Using participatory group activities to understand psycho-social strategies for coping with conflict

Dieneke van der Wijk

● Introduction

In one resettlement village in Sri Lanka, where Oxfam UK/I worked, women heads of households requested that I talk to them about their problems and worries in life. But it was difficult for them to reflect on their situation and therefore participative group techniques were introduced to create a relaxed atmosphere in which women’s emotions could be expressed in different ways. By encouraging women to share experiences and talk to each other, opportunities arose for greater reflection. From these initial experiences in Sri Lanka, the study that is described here was developed. It was carried out from August 1996 to April 1997.

This study is a qualitative, comparative study of the coping and survival strategies adopted by poor women in Sri Lanka and Cambodia during periods of armed conflict. All of the women are heads of households. How do they decide on and adopt survival strategies? How do they cope with their personal feelings of trauma? This study attempts to identify the changes that conflict has on daily life and family structures and how women experience these changes.

The study was carried out in Trincomalee District in North East Sri Lanka and Battambang Province in North West Cambodia, both unstable security situations.

Four villages were chosen where Oxfam was well known to many of the women. Thus, a good rapport had been established before the research started. Some of the activities that are described below were recorded on video. This was played back to the women some months later in a follow up workshop.

● Methodology

The study looked at survival strategies as seen through women’s eyes. The data were collected by working with, and listening to, groups of women. The participatory group activities followed a sequence which started with general issues, such as history and government services. We then moved on to discuss work-related issues and finally more personal and sensitive issues, such as conflict, late husbands and personal feelings.

PRA activities were adapted for the group work and included: drawings, role plays and discussions. Local women added singing and dancing to the programme. Large group activities were followed by individual or small group discussions. The diversity of fora enabled background data to be collected, findings to be verified and particular themes to be discussed in more detail.

The process

The type of activities and the content of the meetings emerged as a natural process which followed the contributions made by the women. The depth and speed of the debate was determined by the women themselves. Planned activities, such as drawings and role plays, provided a starting point for opening up discussions and created a relaxed atmosphere. Discussion of individual issues depended on women's memories, but also on the strength they gained by finding shared experiences. Women showed emotion: they laughed, were serious, showed tears and enjoyment. The
discussion provided an outlet for them to show their frustration and anger about their degraded status and their fear of conflict, violence and pain. Throughout this process, women’s emotional reactions were reflected on. Some activities, such as the role plays and body maps of feelings, were a new experience for some of the women. It was often the first time that they had expressed feelings, shared incidents and felt recognised as individuals.

**Role plays**

The women gradually opened up and their role plays showed their strategies and experiences. These included their feelings of humiliation when passing security checkpoints, their memories of their husbands being taken away from home at night and killed, and how their husbands had beaten them. Women wanted to show us exactly how their husbands were taken away, and performed with great seriousness. They found it difficult to explain in words how they felt about these experiences. Women who watched reacted with a sense of shared recognition. After the role plays, women initiated song and dance activities, possibly as an outlet for tension and excitement. In both countries, the women used the space provided in the discussions to sing songs and grieve about their late husbands and personal feelings.

**Using drawings**

The women drew the ‘perfect woman of the village’ and the ‘widow of the village’. This enabled them to reflect on the work, thoughts and feelings of these different characters. It opened up a range of discussion points including that of the degraded status of a widow in society. While drawing pictures of their late husbands, women explained their physical and personal characteristics. They extracted the main ‘roles’ that spouses perform and ranked them. In three of the four villages, being ‘a lover’ was the most important role, followed by being ‘the decision-maker’. While drawing pictures, women laughed about the products, but also corrected each others’ and sought acknowledgement about their husbands’ physical appearance.

**Figure 1.** Cheap drew this picture to describe how her brother (centre) was taken away by Khmer Rouge soldiers
Bodymaps

Women showed their different feelings in body maps. They identified anger as their strongest feeling, followed by fear. Happiness was experienced the least. Anger is shown as a feeling in the arms, legs and mouth, as the women wanted to kick and hit, but are not allowed to. Fear is shown as beating of the heart, shaking of arms and the inability to walk. Many of the reactions and emotions were similar in the four villages.

- Coping strategies

Women coped with their traumas in two main ways. First, they shared and talked about their experiences and second, they found space to relax. Women said that during the exercises, they began to understand their own complicated situation and unravel the different aspects to their changed lives. Their many roles included that of mother, income earner and decision maker. They reflected on their position in society and how they needed to be able to cope with violence and death.

Talking with other, like-minded women provided them with a feeling of recognition and strength. Women started to use the space that was provided by chewing and sharing betel in Sri Lanka, and by smoking cigars and giving each other massages in Cambodia. This provided a natural and temporary relief. Other support systems were said to be their children, religion, family and neighbours.

Evaluation of the process by women heads of households

The work was evaluated immediately after the process and discussed again three months later. Women were very positive about the process. Although it had brought bad memories to the surface, the women did not have bad feelings about the activities. They felt it had brought ‘a lot of good things and worked as a medicine’. As expressed by one woman: ‘I opened my heart and showed my wound inside; after doing all the exercises I feel that the heavy thing in my heart has gone.’

Women said that this was the first time anybody had asked them about their lives and sad stories. They expressed strongly the need for someone to listen to their experiences. Their depression, mental agony and grief decreased with the chance to talk and the space provided in which to relax. The women felt the process had resulted in a clearness of mind.

Women increased their understanding of the situation they live in and gained insight in to their problems relating to their life before, during and after the conflict.

The Cambodian women released worries and gained insight into the hardship and pressure caused by violence and the social problems of their husbands. By talking about this, they gained awareness of their own rights as women. In one of the villages in Sri Lanka, where there were many illiterate women, they said they felt empowered, had lost their shyness to talk and had learned to write their names.

By participating in a group, women shared and recognised each others’ mental grief. Three months after the process, the groups felt more united and as a result, discussed, helped and shared more with each other. The trust which has been built up among women is something which they now enjoy and are happy about.

The process built women’s self-confidence and gave the women a feeling of strength. Before the meetings, women felt sorry for themselves, but during the meetings, they learnt to forget their worries. They said that they feel more able to face any difficulty, such as the gossip in the community which used to trouble them.

The attitude of the facilitator was crucial to the process. Women opened up, as this was the first time that anybody had asked and had taken an interest in their feelings and sad stories. There was sympathy for the women and they felt ‘free’ with the facilitator. By this, the women meant that the facilitator was not authoritarian. She did not position herself at a higher status, but was an ‘equal’.

Sri Lankan women felt they needed mental and financial support from the groups in the future. In Cambodia, the women said that they wanted to participate in future action research, even
without tangible, financial assistance because they wanted to talk about women’s issues: ‘We liked the meetings and that is why we came’.

**Conclusions**

- Participatory activities enable women to share the reality of their lives. They are a valuable entry point for further understanding. We should realise that the information provided is the reality of the moment, and that this reality is very complex.

- The process with the women heads of households has empowered them, to a certain degree. This is reflected in their ability to articulate their needs, including financial requirements.

- It is important to recognise that the facilitator will have an impact on the process itself. How can we measure the influence of the facilitator on the process and on the response of women? We should be vigilant about our own assumptions and biases, and also be aware that different people will have different interpretations of the same situation.

- Certainly, the process provided insights into the feelings of the women, into the violence of the events they recollected and incurred and some understanding of their own self-esteem.

- Rebuilding people’s lives during and after conflict should be carried out in an holistic way, stressing gender relationships and embracing the economic, social, and psychological/emotional environment.

- Participatory techniques for research or needs assessment can contribute to people’s awareness and empowerment. The people are actively involved in defining the depth and content of the information that is shared and have an opportunity to change direction, reflect and come back to certain issues.

**Dieneke van der Wijk**, Gender and Learning Team, Oxfam UK/I, 274 Banbury Road, Oxford OX2 7DZ, UK.