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NONVIOLENT PEACEFORCE

Trauma Healing for IS-Affected Communities in Iraq: Key for Lasting Peace



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Introduction

The ongoing legacy of trauma in Iraq, exacerbated by years of conflict—particularly following the IS occupation of Ninewa—poses significant barriers to social cohesion and peacebuilding efforts. Communities in Ninewa report that the persistent cycles of violence in the region are inextricably linked to unresolved trauma, which increases the risk of future violence. Experts suggest that mental health disorders rank among the main health concerns for Iraqis aged five and older, underscoring the debilitating impact of emotional distress,ⁱ and demonstrating the large scale of mental health-related needs.

Addressing trauma healing serves as a vital foundation for enabling communities to recover and reconnect, fosters space for strengthening social cohesion, and contributes to sustainable peace efforts.ⁱⁱ

Given the interconnectedness of trauma and social cohesion, there is a need for a comprehensive framework for healing in order to create conditions for social repair, reconciliation, and lasting peace. Locally-led healing initiatives contribute to filling key gaps in the current transition of Iraq towards stabilisation. This is also essential to the integration and effectiveness of the Humanitarian-Development-Peace (HDP) nexus across different kinds of programmes, as violence prevention and lasting peace are unlikely to be sustained while the root causes, such as trauma remain unaddressed.

Trauma-healing and Barriers to Social Cohesion

To understand the barriers to healing in Ninewa, it is essential to explore the following challenges:

1. Limited Recognition for Healing Needs

Across humanitarian, peace and development programming in Iraq, little attention has been paid to the complexities of trauma experienced by communities and the related needs. Peace processes in Iraq so far tend to often focus on unrealistic goals, such as the return of displaced families, with a narrow focus on stabilisation without recognition of unhealed trauma as a barrier for realising peace. While development and stabilisation work is essential to full recovery in the country, the aspect of reconstruction that relates to reconstructing the collective mental and emotional stability of the community remains overlooked.

i. Médecins Sans Frontières. (2021). Healing Iraqis: Challenges in providing mental health care in Iraq. Retrieved from <https://www.msf.org/healing-iraqis-challenges-providing-mental-health-care-iraq>

ii. International Center for Transitional Justice. (2016). Transitional Justice and Peacebuilding: Partners in the Search for Dignity. [ICTJ website](#)

2. “Othering” and Rejection of Returnees Families

Ninewa is the governorate where the IS occupation caused the most profound damage to the social fabric, with a majority of victims of IS atrocities residing in the region. Victims and survivors of IS occupation and their families continue to harbour strong feelings against families who are now returning from displacement locations to their communities, as they are often stigmatised as “IS-families”. As efforts to return and resettle IDPs in the governorate continue, this has not been accompanied by efforts to address the traumas that communities endured. Without trauma healing as a priority, the ability of people to live peacefully alongside one another as one community remains a major challenge. These dynamics unfold differently in different parts of Ninewa based on the ethno-religious identities and diversities of each part of the governorate but remain a cross-cutting challenge for stabilisation efforts.

3. Normalisation of Violence

The prolonged exposure to violence during the conflicts in Iraq has contributed to its normalisation, hindering discussions about mental health. Cultural beliefs about linking masculinity with violence also greatly contribute to the normalisation of violence and the stigma around emotional expression, leading to further isolation, drug and substance abuse, and the perpetuation of cycles of violence as coping mechanisms. For communities that experienced profound traumas during IS occupation, this normalisation of violence poses an additional barrier to collective healing.

4. Mass Graves and Grief

Unexhumed mass graves and linkages to memorialisation and the right to truth exemplify and amplify deep and unresolved trauma. With an estimated 400,000 people buried in mass graves across Iraqⁱⁱⁱ(not only IS-related), progress towards exhumation has also been limited. While complexities around the technicalities of exhumation and the needs of the Iraqi government for support are recognised, the persistence of mass graves remains a major contributing factor to collective trauma in Iraq, particularly in Ninewa in the post-IS era. As mass graves persist, families are limited in their ability to process grief, which exacerbates ongoing resentment between victims’ families and those with perceived or actual IS affiliation. In this way, social divisions persist and continue to jeopardise ongoing humanitarian, development, and peace efforts.

iii. Human Rights Watch (2024). *Iraq: Exhume Mass Grave Sites to Ensure Justice*. <https://www.hrw.org/news/2024/08/13/iraq-exhume-mass-grave-sites-ensure-justice>

5. Quality and Access to Mental Health Services

Limited access and availability of mental health and psycho-social support (MHPSS) services is a key challenge for healing. Peacebuilding and stabilisation are best achieved when underscored by MHPSS efforts.^{IV} Unfortunately across Ninewa, professional MHPSS support is limited in availability. If services are available in the area, many families still face access challenges due to medication and service costs, or sometimes even the costs of commuting. This often results in those most in need unable to obtain necessary care. Despite minimal progress in some locations in Ninewa where MHPSS provisions have been introduced, the services remain insufficient to cover gaps.

6. Livelihood Challenges

Unemployment rates in Ninewa^V remain strikingly higher than the rest of Iraq, with an average of 32.8% as of 2021. Tendencies to engage in violence are directly influenced by economic needs, particularly relevant for violent extremist groups that find fertile grounds for furthering their agendas through exploiting youth who are economically disadvantaged.^{VI} Unequal access to livelihood opportunities across different groups also acts to further divide communities in Ninewa.

Healing Through Community Engagement

NP's initiatives have often proven impactful in initiating healing processes through community-level engagement. By focusing on community engagement as the core pillar of NP's presence with communities, it facilitates opportunities for encounters that are not usually available; all these spaces are also facilitated by peacebuilding allies from the same communities. These localised peace infrastructures (Community Peace Teams, CPTs) create shared spaces for relationships, community, and healing grounded in shared cultural practices. For example, in many cultures, including Iraqi culture, sharing tea is a symbol of hospitality and camaraderie. Through the sharing of tea, CPTs are creating spaces for relationships to be built, conversations to occur, and individual and collective pathways to healing to emerge. In these safe spaces for dialogue, individuals are often able to start sharing experiences and feelings, and in many cases build connections around shared traumas and recognition that past experiences relating to IS occupation represent collective trauma across Ninewa. In these spaces, people can recognise themselves in others and build an understanding that they are not alone. When communities themselves design and facilitate opportunities for healing, restoring deeper connection among community members, they are laying solid grounds for long-term reconciliation and social cohesion.

IV. Inter-Agency Standing Committee -IASC (2024). *Guidance Integrating MHPSS and Peacebuilding, a Mapping and Recommendations for Practitioners*. <https://interagencystandingcommittee.org/iasc-reference-group-mental-health-and-psychosocial-support-emergency-settings/iasc-guidance-integrating-mhps-and-peacebuilding-mapping-and-recommendations-practitioners>

V. The Central Organization for Statistics and Information Technology -COSIT (2021). Population And Labor Force Statistics, p.34, <https://cosit.gov.iq/documents/AAS2023/2.pdf>

VI. Azeez, D. A. (2021). Violence and Extremism in Iraq: Approaches to Motives and Means of Confrontation. *Political Sciences Journal*, 61, 175-204. <https://doi.org/10.30907/jj.v0i61.554>

Recommendations

Based on NP's engagement and presence in affected communities, overcoming trauma healing as a barrier to peace and social cohesion needs to be prioritised through:

1. Community-led Healing Initiatives

Support locally driven initiatives that focus on culturally relevant healing practices, such as reconciliation processes. Encourage community members to share their stories and engage in dialogue to foster understanding and acceptance that is key for social cohesion, and ultimately stabilisation and durable peace.

2. Restoring Rights and Dignity

Addressing persistent grievances is vital to facilitating healing and promoting social cohesion. This includes efforts related to transitional justice and addressing longstanding challenges in service provision and access to rights and livelihood opportunities.

3. Enhancing Mental Health Services Access and Availability

Paired with efforts for reconciliation, stabilisation, and peacebuilding, accessible, inclusive, and high-quality MHPSS provisions are vital for sustaining peace and preventing the recurrence of violence. Building communities' resilience against violence as an essential part of P/CVE is only fully realised when communities overcome the historical psychological scars of living in conflict. Ensuring that MHPSS services are available and accessible to those who need it most is essential.

4. Recognising Healing Needs in Stabilisation Efforts

Addressing unresolved trauma as a risk that hinders stabilisation progress in Iraq is key for the policy and decision-making process. The 'reconstruction' and 'rehabilitation' of Ninewa must look beyond institutions and infrastructure. Stability can only be fully achieved when the social fabric that has been damaged during conflict is restored and communities' lived experiences are acknowledged.