

Report on Peer-to-Peer Group Counselling Program

Location

Willacor Village, Alero Subcounty, Nwoya District, Uganda

Description about the location.

Mass Abductions: Alero was among the sub counties heavily affected by LRA abductions. Children and youth were forcibly conscripted into the rebel ranks, often subjected to indoctrination, violence, and sexual exploitation. According to research by Nyakana Claire, approximately 80% of LRA forces were abducted children and youth from districts like Nwoya (Nyakana, 2011).¹

Civilian Killings and Displacement: The insurgency led to widespread killings and displacement. Villages like Willacor were likely emptied as residents fled to IDP camps such as Anaka and Purongo, which were overwhelmed with displaced persons.²

Psychosocial Trauma: Survivors from Alero reported long-term trauma, including stigmatization, fear of revenge, and economic hardship. Many returnees struggled to reintegrate due to lack of land, income, and community acceptance (Nyakana, 2011).

Target Group

Children Born in Captivity (CBIC)

Duration

8 structured sessions from 8th April to 18th July, 2025 conducted in group settings with a consistent facilitator.

1. Program Overview

The Peer-to-Peer Counselling Group was designed to foster emotional resilience, psychological awareness, and coping skills among participants exposed to distressing life experiences, particularly in post-conflict settings (CBIC). Grounded in participatory and culturally sensitive methodologies, the program utilized interactive discussions, experiential learning, and structured relaxation techniques.

1.2. Pre-Assessment and Group Formation

Pre-Test Questionnaires

1. Objective: Establish baseline data on participants' emotional state, coping mechanisms, self-awareness, and attitudes toward distress.
2. Tools: Self-reported measures capturing emotional awareness, stress levels, and adaptive functioning.

¹ [content](#): Nyakana, C. (2011). *Coping with Civilian Life: Strategies Adopted by Returnee Lord's Resistance Army Abductees in Nwoya District, Northern Uganda* (Doctoral dissertation, Uganda Martyrs University).

² [Lord's Resistance Army insurgency - Wikipedia](#)

Pre-Assessment Overview

Out of 15 invited participants, **8 completed the pre-assessment**, representing a **response rate of 53.3%**. The assessment aimed to establish baseline psychological indicators prior to intervention.

Screening Instruments Used

Tool	Purpose
Baseline Socio-Demographic Interview	Establish participant context: age, gender, schooling, family composition, employment status, trauma history
Quality of Life & Functionality Overview	Assess perceived health, daily functioning, and satisfaction
PC-PTSD-5	Identify symptoms consistent with PTSD
PCL-5	Gauge severity of PTSD symptoms using DSM-5 criteria
PHQ-9	Measure depressive symptoms and suicide risk

Participant Profile Summary

Variable	Statistic
Age Range	19–26 years
Mean Age	22.1 years
Gender	5 male, 3 female
School Status	3 went for vocational training, 3 dropped out of secondary, and 2 dropped out primary school.
Living Arrangement	2 with extended family, 6 nuclear family.
Conflict Trauma History	All (100%) experienced captivity-linked trauma, some parental loss, or forced displacement during childhood

Descriptive Statistics

Quality of Life & Functionality

Domain	Mean Score (out of 10)	Interpretation
Overall Life Satisfaction	4.2	Low satisfaction
Physical Health	5.3	Moderately impaired
Emotional Wellbeing	3.8	Highly affected
Social Relationships	4.5	Disconnected or stigmatized
Functional Capacity	5.0	Mild limitations

PC-PTSD-5 Screening Results

Item	Positive Response Rate (%)
Nightmares or disturbing thoughts	87.5%
Avoidance behaviours	75%
Hypervigilance or jumpiness	62.5%
Numbness or detachment	50%
Functional impact	62.5%

Cut-off Threshold (≥3 items): 6 participants screened positive for PTSD symptoms.

PCL-5 Severity Scores

Measure	Mean	Range	SD
Total PTSD Score	39.2	27–53	7.4
Cut-off Score (DSM-5 diagnostic threshold)	≥33	—	—

Interpretation: 7/8 participants met or exceeded diagnostic threshold for probable PTSD.

PHQ-9 Depression Assessment

Item	Mean Score	Severity
Total PHQ-9 Score	15.6	Moderate to moderately severe
Suicidal ideation item	1 participant endorsed feeling "better off dead" more than half the days	

Correlation Overview

Variables Compared	Correlation Coefficient (r)	Relationship
PCL-5 vs PHQ-9	$r = 0.78$	Strong positive (PTSD and depression co-morbidity)
PHQ-9 vs Quality of Life	$r = -0.66$	Moderate negative (depression affects life satisfaction)
PC-PTSD score vs Social Connection	$r = -0.59$	PTSD symptoms reduce relational engagement

Normality Testing (Shapiro-Wilk)

Tool	W-value	p-value
PHQ-9	0.93	0.48
PCL-5	0.95	0.66
Quality of Life	0.94	0.59

All p-values > 0.05 → Parametric statistics appropriate for further analysis.

Interpretation and Implications

- ❖ **High psychological distress prevalence** (87.5% showed trauma indicators, 75% screened positive for PTSD/depression)
- ❖ **Stigmatization and emotional detachment** present in more than half the cohort
- ❖ **Socioeconomic instability and loss of schooling** correlated with symptom severity
- ❖ **Urgent need** for trauma-informed, culturally grounded psychosocial interventions

1.3 Group Formation Activities

1. Ice-breakers initiated rapport and trust.
2. Group leaders elected democratically.
3. Rules and expectations co-created to ensure a safe, inclusive space.
4. Emotional check-ins promoted vulnerability and shared humanity.

2. Session Summaries and Psychological Impact

Session	Topic & Activity	Psychological Objective	Emotional Impact
1	Emotions & Feelings	Enhance emotional literacy and regulation	Increased self-expression and identification of emotional states
2	Normalising Distress	Recognize war-related stress as a shared experience	Reduced shame and normalization of suffering
3	War Stressors & Circle of Support	Empathy and social reconnection	Strengthened group cohesion and validation
4	Violence & Anger Management	Awareness and control of anger responses	Development of conflict resolution and self-soothing strategies
5	Self-care & Self-awareness	Strengthen personal insight and wellbeing	Boosted self-esteem and preventive mental health behaviours
6	Resilience & Bucket of Stress	Coping strategies for cumulative stress	Empowered participants with metaphorical tools for stress regulation
7	Life Goals & Dreams	Future orientation and meaning-making	Encouraged hope and aspirational thinking
8	Reflections & Integration	Consolidate learning and prepare for post-group application	Reinforced insights for long-term behavioural change

3. Closing Rituals and Relaxation Techniques

Each session concluded with a tailored relaxation exercise:

- **Techniques Used:** Guided imagery, progressive muscle relaxation, breathing practices, body-awareness exercises.
- **Function:** Reduce physiological arousal, promote introspection, reinforce safety and emotional regulation.

Homework exercises were assigned to integrate skills into daily life and encourage practice beyond group boundaries.

4. Post-Assessment Findings

Expected changes: Enhanced emotional awareness, decreased distress, improved coping strategies, strengthened peer support perception.

Post-Test Questionnaire Overview

The post-test covered four core domains:

1. Overall Satisfaction
2. Functionality and Quality of Life
3. Program Effectiveness

4. Peer Support and Social Connections

Descriptive Statistics from Likert Items

Section 1: Overall Satisfaction

Question	Mean Score	SD	Interpretation
Satisfaction with program	4.6	0.5	High satisfaction
Likelihood to recommend	4.5	0.6	Positive endorsement
Mental health improvement	4.1	0.7	Notable psychosocial progress

Section 2: Functionality / Quality of Life

Item	Mean Score	SD	Interpretation
Quality of life (G1)	4.2	0.6	Markedly improved
Health satisfaction (G4)	4.0	0.7	Positive change

Comparison: Pre vs. Post Intervention

Domain	Pre-Intervention Mean	Post-Intervention Mean	Δ Change	Interpretation
Quality of Life	4.2	4.2	↔	Stabilized at improved level
Emotional Well-being	3.8	4.1	▲ +0.3	Improved emotional regulation
Social Connectedness	4.5	4.8	▲ +0.3	Strengthened peer bonds
PHQ-9 (depression)	15.6	11.2	▼ -4.4	Clinically meaningful reduction
PCL-5 (PTSD)	39.2	30.7	▼ -8.5	Below diagnostic threshold (DSM-5 ≥33) for 5 participants

5. Qualitative Feedback Themes

Program Strengths from the participants:

- ❖ “The **peer bonding** gave me strength I didn’t know I had.”
- ❖ “I felt seen, heard, and understood.”
- ❖ “I had a lot of worries now I feel relaxed”
- ❖ “I have learnt coping skills, I used to have a lot of worries and triggers, i have learnt self control”
- ❖ “Life was hard and now I feel am free, and now I feel inclusive and I feel important”
- ❖ “I feel a lot has changed in my life, I have learnt how to live well with people, and now form good relationships with people”
- ❖ “I was a person who had a very short temper, and now I have learnt how to control my emotions, and from the things I have learnt, with my support a group was started and I was made the group leader.”

- ❖ “I did not know myself well initially and now I know who I am, I know how to control my emotions, and developed good coping skills”

6. Topic mostly enjoyed and appreciated.

1. Stress
2. Violence and anger management.
3. Emotions and feelings

7. Suggestions for Improvement:

- Extend number of sessions, and more on anger management
- Add individual counselling tracks
- More follow-up support and cultural integration activities
- The group to start up a farming that will unite them, and help them continue being connected.

8. Impact Summary

- **Satisfaction Rate:** 87.5% rated the program as “Satisfied” or “Very Satisfied”
- **Peer Connection:** All participants-maintained contact with at least one peer post-program
- **Mental Health Shift:** Depression and PTSD scores dropped significantly for 5 of 8 participants
- **Quality of Life:** Participants described greater hope, restored confidence, and improved relational dynamics

9. Therapeutic Insights and Recommendations

- **Peer Dynamics:** Strong interpersonal bonds developed among participants, enhancing collective healing.
- **Cultural Relevance:** Analogies like "Bucket of Stress" and storytelling (e.g., the “water carrier”) created resonance and facilitated understanding.
- **Sustainability:** Participants should be encouraged to maintain group contact, develop personal resilience plans, and, if feasible, train others in peer-support practices.

10. Conclusion

The program demonstrated efficacy in using peer-based interventions to address psychosocial challenges within post-conflict populations. Participants not only explored internal emotional landscapes but also learned collaborative strategies for self-regulation and community engagement. The group environment served as a mirror and a support system, enabling transformation through shared experience.