regime deployed its military apparatus against the Shia population in Southern Iraq and the Kurds in the North.

In March 1988, the Baath-regime attacked the Kurdish city of Halabja (at the Iraq-Iran border) with chemical weapons, killing five thousand people on the spot and rendering the city and its environment unlivable for decades (Hiltermann, 2014).

In the same year, and much less known by an international public, the Baath-regime conducted a vast military operation, which they named "Anfal operations," against the Kurdish population in the border regions with Iran and Turkey. During this, thousands of Kurdish villages were razed to the earth and up to 182,000 men and young women were deported and killed. To this day, from the hundreds of mass graves discovered throughout Iraq after the demise of the Baath regime in 2003, only a small number have been examined. The individual fate of most of the Anfal victims still remains uncertain.

Women with children, and elderly people, were held in detention for months. Many died from hunger and exhaustion in the detention camps and prisons. In autumn 1988, the survivors were released and forcibly resettled in so called "collective towns" to live under military control and far from their original villages (Human Rights Watch, 1993).

The chemical attack against Halabja and the Anfal operations are considered a national trauma by the Kurds in Iraq, and as such are constitutive of their national identity. The survivors of Halabja and the Anfal operations, their offspring, and their entire regions, continue to suffer from the experience of extreme violence, loss, destruction, and displacement to this day. These survivors are claiming for evidence, justice, and compensation (Mlodoch, 2014).

2.1.2 First US-led invasion, 1991

In the shadow of the first US-led military invasion of Iraq in 1991, the Kurdish people rose up against the Baath-regime. Yet their insurrection was defeated and led to the mass exodus of two million Kurds to the borders with Iran and Turkey. In response to the mass exodus, safe havens were installed under international military protection. A large UN-led humanitarian intervention started to see to the basic needs of the displaced population, guaranteeing their return despite international sanctions against the entire Iraq. The operation is known as the first UN-sanctioned humanitarian intervention (Winter et. Al, 2002).

2.1.3 Provisional autonomy and internal war

For the following 15 years, Kurdish people lived in a provisional status of autonomy under UN-surveillance. In 1992, the Kurds democratically elected the first Kurdistan Regional Parliament. Yet the Kurdistan Regional Government was not internationally recognized. The Kurdistan Region suffered from the international sanctions on Iraq, and continued to depend entirely on international humanitarian help to cover basic needs such as food and shelter. This aid did not however invest in infrastructure, or in long-term educational and social services. The provisional status of the Kurdish region led to multiple internal wars between political parties, fighting for access to resources, and exposing the local population once again to multiple experiences of violence in midst of extreme poverty (Winter et. al. 2002). In 1995, these conflicts turned into a full-blown civil war between the two dominant Kurdish parties - the Democratic Party of Kurdistan (DPK) and the Patriotic Union of Kurdistan (PUK) – which claimed numerous victims on both sides. The transformation of the first experience of Kurdish self-government into an inner-Kurdish war – referred to by Kurdish people as brother war - had a devastating impact on the Kurdish people's trust in their leadership and self-determination.

2.1.4 Second US-led invasion, 2003

In 2003, the second US-led military invasion in Iraq led to the demise of the Baath-regime under Saddam Hussein. In 2005, with the drafting of the Iraqi constitution, the autonomous status of the Kurdistan Region was formally sanctioned. The Kurdistan Regional Parliament and Government took political control. In the Kurdistan Region, the years after 2003 brought about political and economic stabilization, as well as the consolidation of regional structures of parliament, government and administration. (Mlodoch, 2014). At the same time, these years were marked by ongoing conflicts between the Kurdistan Regional Government and the Iraqi Central Government, as well as by continuous military interferences by the neighboring countries of Turkey and Iran.

2.1.5 The advance of ISIS

In 2014, the terror militia ISIS took control of large parts of Iraq and Syria, leaving a trail of extreme violence, death, destruction, and displacement. ISIS violence targeted multiple communities throughout Iraq: Yezidis, Kurds, Kurdish and Arab Shiites, Christians and other religious minorities as well as activists from all ethnic and religious affiliations representing political rights, human rights, women's rights, and civil society.

It culminated in the genocidal massacres against the Yezidi population and the enslavement of thousands of Yezidi women.

ISIS violence and the war against ISIS turned Iraq and the Kurdistan Region once again into a war zone. At the peak of the crisis, 3.4 million people in Iraq were internally displaced[10]. 1.5 million people (among them tens of thousands of Sunni Arabs) took refuge in the Kurdistan Region. Another 1.5 million Iraqi refugees found shelter in neighboring countries.

2.1.6 Ongoing financial and political crisis in the Kurdistan Region of Iraq

Today, Iraqi society is deeply fragmented. It is divided along regional, ethnic, religious, and political lines. The Kurdish population in Iraq continues to live in a situation of ongoing financial and political crisis and uncertainty. The conflict between the Iraqi central government in Baghdad and the Kurdistan Regional Government in Erbil is ongoing, and Kurdish rights to autonomy are constantly under threat. Regular interferences by the neighboring countries of Iran and Turkey, including military attacks in the border regions, remain internationally unaddressed. These conflicts lines are aggravated by corruption and nepotism in the rank of local political parties and governmental structures, leading to weak state structures on the one hand and powerful armed militias on the other[11].

2.1.7 Gender-based violence

Gender-based violence against women, including domestic violence, forced marriages, child marriages, honor killings, and cyber-violence against women in general and women activists in particular, are widespread throughout Iraq and the Kurdistan Region. Since the late 1990s, women and human rights organizations have brought the issue of gender-based violence into the public debate and have successfully lobbied for amendments to the Personal Status Law in the Kurdistan Region, improving women's rights within the family in terms of divorce, inheritance, and child custody. In 2011, the Kurdistan Regional Parliament passed an amendment to the Iraqi Personal Status Law from 1959. This amendment – referred to as The Family Law - bans violence against women and children: including female genital mutilation and the denial of education. The Kurdistan Regional Government has established governmental shelters for women threatened by violence and "honor" killings. A specific governmental Directorate for Combating Violence against Women (DCVAW) at the Ministry of Interior, sustains counselling centers for women and families affected by violence and combines police and judicial persecution of perpetrators with legal and psychological counselling for affected women.

Yet, traditional, and religious structures hamper the implementation of law reforms and especially in rural regions, forced and child marriages and family violence against women are widespread. Women who violate the dominating code of honor and shame are often sanctioned and exposed to the risk of femicide.

While writing this paper, the Iraqi Parliament is moving towards an amendment of the Personal Status Law, which would allow religious authorities to govern marriage, inheritance and custody matters[12]. The passing of this law would open the door to legalizing child marriage, and constitutes a severe rollback for women rights in the region.

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[10] International Organisation of Migration (IOM). Irq Mission (2016). Displacement in Iraq exceeded over 3,4 Million. https://www.iom.int/news/displacement-iraq-exceeds-34-million-iom

[11] Act No. 15 of 2008. The Act to Amend the Amended Law (188) of the year 1959; Personal Status Law, in Iraq Kurdistan Region. http://www.ekrg.org/files/pdf/personal_status_law.pdf

[12] Human Rights Watch. Iraq. Parliament poised to legalize child marriage. August, 16 2024. https://www.hrw.org/news/2024/08/16/iraq-parliament-poised-legalize-child-marriage

2.1.8 Civil society

Despite the adverse conditions, ever since the mid-1990s, a rich and multi-faceted civil society has developed in the Kurdistan Region of Iraq, engaged in multiple educational, awareness, and social support projects for women, children, young people, and survivors of violence. Civil society has had a significant role in raising human rights and diversity awareness, bringing about legal and social reforms that enhance women's access to education and work and that strengthen their role within families and communities. In the realm of protection and counselling for women for example, but also in the educational sector, local NGOs are not only complementing weak public services; they are also vital in securing the functioning of public services themselves through NGO-government-cooperation.

Yet most local civil society organizations depend either on the funding and protection of Kurdish political parties, or on international donors and their respective agendas. Many local non-governmental organizations struggle with the short-term of project funding and the changing foci of international donors. They also struggle to secure local funding for more long-term activities.

Civil society organizations are in addition under continuous threat by conservative, religious, traditionalist, and fundamentalists groups, blaming them for 'importing Western values' and eroding local family, social and religious values. Overall, civil society spaces have been shrinking in recent years.

2.1.9 Complex situations of violence

The above snapshot of the last decades illustrates the complex context of violence in Iraq and the Kurdistan Region, the multiple and changing actors of violence, and the overlapping of political, social and gender-based violence. There is hardly any group of the population which has not been affected by violence at certain historical moments. Similarly, there is almost no group which has not been on the side of the perpetrators or by-standers in other historical moments. Thus, there are conflicting, contrasting and permanently transforming narratives of victimhood and marginalization, translating into hierarchies and competition among groups of victims.

Such competition is at times aggravated by the aid interventions of international donors and organizations. To give an example, after the advance of ISIS, many internationally funded humanitarian aid and psychosocial support programs focused on the Yezidi victims of ISIS violence. Survivors of chemical attacks and Anfal operations in the 1980s, who are still struggling for international acknowledgement, were torn between hope that such engagement would open the door to them for bringing their cases to international attention on the one side, and on the other side, fears that their own experience of violence would be over-written. When in the same period in the Germian region in the South East of the Kurdistan Region, massive humanitarian aid went into camps for Arab Sunni people displaced by ISIS, Kurdish host communities, living in poverty and suffering from the long-term impact of the Anfal operations, for whom the Sunni Arab population represents the group of former perpetrators, were torn between solidarity on the one hand, and hostility and struggle for resources on the other hand.

The Kurdish people in Iraq look back on a long history of oppression. Their first steps to self-determination are permanently under attack by national, regional, and international powers. Many continue to live in uncertainty and a situation of ongoing conflict, which is marked by overlapping episodes of violence; multiple violent actors; the intertwining of political, social, and gender-based violence; and contrasting and transforming narratives of victimhood.

Psychosocial interventions and programs should be based on in-depth conflict analysis which does not purely focus on current conflicts, conflict actors and victims, but takes into account historical timelines and the historical development of conflicts.

Rather than focusing solely on victims and survivors of current conflicts, inclusive psychosocial support programs should be developed to address survivors of past and current violence, refugees, displaced communities, and host communities, amongst others, to avoid fueling competition and conflict between survivors' groups.

2.2 | Psychosocial work in the Kurdistan Region of Iraq

Ever since the late 1990s, a growing number of local civil society organizations has been engaged in supporting women victims of domestic and family violence, survivors of political violence, refugees, and displaced communities.

Many of these local organizations have developed sophisticated holistic approaches and combine economic and every-day support with educational and awareness activities, psychological, psycho-educative, and psychosocial counselling, and empowerment activities. At a governmental level, support structures like the Directorate of Combating Violence against Women (DCVAW) have increasingly been incorporating psychosocial counseling in their services.

Psychosocial counselors in these structures have often entered psychosocial practice through activism, experience, and learning-by-doing rather than through formal academic or professional education in psychology, social work, or psychosocial practice. Others have been educated abroad and brought back a set of knowledge and skills from universities or professional institutes in Europe or the US.

One challenge in the psychosocial sector in the Kurdistan Region of Iraq is how to formally acknowledge the expertise and experience of the many psychosocial counselors without formal education; and how to include their knowledge into current academic and professional debates.

Against the above-described background, psychosocial counselors in the Kurdistan Region of Iraq are often confronted with clients in complex and often life-threating situations of overlapping family, social, and political violence, and precarious life conditions.

They are themselves often living in situations of continuous crisis, political instability, and uncertain future perspectives and with experiences of violence impacting on their families.

In addition, they often suffer from stigmatization due to their very work.

"We are taking our homes to work and our work back to our homes"

Psychosocial counselor at a women's counseling project in Slemani, 2014

They might face incomprehension or rejection by their families or risk their social reputation when for example working with women in prisons or shelters, or women being accused of adultery or prostitution. They might be confronted with harassment, violence, and cyber-mobbing when for example intervening in family conflicts supporting women victims of violence.

There are only few supervision, staff-care, and protection programs in place for the psychosocial staff in governmental institutions and international or local organizations[13]. In this regard, the Mastura Institute has formed a multidisciplinary pool of local supervisors. They come together regularly to develop and discuss locally contextualized approaches to supervision and train each other in inter-vision groups. They offer group and individual supervision to governmental offices and local NGOs. Supervision is here understood as a space of reflection, and embraces case supervision, team coaching, and the introduction of debriefing and relaxation techniques.

Psychosocial workers in the Kurdistan Region of Iraq often face complex cases of overlapping political, social, and gender-based violence and are often themselves exposed to violence and stigmatization due to their work.

Both formally and non-formally educated staff of civil society and governmental institutions in the Kurdistan Region of Iraq are in dire need of supervision and staff- and self-care programs to support them professionally, socially, and emotionally.

2.3 | Institutional and societal challenges for social sciences and psychosocial work in the Kurdistan Region of Iraq

The history of the emergence of psychosocial science in academic institutions does not exceed 15 years, and shows a series of institutional and societal challenges.

2.3.1 Challenges at the institutional level

The University of Sulaimani is the oldest university in the Kurdistan Region. It was originally established in 1968 but was forcibly moved to Erbil by the Iraqi Baath-regime in 1981 and named Salahaddin University. The University of Sulaimani was re-established only in 1992[14]. The University of Duhok was established in 1992; and the foundation of other universities is more recent (Soran University 2009; University of Garmian in Kalar 2010). The following observations are limited mostly to public universities and are not to be generalized for the multiple private universities founded after 2003, like the American University Sulaimani.

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[13] One of them has been developed by the German organization medica mondiale and their local partner EMMA – Organization for Human Development with a specific focus on feminist organizations. The project was supported by the German GIZ. https://www.giz.de/en/downloads/giz2023-en-developing-a-staff-care-concept-as-a-local-feminist-NGO-in-KRI.pdf

[14] See: https://su.edu.krd/ku/about/history/suhistory

As for Psychology, Social Work and other disciplines related to psychosocial work, the establishment of the first Department of Social Work at the Salahaddin University dates back to 2008, and the establishment of a Department of Psychology to 2009–2010 (Salih, 2024). The Department of Clinical Psychology at Koya University dates back to 2010[15]. To this day, there is no Department of Psychology at the University of Sulaimani, although a Department of Social Work was established in 2014.

In 2016, under the direct influence of the crimes committed by ISIS, the Institute of Psychotherapy and Psychotraumatology was established at the University of Duhok with the specific aim of strengthening psychotherapeutic and psychological support for survivors of violence. The Institute was created through a collaboration between the University of Duhok, the German University of Tübingen, and the University of Applied Sciences Villingen-Schwenningen, supported by German governmental funds. It also offers Master's classes to students pursuing careers in clinical work. Soran University established a Psychology Department in 2004 within the Faculty of Arts, and offers courses in educational, developmental, and general psychology to students aiming for careers in education and consultation[16]. At Garmian University in Kalar, psychology courses are taught at the College of Education.

Generally, the educational system in the Kurdistan Region of Iraq has a strong orientation towards Western models. Examples are the introduction of the Bologna process in the Higher Education system in the Kurdistan Region of Iraq, starting from 2016[17], or the more recent discussions on introducing English as the main language in the studies of Social Sciences. The latter has however not gained acceptance to this day.

Relatedly, teaching and research in the field of Psychology, Sociology and Social Work have a strong focus on theories, values, standards, criteria, and practices developed in the Western world. They rarely consider and address the characteristics of the Kurdish society, or locally or regionally developed psychological or social concepts.

Though teaching at the Departments of Psychology, Social Work and Sociology at public universities is conducted in Kurdish language, most students have only limited proficiency in English. However, there are very few academic resources available in Kurdish, and translations of Western standard literature into Kurdish often lack commentary and contextualization. For example, for Social Work there is only one academic textbook available in Kurdish. This was published as part of a collaboration between the University of Sulaimani and the University of Applied Sciences Bochum (Ghaderi et al, 2021). Consequently, students and lecturers in Kurdistan – and more generally in the Middle East – rely entirely on Western literature and neglect their own political and socio-economic backgrounds (Midgley, 1981).

It could be said that academic training and research largely rely on copy-pasting Western imported models and concepts (based on English or non-contextualized translated sources) rather than understanding and teaching social sciences as a way of thinking about the world, addressing life challenges, and developing approaches to deal with social and psychological problems within the specific Kurdish context. This approach does not only weaken the role of social sciences in the Kurdish society but also perpetuates mechanisms of scientific colonialism.

This has led to an immense gap between academic teaching and psychosocial practice, further exacerbated by limited internship programs for Social Sciences students, the absence of clear internship guidelines, and a lack of meaningful cooperation on internships between universities and governmental or civil society practice partners.

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[15] https://fsch.koyauniversity.org/departments/dcps

[16] https:// www.soran.edu.iq/index.php/faculties-centres/faculty-of-arts/psychology-department.html

[17] See for example the introduction of the Bologna Process to the Higher Education System in the Kurdistan Region of Iraq (https://spark.ngo/spark-announced-as-key-partner-in-iraqs-higher-education-reform/)

Another challenge is the lack of job descriptions and clear definitions of career paths for clinical psychologists, educational psychologists, social workers, and others, which creates vague and confusing professional boundaries between disciplines. The few existing professional associations for social workers and psychologists in the Kurdistan Region of Iraq remain weak and have so far been unable to clarify professional roles or strengthen the professional identity of Social Sciences graduates.

As a result, university graduates often feel overwhelmed, and unprepared for the practical challenges they face once entering the work sector. At the same, time local governmental institutions and NGOs have expressed concerns about the inadequate practical skills of recent university graduates. And often, they cite difficulties in bridging this gap by providing extensive on-the-job training and additional qualifications, which strains their resources and hinders operational efficiency. Against this background, the Mastura Institute has started an internship program in cooperation with the Department of Social Work at the University of Sulaimani. It takes mentorship for groups of students of Social Work, introducing conceptual frameworks of psychosocial work and organizing visits to governmental institutions and civil society projects engaged in psychosocial support.

> To address the theory-practice gap in academic education in Psychology, Social Work and Social Science in the Kurdistan Region of Iraq, cooperation between academics, practitioners, NGOs and universities should be enhanced.
>
> Meaningful internship programs and cooperation between universities and governmental and civil society practice partners should be reinforced to prepare students for the practical challenges in the psychosocial work sector.
>
> The foundation of professional associations for psychologists and social workers should be fostered to clarify professional roles and strengthen the professional identities of psychologists and social workers.

2.3.2 Challenges at the societal level

Across contexts, the role and influence of psychosocial science and practice depends on the society's perception and acknowledgement of its role. In the Kurdistan Region of Iraq there are a number of challenges preventing psychosocial theory and practice from assuming an important role and increasing in impact.

Mental health and psychological wellbeing do not receive the same attention and appreciation as physical health. This is due to a lack of awareness and education on psychological issues and the negative perception of mental health conditions, which are stigmatized and often seen as 'disfunctionality', 'psychological weakness' or 'craziness'.

It is worth mentioning, however, that the term 'craziness' is not purely negative in connotation in Kurdish society. Older generations in particular talk about people they perceive as 'crazy' with the utmost respect, take their words seriously and will take specific precautions when a so-called 'crazy' person predicts an event to happen. There is an widely shared saying "You can only hear true words from either a child or a crazy person."

Relatedly, the role of psychologists, social workers or psychosocial counselors is negatively connotated and often discredited on a societal level. Many people think that visiting faith healers (FHs) is not as stigmatizing as going to psychiatric clinics and receiving medication or participating in psychological counseling. As a result, faith healing has become a popular way of treating people with mental conditions.

According to a scientific study among 482 cases in Iraq, 279 (57%) reported going to faith healers at any time before, during, or after a psychiatric consultation.

"If we randomly ask people, how they would deal with a specific psychological or social problem, the least mentioned way of addressing the issue would be seeking professional help from a psychologist or social worker."

Workshop participant

Of those, 84.6% reported visiting FHs less than 10 times, while 15.4% went ten times or more; 36.9% still believed that the treatment of FHs is accepted or even good (21.5%), while 30.9% stated that it is useless, and 10.7% thought it is bad. Choosing FHs as the first station of treatment was considered by more than 70% of the patients in the current study; a much higher number than in the findings of Alosaimi for Saudi Arabia (Younis et al, 2019). The vast majority of FHs are men (ibid.)

In conclusion, in Iraq and the Kurdistan Region of Iraq, the trust in and referral to Faith Healing is prevalent and undermines the role and acknowledgement of psychiatrists, psychologists and psychosocial counselors in dealing with psychological distress and mental health conditions.

Efforts are needed to help build public awareness for de-stigmatizing and normalizing mental illnesses and psychological problems and thus improve acceptance of and accessibility to mental health services for vulnerable groups.

At the same time, the prevalent and trusted role of Faith Healers is an important consideration for contextualizing psychosocial work and rather than being ignored or excluded, could be a source of valuable research and exchange.

2.4 | MHPSS knowledge and training in the Kurdistan Region of Iraq

Ever since the advance of ISIS spreading violence and destruction across the region, Iraq and the Kurdistan Region of Iraq have seen a substantial influx of humanitarian aid, mostly addressing internally displaced persons, refugees, and victims of ISIS-related violence. There has been a specific focus on psychosocial support and trauma care. With increased international funding of MHPSS activities, numerous international and local NGOs have set up trauma care and psychosocial counseling centers in the Kurdistan Region of Iraq. In these, they to train local psychologists, social workers, and governmental employees in the health and education sector, in specialized trauma therapeutic approaches as well as broader psychosocial counseling skills.

The German Federal Ministry for Economic Cooperation and Development, BMZ, commissioned GIZ to implement the Regional Project "Psychosocial Support for Syrian/Iraqi refugees and IDPs" in 2015, which was prolonged in 2022 under the name "MHPSS in the Middle East"[18]. GIZ engaged – together with various German university and NGO partners – in the development of ethical and practical guidelines for psychosocial support[19], which were also translated into many languages including the Kurdish language[20]. And – as mentioned before - at the University of Duhok, an Institute of Psychotraumatology has been established in cooperation with the German University of Applied Sciences Villingen-Schwenningen[21], offering master's studies for psychotherapists.

To state again: for many individual survivors of violence, the increasing focus on MHPSS projects has been of great importance. For many Yezidi women for example, who have been enslaved, raped and dehumanized by the terror militia ISIS for months, even years, and many of whom have children born out of rape and have lived through stigmatization and rejection by their own communities after their return, trauma centers are the only safe places for them to refer to, speak about their suffering, and be treated with respect and without judgement while being supported in reintegrating into their communities. Psychosocial counseling centers set up in refugees camps for Sunni Arab women who fled from ISIS terror, were often the only points of reference for them outside family control, and their first experiences of being treated with respect and dignity and of gaining access to information, education, and exchange.

Yet alongside these positive examples, within the wide range of MHPSS programs, there were also multiple problematic examples such as offering short-term trauma exposure therapies and packaged 'recipes' to refugees, IDPs and victims of violence living in unstable and provisional situations. Similarly, there were examples of the complete disconnection between psychological and psychosocial support, and support to address the basic needs of safety and livelihood.

Internationally funded MHPSS programs often start from the assumption that there is a lack of qualified local personnel and academic expertise in (post-)conflict settings for implementing psychosocial support programs. While there is indeed only a small number of academically and professionally trained psychologists, psychotherapists and social workers in the Kurdistan Region of Iraq, this assumption tends to overlook the rich experience and expertise in dealing with violence and suffering in local government health and social services, as well as in numerous civil society organizations, humanitarian initiatives, and human and women's rights organizations. It also overlooks the rich variety of local strategies developed by local communities in coping with trauma and crisis beyond professional contexts.

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[18] See: GIZ – MHPSS in the Middle East (Lebanon, Jordan, Iraq, Turkey). https://www.giz.de/en/worldwide/124408.html

[19] See: GIZ – Psychosocial Support for Syrian/Iraqi Refugees and Internally Displaced People, https://www.giz.de/en/worldwide/39799.html (retrieved 15.04.2020)

[20] https://www.giz.de/en/downloads/giz2019-sorani-guiding-framework-MHPSS.pdf

[21] See http://web.uod.ac/ac/institutes-and-centers/ipp-institute/

Consequently, within the MHPSS programs, there is an abundance and variety of training opportunities, most of them designed for academics and professionals in the psychosocial sector and involving international external educators.

The range of concepts and methods transferred within these trainings is wide and differs according to the respective methodological and conceptual approaches of the implementing NGOs and educators: from trauma-sensitive holistic psychosocial approaches to Western-shaped individual PTSD-approaches or short-term neurobiologically informed exposure therapies like Narrative Exposure Therapy (NET). The adaptation of the latter to unsafe und unstable contexts has been controversially discussed among Western psychosocial researchers and practitioners (see e.g., Mundt, Wünsche, Heinz & Pross, 2011; Ottomeyer, 2011a, 2011b).

Local trainees report that international educators often lack knowledge of the local context and the complex situations of violence local practitioners work in. Thus, educators frequently fail to address the concrete challenges faced by trainees in their work or set standards which are not applicable to the specific work situation. For example, requests for individual settings that grant privacy to clients might be difficult to meet in overcrowded IDP camps or in situations with strong family control, where those seeking counseling might prefer to have another family member as a witness at their side. Attempts to limit their role to that of a confidential psychosocial counselor might have to be abandoned when local practitioners must act as psychosocial and legal counselors at the same time and involve police and judiciary with clients in life threatening situations (Meintjes, Grussendorff & Karem Saleh, 2019).

Trainees furthermore report on trainings with often-conflicting content and information. They are left puzzled by differing 'technical' information, but also by more fundamentally differing approaches, for example, whether to encourage survivors of violence to speak out on their experience, or rather bolster resilience and coping in order to avoid the risk of re-traumatization by re-exposure to the traumatic event (ibid.).

The trainees' consternation points towards a more general problem: Rarely do educators outline the psychological school or conceptual framework they refer to, the underlying assumptions to the approach and methods they teach, and the possible controversies related to their approach.

In regard to the concept of trauma, for example, the complexity and historical and political dimension of trauma concepts, the controversies within the trauma debate between individuum-centred clinical approaches on the one side, and more socially and politically contextualized approaches to trauma, arrive in bits and pieces in the Kurdistan Region of Iraq. Local colleagues are confronted with numerous methods and tools of trauma work, each one presented as 'the one and only,' with confusing and disempowering effects.

Trainees should be encouraged and enabled to choose and adapt an approach or aspects of various approaches they consider useful for their own practice. Trainings that introduce specific psychosocial intervention approaches should therefore include an introduction to the ethical, philosophical and theoretical background and origin of the respective approaches, underlying values, assumptions and definitions of trauma and the academic "schools of thought" behind them. Especially in conflict situations with a high influx of international organisations that offer trainings with often contradictory approaches, trainees should be taught to understand the fundamental ideas behind an approach and the fact that each approach is only one among many in the vast field of psychological and trauma theory and practice[22].

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[22] GIZ (2019). Recommendation Paper on Tranining and Capacity Development in MHPSS. https://www.giz.de/en/downloads/giz-2019-en-recommendation-paper-on-training-and-capacity-development-in-MHPSS.pdf. P. 48

Many trainings and qualification programs conducted under the umbrella of MHPSS programs for psychosocial professionals in post-conflict regions like the Kurdistan Region of Iraq, focus on theories and practices developed in and for Western contexts, fail to address the specific situation and needs of local participants, and marginalize locally developed contextualized approaches to psychosocial work; thus introducing standards and practices of psychosocial work which are not applicable in the local work situation. Furthermore, there is still a prevalence of Western-shaped scientific approaches to trauma in training for local professionals, and thus a tendency to overwrite and marginalize local knowledge and practices, and specifically overlook local strategies of coping with trauma and working with survivors which are not explicitly articulated in the formal education sector.

A **double de-contextualization** occurs in the West-East-transfer of MHPSS knowledge and trauma concepts:

There is a lack of contextualizing psychosocial knowledge and practices to the specific local context.

There is at the same time a de-contextualization of the very concepts conveyed, by not explicating their historical embeddedness, the underlying assumptions and controversies around them.

CHAPTER THREE

The Mastura Institute of Applied Science in Psychosocial Work, Slemani, Kurdistan Region of Iraq

3 THE MASTURA INSTITUTE OF APPLIED SCIENCE IN PSYCHOSOCIAL WORK, SLEMANI, KURDISTAN REGION OF IRAQ

Against the above-described background and based on their joint work experience in the psychosocial sector in the Kurdistan Region of Iraq, a group of Kurdish, South African, and German academics and practitioners of psychosocial work came together in 2022 to found the Mastura Institute of Applied Science in Psychosocial work in the city of Slemani, Kurdistan Region of Iraq.

The Institute's name-giver, **Mastura Ardalan**, was a poet, writer and historian who was born in the city of Sanandaj in Kurdistan-Iran in 1805. Ardalan lived and worked in Slemani. She was the first widely acknowledged female historiographer of the 19th century in the Middle East.

The Mastura Institute brings together researchers, university teachers, students, and practitioners in the realm of psychosocial work, including psychosocial (activist) workers without formal education. It aims to create a space of debate, reflection, and research to address the challenges faced by psychosocial theory and practice in the region.

Statue of Mastura Ardalan in Erbil, KRI
Source Wikimedia Commons; creative Commons License CC0

On a practical level it aims to:

- strengthen and systematize locally developed contextualized concepts and practices of psychosocial work

- improve the theory-practice link in local academic education

- contribute to the development and professional implementation of context-tailored psychosocial support to people affected by violence, displacement, conflict, and crisis in the region.

On the academic level it aims to:

- establish cross-contextual, transnational exchange platforms on psychosocial knowledge

- strengthen local perspectives in international debates on knowledge production in the psychosocial realm by establishing platforms for international knowledge exchange

- contribute to the debate on the decolonizing of psychosocial knowledge and practice.

Research and trainings offered at the Institute have a strong focus on holistic, community-based, and family-based psychosocial support for survivors of political, social and gender-based violence.

However, the Institute's understanding of locally contextualized knowledge is not limited to concepts and practices specifically developed for dealing with conflict, specific 'cultural' or religious settings or gender-based violence. The Institute aims instead at creating a space of reflection and debate on broader psychological concepts, scientific paradigms, controversies, and the like. An example of this is developing local understandings of psychoanalytical schools, or debates on post-colonial theories and concepts of intersectionality. Thus trainings, exchange, and research do not purely focus on methods and tools of psychosocial work, but they also include conceptual debates and outline underlying ethical values, assumptions, world views, and self-concepts of methods and approaches.

The Institute has a strong emphasis on creative and grounded ways of facilitating training, supervision, research, and monitoring and evaluation, and in the engagement of practitioners and academics in conferences and exchange processes. An interactive, interdisciplinary, and multilingual approach is cultivated. Attention is paid to diminishing hierarchies between academics and practitioners and barriers of access to academic debate through logistical support to participants and a focus on local languages.

The approach of the Mastura Institute considers thinking globally to be as important as reflecting on the specific challenges in the context of the Kurdistan society. It strives to challenge the dichotomy between Western knowledge and local or indigenous knowledge by carefully elaborating joint and differing concepts and assumptions, searching for similarities rather than differences, and carefully articulating the difference between culture and context.

It aims to carefully reflect on which approaches and practices are effective in psychosocial work, and which are less successful in the Kurdish context. It also encourages Kurdish researchers and practitioners to systematize their own approaches and practices and share and link them to international debates in the psychosocial sector.

For this purpose, the Mastura Institute's team has formed a 'glo-cal' team. Academics and practitioners from the Kurdistan Region of Iraq, Germany, and South Africa, and who represent various disciplines, have jointly facilitated discussions, workshops, and seminars using creative, innovative, and grounded ways of facilitating and learning.

Thus, the Institute not only contributes to increase local capacities in the psychosocial realm, but also to larger debates on hierarchies, power relations and colonial mechanisms in West-East and North-South knowledge transfer and exchange. It strives to put the decolonization of knowledge into practice, and to develop an approach to psychosocial work that embraces both global approaches and the rich experience of local practitioners in the psychosocial realm.

This paper draws on a series of workshops on the "contextualization of psychosocial knowledge" at the Mastura Insitute as well as on bi-monthly workshops held for a broader audience of researchers, practitioners, and university students of social work and social sciences.

CHAPTER FOUR

Which knowledge? Unpacking conceptual frameworks

4 WHICH KNOWLEDGE? UNPACKING CONCEPTUAL FRAMEWORKS

When we embarked on our cross-contextual exchange, we found that even before we could begin unpacking specific psychological and psychosocial concepts and their usefulness in our setting, we had to reflect on more basic questions such as:

- What do we understand as knowledge?
- Which frameworks are we referring to when we talk about trauma, psychosocial practice or MHPSS?
- What exactly do we mean when we talk about colonialism and decolonization?
- What do we refer to as local knowledge and practice?

In the following paragraph we present some basic reflections resulting from our exchange.

4.1 What is knowledge?

Knowledge is still widely perceived as something objective, something valid and independent of subjective perceptions, and largely associated with claims of truth.

Such understanding of knowledge goes back to the philosophy of Positivism (from French positif, i.e., imposed on the mind by experience), shaped by the French philosopher and mathematician, Auguste Comte (1798-1857). A positivist research paradigm defines as scientific that which can be directly observed and measured. In this understanding, the role of scientific research is to observe and measure patterns in human and social realities and generate scientific knowledge based on evidence through experiments, tests, and data collection; while marginalizing theological, metaphysical, or moral considerations. Positivism is based on "the ontological principle and doctrine that truth and reality is free and independent of the viewer and observer" (Aliyu et al., 2014).

Today, such understanding of knowledge and science finds its sharpest form in the neoliberal concept of a knowledge society, which sees scientific knowledge as a key tool of human control over nature, of economic innovation, and of increased productivity. Progress optimism is inherent to this normative concept, as is the definition of 'development' from a capitalist perspective, and the related diagnosis of 'development deficits' in less industrialized countries[23].

Ever since the 1960s, such normative understanding of knowledge has been questioned and criticized by social anthropologists and by poststructuralist and postcolonial thinkers. They question the related claims of objectivity and truth, pointing instead at multiple knowledge systems and the embeddedness of knowledge in historical, social, economic, and cultural contexts while focusing on understanding knowledge production processes. They further criticize the reductionist view of knowledge as scientific knowledge, which disregards other forms of knowledge based on customs, experience, body, and emotions; and have introduced the term knowledge practices, which underlines the process nature of knowledge.

The Norwegian social anthropologist Fredrik Barth travelled to the Kurdistan Region in the 1950s where he researched on the social organization of Kurdish society (Barth 1953). Barth defined knowledge as "what a person employs to interpret and act on the world" (Barth, 2002, p. 1, quoted from Autorinnenkollektiv 2010, p. 8).

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[23] For a detailed description and critique of the concept, see the paper Wissen und Soziale Ordnung – Knowledge and Social Order by a research group at the Humboldt University Berlin, (AutorInnenkollektiv 2010).

His perception of knowledge includes not only information but also emotions, skills, capacities, and language; and underlines the embeddedness of knowledge in social relations. Anthony Giddens (1984) defines knowledge as agency.

> "Knowledge is what a person employs to interpret and act on the world."
>
> **Fredrik Barth**

In light of the above, efforts of contextualization require both a more fundamental, further questioning around which knowledge it is that we are building on. They require us to address the historical embeddedness of knowledge systems, the global dominance of Eurocentric and Western knowledge, the relation between knowledge and power, and thus the power relations, colonial mechanisms, and controlling and disciplining aspects in knowledge production and transfer.

The question, 'what knowledge is required for a meaningful psychosocial practice in the double-colonized and conflict-ridden Kurdish society?' cannot be reduced to 'what knowledge?' alone. It must also address questions such as 'who can speak?', 'whose knowledge and experience gets heard?', 'who produces knowledge?', and 'how do we, as academics and practitioners from Western, Eastern, Northern, and Southern contexts, come to a process of mutual exchange and learning without immediately reproducing hierarchies?'.

Thus, drawing on international debates on decolonial approaches to knowledge production, the cross-contextual and transnational exchange organized at the Mastura Institute aimed to further shape what decolonial approach means in psychosocial theory and practice and how we can put such decolonial approach into practice.

We understand knowledge here as being produced and shaped by socio-economic, political, and cultural contexts - a result of social relations and practices, driven by various interests and power relations.

Speaking about contextualization, therefore, cannot be limited to simply adapting Western knowledge to local contexts. It requires a reflection of all sides (Western, and local academics and practitioners) on aspects like their respective knowledge systems, their related assumptions, their inherent power relations, and their mechanisms of 'othering.'

4.2 | Challenging positivist paradigms – introducing concepts of critical psychology

Throughout our discussions, participants expressed critique of a reductionist dominance of positivist paradigms and quantitative methodologies in the Kurdish academic education sector. A meta-analysis by Hamasaiid (2024) showed that 67% of the doctoral dissertations in the University Departments of Sociology across the Kurdistan Region of Iraq rely on positivist concepts and quantitative methodologies, while there is a marginalization of phenomenological approaches and qualitative methods.

We found indeed that, as in many other decolonial debates, local colleagues' critique of Western knowledge is closely intertwined with a critique of positivist scientific frameworks and methods and, in Psychology specifically, a critique of biomedical, clinical, and individuum-centered concepts of psychological stress, trauma, and healing. Thus, Western knowledge is often equated with positivist knowledge.

The promotion of positivist approaches in the local education system, as well as the dominance of individuum-centered, clinical approaches in internationally funded MHPSS projects and trainings, both contribute to this narrow perception of Western knowledge.

To counter this perception, an important step in the reflection process has been to introduce and discuss alternative phenomenological, critical, and socio-economically contextualized psychological and psychosocial concepts from the Global North as well as from other Global South contexts (e.g., Critical Psychology and Latin American Liberation Psychology). This process also involves unpacking the constant controversy in Psychology such as the tension between individuum-centered clinical approaches to trauma, psychological distress, and healing on one side, and politically and socially contextualized approaches to psychosocial work on the other.

Much attention was given in the workshops to the introduction and discussion of critical perspectives on the dominant clinical focus in Psychology and its system of diagnosis and treatment, and the introduction of alternative, more socially and politically contextualized approaches to psychological stress, trauma, and healing from various contexts.

A South African colleague introduced the South African context and described how she and her colleagues from the local NGO Sinani - the KwaZulu-Natal Programme for Survivors of Violence - struggled with Western clinical concepts of diagnoses and treatment, which proved to be not applicable in their work with victims of violence in conflict ridden rural communities in South Africa.

Instead, they started to build on the African concept of Ubuntu. A sentence in Zulu and Xhosa, two of eleven official South African languages, says 'Umntu ngumtu ngabantu' and can be translated as "I am because we are" or "a person is a person through other persons."

Ubuntu describes the oneness of humanity and the close interrelation between the individual and the social: between individual freedom and development, and the development and prosperity of the community. Ubuntu emphasizes **dignity, trust, and respect** as core values for strong communities. It also encompasses the continuity of life through a living relationship with ancestors and people who have passed away.

> "In Africa, there is a concept known as 'ubuntu' - the profound sense that we are human only through the humanity of others; that if we are to accomplish anything in this world it will in equal measure be due to the work and achievement of others."
>
> **Mandela in Stengel & Mandela, 2009**

Nelson Mandela 1994; © John Mathew Smith 2001 / CC BY-SA 2.0

Based on such understanding of the individual and the social, the South African colleagues focused on restoring respect and dignity as part of individual and social healing and also included traditional cleansing rituals into their psychosocial practice. The presentation prompted intense discussions on how to integrate such traditional rituals without legitimizing and strengthening traditional structures.

In other workshop sessions the historical development of the trauma concept and the controversies around it (see section 4.4.) were introduced and discussed in regard to the example of Kurdish Anfal survivors.

The roots and history of psychosocial approaches in Europe such as the anti-psychiatric movement of the 1970s/1980s were introduced, as well as theory and practice of Latin American Liberation Pedagogy and Psychology (Freire, 1970; Martín-Barò, 1990).

Participants identified such critical reflections during the workshops as key experience with a direct impact to their daily practices in psychosocial work. For example:

- the reflections on what is normal and what is defined as (mental) health and (mental) illness

- the relationships between individual suffering, and socioeconomic and political contexts

- the potential pathologizing impact of the widespread diagnoses of trauma for survivors of violence.

> "I have learned not to see every illness as a disease, and to think of the individual as living in a social context"
>
> **Workshop participant**

In specific regard to Kurdish society, where generations of people have gone through episodes of extreme violence, destruction, and displacement, it was critically discussed that clinical approaches to trauma might lead to a diagnosis of the entire population as traumatized, thus turning them from political and social agents to 'patients'.

Throughout our discussions there was a strong impetus by participants to challenge the dominance of positivist scientific frameworks and related quantitative methodology in the education sector in the Kurdistan Region of Iraq and work towards a paradigm shift that strengthens phenomenological approaches in examining psychological and social phenomena in the region.

Decolonial debates often tend to equate Western knowledge with positivist knowledge and biomedical and clinical foci in psychology.

Thus, beside the need for rediscovering and strengthening local knowledge, there is also a need for discovering the richness of and controversies within both, Global North and Global South knowledge, specifically phenomenological approaches and related qualitative research methods.

Critical Psychology provided helpful reflections on the tendency to pathologize responses to adversity, especially through symptom inventories and syndromes, instead of analyzing the causes of distress. This approach was found to be helpful in contexts of high exposure to extreme adversity, where psychosocial support may include reframing illness and victimhood as a means to empower individuals as political and social agents of change. This aims to address the root causes of suffering and to reconnect disenfranchised parts of the self and society.

Joint efforts are needed to challenge the dominance of positivist concepts and work towards a paradigm shift in academic education that strengthens phenomenological approaches to understand local realities and develop locally contextualized strategies of addressing social and psychological problems in the Kurdish society.

4.3 | Research methodology

Relatedly, there is a need to challenge the prioritization of quantitative methodology in the Kurdish academic context, which is often accompanied by a devaluation of qualitative, phenomenological research as 'non-scientific' and not evidence-based. Instead, efforts should focus on strengthening the development of locally contextualized qualitative methodology.

In our discussions it was however emphasized that the frequent association of evidence-based research with quantitative research is misleading and often reproduced by ourselves.

As much as anything else, qualitative research needs a strong data base, a clear methodological framework, and evidence – without that we would just be guessing.

Thus, the question is not whether we use qualitative, quantitative, or mixed methods. The challenge is rather how to move away from purely biomedical and clinical models of understanding and 'measuring' suffering towards the development of context- and subject-tailored, human- and survivor-centered methodological frameworks to understand psychological and social challenges.

Kurdish colleagues strongly asked for training in qualitative methods. To avoid the reproduction of an import of qualitative methodology from Western contexts, it was suggested that Kurdish and international researchers jointly engage in concrete research projects on specific social and psychological problems in the Kurdish society and that these develop context-sensitive methods, tailored to the specific research question, in the research process.

> Joint efforts are needed to break the dominance of quantitative research methods in the Kurdish academic education and in society, and the related devaluation of qualitative research. In joint research projects on psychological, psychosocial, and social phenomena in the Kurdish society, attention shall be given to in-depth reflection on the development of innovative tailor-made methods.

4.4 | Which psychosocial knowledge?

Throughout our workshops we endeavored to unpack the concepts and frameworks we are referring to and dealing with on a daily basis. Together we took a deeper look at the historical roots of psychosocial theory and practice, the development of the trauma concepts and controversies around it, and the development of a broader understanding of psychosocial support, and ultimately the development of the MHPSS concept. We did this to come to a shared understanding of psychosocial theory and practice. In this paragraph we briefly address the various concepts we touched upon in our workshops.

4.4.1 The concept of psychological trauma

While concepts for understanding people's emotional distress and approaches to psychological healing are ancient, the psychological trauma concept is relatively young, and its history is closely intertwined with social and political issues.

Trauma is not just a psychological concept. It directly relates to external experiences such as war, aggression, violence, and disaster causing psychological suffering of the affected people. As such, it touches deeply on social, political, and moral issues as well, and it delves into the fundamental fears and abysses of human nature (Herman, 1992).

Indeed, the very relation between external events of shock and violence, and the psychological reaction to these events by the individuals affected, has long been contested in academia and society. For many years after the end of the Nazi dictatorshipin Germany, for example Jewish survivors of the Holocaust, who applied for pensions, medical, or psychological services, had to individually prove that their psychological suffering was not related to genetic heredity or childhood events but related to their detention in Nazi concentration camp and the loss of numerous family members (Eissler, 1958).

In 1980, the concept of psychological trauma finally entered in the Diagnostic and Statistical Manual of Mental Disorders (DSM) of the American Psychiatric Association[24] and two years later it appeared in the International Statistical Classification of Diseases and Related Health Problems (ICD) of the World Health Organization[25] under the label of post-traumatic stress disorder (PTSD).

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[24] American Psychiatric Association (1980). Diagnostic and statistical manual of mental disorders (3rd ed.). Washington, DC: APA.

[25] World Health Organization. (1992). International statistical classification of diseases and related health problems. Available from http://apps.who.int/classifications/icd10/browse/2010/en

The PTSD concept refers to stress-theory and defines trauma as response to events or situations of catastrophic nature, such as disasters, wars, violence, sudden loss, or accidents. It lists a series of symptoms such as hyperarousal, hypervigilance, anxiety, depression, and sleep disorders, as well as memory phenomena like avoiding situations related to the traumatic event while being overwhelmed at the same time by flashbacks, intrusive memories, and nightmares.

The entrance of the PTSD-syndrome in diagnostic manuals has been a great achievement in terms of finally acknowledging the psychological scars left by violence, war, and aggression. It has opened the doors for numerous people who have experienced violence to claim pensions, receive psychological and medical support, and bring perpetrators to justice.

Ever since its introduction, the PTSD-concept has become the dominant paradigm in addressing trauma. Yet, the PTSD-concept and related individuum-centered therapy approaches have also been largely criticized, especially by international practitioners working with survivors of human-made violence such as war, torture, detention, rape, and sexual abuse. It has been criticized for reducing trauma to a catalogue of symptoms, for considering trauma as an individual experience while marginalizing its social and political aspects, and for ultimately individualizing, pathologizing and medicalizing survivors of social and political violence.

Multiple alternative trauma concepts have emerged that consider trauma not solely as an individual experience, but also social and political one, emphasizing the processual and dynamic character of traumatization. In his work with Holocaust survivors in Europe, Hans Keilson (1979) developed the notion of sequential traumatization. This concept emphasizes that for survivors of violence it is not the very dimension of the traumatic event itself that determines future coping and health perspectives, but rather the post-traumatic phase, and the continuity, stability, and social support found in the aftermath of the trauma.

In the work with survivors of torture, detention, and forced disappearances in Latin American dictatorships in the 1970s/1980s, notions developed along the lines of psychosocial trauma (Martín-Barò, 1979) or sociopolitical traumatization processes (Becker, 1991). These notions describe the close intertwinement of psychological trauma with experiences of political oppression and poverty. They link the idea of healing to justice, basic human rights, and liberation from oppression. In South Africa in 1983, Frank Chikane (1986) labeled the impact of the racist division and oppression of the Apartheid-regime in South Africa as continuous trauma (Kaminer et. al, 2016) and feminist work with women victims of gender-based violence emphasize the interrelation between individual trauma and patriarchal gender-relations (Herman, 1992).

Thus, the field of trauma research is shaped by multiple concepts of trauma and ongoing controversies. Greatly simplifying, there are on the one hand clinical, individuum-centered trauma concepts such as PTSD, or concepts from cognitive, behaviorist and neurobiological schools of psychology, which translate into individual and symptom-centered trauma therapies, often focusing on exposure to the traumatic event and/or on behavioral and cognitive changes. And there are on the other hand trauma approaches informed by psychoanalytic and systemic frameworks, which underline the social and political embeddedness of the experience of trauma, and translate into more holistic approaches to trauma care, combining individual therapeutic and psychosocial support with activities for stabilizing the life conditions and for the empowerment of trauma survivors through human rights and political engagement.

In our discussions we found that a closer look into the historical development of trauma concepts and the controversies around these help to challenge dominant paradigms of trauma in the academic education sector as well as in MHPSS projects and trainings in the Kurdistan Region of Iraq. This scrutiny also helps to encourage local researchers and practitioners to counter the widespread and pathologizing diagnosis of large parts of the Kurdish population as 'traumatized' and instead develop context-specific concepts of and approaches to trauma.

4.4.2 Psychosocial theory and practice

Psychosocial theory and practice emerged as a critique of clinical, deficit-oriented, and individuum-centered perspectives on trauma and broader psychosocial issues. These traditional approaches often focus on diagnosing and categorizing psychological problems as individual 'disorders' or 'illnesses'. In contrast, the psychosocial approach highlights the interconnectedness of psychological stress and environmental factors, emphasizing the role of social and contextual influences in shaping mental health.

Conceptually, a psychosocial understanding of psychological conditions refers to systemic approaches (e.g. Bronfenbrenner, 1979), which emphasize a person's embeddedness in family and social relations and structures, political and institutional systems, and economic conditions. It also emphasizes the various circles of support surrounding a person. A further emphasis is on an understanding of health, which is not defined as the absence of illness, but focuses on what a person needs, and which resources a person has available to them in order to function in the face of changes in themselves and in their relationships with their environment (Antonovsky, 1979). The psychosocial approach marks a paradigm-shift from the focus on a person's 'deficits,' 'disorders' and 'illnesses' towards a resource-oriented understanding of **wellbeing**.
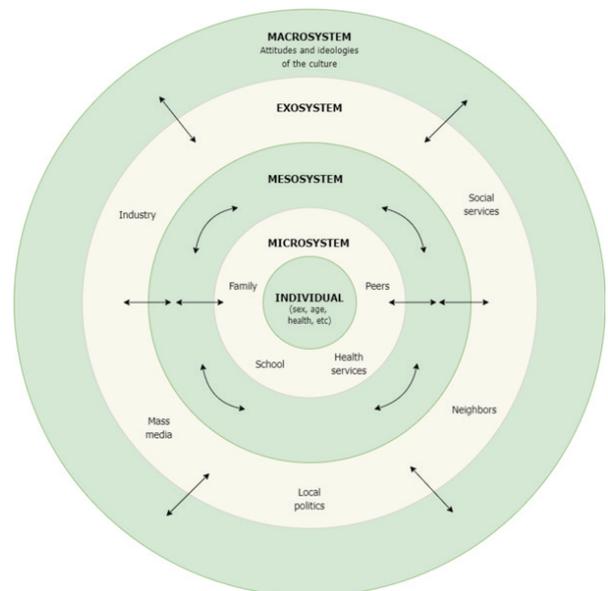
Bronfenbrenner's Ecological Theory of Development, adapted from Abbeyelder, 2022.
https://commons.wikimedia.org/wiki/File:Bronfenbrenner%27s_Ecological_Theory_of_Development_(English).jpg

Wellbeing is a holistic concept that covers many different dimensions of life. It means having basic needs met (like safety, food, clean water, clothes, and healthy bodies), but also refers to things to do with the mind and heart (relationships with family, a sense of belonging, education, cultural and religious heritage, identity, and having a sense of purpose in life).

Wellbeing might be differently defined in different contexts. While in some contexts, the individual freedom of choice in one's life might be emphasized, in other contexts, as in South Africa, wellbeing may to some people be closely related to one's linkages to family and community, and to ancestors and people who have passed away (Nwoye, 2017).

For emphasizing the 'idealistic' nature of the concept of wellbeing specifically for people living in regions of war, conflict and ongoing poverty, the term relative wellbeing has been coinded (see for example Jacobi et al., 2019).

Ultimately, wellbeing includes the important element of prevention – the idea of minimizing and avoiding exposure to suffering in all contexts, rather than 'swooping in' with specialized mental health support after the damage of war, adversity, and suffering has been done.

In practice, the psychosocial approach translates into holistic psychosocial counseling for people who have gone through traumatic experiences or who are living in crisis and distress.

It can include multiple forms and layers of support: from psychotherapy where needed, to psychosocial counseling, strengthening of social and peer group networks, every-day-support for stabilizing the person's life conditions, legal advice, and accompaniment in applying for pensions or compensation. It also encourages psychosocial practitioners to engage in human rights and political advocacy aimed at addressing the root causes of suffering and at bringing about social and political change.

In the Kurdistan Region of Iraq, against a background of uncertainty, overlapping experiences of violence, and ongoing precarious life situations, many local NGOS and counseling projects have quasi-naturally developed such holistic approaches. They combine psychological and emotional care with work to help meet the basic needs of people affected by violence, to address economic and work problems, to strengthen social networks, and to advocate on a human rights and political level for social change.

These contextualized practices are hitherto under-researched and need careful documentation and systematization to contribute to broader international debates on knowledge contextualization and decolonization.

Holistic psychosocial practice needs close cooperation between practitioners from various professional sectors: psychotherapists, clinical psychologists, psychosocial counsellors, social workers, lawyers, and educational experts for example.

Relatedly, for the discussion on how to develop contextualized psychosocial knowledge and practice in the Kurdistan Region of Iraq, a multidisciplinary approach to psychosocial knowledge debates is critical. So too is an openness to including additional disciplines such as the arts, given the essential role that these play in offering tools and platforms for addressing psychological and social problems creatively and non-verbally.

> The process of contextualization of psychosocial knowledge starts with an exploration of what people in the Kurdistan Region understand as wellbeing, and the local family and social support systems that people in distress and crisis can rely on in terms of social support systems.
>
> Holistic psychosocial practices developed by local NGOs and counseling projects in the Kurdistan Region need to be researched, documented, and linked to international debates on the contextualization and decolonization of psychosocial knowledge. Contextualization processes of psychosocial theory and practice need multiprofessional and multidisciplinary networks.

4.4.3 The MHPSS-framework

Within our workshops, a critical reflection of the MHPSS framework was undertaken by the group. As stated previously, the MHPSS framework has been developed specifically in the sector of international aid and development for addressing mental health and psychosocial challenges in (post)-conflict regions.

The guidelines of MHPSS published in 2007 by the Inter Agency Standing Committee (IASC, 2007) were developed in an inclusive process that included UN agencies, the World Health Organization, universities, NGOs, and practitioners from various geographic contexts. These guidelines have been subject to continuous discussion and transformation ever since.

The heart of the MHPSS framework is the MHPSS pyramid, which proposes the integration of various layers of service provision in emergency and (post)-conflict-situations. This model has evolved to become increasingly holistic, adding, step by step, more layers to the initial model.

Intervention pyramid for mental health and psychosocial support in emergencies
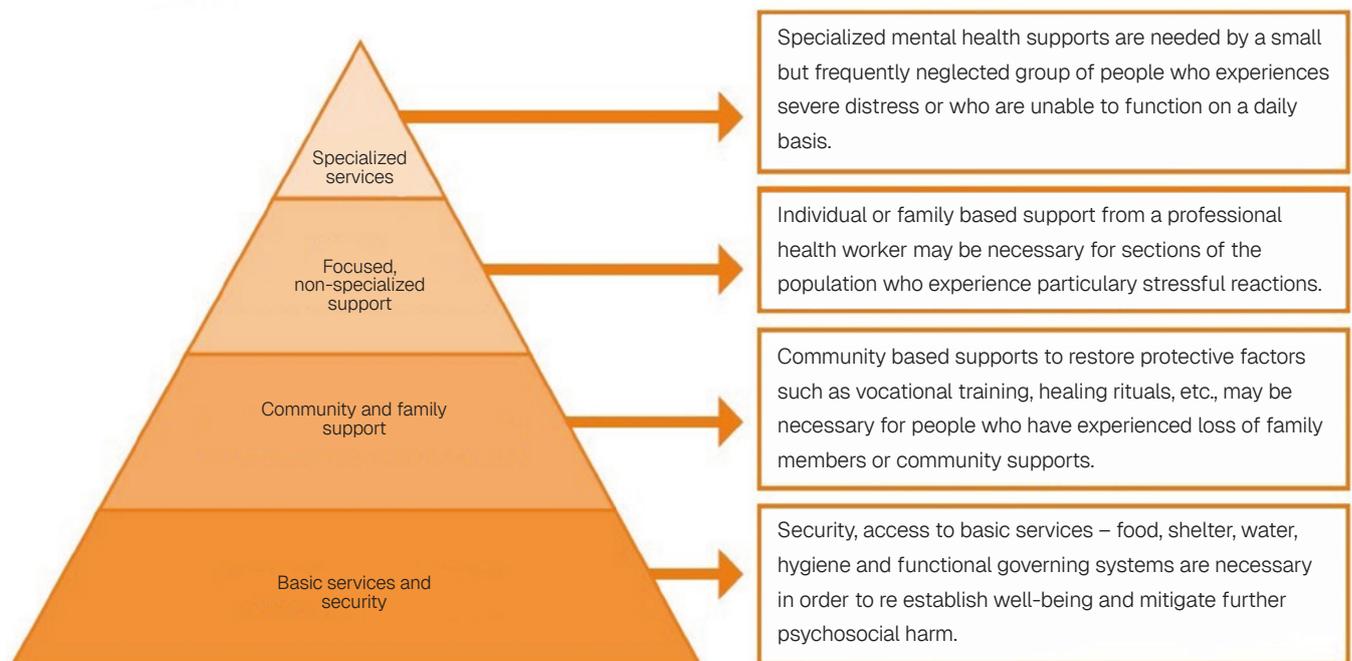
The Inter-Agency Standing Committee on Mental Health and Psychosocial Support (MHPSS) in Emergeny Settings (IASC, 2007)

The top two tiers of the model make an important distinction, emerging from resilience research (e.g., Fleming and Ledogar, 2008) that among people affected by severely adverse circumstances, only a smaller group will need specialized, professional mental health support e.g. by mental health professionals, psychiatrists or psychotherapists, while a greater proportion can benefit from focused support, e.g. basic person-to-person support by community health workers.

The third layer of the pyramid emphasizes the importance of strengthening family and community support and proposes to strengthen these support systems.

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[26] See IASC (2007). https://interagencystandingcommittee.org/sites/default/files/migrated/2020-11/IASC%20Guidelines%20on%20Mental%20Health%20and%20Psychosocial%20Support%20in%20Emergency%20Settings%20%28English%29.pdf

It was discussed that in both the Kurdistan Region of Iraq and South Africa, many people would find it inappropriate and dangerous to go alone, 'behind closed doors', to speak in confidence to an unknown professional. Many would rather seek help with and within families and communities. For a survivor of violence or a combatant returning from war, a dignified, respectful, and acknowledging reception and treatment by their family and community might be more helpful than going to a professional for specialized support. In post-Apartheid South Africa, the human right to be treated with dignity and respect was a priority in the aftermath of the dehumanization and humiliation of Apartheid oppression.

In many African contexts, an assessment of distress would be much more closely related to an understanding of the social and contextual causes of distress, rather than the display of symptoms as an inventory and proposed syndrome. If someone displays distress, there would be a socio-spiritual assessment of extended family relations and connectedness, with a particular focus on disruptions in the social fabric of wellbeing (Nwoye, 2017). A particular example is that combatants and traditional warriors in South Africa would be medicinally, spiritually and socially prepared for battle (Mkhize, 2008). And if not traditionally cleansed after war (again medicinally, spiritually and socially integrated), they would be said to remain with 'a fighting spirit', which may include aggression, irritability, withdrawal, nightmares and intrusive thoughts about war. A community peace-building approach to understanding, healing, and addressing this social challenge could involve community cleansing and reconciliation ceremonies of a whole village of warriors, including integration, family connectedness, and community acknowledgement and appreciation of their role.

However, in our discussions, Kurdish colleagues also pointed at the inherent risk, related to the layer of strengthening family and community support in a society with strong patriarchal controlling family structures. They emphasized instead the importance of de-stigmatizing the referral process to external and professional help outside the family context.

The ground layer of the MHPSS-pyramid ultimately acknowledges the centrality of safety and stable life conditions for survivors of violence and people in distress.

The latest draft circulated proposal for the IASC MHPSS model is to add a fifth layer to the bottom of the pyramid, that is, peace-building (Wessels & Sule, 2022). It emphasizes the need to address the very roots of suffering and prevent conflict and violence.

The ongoing rapid evolution of the model invites agency and participation from developing and (post)-conflict contexts, highlighting the importance of reflective processes with meaningful participation from (post)-conflict contexts and the Global South.

As stated previously, the MHPSS framework was also critically discussed by the group.

Indeed, though the MHPSS framework itself advocates for an integration of various layers of psychological and social support, its application on the ground often looks different. Many MHPSS programs rely on clinical assessment of individual pathology, especially tried and tested inventories for assessing PTSD. This poses the risk of strengthening an internal closed system logic – using the concept of PTSD to devise measures and assess PTSD and verify the reliability and validity of such measures.

Furthermore, MHPSS programs or projects are related to often short-term international funding and reflect the various specific agendas of donors or foci of international organizations, and are often deployed in bits and pieces, focusing on one layer of the MHPSS pyramid instead of representing holistic approaches.

For example, during the ISIS crisis in the Kurdistan Region of Iraq, local Kurdish organizations heavily criticized the fact that in midst of acute crisis and displacement, they had access to short-term funding for trauma care and psychosocial counseling e.g. in IDP camps but faced restrictions in funding for covering basic needs and the strengthening of sustainable services.

Though the MHPSS framework embraces various perspectives on psychosocial work from the Global North and the Global South and has been continuously developing towards contextualized and holistic approaches to psychosocial support, more efforts are needed to contextualize the MHPSS framework and to bring about a meaningful shift towards local ownership in both theoretically shaping, and practically implementing, MHPSS programs.

This includes a questioning of underlying individuum-centered and clinical assumptions and coming up with local models of understanding distress and trauma, helping, and healing. It also includes a critical reflection of the power relations between international donors and local implementers addressing the very conditions of MHPSS-implementation such as short-term funding.

Overall, in our discussion process, it proved helpful to take a deep look at existing frameworks of trauma, psychosocial work and MHPSS, understanding their historical development as well as controversies around them in order to come to an informed reflection of what helps and what does not help in our different contexts.

4.5 | Coloniality and approaches to decolonization

Colonization is understood as "a long-term process involving the bureaucratic, cultural, linguistic, and psychological divesting of colonial power in which the ideologies and mechanisms of control created through colonization continue to oppress and manipulate how people perceive the world and their place in it" (Gray et al., 2013, p. 79).

Thus, colonization is a comprehensive process that extends beyond the occupation of territory into the colonization of culture, science, and history and running through all aspects of the life of the oppressed population. It can be said that in general, colonization of people and countries was not only carried out by force, fire, and iron, but also with the support of the sciences of anthropology, history, and oriental studies (Said, 1978). Finally, we can define the procedural definition of colonialism as the domination of the science and logic of powerful countries, including the psychological and social sciences. Gayatri Spivak has coined the term epistemic violence to describe the process of colonial powers imposing knowledge systems on the colonized (Spivak, 1988). Considering Michel Foucault's (1980) theories on the interrelation of power and knowledge, knowledge production and its dissemination function as a consolidation of power structures and consequently become an inherent part of colonization (Hiddleston, 2009).

Frantz Fanon (1952) has outlined in his landmark book 'Black Skin, White Masks', how colonized people internalize the colonial attributions to their identities and ways of being, and thus marginalize their own roots of knowledge, culture, and being in the world. The South African Anti-Apartheid-activist Steve Biko (1971) coined the phrase, that the "most potent weapon in the hand of the colonizers is the mind of those whom they oppress."

Decolonization is relatedly understood as the process of addressing and 'undoing' the impact of colonialism in all aspects of life of the colonized people, including knowledge and science. In the context of the here presented reflections, the term refers to decolonizing knowledge production and transfer in the psychosocial sector.

"The most potent weapon in the hand of the colonizers is the mind of the oppressed."

Steve Biko, 1971

A process of decolonizing knowledge production includes:

- uncovering and unpacking how the hegemony of theories and practices developed in Western contexts and its decontextualized transfer elsewhere as well as the marginalization of local knowledge and practices perpetuate mechanisms of colonization

- denaturalizing and critically reflecting on assumptions and concepts of dominant knowledge systems and science

- normalizing, uncovering and strengthening local knowledge and marginalized perspectives (see Adams et. al, 2015).

In our workshops, intense discussions evolved around the very definition of colonial experience. While in most international debates, colonialism refers to the invasion, occupation, exploitation, and submission of local populations by European colonial powers, Kurdish colleagues explored also the uprooting of Kurdish identity, culture, belief systems, language, and more, by the process of Islamization and the reign of the Ottoman Empire, as well as how, by the repressive policies and hegemonic cultures of the nation states, Kurds were scattered across after World War I.

At this point, it is important to underline that participants of the workshops embarked on addressing questions of coloniality and decolonization from completely different contexts and speaking positions. For German participants, it proved to be crucial to denaturalize their own assumptions, and to contextualize and historicize their conceptual and professional frameworks, and step back from the temptation to take teaching positions.

Kurdish and South African colleagues were constantly torn between a fundamental critique of the Western dominance in knowledge production (mostly equated to positivist, clinical and individuum-centered knowledge) and the search for genuine understanding of wellbeing, suffering, and healing on the one side; and fears of re-valuing and legitimizing traditional and faith-based practices they strive to leave behind. For example, the question, "Do we need a Kurdish psychology?" was discussed alongside the fears of local participants to unintentionally foster nationalist, fundamentalist, and traditional narratives.

A red thread in our discussions was the continuous unpacking of internalized colonial assumptions – sometimes evident, sometimes subtle – in both thinking and language on all sides. An example is the perception of 'Western' knowledge as 'scientific' and associated to modernity and progress, while looking at local knowledge as 'traditional', remote, or less scientific. But also, dualisms such as 'European societies are individualistic, Eastern societies are collective and family-centered' were critically addressed in their tendency to essentialize and perpetuate processes of othering.

From our different speaking positions, we came to a common understanding that when referring to the decolonization of knowledge, we do not intend to reproduce polarizing dualisms, such as East versus West, South versus North, local versus global, spiritual versus professional, or traditional versus scientific knowledge.

Referring to social work, Gray states that "decolonization of social work first and foremost means acknowledging and harnessing the strengths of indigenous communities rather than engaging in blaming games that compound (the) deleterious effects of several hundred years of colonization" (Gray et al. 2013, p. 19).

"Why do we need the reference to Romeo and Juliet to valorize Mem u Zin?"

Workshop participant

Mem û Zîn is an ancient Kurdish epos on an unfulfilled love, orally transferred through generations and first written down by the Kurdish poet Ehmedê Xanî (1651-1707)

Instead, workshops and reflection spaces should strive to understand theoretical concepts, and practice approaches both from the Global North and the Global South in their historical and contextual embedding, and to unpack underlying assumptions, beliefs, interests, and science systems and critically reflect them. Thus, a continuation of in-depth exchange of knowledge across contexts is needed with an orientation towards identifying locally relevant theories and practices oriented towards social change rather than uncovering 'local pureness.'

Decolonial theorists talk about adopting an epistemic modesty (Teo, 2019) in respecting and understanding and challenging different approaches from different contexts. The need for unlearning truths and de-normalizing our assumptions was underlined in the reflection process. One way to do this is to understand concepts, schools, and theories as useful metaphors, which may be useful in a particular historical and political time and context, rather than representing the ultimate truth about human beings. In this way, rather than searching for the one truth, we can increase our joint pool of metaphors for understanding and addressing challenges across contexts.

In our discussion process around the question of decolonizing psychosocial knowledge our driving questions were:

How to uncover and strengthen local knowledge without 'romanticizing' traditional knowledge, fostering 'knowledge nationalism' or essentializing or culturalizing local colleagues' knowledge?

How to avoid dichotomization between Western and local knowledge – how to instead historicize, contextualize and critically reflect Western and local concepts and approaches?

How to organize in-depth exchange of knowledge across contexts, oriented towards emancipatory psychosocial knowledge and practices for social and political change rather than 'local pureness'?

How to address socio-economic and professional boundaries and language barriers beyond content?

4.6 | Local knowledge – local practice

Within the critical discourse on the hegemony and colonial aspects of Western knowledge and its claim for universalism, much attention has been given more recently to notions of local knowledge, traditional knowledge or indigenous knowledge in social sciences. These notions refer to knowledge developed in countries of the Global South and/or in colonialized and oppressed communities. Here, local or indigenous knowledge is understood as "the main component in the indigenization process, in learning of local needs, diversity and pluralism and developing practices that are culturally appropriate within local contexts" (Gray et al., 2013).

In 2014, the International Federation of Social Work integrated the notion of indigenous knowledge into their global definition of social work, thus including reflections on the influence of postcolonial theories and giving credit to postcolonial thinking[27].

While the importance of this shift from Western universalism to the consideration of alternative forms of knowledge is undisputed, the often made-up, artificial dichotomy between global and local, and between Western and Indigenous knowledge, brings its own problems.

First, there is an underlying assumption about the existence of cultural boxes, of closed knowledge systems, which is to be questioned in a globalized world with constant migration of people, concepts, and knowledge. Cultural theorists like Stuart Hall (1994) and Homi Babha (1994) have challenged the definition of cultural identities and critically analyzed the essentializing and othering aspects of the very notion of culture. They emphasize instead the continuous transformation of cultural positioning, and its contextual embeddedness. In our discussions we have strived to be more critical in using the notion of culture and instead rather talk about context.

Furthermore, there is - as stated before - a tendency to consider local knowledge largely as related to traditions, cultural patterns, customs, and local beliefs, leading to the explicit striving to uncover such 'traditional knowledge' as a 'pure' knowledge, not distorted by colonial influences, with a tendency to romanticize traditional knowledge.

More recently, European psychologists and social workers working in refugee and migrant contexts increasingly refer to Middle Eastern colleagues in order to learn from their expertise in dealing with extended families, frameworks of honor and shame, and phenomena such as forced marriages. While this is an example of learning from local colleagues, this exchange purely focuses on the local colleagues' very specific knowledge of dealing with extended families in Islamic shaped contexts and is less interested in their broader theoretical frameworks. Local colleagues' experience is thus culturalized.

To be clear here: the uncovering of and reference to traditional, spiritual, and faith-based practices or of traditional bargaining and mediation processes between families of communities in the Kurdistan Region of Iraq, should not be dismissed or belittled but should rather become the subject of systematic research contributing to a deeper understanding of local people's trust in these, carefully reflecting at the same time on the related risks of legitimizing and further strengthening traditional structures.

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[27] International Federation of Social Work (2014). Global definition of social work. Available at: https://www.ifsw.org/what-is-social-work/global-definition-of-social-work/

Our understanding of local practice is expansive, encompassing a deeper exploration on how individuals and communities, often shaped by repeated exposure to adversity, have navigated suffering and loss. It examines the individual and collective coping strategies they have developed in response to these challenges. And it strives at a systematic documentation and systematization of the experience and expertise of local practitioners, and the strategies they have developed in their extensive work with victims of political, social and gender-based violence and displacement.

4.6.1 Examples of local practices

The following are examples of local psychosocial processes and practices from colleagues participating in the workshops. They encompass a broader conceptualization of how psychosocial experience may be recognized, acknowledged and strengthened in different locally-relevant ways.

Example 1: Local strategies in dealing with mass violence and trauma: women Anfal survivors in the Garmian region[28]

Under the code-word Anfal, the Iraqi Baath-regime conducted a vast military operation against the Kurdish region in 1988, deporting and killing more than one hundred thousand men and women and destroying thousands of Kurdish villages (Human Rights Watch, 1993). Survivors were held in detention for months and later forcibly resettled in camps. For a further 15 years, they lived in uncertainty about the fate of their deported relatives and in precarious economic situations. For the women among them, social marginalization added to economic constraints. Within a patriarchal and traditional rural environment, their legal and social status as women without men was unclear. They had to work hard to survive and feed their children, and yet were exposed to stigmatization when doing so. They were constantly torn between the struggle for survival on the one hand, and the dominating gender patterns on the other.

Their most powerful resources in coping and surviving were their children and their strong collective network: helping each other, jointly going to work, and raising their children together. They developed a specific way of speaking about their experience during Anfal and in the aftermath, interweaving their own stories with those of other women into one collective and shared Anfal narrative. In the midst of adverse existential conditions, this collective way of narrating Anfal made it possible for them to speak out, and at the same time gain protection within the group from overly painful exposure to their individual traumatic memories. Thus, they found a specific way of dealing with what Judith Herman (1992) describes as the central dilemma of trauma: the wish to speak out on the one hand, and the desire to silence the experience on the other.

The situation of women Anfal survivors' changed only after the demise of the Baath-regime in 2003 and the following political and economic stabilization of the Kurdistan Region. They gained painful certainty about the death of their deported relatives. They received pensions and housing and, together with their meanwhile grownup children, started to reconstruct their family and social networks. Today, they still suffer from the multiple psychological impacts of violence, loss, and hardships, but most of them reject defining their suffering in psychological terms. Moreover, they reject the very idea of healing, which is associated with a betrayal of the dead and of their own identity as Anfal survivors, which brings both stigma and distinction. Indeed, approaching the women with individual trauma-therapies would not only fail to meet their articulated needs, but would also individualize them and thereby undermine their consoling and empowering collective structures.

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[28] The example refers to the project "Memorial Forum for Women Anfal Survivors," initiated by a group of women Anfal survivors in Rizgari, Germian region (KRI), and supported by the German NGO HAUKARI e.V.. See also Mlodoch (2014).

In the town of Rizgary in the Garmian area in the South of the Kurdistan Region, a group of some hundred women Anfal survivors have been campaigning for a self-designed and self-administered memory site to represent their specific suffering as well as their strengths during and after Anfal. The site is designed to be a place of remembrance as well as a social forum for them to maintain their collective structure and jointly advocate for political acknowledgement. For more than ten years, they have been meeting with local and international architects and artists, as well as Bosnian and Rwandan survivors of genocide, and they have visited Holocaust memorials in Germany to discuss the design of the memorial. They have successfully campaigned to be assigned a construction site for the memorial and a budget from the Kurdistan Regional Government. Through the project, they have been strengthening their collective structures and created multiple spaces for jointly processing their individual and collectively shared memories. They have significantly contributed to challenging the dominant national Kurdish discourse on Anfal, which depicts women survivors as passive mourning victims, and instead established a counter-narrative of strong women. They have also brought their claims into the public debate. Thus, the project combines psychosocial and even therapeutic aspects with empowerment and the strengthening of survivors' self-organization structures[29].

Example 2: Family mediation strategies in local professionals' psychosocial work with women survivors of gender-based violence[30]

Multiple women's organizations in the Kurdistan Region of Iraq offer counseling and support to women affected by domestic violence. This example here refers to the KHANZAD social and cultural organization, based in Slemani, but represents an approach which is widely shared by other local NGOs. They closely cooperate with governmental institutions, given that women who flee their families and seek support are often in life-threatening situations, and close cooperation with police, judiciary, and governmental shelters is essential for protecting them. Moreover, the dominant concept of family honor and shame does not consider independent life perspectives for women outside the family context, and social control is too tight to allow women to live with alternative identities anonymously out of reach of their families. In addition, the family context is the mainstay of social relations, the central source of a sense of belonging and emotional support, and the reference system of identity. Consequently, most of the counseling processes focus on family and community counseling and mediation as central strategies for women's counseling projects like KHANZAD, as well as in governmental DCVAW-counseling centers.

In the counseling process, priority is given to the woman's safety, for example by referring her to a government refuge in a life-threatening situation. Counselors will outline different legal options, from denouncing perpetrators, to more reconciliatory approaches of family reunion, and will encourage the woman to make her own decision regarding the aim of the counseling process. If she opts for legal measures, she will be accompanied by the KHANZAD team throughout all judiciary steps. However, in most cases, the counseling team engages in intense family mediation processes, often over several months, together with or on behalf of the concerned woman, and with both her father's and her husband's family. Through family mappings they identify potentially supportive family members and engage them, as well as external moderators such as teachers, religious leaders or local politicians in the locations concerned. In confronting the perpetrators, they use a combination of threatening them with legal sanctions on the one hand and offering conciliatory approaches on the other hand, thereby negotiating solutions step by step. Solutions might be, for example, the reconciliation of wife and husband under the condition of continuous follow-ups; or a father's family consent to the daughter's divorce with guarantees of reintegrating her into the family.

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[29] The Women Anfal Survivors Memorial Forum Project has been supported by the German NGO HAUKARI since 2009 with funds from the German Federal Foreign Office. For more information see: www.haukari.de

[30] This chapter is based on reports and information given by the local NGO social and cultural organization KHANZAD, engaged in protection and counseling for women in situations of crisis and violence.).

Today, feelings of satisfaction and pride at having brought up their children without societal and male support exists alongside their sense of suffering, and they strongly and collectively articulate their claims towards the Kurdistan Regional Government, the Iraqi government, and the international community, for justice, compensation and political acknowledgment, as well as for memory sites to honor victims and survivors.

Local psychosocial counselors have developed rich and sophisticated tools and skills in accompanying women through such mediation processes and often reach solutions even in highly escalated situations which involve the threat of honor killings, by convincing the harassers to renounce the killing of their daughters or wives and sign such a renouncement at court. The mechanism at work here is that at the very moment when the DCVAW or the KHANZAD counseling team – often accompanied by a lawyer or even police – enter in negotiations (which include family, and external stakeholders such as local authorities and religious leaders) the private family issue is brought into a semi-public sphere. This intervention opens a door for fathers/brothers threatening to kill their daughters/sisters when they are themselves under pressure by their peer group to restore their 'honor'. It gives them a way to refrain from the murder without losing face by pointing to political interests, possible damage to their region, or legal sanctions involved. Once they refrain from the honor killing decision, the door is also open for a conciliatory solution and, in some cases, even for the return of the respective woman into her family and the restoration of family ties.

These mediation processes build upon community reconciliation processes inherent to the local context but have been further developed into a women-centered psychosocial counseling tool. However, local counselors are well aware that family reunion is not always the best choice from the women's individual perspectives. Indeed, there is intense reflection among the counselors involved on the tendencies of such family approaches to consolidate repressive family systems. Therefore, besides individual counseling, both governmental offices and civil society organizations are engaged in awareness raising and educational activities, in campaigns for women's economic independence and free choice of partners, and in political advocacy against gender-based violence and for gender equality.

Example 3: Psychosocial support to Yezidi women enslaved by ISIS – the campaign "My Mother's Name is My Name"[31]

Another example is the holistic support of local women organizations to Yezidi women, who survived ISIS massacres. In August 2014, ISIS militants killed some five thousand members of the Yezidi community in the region of Sinjar. Some six thousand women were deported, kept in captivity, enslaved and raped, for months or sometimes for years. Up to three thousand women are still missing[32]. Others were liberated or could escape from their ordeal and returned back to their communities, often with one or more children born out of rape. Here they faced mistrust and rejection and were forced to choose between giving their children up for adoption and returning to their families or living with their children outside their families and communities (e.g. in shelters).

Local organizations like the Slemani-based People's Development Organization (PDO) and the Erbil-based EMMA-Organization for Human Development set up support programs for these women which embraced psychotherapeutic and trauma care, the establishment of safe spaces for the women and their children to live, spaces for self-organization in peer groups, and educational activities.

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[31] This paragraph goes back to reports and information given by the local NGP People's Development Organization, one of the founders of the Campaign

[32] See: About the Genocide. https://www.nadiasinitiative.org/the-genocide

At the same time, these organizations have engaged in negotiations with Yezidi religious leaders and community elders for treating the surviving women with dignity and respect and reintegrating them into the community. While this was partly successful with regard to the community's acceptance of the women themselves, the situation of the children born out of rape remains challenging. Not only do they suffer from separation from their mothers, stigmatization and rejection by the community, but furthermore, with their fathers being unknown ISIS combatants, and given that the legal and citizen rights procedures in Iraq and the Kurdistan Region are bound to patrilineage, they are also denied registration, documents, and citizen rights, and thus access to school education and life perspectives.

In 2018, a group of local NGOs and former parliamentarians engaged in the campaign "My Name is My Mother's Name" to support children of Yezidi women born out of rape and more broadly all children born out of wedlock and facing issues with civil registration. The campaign addresses the children's need for recognition of lineage through their mothers when the father is unknown. The campaign advocates for amendments to the Iraqi National Card Law No. 3 of 2016 to allow for the recognition of maternal lineage in the Civil Registration.

Since the campaign's inception in 2018, organizers conducted a series of meetings and workshops with judges, legal scholars, NGOs, and government stakeholders in the Kurdistan Region and in Federal Iraq, and prepared a proposed draft to amend Articles 19 and 20 of the Iraqi National Card Law No. 3 of 2016, with the aim of finding a reasonable legal solution to registering children born out of wedlock and with unknown fathers under their mother's name.

This campaign is an example of contextual psychosocial support which addresses the root foundations of wellbeing - of belonging in society with structural and social integration - through legal measures. It emerged from listening deeply to the context-specific challenges prioritized by Yezidi women with children born out of rape. The engagement in the campaign is an example of solidarity achieved through addressing collective advocacy concerns and complements the psychosocial support offered, including individual and family case management, counseling and referral for specialized psychosocial services.

We refer to an understanding of local knowledge as local experience, not tradition or cultural practice. Our procedural definition of local knowledge is the sum of the experiences and knowledge that local communities have developed in coping with violence, loss, and adversities, and that academics and practitioners have gained in their daily practice.

Documentation and systematization of such practices is an important step towards the contextualization of psychosocial knowledge and practice.

CHAPTER FIVE

Ingredients for engaging in cross-contextual
exchange on the contextualization and decolonization
of psychosocial knowledge

5 INGREDIENTS FOR ENGAGING IN CROSS-CONTEXTUAL EXCHANGE ON THE CONTEXTUALIZATION AND DECOLONIZATION OF PSYCHOSOCIAL KNOWLEDGE

The section below reflects our lessons learnt on the basic conditions for engaging in a meaningful cross-contextual exchange on the contextualization and decolonization of psychosocial knowledge.

5.1 | Safe space

The creation of a safe space for open and critical reflection was regarded by many participants as one of the most significant achievements of the contextualization workshops at Mastura Institute. In reflecting on how this was practically achieved, the following aspects were noted:

Continuity: Participants of the workshop series were asked for a strong and continuous commitment to the process with continuity of presence in workshops and discussions.

Shared ground values and respectful communication: Participants explicitly agreed on shared ground values for the reflection process: An attitude of self-reflection and mutual learning and respectful communication in each interaction. A culture of **asking, not assuming** was established. For example, during discussions individual participants occasionally used English terminology or specific technical terms related to their professional realm, which were difficult to understand for other participants.

> "The atmosphere of discussion was such that everyone seemed to be in the same scientific and cognitive position. It was not like university lectures, there were no teachers and students, but all were teachers and everyone was a student"
>
> **Workshop participant**

Creating an atmosphere, in which all participants felt encouraged to ask each other for explanation and unpacking of complex terminology or theoretical assumptions, was a big achievement.

Equality: Participants came from all age and gender groups, different professional groups, academia and practice. Equality among participants was encouraged and the importance of recognizing experience and expertise, not professional qualification was emphasized. As many participants are enrolled in local universities and/or working in civil society organizations of governmental institutions, it was emphasized that they speak and are addressed as individuals, not as delegates of their organizations or institutions.

Access: There was a process of continuously discussing and adapting frameworks (e.g. time schedules) to the participants' specific challenges, e.g. work load, mobility, parental responsibilities etc. so to accommodate each participant's access to the workshop equally. Workshops took place after working hours or on weekends, which allowed the participation of colleagues with extensive practical work load.

Ownership: Workshop topics, agendas and the invitation of external guests and referees were jointly discussed as well as agenda changes when burning issues came up.

Time: Abundant time was given to individual presenters and to discussion. Presenters were not rushed by narrow time-limits, and emphasis was given to the flow of discussion processes rather than sticking to the workshop agenda.

Open process: It also proved important for the exchange not to be goal-driven and output-oriented. We did not have specific deadlines, or pre-defined goals to reach, and could therefore engage in an exchange which was oriented at relation-building and learning, not at specific pre-defined outputs.

> "It's a beautiful space where everyone listens to each other, talks and at the same time listens to someone's experience and expertise. This has always been a process of knowledge production for me."
>
> **Workshop participant**

The evaluation among participants shows the outstanding importance of creating a safe space for open reflection as a precondition for engaging in a deep and mutual exchange across disciplines and contexts. It also shows that a culture of mutual learning, respectful communication and equality across age, gender and professional groups help to create safe spaces and foster a sense of ownership among participants.

A cross-contextual exchange on the contextualization of psychosocial knowledge and the decolonization of knowledge production requires first and foremost a safe space based on mutual respect and learning. There is a need to adapt frameworks and address socio-economic, time, and mobility constraints, in order to make the space accessible for participants across professions, disciplines, age groups, gender groups, and socio-economic contexts. This process benefits from a freedom to de-couple one's input from one's institutional belonging and representation, in order to allow critical and reflective exchange, as opposed to representing an institutional position, approach or reputation.

5.2 | Multi-disciplinarity

All participants appreciated the multi-discipline exchange and the inclusion of arts as an important realm to reflect on and address psychosocial problems on an emotional, creative, and nonverbal level. It was emphasized that each discipline brings different strengths to develop a uniquely holistic approach to psychosocial work.

> "There is something that makes me very happy (...)It is that things are looked at in many ways. At least, this work seems to be viewed from different perspectives and methods. It's a multi-method world."
>
> **Workshop participant**

It was noted that the multi-disciplinary perspective helps to break out of closed circle thinking and language related to the individual disciplines. Multi-disciplinary spaces urge and encourage participants to explain more in depth their concepts, their origin, and underlying assumptions. They also help to lower barriers in asking each other for deeper explanations of terms and concepts.

Debates on psychosocial theory and practice benefit from exchange across scientific disciplines, which bring in different strengths to develop holistic psychosocial approaches. Beyond content, multidisciplinary exchange encourages us to think 'out of the box' and enhances our own self-reflection on the concepts we refer to and the underlying assumptions and challenges.

5.3 | Key competencies - self-contextualization, self-reflection, critical thinking

The space created in Mastura "represents the Freire curriculum on dialogue. I mean that dialogue should start from the bottom up and gradually expand. Let all the members speak, let different people speak, let them all have their own opinions, and let them not have a filter."

Workshop participant

Most of the participants stated that they initially joined the workshops with a hunger for broader, challenging thinking and new ideas. One participant recommended the workshop to a friend by saying "If you want to get out of an idea, come and listen to these meetings."

The evaluation of our exchange shows the great importance participants give to a space of critical reflection, self-reflection and critical thinking. They consider critical thinking not only as a key competence for engaging in debates on the contextualization and decolonization of knowledge, but also for finding practically relevant approaches in their professional work.

It was significant that the first sessions of the workshop series were dedicated to the question "What is critical thinking in our various contexts?"

Kurdish university teachers were invited to present different schools and theories of critical thinking. They introduced European schools such as the Critical Theory developed by the German Frankfurt School, but also traditions of critical thinking in Middle Eastern religious and philosophical traditions. The introduction of European critical schools was accompanied by intense discussions on the inaccessibility of related core concepts and terminology, often presented in English language, and the joint search in the group for Kurdish terms, which appropriately render their deeper meaning (see also 5.4.).

It was also discussed how the current education system in the Kurdistan Region in Iraq, which is – as stated above – largely oriented towards Western positivist science and related quantitative methods and standards of academic writing, does not allow for (in fact it even discourages) critical thinking. Specifically relevant to the lecturers for taking back to their universities were the exchanges between these lecturers and participants still involved in doctoral or master study programs.

Subsequent workshop sessions were each structured around presentations by participants from the Kurdistan Region of Iraq, Germany and South Africa, and all started with an in-depth introduction of the speaker, making explicit their own context, educational background, experience, and conceptual framework: laying bare which schools, thoughts, and experience have shaped their biographies, approaches, and practices. This exercise of personal self-contextualization proved to be highly significant. It showed the strong interrelation between personal and professional biographies, context, and historical moments, thus promoting a deeper understanding among participants and contributed to creating a space of equal exchange.

Thus, it was perhaps more important to strengthen the capacity for critical thinking, self-contextualization, and self-reflection as a key aspect of decolonizing our way of thinking and speaking about psychology and social work, than coming up with particular recommended models or practices in the sector. This means that each time a new theory or model is 'imported' or even generated locally, this is critically reflected upon in terms of its historical, political, and contextual roots, and relevance for the specific Kurdish context.

> "In Mastura's conversations, the art of listening and dialogue has developed more in me. The art of accepting different opinions is another positive point that has become more attached to me."
>
> **Workshop participant**

The attitude and competence of critical thinking led, for example, to intense discussions, critically challenging psychological and psychiatric diagnoses of mental problems, the dominant definitions of health, illness, normality etc., and critically reflecting on the adoption of Western shaped therapeutic approaches in the Kurdish context.

> Critical thinking, self-reflection and self-contextualization are key competencies for embarking on a process of contextualization of psychosocial knowledge and strengthening these competencies maybe more important than coming up with recommended models of practices.

5.4 | The politics of language

The key role of language and translation in knowledge production, transfer, and exchange across contexts and in contextualization and decolonization processes has been widely discussed (see the seminal work of Spivak (1993) on the politics of translation).

Specifically, the standard use of European languages in academic contexts – and with this a whole set of related scientific traditions, citation rules, etc. - has a particular political dimension in countries that have been colonized – as in the case of the Kurdistan Region of Iraq - and perpetuates the marginalization of local voices in international debates.

Our workshops were held in Kurdish language with some presentations by German and South African participants held in English. Simultaneous translation from English to Kurdish and vice-versa was available.

Yet language and translation remained a constant challenge throughout the reflection process on various levels. The richness of the concepts introduced and discussed by participants, their historical embeddedness, the related assumptions, beliefs, and emotions, tend to get lost in translation and become somehow schematic.

Mediating professional translators' terminology is often shaped by specific vocabulary as used by international NGOs and UN agencies and the required speed of interpretation doesn't give much room for long considerations and reflections on used terminology.

Generally, it was difficult at times to find Kurdish expressions for theories and concepts and participants expressed a great need for unpacking academic and scientific terms beyond technical translation to unfold their contextual, historical, and political origins and meaning.

The challenges of language do not only refer to settings of international exchange, but also to the exchange among Kurdish participants. Local academics frequently use English terminology in presenting concepts and practices due to the lack of precise or commonly agreed upon Kurdish translation. Thus, concepts come across in a de-contextualized way and remain inaccessible for others.

Throughout our reflection process, attention was given to carefully unpacking technical and professional terms – (again: asking, not assuming) – and searching for appropriate expressions in English and Kurdish language as previously mentioned. For example, even the very term psychology (دەروونزانی in Kurdish) was unpacked, with different historical, political, and contextual forces being analyzed in developing and using such terms.

Psychology

- the study of the mind and behavior.

- In Kurdish: دەروونزانی

- "-nomy" refers to the laws or systems within a field, while " -logy" refers to the study or science of that field.

- پاشگری (...ناسی) بە رانبەر مجموعە معارفی عەوبی ، (nomy-) ی ئینگلیزی بەکار دەهێنرێت.

- پاشگری (... ژنی) بە رانبەر (علم)ی عەوبی یان (logy-) ی ئینگلیزی بەکار دەهێنرێت . بۆیە لێرەدا کەلک لە "... ژنی" وەردەگیرێت، چونکە بابەتەکە لە زانست (علم)ی بوارەکە دەدوێت . چونکە پێشتریش وشەی زانست لە "ژنین" وە گیراوە، ئێستەش پاشگری "... ژنی" بەکار دەهێنرێت.

- دەروونژنی، کۆمەڵژنی، زیندەژنی، نەخۆشیناژنی، دەرمانژنی

- ئەستێرەناسی، خۆراکناسی

- بۆماوەژنی : Genetics

An intense exchange evolved on the meaning, related emotions, and assumptions of psychological terminology in various contexts, but also more basic philosophical and scientific terms such as paradigm, world-view and even the word assumption itself.

Difficulties were not only found in translating scientific terms, but also in finding appropriate translations for basic terms related to emotions, for example to find a translation of the English term grief into Kurdish, and distinguish between grief, mourning and bereavement. There is also no specific Kurdish word for trauma. The Arabic term *satma*, which means shock, is widely used and local colleagues increasingly refer to the Kurdish term *brini daruni*, which means a wound of the soul. At the same time Kurdish people use descriptions like. "My heart is heavy," or "my heart is black," to describe the impact of trauma or depressive moods.

Participants were strongly interested in referring to the language of Kurdish poetry, literature, Kurdish proverbs etc. to find appropriate and contextualized terms for psychological, emotional and social phenomena.

Reflections were made on the political character of translation. The frequent use of untranslated English terms for example from MHPSS frameworks such as pathology, or depression, or broader humanitarian aid and development programs – such as ownership, participation, etc., or abbreviations like PTSD, CBT or NET in local debates, trainings and conferences, contributes to the formation of an 'in-group' of international and local MHPSS specialists and has an impact on these specialists' minds and attitudes, distancing and detaching them from the realities, the way of understanding, and the language of their clients and other societal and professional groups. It ultimately perpetuates the hegemony of Western, Eurocentric knowledge. It was reflected on how to encourage each other and other colleagues to use Kurdish terms in discussion with clients and other colleagues.

Thus, language is not just a barrier but a driver in both the decontextualization of concepts, and in approaches to contextualize and decolonize psychosocial knowledge.

The shared understanding that translation of terminology goes beyond syntax and vocabulary resulted in a joint activity of workshops participants to develop an English-Kurdish glossary of psychosocial terms and concepts, which will not be based on a one-term-translation but include comments on the historical roots of terms, their use, and controversies around them. Such a glossary will be developed in a joint effort by psychosocial experts AND professional translators.

"I used to think that I had to write my research in a foreign language because it was better and acceptable. But now I think it is important to pay more attention to the mother tongue so that my work does not weaken the knowledge and language of my community. We modify it according to the characteristics of the community."

Workshop participant

Participants also expressed a strong interest in doing research in Kurdish language, addressing specific context-related psychosocial issues, and at the same developing a Kurdish terminology which renders psychosocial needs and approaches accessible to a broader local audience. Such research would not only increase available resources in Kurdish language for academic and professional education, but also contribute to psychoeducation on a broader societal level. There is also a strong interest by Kurdish workshop participants in increasing the availability of Kurdish translations of psychological and psychosocial literature originally written in English or other languages.

Language is a core driver in perpetuating the dominance of Western knowledge and addressing the problem of language is a core element in processes of contextualization and decolonization of knowledge production.

Contextualization of psychosocial knowledge needs space and in-depth reflection and exchange on terminology beyond technical translation. Psychosocial academic and practice-related terms need to be carefully unpacked, understood in their historical embeddedness, assumptions, and belief systems.

Dynamic and 'living' terminology glossaries need to be developed based on such discussions and in a joint effort between psychosocial experts and professional translators, encompassing also the language of Kurdish poetry, literature, and proverbs to develop contextualized terms for psychological, emotional, and social phenomena.

Research in Kurdish language, Kurdish translation of English texts, and English translations of Kurdish research, should be encouraged to strengthen local psychosocial knowledge and terminology.

Contextualized translations of basic psychological and psychosocial literature into Kurdish language should be fostered.

5.5 | From decolonial reflections to contextualized practice

Throughout our discussions there has been an ongoing tension between critical reflection on concepts and approaches to psychosocial work, and the parallel challenge to address and 'solve' everyday practical and professional challenges. Participants stated that while unpacking concepts and terminology on a conceptual level in the workshops, they easily fell back into using recipes in everyday work with vulnerable groups. Daily work challenges, and the complexity of problems Kurdish professionals deal with on a daily base, induce pressure to come up with practical, local models or practices for psychosocial support and the evaluation of the workshops shows a strong request of local participants to introduce and share more practically relevant concepts and tools.

Space was given in the workshop series to introduce and discuss practical experience of local colleagues in psychosocial counseling for women affected by gender-based violence, refugees, and displaced people, and difficulties of colleagues educated in Europe in bridging the set of knowledge acquired in their studies with concrete challenges on the ground.

In parallel bi-monthly workshops with a broader audience, experiences of clinical psychologists were introduced as well as strategies of family-mediation in situations of gender-based violence, such as those developed by governmental and civil society organisatizations.

At the same time it was experienced that the critical reflection of theories and approaches and also the questioning of definitions of normality and deviance had an immediate impact on daily work practices. Workshop participants stated that they would listen more carefully for the client and his/her world view and opinion. They paid more attention to understand clients within a complex social context, rather than coming up with quick individual diagnoses of illness 'taking place in their heads.'

"The conversations have brought me out of seeing my cases and patients through a manual, but in their social context."

Workshop participant

It was also discussed that rather than coming up with 'recipes' or 'toolboxes' of psychosocial work, psychosocial work requires a set of basic skills such as empathy, respectful and dignified listening and communication, and a radical openness towards the counterparts' world-views, belief systems and circles of support. Such openness requires first and foremost modesty and the ability to step back from one's own professional frameworks and convictions.

Thus, the process of developing locally contextualized practical approaches is closely linked to the key competence of critical thinking, self-reflection, and mutual learning.

Yet there was a strong request and recommendation to put a stronger focus on contextualized practical aspects of psychological and social work and introduce and share locally contextualized strategies on mental health and social work relevant to their practical work.

Practitioners suggested to local academic researchers that they accompany them in their daily work with clients, document and systematize daily counseling practices, and jointly reflect on what helps, what damages, and what can be improved, thus creating a space for scientific reflection of locally developed psychosocial practice. Such research cooperation between researchers and practitioners needs careful reflection on shared ethical values and the protection of the clients.

Developing contextualized or context-tailored psychosocial practice is not about 'recipes' or 'toolboxes'. It requires careful observation, documentation, and systematization of what local people and professionals use in addressing adversities. Core competencies for coming up with contextualized practices are critical thinking and self-reflection as well as an attitude of empathy, modesty, dignified listening and communication, and a radical openness to deeply understand clients' or counterparts' world-views, belief systems and circles of support.

CHAPTER SIX

Next steps

6 NEXT STEPS

Findings and reflections from the contextualization workshops at the Mastura Institute were shared with local universities, delegates from governmental institutions (Departments of Health, Education etc.) and with other academics and practitioners on various occasions. The following recommendations for how to continue and extend the activities were made by workshop participants and local stakeholders:

Continuation of the exchange

- Promote ongoing exchange on psychosocial knowledge across contexts and including more direct exchange with other colleagues from the Global South (other countries in the Middle East, Asia, Africa, and Latin America)

- Engage in in-depth exchange with colleagues from Latin America to learn about Liberation Psychology and the Pedagogy of the Oppressed.

Outreach

- Planning for outreach activities using media and arts to counter the stigmatization of mental health issues

- Involving, specifically, young people, students, and activists in the debate on contextualization of knowledge.

Strengthening local research on contextualized psychosocial practice

- Focus more on the development of contextualized, qualitative methods for research projects in the Kurdish context and – avoiding polarizations – reflect also on locally and culturally contextualized tools of evidence-based quantitative research, which move away from medical models towards more client- or survivor-centered holistic approaches

- Conduct joint research projects with both, local and and international colleagues, on specific psychological and social challenges in the Kurdish context, jointly developing topic-tailored, context-sensitive methods

- Encourage joint evaluative research on daily practices of psychosocial practitioners in the Kurdistan Region of Iraq, e.g., with researchers accompanying practitioners, and documenting and systematizing their approaches

- Conduct meta-analyses of Kurdish research in the fields of social work and sociology

- Emphasize artistic aspects and incorporate these into research on contextualized psychosocial work, paying attention to the contribution of cinema, music, and fine arts in understanding and addressing psychological and social challenges.

Cooperation with universities

- Expand internship programs to address the theory-practice gap in university education

- Set up support programs for Kurdish Bachelor's, Master's, and Doctoral university students, including mentorship and training in research methods, providing access to sources and assisting them in publishing their work

- Cooperate with colleges and departments of local universities to contribute to a paradigm shift towards greater acknowledgment of phenomenological approaches, qualitative methods, and the embodiment of locally developed and contextualized concepts and practices of psychosocial work in academic education

- Conduct conferences in cooperation with Kurdistan universities on decolonizing knowledge production and transfer in Social Sciences.

Cooperation with governmental institutions

- Conduct workshops on how to localize and contextualize social sciences for social and psychological researchers within institutions of the Kurdistan Regional Government.

CHAPTER SEVEN

Summary and recommendations

7   SUMMARY AND RECOMMENDATIONS

Why recommendations?

A core lesson learnt from contextualization processes is that findings are context-specific and cannot easily be generalized for other contexts. Bearing this in mind, in the following section we still try to draw some summarizing conclusions and recommendations for encouraging academics and practitioners of psychosocial work in other contexts to engage in cross-contextual exchange in psychosocial knowledge and contextualization, and the decolonization of knowledge production in the sector.

Cross-contextual exchange

While it is local academics and practitioners of psychosocial work who know best what helps and what does not help in their respective contexts, we found that cross-contextual exchange between Western/Northern and Eastern/Southern experts can be helpful. This is because it challenges and encourages experts from all sides to carefully think through their own concepts and strategies of psychosocial work, as well as to uncover their historical embedment, underlying assumptions, belief systems and world views. This in turn enhances reflective processes, mutual learning, and enrichment. Meaningful engagement from different contexts requires equality, modesty, and shared leadership of contextualization processes, not merely tokenism.

Understanding the context

For developing contextualized psychosocial knowledge and practice, first and foremost a deep understanding of the respective context is essential. In planning processes of psychosocial programs, problem assessments and context analysis should not solely focus on current conflicts and related psychosocial challenges, but include a historical timeline, looking into the history of violence in the respective region, contrasting and conflicting narratives of victimhood, and taking into consideration overlapping experiences of political, gender-based, and social violence.

Inclusive approaches of psychosocial support are needed that address victims and survivors of current and past violence, refugees, their host communities, and the like, to avoid fueling further conflict or competition between victim groups. Context analysis should also address institutional and societal challenges faced by psychosocial academics and practitioners in the specific context. This includes focusing on structural weaknesses and dominant paradigms in universities and in professional education, as well as societal perceptions of psychosocial work such as stigmatization of mental conditions or rejection of professional psychosocial support.

Contextual understanding includes allowing different priorities to emerge from what was planned or expected to be addressed in psychosocial programs. For example, during a program designed with the intention to prioritize psychological counseling, it may emerge that a more important priority is to provide legal advocacy support to address a policy issue which affects many people.

Unpacking, historicizing, and contextualizing existing frameworks of trauma, psychosocial work and MHPSS

Contextualization of psychosocial theory and practice is not a one-way road of 'adjusting' existing frameworks to local context. Instead, it requires a deeper look at existing frameworks of trauma, psychosocial work or MHPSS, as well as understanding their historical embedment, conceptual framing, and the controversies around them.

This unpacking of existing frameworks includes fundamental questions such as "What definitions of normal and not normal do these frameworks convey?", "How do they conceptualize health, illness and wellbeing?" and "How do they define the relationship between the individual and the society?"

Such reflections have proved to be valuable for enabling all exchange participants to make informed decisions on which concepts and tools from these frameworks they find helpful for their own contexts and which not. It also encourages them to develop their own, context-tailored approaches.

Uncovering local knowledge and practice in dealing with suffering and psychosocial issues

Processes of contextualization of psychosocial knowledge should not strive simply to 'adapt' knowledge from international MHPSS or psychosocial handbooks to add examples of local 'cultural' practices for coloring existing sets of knowledge. Instead, these processes require an in-depth exploration of local understanding of suffering, psychological distress, and local concepts and practices for dealing with adversities and healing.

The uncovering of local practices should not be confined to specific local, traditional, cultural, spiritual, or faith-based practices but must take a broader look at how local individuals and communities, who have gone through (often multiple) experiences of war, conflict and extreme violence, have dealt with suffering and loss, and which individual and collective coping strategies they have developed.

It should also include the documentation and systematization of local practitioners' approaches, concepts, and tools of psychosocial practice in addressing psychosocial problems.

Such understanding of local practice is not searching for local 'pureness' but rather to document and systematize local strategies of dealing with psychosocial challenges both in professional and non-professional sectors. This helps to avoid the 'romanticization' of traditional practices and the 'culturalization' of local colleagues' expertise.

Safe spaces, continuity, and equality

Processes of knowledge contextualization and cross-contextual exchange require safe spaces, which do not reproduce professional or contextual hierarchies in discussions, and where all participants are considered to be teachers and learners at the same time.

The creation of such safe spaces needs:

- time and the long-term continuous commitment of participants

- shared ground rules of discussion such as respectful communication, careful and nonjudgmental listening to each other, and a culture of "asking, not assuming"

- recognizing experience rather than professional certificates or institutional positions

- speaking and being addressed as a person, not as a delegate of a university, NGO, or institution

- continuous adaptation of schedules and timeframes for discussions taking into consideration the workloads, and family and personal responsibilities of participants

- flexibility of expectations and topics to be addressed.

Multi-perspective approach

The development of contextualized psychosocial theory and practice needs the involvement of both academics from multiple disciplines (Psychology, Social Work, Sociology, Philosophy, Political Science, Law, Human Rights, Conflict, and Gender Studies) and practitioners from various professions (psychologists, social workers, and lawyers). It should also include practitioners of psychosocial work without professional education who came to psychosocial practice through NGO work or activism in human rights, women's rights, or youth and child rights.

The involvement of colleagues from areas like literature and arts has proven enriching in discovering some of the local roots and sources of psychosocial approaches, developing local-language terminology for these, as well as in developing creative tools of psychoeducation.

Multidisciplinary and multi-perspective exchange does not only enrich the search for locally contextualized concepts of psychosocial work but has proved also to encourage self-reflection and self-contextualization of individual researchers and practitioners, and to lower hierarchies and barriers between disciplines and professions, and between academics and practitioners, all helping to decrease the theory-practice gap in psychosocial work.

Core competencies and skills to be enhanced in contextualization processes

Contextualizing psychosocial knowledge is not about developing 'formulas' or 'toolkits' for specific contexts, but more about carefully uncovering existing local practices in dealing with adversities in both the professional context and within communities.

Core competencies for such discovery are critical thinking, self-contextualization, and self-reflection, as well as the ability to step back from one's own scientific and professional frameworks and radically open up to local individuals' and communities' worldviews, belief systems and related understanding of and coping with adversities.

It includes mutual epistemic modesty and a realization that all theories and models are useful metaphors, rather than 'truths' which may have different value in different settings and may be challenged and adapted over time.

It requires a willingness to collaboratively learn from and increase one's pool of theories, practices, and metaphors, rather than promoting one idea as a universal approach.

Furthermore, psychosocial practice is not so much about 'knowing,' but about basic skills and attitudes such as humility, empathy, and dignifying communication through respect.

Language

The dominance of the English language in psychosocial research, global MHPSS frameworks, international standards of psychosocial work, and local psychosocial trainings perpetuates the hegemony of Western knowledge and deeply shapes local academics' and practitioners' minds, attitudes, and practices.

It may exclude valuable contributors and contributions and can reinforce a core elite of English-speaking professionals rather than being inclusive and challenging existing hierarchies both locally and internationally. Seriously engaging with the challenge and richness of language is therefore a core element of contextualization processes.

Such engagement requires:

- the unpacking of English terms beyond technical translation: their historical roots and embeddedness, underlying assumptions, conceptual schools, and belief systems

- the careful search for terms in local languages, which render the deeper meaning of such terms

- encouraging local professionals to use local terms in discussions with clients and colleagues

- the ongoing development of a local psychosocial terminology, which reflects local people's understanding of suffering, psychosocial problems, and healing, referring also to local literature, poetry, proverbs, historical embeddedness, assumptions, and belief systems

- strengthening and supporting local research in local languages

- developing contextualized, annotated English-local language glossaries through joint efforts between international and local professionals and translators

- translating local research and publications in local languages into English and fostering their entrance in international psychosocial debates, manuals, and standards

- fostering contextualized translations of international psychological and psychosocial literature, especially from non-Western contexts, into local language

From contextualization of knowledge to decolonial approaches to knowledge production

The very process of contextualizing knowledge is inherently linked to the process of decolonizing knowledge. It requires addressing the historical embeddedness of knowledge systems, the global dominance of Eurocentric/Global North centered knowledge, and the intertwined relation between knowledge and power, including the colonial structures that have shaped knowledge production and transfer.

It requires a direct engagement with power relations, such as those held by donors and through the funding of dominating models of psychosocial and other interventions, to foster greater diversity, mutual collaboration, and self-reflexivity.

It calls for unpacking complex socio-political histories behind knowledge and concept formation, including recognizing waves of resistance to certain dominant frameworks within each context. Rather than dismissing all previous approaches, it seeks to create space for the emergence of new, contextually relevant knowledge.

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Detail from the International Conference "Social Work in War and Conflict Areas" at the University of Sulaimani, Kurdistan Region of Iraq, organized in cooperation with the Protestant University Rhineland-Westphalia-Lippe in Bochum, Germany and HAUKARI-Association for International Cooperation, Germany, in October 2019.
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CONTRIBUTORS

Luqman Saleh Karim

Based in Slemani, Kurdistan Region of Iraq. PhD in Social Work. Ass. Prof. at the Social Work Department, University of Sulaimani, Kurdistan Region of Iraq. Researcher, evaluator, supervisor, trainer and counselor in psychosocial theory and practice. Founding member and Director of the Mastura Institute of Applied Science in Psychosocial Work.

***Mam Polla* (Jamal lbrahim)**

Based in Slemani, Kurdistan Region of Iraq. B.A. degree in Political Sciences from the University of Sulaimani. Founding member and project coordinator of the German based NGO HAUKARI – Association of International Cooperation. More than thirty years of experience in humanitarian and development work with a focus on empowerment projects for survivors of violence and young people and the integration of psychosocial work and arts. Founding member of the Mastura Institute of Applied Science in Psychosocial Work.

Niyaz Salih Fatah

Based in Slemani, Kurdistan Region of Iraq. Bachelor's degree in psychology. High diploma in Family Reconciliation. Working in organizations and the Slemani Directorate on Combatting Violence Against Women (DCVAW). Member of the Family Reconciliation Committee in Slemani Court. Expert in Slemani Court. Coach of Gender Based Violence Working Group at provincial level in Slemani province. Case manager, Psychologist, and Head of Communications at Khanzad Organization. Head of administration part of Mastura Institute.

Suren Abubaker Abdullah

Based in Slemani, Kurdistan Region of Iraq. Bachelor's degree in Sociology from the University of Sulaimani. Master's degree in Contemporary Sociology from the University of Leicester, UK. PhD in Sociology of Knowledge (Gender Knowledge) at the University of Sulaimani. Ass. Prof. at the Department of Sociology of the University of Sulaimani. Research on contemporary theory, social change, migration, global warming, sociology of gender, collective behaviors and social movements. Work with civil society organization as coordinator, project assistant, project manager, supervisor, trainer and researcher.

Sawen Hawre Yasin

Based in Slemani, Kurdistan Region of Iraq. M.Sc. in Clinical Psychology from the University of South Wales, UK. Contributed to non-governmental organizations (NGOs), international non-governmental organizations (INGOs), and psychiatric clinics, delivering mental health and psychosocial support (MHPSS) services. Works with survivors of violence, gender-based violence, and human trafficking, empowerment of women and youth. Research projects on gender-based violence, the efficacy of specific therapeutic approaches, effects of war, genocide and sexual abuse.

Jihad Omer Fatah

Based in Slemani, Kurdistan Region of Iraq. Master's degree in Sociology and Social Research at Newcastle University in the United Kingdom, Bachelor's degree in Law, Bachelor's degree in Sociology. Social worker at Slemani Court. Part-time Assistant Teacher at Qaiwan International University.

Aram Tofiq Hamasaiid

Based in Slemani, Kurdistan Region of Iraq. PhD in Sociology from the University of Sulaimani, with a specialization in Methodology. Social Research lecturer. Program manager for local NGOs and trainer in civil society organization. Research on cultural studies, gender studies, violence against women and girls, research methodologies, and the sociology of technology. Leads an academic center for People's Development Organization (PDO) in Sulaimani, dedicated to empowering women in leadership and political spheres.

Rawezh Nasralddin Baqr

Based in Slemani, Kurdistan Region of Iraq. M.Sc. in Clinical Psychology, University of Tabriz, Iran. Professional experience in local media. Experience in working with local teams and groups on environmental and educational developments. Experience as a therapist and as a psychological counselor.

Peshin Abdalstar Salih

Based in Slemani, Kurdistan Region of Iraq. Clinical Psychology professional with experience in psychotherapy, counseling, and mental health support. Currently pursuing a master's degree at the Doha Institute for Graduate Studies, Qatar. Trainer, counsellor and lecturer.

Nabaz Azwar Ahmed

Based in Slemani, Kurdistan Region of Iraq. PhD in Social Psychology. Founding member of the Center of Universities and Institutes of the Hamoon Organization, member and founder of the Khak Survey Center, founding member and secretary of the organization (TAKO) for psychological and social issues. Degree in Psychotraumatology from the University of Hamburg and Wings of Hope. Social worker in the Slemani General Directorate of Education and a clinical leader at the Jiyan Foundation for Human Rights.

Nechirvan Anwar Abdulla

Based in Slemani, Kurdistan Region of Iraq. Bachelor's degree in General Psychology from Salahaddin University-Erbil. Master's degree in Clinical Psychology from the Islamic Azad University, Science and Research Branch, Tehran, Iran. Assistant Lecturer at the Department of Social Work and the Department of Philosophy and Cultural Studies at the University of Sulaimani. Member of the American Psychological Association since 2025. Research fields: Psychopathology and the theoretical and practical applications of Positive Psychotherapy.

Dyari Sabir Hama amin

Based in Slemani, Kurdistan Region of Iraq. BSc in Clinical Psychology. Practical experience in the field, clinical work experience as a psychologist. Authored and co-authored several scholarly papers. Founded the Psychologia Group, aiming to foster professional development and collaboration in psychology.

Murshid Ahmed Mustafa

Based in Slemani, Kurdistan Region of Iraq. Master's degree in Clinical Psychology and Master student in sociology. Clinical psychotherapist. Founder of the Kolleng Institute of Education Studies.

Lalas Omer Muhammadamin

Based in Sulaimani, Kurdistan Region of Iraq. Bachelor's degree in Sociology, and a Master's student at the University of Sulaimani, Department of Sociology. Academic diploma in family mediation. Trainer and life coach at Buwar Institute for Family Education.

Berenice Meintjes

Based in KwaZulu-Natal, South Africa. M.A. in Clinical Psychology. Previous Director of Sinani – KwaZulu Natal Programme for Survivors of Violence, South Africa. Researcher, trainer, consultant and evaluator in community based psychosocial projects in various African countries, Balkans, Pakistan and Kurdistan Region of Iraq. Founding member of the Mastura Institute of Applied Science in Psychosocial Work.

Karin Mlodoch

Based in Berlin, Germany. PhD in Psychology. Ass. Prof. of Social Psychology and Intercultural Practice at the Sigmund Freud University Berlin. Founding member of HAUKARI – Association of International Cooperation. Research and practice in psychosocial support and empowerment projects for survivors of political, social and domestic violence in Kurdistan-Iraq. Founding member of the Mastura Institute of Applied Science in Psychosocial Work.

Kyra Gawlista

Based in Berlin, Germany. B.A. degree in Communication and Translation from the University of Hildesheim/Germany and Master's degree in Cultural Relations and Migration from the Sigmund Freud University Berlin. Working experience with refugees in Germany. Research consultant to the Mastura Institute of Applied Science in Psychosocial Work and project management at HAUKARI – Association of International Cooperation.

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