

Title	Building meaningful participation in reintegration among war-affected young mothers in Liberia, Sierra Leone and Northern Uganda
Authors	McKay, Susan;Veale, Angela;Worthen, Miranda;Wessells, Michael G.
Publication date	2011-07-01
Original Citation	McKay, S., Veale, A., Worthen, M. and Wessells, M. (2011) 'Building meaningful participation in reintegration among war-affected young mothers in Liberia, Sierra Leone and Northern Uganda', Intervention, 9(2), pp.108-124. doi:10.1097/WTF.0b013e328348dfe7
Type of publication	Article (peer-reviewed)
Link to publisher's version	10.1097/WTF.0b013e328348dfe7
Rights	© 2011, War Trauma Foundation. All rights reserved. Reprinted with permission. This document is the Accepted Manuscript version of a Published Work that appeared in final form in Intervention - Journal of Mental Health and Psychosocial Support in Conflict Affected Areas. To access the final edited and published work see http://journals.lww.com/interventionjnl/Abstract/2011/07000/Building_meaningful_participation_in_reintegration.2.aspx
Download date	2026-10-14 08:45:40
Item downloaded from	https://hdl.handle.net/10468/3642

Building meaningful participation in reintegration among war-affected young mothers in Liberia, Sierra Leone and northern Uganda

Susan McKay, Angela Veale, Miranda Worthen & Michael Wessells

When young mothers, formerly associated with armed groups, return to communities, they are typically socially isolated, stigmatised, and marginalised. This creates reintegration challenges for themselves, and their communities. Their children face child protection problems such as neglect, rejection and abuse. In this paper, the authors describe an innovative field practice - community based, participatory action research (PAR) - that meaningfully involved formerly associated young mothers, and other vulnerable young mothers, in their communities. The project took place in 20 field sites in three countries: Liberia, northern Uganda and Sierra Leone. It was implemented through an academic, nongovernmental organisation (NGO) partnership. The participants were 658 young mothers, both formerly associated with armed groups and other mothers seen to be vulnerable. Within the context of caring psychosocial support, these young mothers organised themselves into groups, declined their problems, and developed social actions to address and change their situations. Some project outcomes included: young mothers and their children experiencing improved social reintegration evidenced by greater family and community acceptance; more positive coping skills; and decreased participation in sex work for economic survival.

Keywords: Liberia, meaningful participation, northern Uganda, participatory action research, reintegration, Sierra Leone, war-affected young mothers

Introduction

The marginalisation of young women and girls formerly associated with armed groups and forces has been substantially analysed by scholars, activists and practitioners. These analyses have clearly shown the discrimination and neglect in disarmament, demilitarisation and reintegration (DDR) programmes, especially within the context of sub-Saharan Africa (Annan et al., in press; Betancourt et al., 2010; Burman & McKay, 2007; Denov, 2008; Denov, 2010; McKay & Mazurana, 2004; McKay et al., 2006; McKay et al., 2010; Veale et al., 2010; Wessells, 2006; Wessells, 2010; Worthen et al., 2010). When formerly recruited young women and girls return to communities, they are typically socially isolated and experience significant psychosocial distress, which poses major barriers to their reintegration. As a result, many feel disempowered and invisible within the communities. This is particularly true for those who became pregnant, or had children because they were raped or forced into 'bush marriages' and pregnancies with male combatants. Most of these girls and young mothers, the latter group being declined as between 15 and 30 years of age, self-demobilise and settle near families or friends, where they typically encounter stigmatisation. Furthermore, their children face numerous child protection problems, such as: neglect, rejection, abuse and a high level of

vulnerability. Because of childcare responsibilities and extremely limited resources, these young mothers are hard pressed to improve their desperate situation. Isolated due to community rejection, lacking the means to create economic livelihoods and finding survival difficult, many turn to sex work or have boyfriends with whom they trade sex for basic subsistence. Some may formally engage in prostitution, which makes them additionally vulnerable to HIV/AIDS and recurring sexual violence. Others find economic livelihoods that may not serve their best interests, such as in northern Uganda, where alcohol brewing and distilling are relatively profitable and can be performed along with child care and household responsibilities, but may put themselves and their children at greater risk of violence. Few psychosocial programmes have yet been developed to support the improvement of their (post) conflict lives. Existing programmes are typically driven by implementing agencies and funder established objectives, rather than from consultations with the young mothers who are the programme beneficiaries. Also, donor assistance has often excessively targeted formerly recruited children, addressing them separately from their communities, instead of taking a more holistic approach and serving all vulnerable groups.

The *Paris Principles* (UNICEF, 2007) caution against excessively targeting specific groups for assistance. Some of the consequences of excessive targeting have been stigmatisation and the development of social divisions, which make sustainable change less likely. Yet, as observed by Annan & Patel (2009), few documented experiences or assessments of community reintegration exist, nor does good practice exist on how to create effective and participatory psychosocial programming that addresses the specific concerns of young mothers and their children, without

excessive targeting.

In this paper, the authors provide an example of how to enable participatory self-help processes and psychosocial support, combined with systematic documentation of processes and outcomes. Use of participatory methodology is well suited to promoting self-efficacy and empowerment following exposure to overwhelming events (Hobfoll et al., 2007). The methods are discussed, as are findings and challenges to using highly participatory processes that are community based and young mother centred, rather than orchestrated by agencies to achieve organisational or donor declined objectives and outputs. This approach builds on the participation of young mothers as central to supporting their reintegration within the context of the communities, and by recognising their unique strengths (Minkler & Wallerstein, 2008). Also, importantly, the authors wanted to understand reintegration and key aspects of psychosocial support from the young mothers' perspective.¹

Using participatory action research (PAR) methodology, which is detailed below, this project took place between October 2006 and June 2009 in three sub Saharan African countries: Liberia, northern Uganda, and Sierra Leone. The PAR project, an innovative field practice, was implemented through an academic, nongovernmental organisation (NGO) partnership that brought together a team from 10 different NGOs in the three countries, three African academics and four Western academics. This team worked for nearly four years, with low attrition rates among our members. Each of the 10 NGO partners selected two field sites (N = 20) that ranged from urban, to semi-urban, to rural for implementation of the PAR project, and hired and trained field staff in participative methodology. This approach is consistent with the *Machel Review's* (UNICEF, 2009) observation that

collaboration with academic institutions is a useful means of collecting the systematic evidence needed to strengthen global efforts on child protection and reintegration.

Study participants

The PAR project involved young mothers who had returned from armed groups and other young mothers deemed to be vulnerable (N = 658) in each community where our field sites were located. Approximately two-thirds of the young mothers were formerly associated with armed groups, and one-third were young mothers considered vulnerable, but who had not been associated with these groups. Eighty percent were between 16 and 24 years. Project participants were under the age of 18 when they became pregnant, but most were over 18 years when the PAR project began. These young mothers had almost 1200 children among them. A substantial percentage of participants lived in communities where they had not previously lived (35% in Liberia, 44% in Sierra Leone, and 21% in Uganda). In fact, many were integrating into unfamiliar communities instead of returning to homes that no longer existed, or where they did

not feel accepted. Others were living in camps for internally displaced people, especially in Uganda. Many of these young mothers did not know their birth dates, and verifying their ages and those of their children proved challenging and sometimes impossible (Table 1).

Our original study design aimed to have an equivalent number of formerly associated young mothers (n =15) and other young mothers, deemed to be vulnerable (n =15), at each field site. However, the location of field sites, with respect to the pattern of armed conflict in each of the three countries, affected the demographics of participants. Therefore, some sites had a preponderance of formerly associated young mothers, whereas others were primarily composed of vulnerable young mothers. All were war affected. In most sites, a mixture of both groups of young mothers occurred, with about 30 participants enrolled in each of the 20 groups. Some attrition (e.g. from moving away), and the addition of new participants, occurred over the life of the project as young mothers in the community became aware of, and wanted to join, the PAR.

The project was consistent with the recommendations of the *Machel Review* (UNICEF, 2009), which advocated broader and more

Table 1. Socio-demographic characteristics of participants

Average age at start of project:	20 years, Liberia (n =111) 22 years, Sierra Leone (n = 266) 18 years, Northern Uganda (n = 281)
Who lives with:	41% live with boyfriends or husbands 36% live with parents or guardian(s) 5% live alone
Number of children at start of PAR:	22%, 1 child 44%, 2 children 25%, 3 children 9%, 4 children or more

inclusive approaches, whereby programmes providing services tailored to a specific group of children with special circumstances also responded to a wider range of vulnerabilities. Therefore, the PAR consulted with, and encouraged the active involvement, of the young mothers in planning, implementing, and evaluating project processes and impacts, within the context of their communities. By involving young mothers as key actors in changing their situations, and building broader community support for this process, the PAR project paved the way for change in cultural attitudes, and enabled the social transformation that is an important part of effective reintegration.

The research also paid close attention to ethical issues. The University of Wyoming, in the USA, was the lead institution responsible for the fiscal and organisational overview, assuring the protection of human subjects, and adhering to ethical standards. The team collaboratively developed a set of guiding ethical principles of 'do no harm' prior to the beginning of the study, including items such as: no research without informed consent. During each annual meeting of the PAR team, these principles were reviewed in order to reflect on whether the project members were adhering to these principles, and to discuss difficult situations, such as community jealousies, exploitation and violence that arose at some of the field sites (McKay et al., 2010).

Confidentiality procedures were developed prior to the study's onset and were approved by the University of Wyoming Institutional Review Board. The consent form was translated from English, into the indigenous languages spoken at each site, and then back translated into English to ensure accuracy. Because only a minority of the young mothers could read, and many were unable to write their names at the onset of the study, the consent form

was read in the language of the participant, and was followed by the participants signing their consent form with an 'X'. In the case of minors, who were living with parents or guardians, these adults also signed the form.

Child participation

Child participation is a cornerstone of the *UN Convention on the Rights of the Child*. However, in practice, participation has been difficult to achieve beyond involving children minimally. Rarely have programmes used highly participatory processes that place decision-making and leadership in the hands of young people, to support their sustainable reintegration. Yet, the *Paris Principles* (UNICEF, 2007) recommend that girls and women participate in programme development, implementation, monitoring and evaluation. The *Principles* note that a key to successful participation is the development of strong networks of peer support that brings young people together to 'solve problems, develop social competencies appropriate to civilian life, and decline their roles and responsibilities in their community' (UNICEF, 2007).

Meaningful child participation is difficult to develop within programming, as was evident in a 2009 inter-agency review of 160 evaluation documents about community based groups working on child protection and wellbeing (Wessells, 2009). Only a small number of programmes achieved genuine child participation, and enjoyed improvement in child protection as a result. Child participation was usually low to moderate, and often overridden by adults, especially male adults who dominated meetings and decision-making. Children wanted more of a voice and an influence in decision-making. This report underscores how the idea of child participation, while embraced as desirable by the international community, is rarely implemented except at a token level.

Also, different child protection agencies mean different things when they use the term '*participation*'. In some cases, it means giving children information about what is planned by the agency, as in a process of light consultation or membership in a committee, speaking during an agency-directed focus group, and/or answering a questionnaire. The authors consider these forms of participation to be on the low end of meaningful participation. Promoting higher levels of participation, therefore, should be understood as a learning process that requires training and mobilising adults to respect children's views, and give them opportunities to help make decisions and increasingly participate in society in age appropriate ways. Even more unusual is participation that gives female children a voice. Facilitating decision making by young mothers involved a highly challenging paradigm shift from agency centred to young mother centred processes.

Community based participatory action research

To enable meaningful participation, we took the approach of a community based PAR. The core of PAR approaches is that groups of people, in this project young mothers, organise themselves, decline the social problems they face, develop and implement a plan for addressing these problems, and evaluate what they have accomplished. They do so within the context of caring psychosocial support, and guidance in decision-making by field staff. Fundamental to the collaborative process between the young mother participants, field staff, NGO partners, academics, and funders were two key elements: an empowering approach to partnership that was collaborative and equitable, and the sharing of power to address social inequities (Israel et al., 2008).

PAR embodied specific principles that included the following: enabling high levels of participation; being cooperative and engaging community members and researchers in a joint process in which both contribute equally; entails co-learning; develops local systems and builds local community capacities; is an empowering process through which participants can increase control over their lives; pays attention to issues of gender, race, culture and class; and achieves a balance between research and action (Minkler & Wallerstein, 2008). Fundamental to this project was the feminist participatory research's emphasis on the importance of '*voice*' - of having girls and young women speak on their own experiences and reality, the understanding of power relationships, and the importance of structural transformation '*as the ultimate goal of an integrated activity combining social investigation, educational work, and action*' (Minkler & Wallerstein, 2008, p. 10). A key outcome was to contribute to policy and practice recommendations.

The PAR's genesis

To lay the groundwork for this project, two conferences (May 2005 and October 2006) were held at the Rockefeller Study and Conference Centre in Bellagio, Italy. A third meeting took place in Freetown, Sierra Leone in December 2006 involving academics, NGOs and intergovernmental agency experts. Considerable emphasis was placed on learning the PAR methodology through extensive discussions and role-playing. Once the implementation phase began, the team met in Kampala, Uganda, annually from 2007 to 2009, to assess progress and findings. At two of these meetings, in 2007 and 2008, the team were joined by young mother delegates, who came from each of our project countries and were selected by their peers. At the meeting in September 2009, the team also invited government,

UNICEF and other officials from Liberia, Sierra Leone, and Uganda to work with us in identifying key project lessons learnt, and to plan for dissemination of findings. At the three Uganda meetings, representatives from the Oak Foundation and Pro Victimis Foundation (our key funders) were also participants in the discussions. In describing the PAR's implementation, key steps of the project were outlined as they occurred, across all sites. Because of different site characteristics (e.g. urban, semi-urban, rural) and cultural contexts, each country team developed somewhat different approaches to the implementation. Throughout the implementation phase, the project coordinators (McKay, Veale, Wessells, and Worthen) remained in close contact with team members, and each other, through email, phone, periodic site visits, and meetings with country teams. Similarly, at the country level, PAR team members worked with, and communicated with, staff at the PAR sites and visited these sites to collaborate with project personnel and young mother participants. A key reason for this was to ensure that agency staff had a firm grasp on the participatory nature of the programme, and had established effective working relationships both with the young women and girls, and the communities where they lived (Onyango & Worthen, 2010).

Also, country teams met on a regular basis to assess the progress of the PAR. When country academics joined the PAR in its second year, they worked for the duration of the project with local country NGO partners, as well as directly with young mother participants. One of their primary responsibilities was to bring their data into the meetings with young mother representatives from each field site, and to oversee measurement strategies such as the survey described below. In February of 2009, African and Western academics met in Dakar, Senegal to analyse project

findings to date and to work on methodological issues of a participatory impact assessment.

Methodology of the PAR

Initially the 10 NGO partners identified communities where a substantial number of young mothers lived. Next, the NGO partners began working with these communities through local leaders and stakeholders, both men and women, such as: district officials, a local child protection committee, opinion leaders, birth attendants, and faith representatives (Onyango & Worthen, 2010). At these meetings, explanations of the PAR were given, ethical principles were discussed, and characteristics of young mothers to be recruited as participants were described. Also, communities were invited to participate and begin work with agency field staff. Among the activities undertaken by community members were identifying and recruiting vulnerable young mothers in the community, facilitating community meetings, and serving as advisory committee members.

Community members, in cooperation with agency field staff, then began identifying young mothers who were formerly associated with armed forces, or deemed to be vulnerable. In the process, parents and/or caretakers were also consulted, often in their own homes. After the PAR was explained to the young mothers, they were asked to join the project. At many sites, after the initial group was organised, participants became instrumental in enrolling other community young women and girls in a snowball process. Once enrolled, a key organisational component at each site was for young mothers to come together in regular meetings facilitated by agency field staff. The emphasis from the onset was on group support, so that the young mothers could learn to trust each other and work together. In constructing this first phase,

considerable time was needed to enable the groups of the young mothers to develop cohesion, and come to share their problems without the pressure to move quickly into broader project objectives. By creating this space, the stage was set for a participatory framework where participants began to grow together, developed a sense of ownership of the project and greater self-confidence, and realised that they had the responsibility for the success of the project because ownership and control were in their hands. Many sites held trainings in matters such as parenting, reproductive health, how to do research about their problems, literacy, and human rights.

Community advisory committees (CACs) were established at each site and played a critical role in involving the community from the onset. Young mother participants often selected community advisors. In some sites, CAC membership revolved through the group, until advisors whose interest in the project was related to possible compensation gave way to those whose primary concerns were supporting the young mothers in their initiatives, sharing the wisdom of their experiences, and serving as liaisons within the larger community. The CAC members interacted with the young mothers in a variety of ways. Some joined them for regular meetings, whereas others held separate meetings, or individual consultations with the young mothers to discuss plans and concerns. Involvement of agency personnel and CAC members was critically important in supporting the young mothers' decision making process.

Importantly, group development was not linear but an iterative process with many detours along the way. Initially, the field site coordinators organised the meetings, and explained their purpose, along with ethical considerations such as confidentiality of what was said, written and recorded. Conflict resolution was

sometimes necessary, as formerly associated and other vulnerable young mothers learned to cooperate and trust each other. Gradually, participants took on more responsibility, such as deciding where and when to meet, rules for the conduct of the meetings, and whether they wanted other people (parents, boyfriends or husbands) to attend. As the group process unfolded and group unity solidified, the young women and girls identified the challenges they faced and engaged in self-reflective inquiry. Then they began to focus on their problems, and how to overcome them. Over time, these meetings became a rich source of nonformal, psychosocial support. Agency partners and field workers learnt that a key to facilitating the young mothers' empowerment was that they needed to relinquish power and control, and have confidence that, with guidance, the young mothers could make sound decisions. They came to understand the importance of transparency in facilitating participatory processes, such as sharing details about available resources and the constraints of the project. For many partners, this represented a paradigm shift from usual ways of working with beneficiaries.

Young mothers as 'researchers' of their problems

In the PAR sites, young mothers worked together to learn to gather data, such as by participating in focus groups and identifying problems they face in their communities. They described key areas of concern and barriers to their reintegration, which included stigma, their own marginalisation, and perceived lack of social support from family and community. The young mothers targeted economic livelihoods, health, and education as critical areas for social action. In many sites, one of their first actions was to develop dramas and songs that contained rich details about their lives in the armed

groups, their present situations, and the challenges of being young mothers of children who were also stigmatised by their communities. As community members gathered in large numbers to listen and watch the girls act out the difficulties they faced, these dramas became a catalyst for interacting with each other. When communities better understood these challenges, they began to lend both emotional and practical support. Notably, early social actions were usually undertaken with little or no monetary support, because funds were small, and the PAR process initially needed to develop and become durable within the context of the community. This approach shifted the responsibility to the young mothers to change their situations by using their own resources, as well as engaging community members in seeking available resources (e.g. farm land), or those who would teach them skills such as hair plaiting, bookkeeping or sewing, and to help young mothers to identify livelihoods that would be sustainable within their communities. Also, as the PAR project developed, young mothers at some sites engaged in social actions for the benefit of the whole community, for example, cleaning communal community areas and sponsoring activities, such as picnics. These actions contributed to community wellbeing, reduced jealousies, facilitated young mothers' sense of belonging, as well as fostering a sense of acceptance and respect for the young mothers in their communities.

When a small amount of funding became available, the young mothers began developing social actions that emphasised development of livelihoods. They planned budgets for consideration and approval by partner agencies. Choices of sustainable livelihoods varied by site, for example, rural sites were much more likely to engage in agricultural activities and group livelihood schemes, such as farming ground nuts or cassava, soap making,

selling food, gara tie dyeing, and rearing goats. Several groups hired teachers to provide literacy training. Urban groups began petty trading businesses, funded through micro-credit or micro-grants. A few groups staggered projects depending on the season of the year, for example alternating agricultural work with marketing projects, so their income was more consistent. In many sites, young mothers used the funds or income earned through petty trading or small businesses to pay for skills training and/or school fees for themselves and their children. The young mothers also allocated group funds for emergencies, such as medical crises and gifts to families suffering bereavement. Some provided small loans, including to new participants of the project. Each new initiative had its origins in reflection and learning, based on earlier social actions, and on gathering the information and skills needed for the next phase of engagement.

Data gathering

The young mothers' groups were charged with keeping their own data, such as meeting minutes, photos of their activities, and written copies of poems or dramas. Young mother representatives from each site came together periodically in their own countries to meet, in a rotating fashion, with local academics who facilitated the workshops. The young mothers shared experiences, contributed data from their sites, and participated in training. Also, country academics were responsible for overseeing the gathering and organisation of demographic data, and administration of a participatory impact assessment survey (described below), which was developed in partnership with the young mothers, agency staff, and academics.

Other sources of data about the PAR came from yearly team meetings in Kampala, monthly reports from each agency, regular field visits to the sites by the four PAR organisers, and ethnographic evaluation of

selected field sites in each country. To analyse the ethnographic data, interviews and focus group discussions were transcribed, and field notes were compiled into analytic notes and findings, and exchanged between the four organisers. Data were examined thematically, and consensus was reached about key PAR findings. The draft report of findings was shared with both the field staff and young mother participants for discussion, and to incorporate their views on the resultant analysis. Finally, international child protection experts reviewed the PAR project findings and recommendations and provided feedback.

To construct the survey, in the second and third year of the PAR, participants engaged in an elicitive process with their peers, local academics, research assistants and community advisors, in order to generate their own indicators of successful reintegration. These lists were then shared with the organisers, who compiled them and ranked the frequency of each indicator. The lists of indicators were remarkably similar. In total, the organisers, remaining as close to the participants' own words as possible, catalogued 47 items representing 20 categories. These items were then presented to focus groups of participants to test for face validity, and for them to rank the importance of each indicator. This process was conducted in all three countries to assure that the indicators selected were coherent across countries and made adjustments in wording according to culturally specific understandings. Based on the ranking of the indicators, and questions within each category, a pilot survey was then developed comprised of 19 indicators with space to give narrative information in addition to answering each question on a three-point scale (yes, sometimes, no). The narrative space allowed organisers to analyse how well participants understood the questions. The pilot was tested in at

least two field sites in each country. Using the results from the pilot, a final survey was created with 20 questions and at least one specific qualitative '*probe*' per question. Close contact with organisers, and a narrative survey guide, ensured that the survey process was similar in each country. Surveyors visited each field site to meet with each participant in private, within her home community. A total of 434 participants, who had registered in the project at its onset, completed the survey (58% in Liberia, 77% in Sierra Leone, and 58% in Uganda). The discrepancy from the total project number of participants can be explained by attrition over the three years of the PAR, being unable to locate participants on the days the survey was implemented, and not including new participants to the project. Data were entered locally, then cleaned, and analysed using epidemiologic methods in *Stata version 10* (StataCorp, College Station, Texas, 2007).

Key findings

The meaning of social reintegration for young mothers was that they and their children felt accepted, respected, and included as contributing family and community members. Key elements of social reintegration that young mothers identified were: being responsible, respected, and taken seriously, and participating in reciprocal support relationships within the community. They described successful reintegration as being involved in actively improving their lives, showing good mothering and self-care skills, and demonstrating behaviours consistent with community and gender norms. As a result of their community dramas, economic livelihood activities and other social actions, the young women and girls reported that community members now saw them as '*serious*' and '*not idle*'. When these changes occurred, community acceptance increased, whilst stigma and

discrimination decreased. In some communities, a key element of psychosocial reintegration was through the young mothers' initiatives that helped mitigate jealousies and positively changed the community's spirit, for example, by bringing the community together for picnics, by engagement in community cleaning, and through service to the community to reciprocate for the support received from advisers and leaders. For the three countries, participation in the PAR overwhelmingly resulted in better relationships within the broader community, with 89% of young mothers reporting they felt more supported and respected by their community, 5.5% responding 'sometimes', and only 5.5% answering 'no'.

To facilitate social reintegration that is community based and highly participatory, communities were involved from the outset and took ownership of the process. From the beginning, and throughout the PAR process, participatory processes benefited from slow, consultative engagement at all levels of the community. Extensive community dialogue, involvement and ownership were essential to motivate influential community members to support the young mothers' reintegration. The PAR staff engaged in dialogue with community leaders, including women elders, talked with families of participants, and discussed the issues that the young mothers faced, with the young mothers.

Community advisory committees provided a crucial link between the young mothers' groups and the larger community, and encouraged the young mothers by offering pragmatic advice, helping manage conflict, and giving psychosocial support. Importantly, community advisors played crucial roles in responding to and managing jealousies, which emerged in all three countries and were manifested in a variety of ways. For example, participants at one site decided to rear pigs and they

undertook some of the hard physical labour needed to construct their piggery. An outbreak of Hepatitis E amongst pigs in a distant community led to a rumour spreading that the young mothers had made a bad decision and it would result in bringing harm to the community. When investigated further, participants reported that a group of young men from the community were responsible for spreading the rumour, and creating this tension, as a result of jealousy. The group was in danger of collapsing due to a loss of confidence. With the support of community advisers and agency staff, they approached a community leader to advocate within the community on their behalf. In addition, they used some of their funds to obtain expert training on pig rearing, thus addressing the community concerns. A key lesson learnt is that jealousies, and other negative unintended consequences, cannot be allowed to happen without recognising their occurrence and developing appropriate responses, such as by giving a community drama, through family visitation, or engaging in some small action that benefits others in the community.

Groups for young mothers were instrumental in providing psychosocial peer support for positive coping and social reintegration. Group processes formed the bedrock of social reintegration. Within the group, formerly associated young mothers and other young mothers deemed to be vulnerable within the community learned to talk with, and listen to, each other in respectful ways, manage conflict, engage in collective problem solving (such as ways to reduce stigmatisation and improve community acceptance), and give support. These behaviours, in turn, became in general use within their families and communities. Although some groups initially were characterised by mutual distrust, they gradually became cohesive as participants worked together, prepared food, met each other's families, and

socialised. Young mothers shared their problems and moved to a common purpose and collective responsibility. Ethnographic results reported recognition at some sites that if the group failed, all members would lose the opportunity to participate in the PAR. Groups gave themselves names such as *'Togetherness'* and *'Girl Mothers Without Borders'*.

Young mothers' groups were fostered by organising, structuring, and expert facilitation by agency staff, whose ongoing aim was to shift decision making to the young mothers. Participatory processes necessitated shifting control and ownership to young mothers themselves. Agency staff invested significant time in organizing and facilitating young mothers' to manage their groups and in providing psychosocial support. They identified capacity building needs and introduced training in a timely and appropriate way.

Many agency staff found the shift to PAR challenging. As staff supported the young mothers' empowerment, the young women and girls then began to drive the process and make their own decisions about the use of resources. In ethnographic work, one community leader observed;

'what I saw immediately, is these girls began mobilising themselves. They totally sacrificed their time, not demanding any payment. When it came to identifying their priorities they said, "we want a restaurant because that's what we can do ourselves". When I say that spirit, they are now embracing ownership. If it was not their choice, the project would have died by now'.

Over time, they realised that they had real power to make changes in their life conditions. With this transition, the young mothers began experiencing both individual and collective empowerment. Young mothers' group work facilitated their

reintegration through increasing their strengths and improving their capacity to be seen and heard within their communities. Ethnographic reports of family members and participants themselves indicated that young mothers' emotional and behavioural problems were reduced over the project's lifespan. The young women and girls wanted to be effective mothers, but before the project lacked the economic livelihoods needed to enable their children to go to school, access health care, and utilise community supports. Most of the young mothers (83.3%) reported that they could take better care of their children after they joined the project than before, and 81.3% of participants reported that they could now speak in public more easily than before the PAR. Across the three study countries, 87% of young mothers reported that their health had improved compared to it before the project. No significant differences occurred according to whether participants were associated with armed forces, or not associated, or by country. In a number of the sites, health education programmes in which content was developed to address health priorities identified by the groups led to behavioural changes, such as better self-care and care for their children. However, the majority of young mothers lacked sufficient access to primary health care, and the cost of health care impacted the progress many were making with their livelihoods.

Unwanted pregnancies remained a challenging issue for many young mothers. Across the three countries, two-thirds of young mothers reported they were able to prevent unwanted pregnancies. Yet, a quarter of participants became pregnant, even when they did not want to do so. The most common explanations for why they thought they had difficulty preventing pregnancy were that they could not afford birth control, oral contraceptives failed, their husbands or boyfriends did not

support their using any form of birth control, or they did not have the knowledge about how to prevent pregnancy.

Children of young mothers showed improved wellbeing, which facilitated their social reintegration. The children of young mothers achieved increased acceptance and belonging within the family, and by members of their communities. Young mothers reported that they were better mothers, and their children's health status had improved. In some communities, they became role models for others who imitated their behaviours. Approximately 80% of participants, across the three countries, reported that they were better able to take care of their children after participating, compared to before the project had begun. Furthermore, 80% of the survey respondents reported that the health of their children had improved, compared to before the project. Those reporting that their children's health had improved also said they were better able to care for their children. In one ethnographic account, a grandmother noted;

'now there is a difference from before. The baby used to remain dirty and is now well dressed. Hygiene is well kept, she has learnt to take care of the baby, what kind of food is good for the baby, now the baby is less sickly'.

Tensions that had existed over concerns about the baby's care had dissipated, leading to a changed atmosphere within the home. Stress arose from the complexities of gender relations. While some young mothers reported supportive relationships, the majority did not experience their boyfriends/husbands as supportive of them, or their children. Supportive relationships with male partners and fathers involved both economic and emotional support. Across the three countries, only a third of young mothers reported that their boyfriends or husbands

were supportive of their children. In the three countries, young mothers reported conflict with their boyfriends and husbands. They left boyfriends or husbands because of domestic violence and/or discrimination against their children not conceived with their current partner. Many young mothers with unsupportive partners reported being abandoned. Regional differences were also seen, with a third in West Africa reporting their male partners unsupportive of their children, and over three-quarters in Uganda reporting the same. In Uganda, alcohol use by male partners was frequently a problem. One ethnographic record from Liberia captures some of the complex dynamics that existed;

'One young mother said many young men (boyfriends) were not happy at first with young mothers going to meetings. "But now since we earn money and share it, boys are happy for us to participate." Another young woman said, "my husband used to beat me but now he has changed. I get money and do everything myself, so he changed." One young woman said that as poverty worsened, her boyfriend took money from her cashbox, but she took him to the police to get it back. The same woman said, "Because of bad business (fluctuating international exchange rates), he beats me and I go to the police and put him in jail. After a couple of days, he signs a paper saying he will not beat me, but he still beats me.'"

Young mothers in all three countries were ashamed to speak out about domestic violence. They reported that increased economic security from their livelihood initiatives, and support from their peers in the group, facilitated their leaving abusive partners. A key lesson about gender relations occurred, as agency staff

included consultation and advocacy with husbands and boyfriends and with other family members. This facilitated many young mothers to participate more fully in the PAR and reduced conflict at home.

Young mothers developed tools to address sexual exploitation and violence, often with the support of group members. However, shame was still a barrier to seeking help. Sexual exploitation and violence was endemic across all three countries. During the project, young mothers reported that they or their children experienced sexual violence, including rape. In some instances, participants turned to the group for support. Most cases of sexual violence, however, were probably not reported because of a pervasive culture of silence and imperviousness to doing anything to change cultural attitudes towards sexual violence.

In the survey, 86.8% of participants said they knew how to report and get help if someone tried to force them sexually. Most young mothers said they would report it to the police, although some would report to their family, the chief, or an NGO. Effectively addressing sexual exploitation and violence is a formidable challenge, and one in which this project had limited impact. One approach might be to develop a community based PAR with the goal of developing constructive steps towards attaining women's human rights and gender justice.

Participation in sex work decreases as young mothers gain confidence and self respect and develop alternative livelihood strategies. Prior to the project, young mothers at almost all of the field sites reported engaging in transactional sex, or having boyfriends to gain economic support. Late in the project, when the survey was administered, 83.1% said that the young women and girls in the project did not engage in transactional sex, and 9.4% said 'yes', girls engaged in transactional sex. Community members often

stated that young mothers were doing far less sex work. Nearly all young mothers reported that PAR participants engaged in sex work less than they had before the project began. A key lesson from the project was that when young mothers have sustainable livelihoods, sex work was much less likely to be used as a survival strategy.

Challenges to using highly participatory processes

The success of this project was dependent on the capacity and engagement of field level staff who used a deeper, slower facilitation process than they were accustomed to in project implementation. Also, our donors valued processes that improved the lives of young mothers and de-emphasized preestablished outputs. Another key factor was that the project had commitment and institutional support from partners. Also, the PAR was often introduced within existing project supports, and within contexts where the agencies and their record of working on psychosocial reintegration of children were already known.

Our project's mantra was; *'if it doesn't come from the girls, it's not PAR'*. Highly participatory processes were field driven and decentralised and did not originate at agency headquarters. The level of participation by the young mothers was much greater than what the NGOs typically achieve, and what donors are familiar with and expect. Even experienced NGO staff found it challenging to master the skills and approaches necessary to support the highest levels of participation. Capacity building took substantial time and occurred at multiple levels, such as with field staff, agency partners, donors, and young mother participants. Therefore, engaging in PAR means a commitment to staff development, supervision, modelling of participatory processes, and continued

dialogue about the research.

Many agency partners had to change from using a predominately directive style to one emphasising listening, dialogue, nondirective advising, and strong facilitation skills. In some partner agencies, directors or high-ranking national staff showed low levels of engagement with the project, possibly because of the relatively little money involved, the large size of some partner organisations, and an emphasis on projects that support agency visibility and viability. For some agencies, this was a '*small project*' and factors other than effective community based programmes were driving how agencies declined their priorities. This marginalisation of the PAR project within organisational programming priorities suggests that substantial challenges exist to using this approach. This is especially true within large agencies that are accustomed to working in a different modality and are driven by donor money, timelines, and prescriptive specificity such as predetermining expected outputs and quickly '*going to scale*'. Prescriptive specificity makes it difficult to achieve highly participatory processes (or even lesser levels of participation) as a primary goal of community based work, especially when donors and/or agencies have a limited interest in participation as the core programming value and approach. Fundamental challenges of a highly participatory approach also include the length of time needed to enable full participation, the flexibility required, and initial openness needed about uncertain outcomes. Although all partner agencies were impressed by the low costs and sustainability of the outcomes of the PAR, the contrast between the time-frame of PAR processes and other NGO activities can make it difficult to adopt highly participatory processes into other, ongoing work. Also, a key difference between the PAR methodology and other projects had

to do with the way that funds for young mothers' social action were managed. Agencies are used to writing proposals and budgets with each line item specified. Donors typically require agencies to specify, in advance, exactly how they plan to use each dollar requested. The PAR project began with money set aside for each agency with open and unspecified budget lines allocated to young mothers' social action. Later, the young mothers decided, with counsel from field staff and community advisors, how to spend the money on social action. Thus, a measure of flexibility and faith was required that funds would be used wisely, which was initially a challenge for many agency partners. Also, it required that field staff have excellent skills in guiding and supporting the young mothers' decision making, especially as they developed plans for creating economic livelihoods.

Limitations

In reporting these findings, some distinctions of this study limit our ability to generalise to other contexts. The project was conducted over months and, in the West African cases, years following participants' active exposure to armed conflict. The relatively high levels of accessibility to young mothers, political stability, and trust by the communities involved in the project enabled the young mothers to engage in group support and livelihood activities. In areas torn by active or very recent conflict, the PAR methodology as developed for this study would not be feasible, because of security concerns. Also, the slow and time intensive methodology of the PAR is likely to be ill suited to the highly fluid context of many conflict or early (post) conflict settings. Another important limitation of the PAR, was the absence of comparison groups, so that some of the improvements the young mothers experienced may have derived to a lesser extent from participation in the

project and more fully to changes in the wider political and economic arenas.

The PAR deliberately set out to support highly vulnerable young mothers in the community. Despite findings that showed very positive changes for the cohort studied, PAR should not be construed as an all-purpose methodology to be used with all children formerly associated with armed forces and groups, or with all vulnerable young mothers. When PAR is not feasible for some of the reasons outlined above, diverse, inclusive, and flexible approaches are recommended to be incorporated so that children have an authentic voice and agency in their own lives, and which involve communities from the onset as a key element in facilitating reintegration.

Conclusion

PAR is a long, slow decentralised process that requires substantial attention to its ongoing development in the field. Close mentoring by a caring facilitator, cultivation of young mothers' agency, and development of relationships between young mothers, community members, and agency focal people were critical to the success of the PAR project. Centrally, young mothers, both formerly associated with armed forces and other young mothers deemed to be vulnerable in the community became researchers of their own situations. They subsequently were able to garner their own resources, and those of their communities, to move them from being marginalised young mothers to contributing and respected members of their communities. For our study participants, this was the true meaning of social reintegration.

Although PAR may not be appropriate in all contexts, this innovative field practice is well suited to promoting self-efficacy and empowerment of vulnerable populations. The method can achieve multiple aims, allowing for research to assess the

situation of young, war-affected mothers and their children, while simultaneously cultivating individual and collective empowerment and fostering durable improvements in living conditions and wellbeing. The authors therefore encourage the adoption of PAR approaches in future programming with this largely neglected population of war-affected young mothers, and other vulnerable groups.

Acknowledgements

The PAR team members were: Gabriel Banya, Stephen Borbo, Celestine WawaBrown, Victor Gbegba, Doris Geedah, Ebum James, Anthony Kerwegie, Evelyn Laruni, Agnes Marah, Stella Neema, Francis Okema, Grace Onyango, Patrick Onyango, Debey Sayndee, Dora Single and Samuel Beresford Weekes. We are deeply appreciative of the primary funding for this study that was provided by the Oak Foundation and Pro Victimis Foundation. The Rockefeller and Crompton Foundations and UNICEF West Africa provided additional financial assistance for conferences of the study team.

References

- Annan, J., Blattman, C., Mazurana, D. & Carlson, K. (in press). Women and girls at war: "Wives," mothers and soldiers. *Journal of Conflict Resolution*.
- Annan, J. and Patel, A. (2009, May). *Critical issues and lessons in social reintegration: balance justice, psychological well being, and community reconciliation*. CIDDDR.org and Republic of Colombia.
- Betancourt, T., Brennan, R., Rubin-Smith, J., Fitzmaurice, C. & Gilman, S. (2010). Sierra Leone's former child soldiers: a longitudinal study of risk, protective factors, and mental health. *Journal of the American Academy of Child & Adolescent Psychiatry*, 49(6), 606-615.
- Burman, M. & McKay, S. (2007, December). Marginalization of girl mothers returning from fighting forces in Sierra Leone. *International Nursing Review*, 54(4), 316-323.
- Coulter, C. (2009). *Bush wives and girl soldiers: Women's lives through war and peace in Sierra Leone*. Ithaca, NY: Cornell University Press.
- Denov, M. (2008). *Girls in fighting forces: Moving beyond victimhood: a summary of the research findings on girls and armed conflict from CIDA's child protection fund*. www.cida.gc.ca.
- Denov, M. (2010). *Child soldiers: Sierra Leone's Revolutionary United Front*. Cambridge: Cambridge University Press.
- Hobfoll, S., Watson, P., Bell, C., et al. (2007). Five essential elements of immediate and mid-term mass trauma intervention: Empirical evidence. *Psychiatry*, 70(4), 283-315.
- Israel, B., Schulz, A., Parker, E., Becker, A., Allen, A. & Guzman, R. (2008). Critical issues in developing and following CBPR principles. In: M Minkler & N Wallerstein (Eds.), *Community-based participatory research for health: from process to outcomes* (2nd ed, 47-66). San Francisco, CA: Jossey Bass.
- McKay, S. & Mazurana, D. (2004). *Where are the girls? Girls in fighting forces in northern Uganda, Sierra Leone and Mozambique: their lives during and after war*. Montreal: Rights and Democracy.
- McKay, S., Robinson, M., Gonsalves, M. & Worthen, M. (2006). *Girls formerly associated with fighting forces and their children: returned and neglected* (2006). London: Coalition to Stop the Use of Child Soldiers.

McKay, S., Veale, A., Worthen, M. & Wessells, M. (2010, July). Community-based reintegration of war-affected young mothers: participatory action research (PAR) in Liberia, Sierra Leone and Northern Uganda. Available at: www.PARGirlMothers.com.

Minkler, M. & Wallerstein, N. (Eds.), *Community-based participatory research for health: from process to outcomes* (2nd ed.) San Francisco, CA: Jossey Bass.

Onyango, G. & Worthen, M. (2010, November). *Handbook on participatory methods for community based projects: a guide for programmers and implementers based on the participatory action research project with young mothers and their children in Liberia, Sierra Leone, and northern Uganda*. Available at: www.PARGirlMothers.com.

United Nations Children's Fund. [UNICEF]. (2007). *The Paris Principles: principles and guidelines on children associated with armed forces or armed groups*. New York: UNICEF.

UNICEF. (2009). *Machel study 10-year strategic review: children and conflict in a changing world*. New York: UNICEF.

Wessells, M. (2006). *Child soldiers: From violence to protection*. Cambridge, MA: Harvard University Press.

Wessells, M. (2009). *What are we learning about community-based child protection mechanisms? An inter-agency review of the evidence from humanitarian and development settings* London: Save the Children.

Wessells, M. (2010). Girls in armed forces and groups in Angola. In: S Gates & S Reich (Eds.), *Child soldiers in the age of fractured states* (183-199). Pittsburgh: University of Pittsburgh Press.

Worthen, M., Veale, A., McKay, S. & Wessells, M. (2010). 'I stand like a woman': Empowerment and human rights in the context of community-based reintegration of young mothers formerly associated with fighting forces and armed groups. *Journal of Human Rights Practice*. Doi:10.1093/jhuman/hup028.

¹ This article presents a summary of key findings, a fuller description of the process and its outcomes are contained in the report by McKay et al. (2010) Community-based reintegration of war-affected young mothers: Participatory action research (PAR) in Liberia, Sierra Leone and Northern Uganda. Available at: www.PARGirlMothers.com.

Susan McKay, Ph.D. is a psychologist, nurse and Professor of Women's and International Studies at the University of Wyoming in Laramie, Wyoming, USA.

email: McKay@uwyo.edu

Angela Veale, Ph.D., is a lecturer in Applied Psychology, University College Cork, Ireland.

email: a.veale@ucc.ie

Miranda Worthen is currently a Ph.D. student in Epidemiology at the School of Public Health at U.C. Berkeley. She received her Masters in Development Studies from Oxford University in 2006.

Miranda Worthen, Doctoral Candidate, Division of Epidemiology, School of Public Health, University of California, Berkeley, Berkeley, CAUSA.

email: mworthen@post.harvard.edu

Michael Wessells, PhD, is Professor of Clinical Population and Family Health at Columbia University in the Program on Forced Migration and Health, and Professor of Psychology at Randolph-Macon College.

email: mikewessells@gmail.com