

Rwanda

Sociocultural Practices for Resilience and Recovery

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The incidence of wars and other disastrous stressors has long had negative impacts on human lives. Disaster leaves behind unmentionable grief to all involved and usually diminishes the quality of life of an entire population across all ages and generations as they are forced to endure in the aftermath of the disaster. So how do societies cope? How do they institute programs aimed at recovery and reconciliation and build resilience among communities as they search for development and sustainability? In this examination of catastrophes in context, the case of Rwanda offers ideal scrutiny into recovery practices that have stood the test of time.

With a population of only 13 million, Rwanda is the smallest eastern African country. Rwandans also share one indigenous language, Kinyarwanda, which everyone uses. Despite this, Rwanda experienced a fierce civil war, a disaster of enormous proportion, in the 1994 genocide against the Tutsi. The consequences of this disaster loom to this day. The mental health of genocide survivors, their descendants, and perpetrators of the genocide, along with economic deprivation, social and community distrust, and physiological problems have challenged the political, economic, and social development of this territory for the last twenty-eight years. However, in the last five years or so, World Bank reports (2023) indicate that growth within the last decade in Rwanda has averaged 7.2 percent while per capita Gross Domestic Product (GDP) grew at 5 percent annually. The 2020 recession induced by the worldwide COVID pandemic (in which GDP fell by 3.4 percent) was the country's first since 1994. Such developmental performance, albeit described in purely economic terms, conveys the hope to onlookers that the well-being of Rwandans in the aftermath of their political, cultural, and social crisis contributes to viability and sustainability for progress in the country. To combat the effects of the genocide in the

immediate aftermath of the disaster, however, Rwandans made a significant effort to respond and manage the pressures experienced in their lives. Several homegrown solutions or adopted interventions had to be used to restore resilience and wellness within the Rwandan community. Community-based interventions and person-based therapies were extensively implemented to address the impacts of those stressors.

This chapter strives to explain Rwanda's post-genocide recovery strategies. Given the diversity of human responses to stressful life events, particularly traumatic events, which we ordinarily expect to overwhelm people's coping resources, the government of Rwanda created several initiatives to promote unity and reconciliation, effective reintegration of genocide prisoners and ex-prisoners, reduce intergenerational legacies of genocide, and empower the local leaders, teachers, and church leaders so that they could contribute to the reduction of the genocide effects in Rwandans of all generations. These efforts, made in partnership with other health (national and international) organizations, demonstrate the potential for increasing resilience, social identity, reconciliation, social healing, post-traumatic growth, reintegration of genocide perpetrators, and reduction of trauma transmission from one generation to another in post-disaster Rwanda.

To heal the nation and return to a semblance of harmony among formerly hostile groups, integrative psychotherapeutic approaches have been adopted to reflect Rwandan culture, assert respect for personal loss within communities and dispose of victims in a traditional, dignified, and respectful manner. Rwanda's achievements to date have been a lighthouse for managing trauma and restoring justice in the post-disaster period in remarkable ways. In the following sections of this chapter, we will discuss reasons for the genocide, justice restoration strategies, community-based mental health interventions, social arts and culture inputs, government programs and policies, and religious and traditional rituals.

Rwanda's Catastrophe

Circa 1990 and later, Rwanda experienced wars from insurgencies in Northeastern Rwanda. There is no agreed single cause of the invasion and political disturbance factors that led to the 1994 genocide against the Tutsi. Political instability and bad governance were, perhaps, foremost among suggested causes of the genocide that ensued in Rwanda. Some scholars have attributed Rwanda's catastrophe, however, to its colonial past, arguing that decades of division and incitement to hostility against the Tutsi by radicals in the Rwandan leadership structure (see Heldring

2021) controlled by members of the Hutu majority, contributed to the breakdown of peace and harmony among the two groups. Few deny that an intentional process of smearing the Tutsi minority as inferior and dangerous, contributed to the perception among Hutus that the only solution to the danger Tutsis posed was to eradicate their threat to the community.

In approximately one hundred days from the first open murmurings against the Tutsis, government forces, militias, and ordinary citizens took up arms against the Tutsi and killed more than one million of them, in addition to perpetrating sexual violence against the women and girls of that social and ethnic group. Journalists writing for human rights organizations and the press were quick to highlight Belgian colonial policy, which favored the Tutsis as superior to the Hutus and better able to manage positions of leadership. Thus, after more than thirty years of currying favor, there was little appetite among Hutus to stop the anti-Tutsi hatred that had developed.

In the chronology of events that led to the genocide of 1994, Rwanda experienced a coup d'état in 1973 by a Hutu general that reinforced anti-Tutsi and pro-Hutu sentiments, leading to another wave of violence against the Tutsis for no other reason than to make clear that the latter were in no way superior to the Hutus. In hindsight, therefore, it was not at all surprising that the Tutsi, many of whom had been exiled to surrounding areas of Rwanda, pushed back against the violence and demanded the right to return to their place of birth. Persistent claims of rights echoed cries for democratic leadership in Rwanda and brought the crisis to a head with all-out genocide against the Tutsis opening a new chapter in the history of Rwanda. Lessons, subsequently learned, have led to eagerness over the years to erase the memory of the past by transitioning to a shared future where group identities are absent from educational, government, and social institutions of Rwanda. No longer do school children have to reveal their group affiliations, their identification documents (e.g. passports), nor do they have to label passport-bearers as one ethnic group or another with an identification brand.

Indeed, after the genocide, the Rwandan community experienced the impacts of the catastrophe in a variety of ways, including cultural, environmental, economic, social, psychological, and physical. The effects of the genocide manifested on the individual level, community level, and societal level. The Rwanda National Commission for the fight against genocide reported that in Rwanda after only three months of clashing, more than a million Tutsi ethnic minorities were killed by the extremist Hutu ethnic majority. The rate of post-traumatic stress disorder (PTSD) was found to range from 50 to 76 percent among women, children, and men exposed to genocide (Pham, Weinstein, and Longman 2004). Furthermore, the econ-

omy was devastated by the wanton destruction of infrastructure. Rwanda also experienced the human impact of loss from a high incidence of prisoners, a massive number of orphans and an abundance of single parents. All those co-social demographics indicated that not only the economy but also the Rwandan way of life needed to undergo a full, societal overhaul.

Post-disaster recovery is best served through building the resilience of the people, community by community. Homegrown strategies, developed in every sphere of life (cultural, social, economic, political, etc.) have been among the most innovative methods for seeking sustainability. These strategies are mostly rooted in the knowledge capital resident in communities, where the narratives and memories of the past offer lessons on best practices that may still yield hope for a sustainable future. In this regard, this chapter will unpack some of the mostly homegrown, rather than imported, restoration practices, which include strategies for realizing a just transition to peace and harmony in post-disaster Rwanda, innovative socio-therapy practices for mental well-being, creative public policy for strategic leadership and reconstruction, sociocultural practices for generating reconciliation, apology, forgiveness, renewal, and so on.

Restorative Justice

Community Justice

In the aftermath of a national catastrophe, such as the genocide in Rwanda of 1994, a just transition to normalcy requires innovative strategies for realigning communities. Home-based practices in judicious settlement emanating from the knowledge capital found in community membership offer a realistic expectation that harmony may be restored among survivors and perpetrators when communities use traditional methods to ensure free and open communication across all parties. In addition to the contributions of health care providers who treated those wounded in the genocide for the many mental disorders observed as outcomes of the genocide, Gacaca courts and Gacaca judges were selected from the communities to restore resilience and bring reconciliation to genocide survivors and perpetrators. Gacaca is a system of community justice, which is rooted in Rwandan knowledge traditions. It is patterned on the idea of truth and reconciliation, arguing that when communities face their problems as a community, punishments are likely to match the weight of the crimes as recognized by the communities in which both perpetrators and victims reside. Gacaca courts constitute the traditional judicial meetings of the Rwandan communities where, prior to the genocide, people gathered to discuss property and family problems. At those gatherings, traditional

leaders had the last word, judicially. By applying traditional mechanisms (such as Gacaca courts) to mete out justice to demoralized communities, Rwandans hoped to effectively complement conventional judicial systems with homegrown methods, with a real potential for promoting justice, reconciliation, and a culture of democracy. In 1998, this traditional model—used to roll out a transitional type of jurisdiction to end the long history of unpunished violence, try the mass crimes in a community-based way, tackle the humanitarian issues in prison, find the truth about what had happened, determine the level of punishments, and bring about reconciliation and unity—was seen as the most innovative method for restoring justice in war-ravaged Rwanda. These are in harmony with other indigenous African knowledge systems adopted by African countries (Krog 2015a) and could well serve the needs of communities within the African diaspora experiencing and managing civil unrest in post-disaster periods.

Given the enormity of the civil catastrophe in Rwanda, transitional jurisdiction was restricted to cover justice in the immediate aftermath of the 1994 genocide. Crimes to be tried before the renewed Gacaca courts had to be focused on uncovering the truth of what took place during the genocide and determining the appropriate level of punishment. Significant crimes related to a history of unpunished violence committed by those who masterminded the genocide, were referred for trial to the International Criminal Tribunal for Rwanda in Arusha, Tanzania. Crimes committed by the coordinating perpetrators were referred to the national courts. Those accused of rape faced the highest class of prosecution. Overall, in Rwanda, the Gacaca court has been acclaimed for contributing much to the psychosocial healing, reconciliation, compensating of genocide survivors for their property loss during the genocide, honorable burial of the bodies of the genocide victims, repair of properties damaged during the genocide, and increasing the level of self-reliance among all people. These strategies are similar to the mechanisms implemented in South Africa (Koulen 2009; Krog 2015b) in their post-apartheid era and in Zimbabwe following independence from colonial management and could continue to be applied in other areas of the diaspora after similar civil catastrophes.

Contextually, the strategy for Rwandan justice, manifested in homegrown practices such as Gacaca, where the hearing in local trials of persons violating community and cultural norms, was brought before a joint committee, justifies the value of relying on the historical tradition, whereby facing one's accusers allows for the management of conflict in a way that the community finds helpful. Additionally, education and training in academic and social institutions have aided such methodologies in repairing the social identity hindered by the genocide and conflicts preceding the traumatic events of 1994. Recent generations specializing

in anthropology, psychology, public health, social work, and more encourage policy decisions centering on crimes against women, for example, and their issues in a sociocultural environment where inequities are addressed and solutions found internally. As anthropologists interpret traditional practices, psychologists also weigh in with knowledge-based strategies to promote mental health through innovative formulas, relieving stress, and reducing collective and transgenerational trauma. These new methods supplement conventional practices that have also contributed to mental health. Practices such as laughter yoga, traditional dance, and handcraft have had a substantial impact on the mental well-being of communities. These practices have been artfully designed to work at the community level to engage necessary conversations and behaviors that improve peaceful communication and *Ubuntu* (radical hospitality) within neighborhoods.

Mental Health Interventions

Community Resilience Model (CRM)

The African diaspora is renowned for its resiliency. Given the history of slavery and cultural disruption in the lives of African-descended peoples, community resilience has been the cornerstone of sustainability for the diaspora. In Rwanda, CRM interventions are psycho-biologically based healing approaches applied in communities with the aim of significantly improving mental health and achieving community well-being (Freeman et al. 2021; Grabbe et al. 2020). In Rwanda, as in other sub-Saharan African countries to have experienced traumatic events that hampered the lives of past and current populations, this intervention was implemented and successfully boosted the resilience of individuals and promoted psychosocial healing through the training in the CRM skills.

Application of such skills helped to create “trauma-informed” and “resiliency-informed” individuals and empower communities that share a common understanding of the impact of trauma and chronic stress on the nervous system. Knowledge of said skills/approaches inform how resiliency can be restored or increased when a skills-based model is applied.

Resilience is the ability to bounce back from some real, experienced, difficulties or the skill of utilizing knowledge that can restore or establish inner strengths and resources for overcoming seriously adverse, traumatic events and their impacts, thus allowing individuals to pursue and succeed in their endeavors (Ionescu 2011; Julien-Gauthier and Jourdan-Ionescu, 2015). Resilient individuals, when experiencing well-being, might become better than ever in embracing positive well-being. The 1994 genocide sur-



Figure 5.1. Socio-therapeutic training exercise. Source: RRG0 project © Samuel Habimana

vivors showed resilience and continued living and achieving their goals after the genocide. An example of this is explained in a study conducted on students associated with Genocide Survivors Students Association (Association des Etudiants Et Éléves Rescapés Du Genocide; AERG). These students were seen to show resilience and were reported to have attained their vision of achieving goals for living successfully in the present and even in the future (Dushimirimana, Sezibera, and Auerbach 2014). Resilience is often measured by the extent to which accomplishments surpass original intentions and lead to the adoption of a new lifestyle. Studies show that survivors of the Holocaust achieved resiliency by thriving in the present and remain mentally stable despite the rate of trauma they experienced in their post-disaster era. The influence of resilience varies across different sectors of one's life, including social, individual, political, economic, and cultural interventions (Luthar and Cicchetti 2000).

Other scholars have observed how traumatized communities demonstrate resiliency. Resilient individuals maintain a physical equilibrium of living in the present and achieving a stable mental balance in the face of difficulty (Miller-Karas 2015, 2018). Resilient individuals tend to develop new possibilities and positive thinking, which indicate post-traumatic growth (Anderson et al. 2019; Lepore and Revenson 2006; Ogińska-Bulik and Kobylarczyk 2016). Based on the post-disaster experiences of Rwan-

dan community members, where life was inevitably stressful, and there was tremendous variability in how people responded to and managed life's stressors, it can be argued that the introduction of coping skills served to boost the resiliency levels of communities. Knowledge sharing has the capacity to avail communities of the potential for resilience. Diasporic people may be empowered to develop and adopt skills of resilience and gain post-traumatic growth that has been important to their everyday memories and plans for the future. In a recent study, a relationship between resilience and PTSD showed stability was robustly and significantly associated with a decreased likelihood of mental health problems (Bogopolskaya 2019; Wrenn et al. 2011). Strength is exemplified by refreshment, mental equilibrium, and homeostasis of the nervous system (Miller-Karas 2018). Across Africa and its diaspora, there has been a notable dissociation in periods of civil unrest between post-traumatic stress disorders and resilience in individuals and communities.

The interventions of five CRM skills, namely tracking, resourcing, grounding, gesture, and spontaneous movements, now help and demonstrate that this biologically based model significantly contributed to the restoration of mental equilibrium and mental well-being in genocide survivors who had previously displayed trauma symptoms. The genocide survivors increased their ability to show love, embrace a relationship, and heal from their trauma after participating in the Community Resilience Model skills training program (Habimana et al. 2021). Further, Rwandans, within their own understandings, have applauded the resilience of the Rwandan community after the genocide. It is still difficult to understand and differentiate the definition of resilience and factors of resilience among different communities. The experiences encountered by people originating in Africa highlight the risk factors of disequilibrium of the nervous systems, as perceived in victims, survivors, and descendants.

The patterns of this dysregulation of the nervous system increase the risk of physical and psychological illnesses such as immune-system disorders, depression, anxiety, and cognitive impairment. For example, some survivors may have the chronic impact of trauma. Some communities may experience chronic collective trauma. If those communities of people are not provided health interventions such as the CRM skills that may target the regulation of the nervous system, the life of the affected may be worsened (Pfefferbaum et al. 2013; Miller-Karas 2015). Based on principles of participatory action research, CRM applications had the potential to contribute to community resilience by encouraging and supporting community participation, reconciliation between survivors and perpetrators, and build cooperation, communication, self-awareness, humanity, and trust among Rwandans. Therefore, somatic interventions that specifically

target the way post-traumatic responses are stored or patterned in the body, in addition to working with cognitions and emotions (Ellis and Dietz 2017) are useful strategies in the search for sustainable development in post-disaster communities.

Clinically, we can say that psychotherapeutic approaches in the aftermath of disaster effectively restore the nervous system, which is the major mechanism that allows other health systems to work well. Based on Rwanda's experiences, communities in the diaspora may advocate for CRM skills training after confronting a physical (weather-related) disaster, a sociopolitical catastrophe, or any other form of traumatic event that may impede their development and sustainability as a nation. Clearly CRM can aid self-care for those community members who are frontline workers, first-responders to crises, or live in highly traumatized and marginalized communities. Such recommendations concur with studies that found CRM skills training to be a critical approach to knowledge production that addresses psychopathologies and helps communities to be resilient and work in equilibrium (Leitch and Miller-Karas 2009).

Socio-therapeutic Practices and Mental Well-Being

Prior to 2005, several interventions to resolve post-disaster underdevelopment were focused on the individual. Several Rwandans, for example, received patient-centered interventions and hospital-based therapies that aided in biopsychosocial healing and, as a result, were indirectly supported in reconciliation, social cohesion, and reintegration. However, due to a cultural taboo, many Rwandan communities at first opposed mental health interventions.

Not dissimilar in this resistance is the way African diasporic communities also believe that mental health treatment is anathema to their well-being and is likely to further contribute to the marginalization rather than recovery of individuals of African descent undergoing such treatment. The exigencies of disaster, however, call for desperate efforts to be implemented to ensure recovery and sustainable development. Thus, socio-therapy was introduced into Rwanda as a community-based approach to promoting a high level of reconciliation between genocide survivors and perpetrators, as well as formulating effective strategies for reintegration of genocide prisoners and ex-prisoners, reduction of the intergenerational legacies of genocide, and empowering the local leaders (see Figure 5.2 below) to take action to reduce the effects of the genocide. Note that socio-therapy strategies differ from psychotherapy because socio-therapy incorporates the totality of the clinical setting. The listed principles and methods are



Figure 5.2. Gathering of genocide survivors, perpetrators, and family members. Unity and Reconciliation program.

applied as a model of confronting patients with their “outside world.” This is the opposite of facing a patient with an inside world during psychotherapy (Jansen et al. 2015; Richters, Dekker, and Scholte, 2008). Hence, this practice is implemented via community-based interventions, in various countries, to address the impact of conflicts, war, and genocide. Notably, African countries have benefited from such interventions, which have resulted in historical healing from trauma and promoting individual and community resilience in the post-conflict period. Such interventions have been implemented in African countries, such as Uganda, South Africa, and Sudan (Brewer 2020; Krog 2015a), but have not been necessary in post-disaster conditions in the Black diaspora. Given the recent post-election experiences in regions of Guyana following months of debate about who had won the elections, socio-therapy may well become necessary in future to defuse the rising passions that stem from the ethnic undertones of community conflict in the city and rural areas.

In Rwanda, community-based socio-therapy has also been used as a hybrid intervention integrating psychological trauma healing with rebuilding community trust and resilience. Within a group of survivors, participants were able to transition from one exercise in recovery to another. Distinct sequential stages of the healing process in socio-therapy include “safety,” “trust,” “care,” “respect,” “new life orientation,” and “mem-

ory.” The approach has often promoted psychological and community resilience through shared storytelling. Storytelling has had many benefits. Sharing their stories allows participants to reflect on the actions of the past and determine the origins of the behavior that led to the hostility resulting in hatred for each other and genocide in retaliation for mutual anger. Knowledge sharing also allows participants to determine better ways to recover, move forward, and grow to achieve the best outcomes for the whole nation. As argued by George Santayana (1905), and later supported by Winston Churchill in a 1948 speech to the British House of Commons that those who fail to learn from history are doomed to repeat it. Rwandan communities that revere the lessons of the past have gained much in terms of individual and national growth by not repeating the mistakes of their recent past. Communities in the Americas and the Caribbean (especially Guyana in recent years) should be similarly encouraged not to forget the consequences of political disasters of the past, lest they repeat them.

In the aftermath of political conflict and following transitions to peace and democracy, Rwanda has attempted to rebuild political structures and shape social relationships to create more peaceful futures. Yet, the memory of past violence does not stay neatly in the past. It festers and disrupts and haunts our best efforts to move forward. Along with significant social and political actions, it is crucial that peacebuilding processes also grapple with and respond to the individual and collective memory ghosts of past violence (Bayer 2010; Dudouet 2007).

The approach of socio-therapy as a clinical effort was adapted to the Rwandan context for dealing with the effects of the genocide among the genocide survivors and their descendants, and genocide prisoners and ex-prisoners and their descendants. The approach aimed at promoting an effective reintegration, reduction of transgenerational legacies of genocide, and empowerment of local leaders, teachers, and church leaders to find solutions to problems associated with the effects of genocide (Biracyaza and Habimana 2020). Often, families entered the therapeutic setting, in socio-therapy, with complex trauma histories and intergenerational trauma that may persist for a long time when not addressed using the appropriate interventions such as community-parent-based and community-youth-based interventions. These histories are complicated in that every generation seems to be affected by adversity, mental health issues, substance use, and government agency involvement. In agreement with scholars researching this topic, it was found that untreated traumatic stress has severe consequences for children, youth, adults, and families. These are congruent with other studies documenting that public health interventions are substantial for empowering people and promoting their well-being (Goodman 2013).

Other studies have also made strides in understanding the impact colonialism, slavery, war, and genocide have on families and what can be done to address this in the context of a present problem (Brewer 2020). To be clear, not all families carry the burden of what happened generations ago; some families are more resilient than others and can acknowledge the past while looking toward the future. This chapter on post-disaster recovery and development aims to address the varied impacts of disaster while providing ways to work with families who present with complex histories of disaster in their own lives. It is helpful to take this into account, since it is the hope that communities in the African diaspora, with their diverse experiences of disaster and resultant trauma may apply the best practices that may alleviate their situation in their own regional spaces. While socio-therapeutic practice may, overall, serve as a helpful interventional approach, because of its contribution to social cohesion within the same neighborhood or group, it must be recognized that variation in its impact may result. In Rwanda, a group of ten to fifteen participants sitting in a circle to talk about their experienced health stressors and the effects on their psychosocial health (Richters et al. 2008) has been impactful for the community in which the strategy was applied. The intervention helped to restore the psychosocial well-being of the participants and community and contributed to economic welfare. Participants also talked about events related to their traumatic experience, be it sexual or gender-based violence, war, genocide, or other public health concerns, in addition to the destruction of trust and safety within their communities, as being akin to “life without humanity.” To facilitate a sense of redress for people in Rwanda, an approach was needed to address psychological factors operating at individual and community levels. Analyzing the PTSD associated with the 1994 Rwandan genocide against the Tutsi as one of the root causes of domestic violence in Rwanda, with some research postulating that domestic violence has been a vector for the transmission of trauma to children in the aftermath of the genocide, may not be consistent with approaches and findings for Louisiana following the devastation of Hurricane Katrina in 2005. This illustrates the fact that recovering from disaster, given the variety of its forms, does not and cannot have a one-size-fits-all treatment plan.

Still, sharing socio-therapeutic knowledge and practices with other communities experiencing trauma related to idiosyncratic disaster experiences is particularly helpful to recovery and a better mental and social functioning approach to the problems at hand. The benefits of information sharing, as it relates to disaster recovery, emanate from the shared dialogues (Biracyaza and Habimana 2020) within communities and have a powerful impact on the continuing search for recovery and developmental sustainability.

Religious and Cultural Practices

Religiosity in Rwanda

Before the genocide, traditional healers, pastors, and herbal medicine were used to treat mental health problems. The study, conducted in the Northern Province of Rwanda, reported that traditional healers use a variety of indigenous labels to describe what biomedical psychiatry categorizes as psychotic disorders (Tan et al. 2021). These are associated with various explanatory models, from supernatural and/or spiritual causes to somatic causes such as HIV (Patel 2011). Research on traditional healers and mental health revealed that 9 percent of Rwandan respondents consulted traditional healers, and 11 percent consulted a religious or spiritual advisor in the aftermath of the genocide. In the sample analyzed, it was found that consultation with conventional healers was more likely to be predicted by (older) age, (black) race, unemployment, (lower) education, and anxiety or substance use disorder (Sorsdahl et al. 2009).

Cultural Practices

Of course, such findings demonstrate the range of cultural practices engaged in the aftermath of post-traumatic stress events. Disasters, as well as any other disruption to communities in the diaspora, are often met by a return to roots, to the conventional wisdom, to seek understanding, new and old ways of knowing, so that action can be taken to mitigate the risks to recovery, development, and a better future. Attentive community leaders are aware that clinical assistance is only one way to heal communities traumatized by disaster and do their best to engage government action to provide other forms of sustenance for marginalized members of the community, especially those who are unable to afford medical care or may be distrustful of modern and technological means of treating trauma. Uniting behind cultural norms helps to aid healing and recovery in fundamental ways. This is a lesson that diasporic communities in the Global South understand well. Diasporic communities in developed localities of the Global North, who have long forgotten or abandoned the cultural rituals of their ancestors, find slower healing for the lack of homegrown practices to which they can resort. The latter thus continue to depend on government assistance, costly therapy, available charitable services, or, in the absence of those, give in to the wanderings of their mind and seek shelter and food wherever they may find it, sometimes resorting to alcohol or drug abuse to “kill the pain” of survival.

Government Policies

Reconciliation Strategies

Reconciliation after a disaster such as the genocide in Rwanda is a priority in nations struggling to recover and grow. In addition to the cultural and medical strategies made available to disrupted communities, governments have stepped up to mitigate the fallout from the disaster. In the case of Rwanda, attention was given, over the decades since the genocide, to provide diverse community-based health interventions in the countryside. The aim of these efforts was to promote the well-being of Rwandans and increase the level of social identity. Although these interventions have knowingly contributed to psychosocial healing, social cohesion, trauma healing (individual and collective trauma), they have also contributed to reconciliation and forgiveness journeys among the genocide survivors and perpetrators. As shown in prior studies (International Peace Institute 2013), forgiveness and reconciliation are the essential processes leading to individual and community resilience. Reconciliation and forgiveness are the significant steps in peacemaking, collective healing, and social cohesion. Reconciliation has been the final step of forgiveness since they are complementary. Therefore, the government of Rwanda has established a month of unity and reconciliation that aims to promote recovery, effective reintegration of genocide prisoners and ex-prisoners, and promote the well-being of all Rwandans, including genocide survivors and perpetrators. This policy is put into effect on 31 October every year.

Several other policies are implemented to foster community and family resilience. Among these are such activities as constructing a house for vulnerable people, empowering youth and reintegrating them in activities that promote reconciliation, campaigning in the community to encourage resilience in Rwandans, eradicating the genocide ideologies in youth and adults, involving Rwandans in the effects of discrimination and genocide by promoting the Ndi Umunyarwanda program, translated as “I am Rwandan,” and performing community service to promote a unique identity and social cohesion. This line of policymaking was introduced on 1 October 2020, when Rwanda launched a month-long event commemorating the Unity and Reconciliation of Rwandans on the thirtieth anniversary of their journey to restoring Rwanda and liberating itself from the shackles of discrimination and division.

Since 2007, a particular time has been set aside to reflect on unity and reconciliation every year. Initially, a week was assigned for such reflection but in 2018, as Rwanda approached the twenty-fifth year since the genocide, the commemoration was increased to a month-long program



Figure 5.3. Government provided green space available for Umuganda activities.
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at the request of Rwandans. Each year has a theme. For instance, in 2020, the theme of this remembrance was “Let’s work together to build a country without discrimination.” The people of Rwanda recognize all these sociocultural events or memorials as a new, collective step in the country’s recovery and the achievement of self-determination and sustainable development. Rwanda fully recognizes that reconciliation is a genuine pathway to healing and with the recovery of individuals comes a national product that can be sustainable. The government of Rwanda in listening to the people and seeking to meet their demands has added currency to global speculation that Rwanda is leading the way toward overcoming disaster and attaining a sustainable future, free from inequity and unrest.

One often overlooked fact is that the government of Rwanda looks nothing today as it did thirty years ago when government leadership and opinion practitioners comprised mostly of Hutu males who stirred up “identity conflict” and added vengeance to their policymaking arsenals. In the post-genocide period, with a society where more women than men were available to take the reins of government, a new vision was reflected in Rwandan decision-making and women were empowered to nurture communities back to good health. With careful planning and collaborative use of the knowledge capital produced in towns and villages, reconcilia-

tion and other healing strategies were implemented. Representation of women in government, as discussed more fully in other parts of this text, has been a major source of progress and development in this region of Africa and a light for those in the diaspora (as seen in Barbados in 2021) who are fast catching up with Rwanda's lead in female representation in the hallways of government.

Umuganda

Umuganda, a program for restoration and patriotism, is a pre-colonial Kinyarwanda word that means working together to support and reconstruct impoverished conditions. According to Penine Uwimbabazi (2012), in pre-colonial Rwanda, Muganda was a traditional practice and cultural value of working together to solve social and economic problems for mutual benefit. This practice aimed to support the people with low income and in need of immediate financial support (Uwimbabazi 2012). The activities of Umuganda included, for instance, cultivating the fields for those who were unable to do so due to either physical handicap or old age, building houses and spaces for their livestock, carrying the food, and fetching the water for physically disabled people and providing transportation to medical facilities for those who were in need. Today, green spaces, as illustrated above, are available for Umuganda activities, which may be conducted at the individual or household level. These played a significant role in protecting human security and increasing household income. This community practice started in pre-colonial times, and it was characterized by bringing together community members to solve social and economic problems for mutual benefit (RGB 2017).

After the genocide, communities, with the support of government officials, returned to the practice of Umuganda, which has the potential to restore resilience and reconciliation among survivors and perpetrators of the genocide. The village codes to build the house of survivors were re-established and the perpetrators' families join others to give support. In some families, the perpetrators do more than others to demonstrate their regret and a willingness to foster cohesion in the community. Furthermore, survivors show willingness to apply this program to support the families of perpetrators. This mutual collaboration significantly contributes to the community's restoration of wellness. Umuganda activities have a significant impact on conviviality within Rwandan society. As a cultural-based approach, Rwandans embrace the opportunity to contribute to the health of the Rwandan community in support of economic advancement and communal cohesion, which fosters both a spirit of reconciliation and patriotism.

Reconciliation Villages

For those who survived the Rwanda genocide or watched as their loved ones were slaughtered or raped, reconciling with the genocide perpetrators once seemed unimaginable. Living together in harmony and helping each other was also unbelievable. To promote neighborhood safety and reconciliation between the genocide survivors and perpetrators, reconciliation villages were constructed so that genocide survivors and perpetrators could live side by side. Such villages were built by the Rwandan government with the support of the Prison Fellowship Rwanda (PFR) organization. This organization, PFR, has adopted a variety of approaches to implement healing and reconciliation programs, including programs titled Peacebuilding and Reconciliation, Psychosocial Healing and Reconciliation, Human Rights Promotion and Legal Aid, and Spiritual Resilience (Mafeza 2013). The reconstituted Rwandan government fully supported the communities in efforts to make these programs successful. Most of the labor of love, however, came from community advocacy, primarily the diligence of women, some of whom worked in tandem with local female political representatives, who served as government liaisons to the community. Under the Peacebuilding and Reconciliation program, the PFR (2003) started the reconciliation villages program. Compared to other existing villages, these reconciliation villages provided an enabling environment for continued practical reconciliation while also offering shelter to the target groups and an opportunity to bring peace and reconciliation to the community.

Sociopolitical Perspectives

In postcolonial Africa, several countries from this continent built on universal norms and enshrined them in domestic legislation and practices as they attempted to reconcile the imperatives of national independence with adherence to international law. Some countries experienced violence, wars, and genocide that decimated the quality of life of individuals and communities. The continent also witnessed the prevalence of undemocratic and dictatorial regimes that were characterized by gross violations of human rights, extrajudicial executions, and violent change of power. Although some of the countries that experienced those traumatic events have been struggling with the psychiatric and social effects of those events, Africa has promoted reconciliation, social cohesion, social identity, constitutionalism, trauma healing, resilience, self-reliance, and traditional justice in several countries (Bruch et al. 2009; International Peace Institute 2013). Africa achieved this through diverse efforts to incor-

porate value and norms into national, regional, and continental structures and strategies to attenuate the harmful effects of those events.

Rwanda has not been the only African territory to benefit from these cultural efforts to rebuild its society after a disaster. African countries, such as Uganda and Burundi, faced civil conflicts that brought several negative impacts to the lives of the people and social cohesion among the community members. After these widely publicized harmful events of the 1980s, Rwanda's experience with the 1994 genocide that killed millions of people and brought extreme poverty, mistrust, family conflict, orphans, widows, psychopathologies, and collective trauma added new fears that development in African regions was being retarded rather than sustained. Across the Black diaspora as well as in other parts of the world, many gave in to the negative perspective that Africa was doomed and its people, no matter where scattered, lacked the capacity to self-govern efficiently. Few considered the global challenges facing Africa and its descendants, the discrimination and inequity that brought countries like Rwanda to this state of psychological collapse. Few envisaged a return to a commitment to responsible governance with fairness, equity, and respect for the sanctity of human life. But, a few years later, Africa momentarily contributed to reducing the negative impacts of lifelong trauma by elaborating and articulating the norms that have contributed to the well-being of the people and development. Although the conflicts experienced were due to colonialism, weak governance was also one of the factors that led to the battles, war, and genocide. So different organizations and government leadership collaborated to bring peace and restore stability to African countries. The contributions of Africa, by creating initiatives favorable to peacebuilding (McNamee and Muyangwa 2021), may serve as a beacon for other areas of the African diaspora with whom such understandings can be shared. Recognizing that development in all its forms can be sustained in the Black diaspora is a lesson in resilience this volume hopes to reiterate.

In addition, government policies aimed at building the resilience of Rwandan communities and reinforcing the wisdom of pursuing self-determination rather than continued political and economic dependence on a colonial past. One of the policies instituted in Rwanda, *Ndi Umunyarwanda*, translated as "I am Rwandan," is specifically relevant to ideals of self-determination. It is a political move aimed at nationwide "de-ethnicization" of the population and it has taken many forms. In recent times, this program identified Rwandans as unique and renounced the colonial strategy of divide and conquer. Policy leaders made the argument that there is no ethnic identity of groups under labels such as Hutu, Tutsi, or Twa. Thus, the *Ndi Umunyarwanda* program, established in the post-



Figure 5.4. Ndi Umunyarwanda Gathering. © Samuel Habimana.

genocidal period to strengthen reconciliation, patriotism, and national identity, has engendered Rwandans' humanity and social identity. The program also initiated the building of a national identity based on trust and dignity. Its aim was to strengthen unity and reconciliation among Rwandans by providing a forum for people to talk about the causes and consequences of the genocide and what it means to be Rwandan.

Consistent with other government initiatives, officially aimed at overcoming tribalism and building a national identity, Ndi Umunyarwanda is also about sharing a single narrative of the country's past, present, and future (Kagoyire and Richters, 2018; Richters and Kagoyire, 2014). Ndi Umunyarwanda is the policy established in 2013 after the community-based Gacaca courts were concluded. The government of Rwanda based this strategy on restoring the unity of Rwandans and promoting community resilience. No conventional means existed to hold accountable ordinary Rwandans who committed genocide. There were too many cases; nearly two million Rwandans were implicated. So, many programs were applied to create unity, resilience, and reconciliation among Rwandans, post-genocide (see Figure 5.4 above).

Based on how the genocide was conducted and its impacts, it was not easy to imagine that people could live together, work together, study, and pray together. If as many victims as perpetrators conflict, justice becomes difficult. For example, South Africa experienced social injustice during

the period of apartheid. Due to the traumatic past experienced in South Africa, South Africans thought that forgiveness and reconciliation were impossible. This also occurred in Rwanda, where genocide survivors and perpetrators did not realize that reconciliation could be possible among the genocide survivors, their families, genocide perpetrators, and their families. But in several instances, the unforgivable has been forgiven by envisioning a new national identity (Gallagher 2002).

Moreover, current strategies also contribute to effective reintegration of genocide prisoners and reduction of their sentences. So, the Gacaca judges began the process of healing and forgiveness by facilitating a resolution of the problems related to the genocide. Via community services made available to Rwandans, not as punitive judgments but as restorative practices, what was feared to be impossible, became possible. To better appreciate the particularities of restorative justice in the Rwandan context, it is necessary to understand the rationale behind it and examine its implementation. Many Rwandans now believe that being Rwandan within the community empowers the society to work for the betterment of the whole nation rather than allow for the recovery of individuals. This perspective sustains the belief that when knowledge capital is tapped into and produced at the community level, the empowered society can effectively advocate for its whole well-being and benefit from sustained development.

Gender Equality

It cannot be denied that bottom-up strategies are more likely to succeed in collaboration with government support. At the heart of Rwandan community success in achieving peace, harmony, and economic security in an environmentally just society, are the rights, roles, and duties assigned to women in the post-genocide era. As stated earlier in this text, the war in Rwanda left many more women than men alive to take the reins of government and restore peace and progress to Rwanda. According to the Rwanda National Institute of Statistics, Rwandan women represent 58.6 percent of the population and more than 63 percent of the members of parliament in Rwanda are women. Those statistics illustrate how gender equality and equal participation in policy making in Rwanda contributes to positive reconfigurations of Rwanda after the long-term effects of disaster.

After the genocide, with more women surviving the atrocities and heading households in Rwanda, the promotion of gender equality was the right choice for helping the nation develop and recover from the effects of the 1994 genocide. Such developments are not sufficiently known in the

African diaspora. There continues to be a pressing need for knowledge sharing among a people who are constantly reminded by the West of their perceived failure to live up to European standards of civilization. It cannot be overstated that when women engage in policy making, they are less likely to ignite wars than to generate policies that nurture and rebuild communities.

Social Arts and Culture (SAC)

Sociocultural influences in Rwanda have included sports, music, laughter, exercise, and dance throughout the ages. In the aftermath of the genocide perpetrated there, the creative arts have played a meaningful role in recovery. In Rwanda, traditional practices that potentially promote mental health have been identified and explored. For example, there are ways to sing songs that heal the wounded heart and restore mental wellness. These are songs typically sung when a person has died or when a person's health is impaired and in need of special care. Communities in Rwanda have not only revived these for small family gatherings but have embellished and shared them with larger communities and international visitors. When performed at memorial ceremonies and other national events, these social arts convey, with a level of certainty, that a national spirit is alive and thriving in Rwanda. Although such behavior is not unique to Rwanda, it gives hope to many who wrote the country off as non-viable in the post-disaster era. As observed in airports and other public spaces in the Caribbean and Africa, diasporic countries exuding a warm welcome to visitors do so with song and dance and genuine cheer.

Sports Activities

Additionally, sporting exhibitions were revived by the government of Rwanda to promote the well-being of Rwandans. It is considered an essential method for building resilience and bringing positive feelings and emotions to communities of people. After a tragedy, such as the genocide of 1994, these recovery methods were used among families of survivors to bring hope for children and older adults who survived the atrocities of the day. In concurrence with previous studies that documented the effectiveness of sport and songs on mental health outcomes, this approach to recovery aided a reduction of depression, anxiety, and trauma. It also increased the level of social cohesion (Büssing et al. 2012; Pascoe et al. 2020). It is evident that these practices helped rebuild the social life of Rwandans and heal wounds from the genocide.

Contact sports, such as football and volleyball, are worthy of mention here. After the genocide, it was hard to motivate people to meet again with feelings of goodwill. Sporting opportunities were devised to bring back happiness and well-being to the Rwandan community. Sporting events were held to reconnect the Rwandan community and eliminate ethnic segregation. Sports were encouraged in Rwanda in all population categories, including youth. Rwanda began identifying champions among primary, secondary, and tertiary institutions. Schools met and played different games: football, volleyball, basketball, and handball. Adults also participated in tournaments and won at the intersectoral or district level. Those games signaled the togetherness and wellness of the Rwandan community in the post-genocide period.

Engaging in sports was also another way to teach and share social values, including fair play, respect for opponents, and the importance of hard work. It also taught the significance of teamwork, cooperation, and inclusion. Thus, through sporting activities, sponsors of recovery reinforced the benefit of helping participants acquire values and life skills consistent with positive social relationships, collaborative action, and mutual support. All those collaborations have contributed to making Rwanda live again. For example, when the sports organization known as Rayon Sports F.C. plays and wins at national and international football games (now ranking fourth in Rwanda NFL), a high percentage of the Rwandan community displays togetherness and joy in the shared experience.

Dance

Traditional weddings and dancing also played a special role in the post-disaster recovery of Rwanda. The Rwandan wedding remains a symbol of unification between families. It is also a way of sharing daily and of protecting family relationships. Marriage ceremonies have served as an excellent sociocultural practice that brings communities together. Music and dance are part of the Kinyarwanda tradition; special dances are performed for leisure, entertainment, and celebrations like marriage. The Kinyarwanda dancing (*Intore*) is unique; it consists of heavy drums carried and played by energetic men and women who dance. Sometimes, spectators sing along so that the performance becomes colorful, interactive. The Kinyarwanda dance demonstrates their tradition as the dance motions illustrate their way of life, such as cattle rearing and personal bravery. Performances educate younger audiences and international visitors on the traditions and way of life of Rwandans.

Dancing and weddings in Rwanda also contributed to the restoration relationship within the Rwandan communities destroyed because of the

genocide. When a son from the perpetrators' family marries a female survivor, they invite both families to attend the wedding. These cultural experiences have made it possible for Rwanda to overcome the conflicts resulting in the genocide and attest that acknowledging the past helps one never to want to repeat the atrocities of the past.

Laughter Yoga

Laughter yoga has been used in several countries. In 2012, a team from Australia brought laughter yoga to Rwanda. This intervention has successfully motivated the Rwandan community to strive for wellness and well-being after exposure to the adversity of genocide. Through laughter yoga, Rwandans bounced back and shared smiles, joy, and peace. Laughter is contagious! It does not discriminate among individuals; rather, it generated wellness and well-being throughout the Rwandan community. In exercises in laughter yoga, conducted for the benefit of international visitors and also practiced in community groups and on campus, it is illuminating to see the powerful impact laughter has on the individual, the community, and others affected by the contagion of laughter and the energy it fosters. It is a satisfying exercise for people of all ages. In societies where there is strife, poverty, and many other vulnerabilities, sharing the gift of laughter is precious indeed.

Rites and Respect

After the genocide against the Tutsi, genocide survivors and their descendants developed heart wounds, complex trauma, and some experienced psychosomatic symptoms. Not finding the bodies of loved ones killed in the genocide was devastating for surviving members of society. This loss maimed their personal growth, disrupted collective healing, and stymied sociocultural development. Despite the fact that many (discussed above) strategies were implemented to contribute to reconciliation and psychosocial healing, the problem of not burying the bodies of genocide victims became a public health concern that hampers the well-being of survivors and perpetrators (African Rights and REDRESS 2008; Korman 2016). It is disturbing to see that many years after the genocide, the remains of genocide victims are still being retrieved and given to families for a decent burial.

In general, when a person dies in Rwanda, the rest of the family has to bury them to honor the bodies of the genocide victim. Most of the time, after losing the victim, the other family member(s) may develop psychiatric ailments that may last a long time. Some psychiatric disturbances may include depression, anxiety, and inconsolable grief. This perspective

is expressed in recent scholarship, establishing that death is a “universal, natural, persistent, inescapable, unavoidable, and undeniable fact of life” (Ekore and Lanre-Abass 2016). When a death occurs, there is usually a strong negative impact on the family and friends of the deceased. The magnitude of the impact often depends on whether the end was expected or unexpected. Such effects may be economic, emotional, psychological, or socioeconomic, depending on the relationships between the dead and those left behind. In the case of genocide, however, the circumstances of death are elevated. The number of lives lost constituted a disaster of enormous proportions and impacted families, the nation, and the Rwandan diaspora in the wake of so many lost lives, heightened economic insecurity, the collapse of families, and devastation in the physical environment. Although some scholars highlighted the impact, the deaths caused entire Rwandan communities to be crippled by fear, anger, and grief, which effectively impacted the whole society.

According to Copernicus, the human soul perishes with the body at death, bringing all sensation and conscious existence to an end (Ekore and Lanre-Abass 2016). Although some scholars or philosophers believe that death is natural, and there is no need for it to have such an impact, the relatives who were closer to the dead suffer deeply from the senselessness of the genocide and fear, anger, and grief, once the inevitability of death becomes apparent and intolerable. In the case of Rwanda, the loss of so many lives and souls brought an abrupt end to the potential for personal, economic, and environmental security and halted national development.

These experiences of Rwanda also support the view expressed in previous studies that sharing collectively is better than sharing individually because collective memory has the potential impact of reconciliation and social cohesion (Rafferty 2017). The fact, though, is that collective memory is a massive barrier to conflict resolution in societies that endure intractable conflicts. It is for this reason that sharing the experiences of this disaster and the solutions found to mitigate the risks of such a disaster being repeated is recounted here. Members of the African diaspora, wherever currently located, can learn from the innovative measures applied in Rwanda to create their own narratives of identity, responsible self-governance, and the successful pursuit of sustainable development for their communities.

Conclusion: Balancing Resilience with Development

The genocide against the Tutsi in Rwanda utterly destroyed the standard of living for Rwandans, and several repercussions still act as obstacles

to social reconstruction and human welfare. To overcome such effects, many sociocultural practices and innovative policies were established in an attempt to mitigate the impact of that disaster, ensuring that Rwanda achieved the viability that all nations require in order to grow and prosper. Overcoming negatives in a country devastated by colonial exploitation, injustice, racial degradation, ethnic discrimination, natural resource rape, a high rate of poverty and economic insecurity, environmental distress, physical and psychological illness, and mistrust of policy and opinion leadership throughout Rwanda, is an impossible task for any country to undertake. Diverse creative policies and psychological models adapted from homegrown and foreign anthropological and culture-based practices were set in place to build the resilience of Rwandan society and recover from the harmful effects of genocide. Rwanda serves as a crucial example to other countries, demonstrating the truth that it is possible to live again after a calamity as horrific as genocide by employing tried-and-true methods to discover solutions. However, resilience has not yet reached its peak; much is still left to be done for development to be achieved and for Rwandans to exercise self-determination in the hope of becoming a sustainable and prosperous force for development.

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