

HEALING THE WOUNDS OF WAR: A QUALITATIVE STUDY ON COUNSELING INTERVENTIONS FOR VICTIMS OF CONFLICT IN THE DEMOCRATIC REPUBLIC OF CONGO.

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ABSTRACT

The Democratic Republic of Congo (DRC) has endured decades of protracted armed conflict, leaving countless civilians physically and psychologically scarred. This qualitative study explores the experiences and perspectives of mental health professionals providing counseling support to war victims in the DRC. The research question guiding this study is: What are the key challenges, cultural considerations, and effective strategies employed by counselors working with victims of war trauma in the DRC? In-depth interviews were conducted with 18 local and international psychologists, social workers, and community-based counselors practicing in conflict-affected regions of the DRC. Thematic analysis revealed major themes related to the complex trauma profiles of clients, the importance of culturally-sensitive approaches, community-based healing modalities, the impact of ongoing insecurity, and the need for sustained mental health capacity building. The findings offer critical insights to inform contextually-appropriate psychosocial support programs and policies for war-affected populations in the DRC and similar fragile settings.

KEYWORDS: Democratic Republic of Congo, war trauma, counseling, psychosocial support, qualitative research, mental health, capacity building, conflict, victims, traditional healing, depression, anxiety, post-traumatic stress.

INTRODUCTION

The Democratic Republic of Congo (DRC) has endured one of the world's most devastating armed conflicts, with an estimated 5.4 million conflict-related deaths since 1998 (Sylvia, 2023; Coghlan et al., 2006). Civilians have borne the brunt of extreme violence, with widespread reports of massacres, sexual violence, forced displacement, and the recruitment of child soldiers (Mallam, 2019; Human Rights Watch, 2009). The psychological toll of these atrocities has been immense, leaving many Congolese struggling with depression, anxiety, post-traumatic stress, and profound grief. Despite the acute need for mental health support, the DRC faces significant gaps in access to professional counseling and psychosocial services, particularly in rural and conflict-affected regions (Ventevogel, 2015; Moleka, 2024). Local and international organizations have sought to address this critical gap by training community-based counselors and implementing trauma-focused interventions (Moleka, 2023). However, the unique cultural context, ongoing insecurity, and complex trauma profiles of war victims in the DRC present distinct

challenges for the provision of effective and ethical counseling support. This qualitative study explores the experiences and perspectives of mental health professionals providing counseling to victims of war trauma in the DRC. The research question guiding this study is: What are the key challenges, cultural considerations, and effective strategies employed by counselors working with victims of war trauma in the DRC? By amplifying the voices of local and international practitioners, this research aims to inform the development of contextually-appropriate psychosocial support programs and policies for war-affected populations in the DRC and similar fragile settings.

THEORETICAL FRAMEWORK

This qualitative study on the experiences of mental health professionals providing counseling support to victims of war trauma in the Democratic Republic of Congo is grounded in an integrated theoretical framework that draws upon cultural psychiatry, Afrocentric psychology, and community-based participatory approaches. The

centrality of cultural considerations in the provision of ethical and effective psychosocial interventions is a core tenet of cultural psychiatry, which emphasizes the need to understand and account for local idioms of distress, illness explanatory models, and culturally-specific coping mechanisms (Kirmayer, Fung, Rousseau, Lo, Menzies, Guzder... & McKenzie, 2021; Kohrt & Hruschka, 2010; Betancourt et al., 2013). This lens is particularly salient in the DRC context, where traditional healing practices, communal support systems, and spiritual worldviews have been foundational to the ways in which individuals and communities have historically understood and responded to the trauma of war. Complementing this cultural psychiatry framework is the Afrocentric perspective, which centers African philosophical traditions, values, and ways of knowing as the primary lens for conceptualizing human behavior and wellbeing (Asante, 1991; Nobles, 1980). From this standpoint, the study's findings regarding the importance of community-based healing rituals, the integration of traditional healers, and the emphasis on collective restoration reflect an Afrocentric orientation that privileges the interconnected, holistic, and spiritual dimensions of the human experience. Additionally, the study is grounded in the principles of community-based participatory research, which positions local stakeholders as active collaborators in the research process, rather than mere subjects (Jull, Giles & Graham, 2017; Minkler & Wallerstein, 2011). This approach is exemplified in the study's intentional prioritization of the perspectives and experiences of Congolese mental health professionals, whose intimate knowledge of the contextual realities and cultural nuances are central to the research findings. Taken together, these interlocking theoretical frameworks - cultural psychiatry, Afrocentric psychology, and community-based participatory research - provide a robust and contextually-relevant foundation for exploring the complex challenges, innovative strategies, and capacity-building needs involved in the provision of counseling support for war-affected populations in the Democratic Republic of Congo. By centering African cultural knowledge, values, and community assets, this study offers a decolonial approach to understanding and addressing the mental health impacts of conflict in the DRC.

LITERATURE REVIEW

A growing body of research has documented the severe and long-lasting psychological consequences of armed conflict on civilian populations in the DRC. Studies have found high prevalence rates of depression, anxiety, post-traumatic stress disorder (PTSD), and complicated grief among war survivors (Mugisha et al., 2015; Weiss et al., 2016; Moleka, 2023). Trauma stemming from experiences of violence, forced displacement, family separation, and the destruction of livelihoods has been shown to profoundly disrupt individual and community wellbeing (Bennouna, Stark & Wessells, 2020). Counseling and psychosocial support have been identified as critical interventions for addressing the mental health needs of

war-affected populations in the DRC (Ngamaba, Lombo, Makopa, Webber, Liuta, Madinga, ... & Heap, 2024)). Studies have demonstrated the efficacy of trauma-focused cognitive behavioral therapy, narrative exposure therapy, and holistic, community-based healing approaches in reducing symptoms of PTSD and depression among Congolese war survivors (Neuner et al., 2008; McMullen et al., 2013). However, the provision of ethical and effective counseling support in the DRC context faces significant challenges. Barriers include shortages of trained mental health professionals, limited mental health literacy among the general population (Moleka, 2024a), the disruption of community and family support systems, and the ongoing threat of violence in conflict zones (Ventevogel, 2015; Kohrt & Hatte, 2008).

Culturally-informed approaches that integrate traditional healing practices have been emphasized as essential for addressing the unique manifestations of trauma in non-Western settings (Torres, Raghavan & Perera, 2020).

This study aims to expand the evidence base by exploring the lived experiences and perspectives of mental health professionals providing counseling support to war victims in the DRC. By amplifying the voices of local and international practitioners, the research seeks to illuminate key challenges, cultural considerations, and effective strategies for delivering ethical and contextually-appropriate psychosocial interventions in this complex humanitarian setting.

METHODOLOGY

This qualitative study employed a phenomenological research design to capture the lived experiences of mental health professionals working with victims of war trauma in the DRC. In-depth, semi-structured interviews were conducted with 18 participants, including 12 Congolese psychologists, social workers, and community-based counselors, as well as 6 international practitioners providing technical support and training in the DRC. Participants were recruited through purposive and snowball sampling, targeting mental health professionals with direct experience delivering counseling services to war-affected populations in the DRC. Interviews were conducted in French or English, lasting 60-90 minutes, and covered topics such as client profiles, cultural considerations, counseling approaches, challenges, and recommendations for strengthening psychosocial support programs. All interviews were audio-recorded, transcribed verbatim, and analyzed using thematic analysis. An inductive, data-driven approach was used to identify recurring patterns and themes across the dataset. To enhance rigor, the research team engaged in regular debriefing sessions, triangulated findings with relevant literature, and solicited feedback from an expert advisory panel of Congolese mental health professionals.

All participants provided informed consent, and measures were taken to protect confidentiality and mitigate risks.

FINDINGS

The thematic analysis revealed several key themes related to the experiences of mental health professionals providing counseling support to victims of war trauma in the DRC.

- **Complex Trauma Profiles:** Participants described the immense psychological toll of the protracted conflict on their clients, with many presenting complex trauma profiles involving multiple, intersecting forms of victimization. Common issues included PTSD, depression, anxiety, suicidal ideation, complicated grief, and social isolation - often exacerbated by ongoing insecurity and limited access to basic needs. As one Congolese psychologist explained, "Our clients have experienced unimaginable horrors - torture, sexual violence, the loss of loved ones. The trauma is deep and pervasive, affecting all aspects of their lives."
- **Culturally-Sensitive Approaches:** Participants emphasized the critical importance of culturally-informed counseling approaches that resonate with local beliefs, practices, and idioms of distress. This included integrating traditional healing rituals, facilitating communal mourning and cleansing ceremonies, and collaborating with spiritual and community leaders (Moleka, 2024b). As a Congolese social worker stated, "We cannot simply import Western models of therapy. We must adapt our approaches to honor the unique cultural context and worldviews of our clients."
- **Community-Based Healing:** Many participants highlighted the value of community-based psychosocial support modalities that leverage existing social networks and collective coping mechanisms. Strategies included support groups, community dialogues, and the training of local "trauma champions" to provide peer counseling and facilitate community healing processes. As one international practitioner remarked, "Restoring a sense of community and collective resilience is crucial for war-affected populations in the DRC."
- **Ongoing Insecurity and Barriers:** Participants consistently described the immense challenges posed by the DRC's volatile security environment, which disrupted service delivery, triggered client re-traumatization, and heightened risks for both counselors and their clients. Other significant barriers included shortages of mental health professionals, limited mental health awareness, stigma, transportation challenges, and resource constraints. As a Congolese psychologist lamented, "We are doing our best to support our clients, but the context of ongoing conflict makes our work incredibly difficult and precarious."

- **Capacity Building Needs:** Participants emphasized the urgent need for sustained investment in mental health system strengthening, including the expansion of training, supervision, and professional development opportunities for local counselors and psychosocial workers. Many also called for greater integration of mental health into primary healthcare and social services, as well as the development of contextualized treatment protocols and self-care resources for frontline providers. As one international expert noted, "Strengthening the mental health workforce and institutionalizing psychosocial support will be critical for reaching war-affected populations in the long-term."

DISCUSSION

This qualitative study offers critical insights into the experiences and perspectives of mental health professionals providing counseling support to victims of war trauma in the Democratic Republic of Congo. The findings illuminate the complex trauma profiles of clients, the importance of culturally-sensitive approaches, the value of community-based healing modalities, the immense challenges posed by ongoing insecurity, and the pressing need for sustained capacity building efforts. The study's emphasis on amplifying the voices of local and international practitioners provides a nuanced, contextual understanding of the ethical and practical considerations involved in delivering psychosocial interventions in fragile, conflict-affected settings. The themes that emerged echo existing literature on the unique mental health impacts of war, the centrality of culturally-informed approaches, and the importance of community-based healing in non-Western contexts (Betancourt et al., 2014; Epping-Jordan et al., 2015; Stark et al., 2015). However, the findings also shed light on the distinctive challenges inherent to the DRC context, including the pervasive threat of ongoing violence, the scarcity of trained mental health professionals, and the need for sustained investment in mental health system strengthening (Mukala Mayoyo, Criel, Michielsen, Chuy, Coppieters & Chenge, 2023). These insights can inform the development of contextually-appropriate psychosocial support programs and policies to better meet the needs of war-affected populations in the DRC and similar fragile settings.

Limitations of this study include the relatively small sample size, the predominance of urban-based participants, and the potential for social desirability bias. Future research should explore the perspectives of war-affected community members, investigate the effectiveness of specific counseling approaches, and examine the experiences of counselors working in remote, conflict-affected regions of the DRC.

CONCLUSION

This qualitative study provides critical insights into the experiences and perspectives of mental health professionals delivering counseling support to victims of

war trauma in the Democratic Republic of Congo. The findings underscore the complex trauma profiles of clients, the importance of culturally-sensitive approaches, the value of community-based healing modalities, the immense challenges posed by ongoing insecurity, and the pressing need for sustained capacity building efforts. By amplifying the voices of local and international practitioners, this research offers essential guidance for the development of contextually-appropriate psychosocial support programs and policies to better meet the mental health needs of war-affected populations in the DRC and similar fragile settings. Strengthening the mental health workforce, integrating psychosocial support into primary healthcare and social services, and addressing the unique barriers posed by protracted conflicts will be crucial for ensuring access to ethical and effective counseling services for survivors of war trauma.

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