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Peace, Love, and Justice: A Participatory Study of Psychosocial Wellbeing in Afghanistan

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Abstract

While there have been many studies showing the extent of human suffering in Afghanistan, there has been no formal study of what it means to be psychologically and socially well. Literature on Afghan resilience has called for such studies to take place in order to begin to develop indicators of positive outcomes for the practice of counseling. This paper reports on a 2018 participatory phenomenological study conducted in Afghanistan in order to better understand psychosocial wellbeing. Collecting data from 440 Afghan participants in 56 focus group discussions, the research specifically elaborated and operationalized definitions of psychosocial wellbeing among adults.

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Introduction

For the last four decades, Afghans have experienced war, prolonged and chronic violence, severe drought and accompanying economic insecurity affecting every aspect of life (United Nations Development Programme (UNDP), 2017). These experiences have had a profound impact on the emotional and social lives of all Afghans (Babury & Hayward, 2013; Wildt et al., 2017). To address these needs, Afghanistan's governmental and non-governmental organizations worked quickly provide services to the population, increasing roles for social work and allied professions (Bragin & Akesson, 2018). Yet, to date, there is little research that explores Afghan-specific descriptions and understandings of psychosocial wellbeing. This paper draws upon data from research with 440 Afghan participants in 56 focus group discussions interviewed across four of seven regions in Afghanistan. Using participatory, qualitative methods, this paper will present potential domains of psychosocial wellbeing that might be referenced by practitioners, researchers, and policymakers seeking to find ways to work with Afghan populations to evaluate the effectiveness of programs to enhance wellbeing.

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Background

In December 2001, when the Afghan Interim Authority took over the country's governance with the support of international forces, the preceding civil wars had destroyed nearly all infrastructure, closed public services, and created conditions of constant random violence and insecurity. Over 3.5 million refugees had fled the country and 965,000 persons were internally displaced (Coll, 2004; Turton & Marsden, 2001). In addition, record levels of malnutrition, infectious disease, maternal and infant mortality prevailed. Epidemiological studies indicated high prevalence rates of mental illnesses including depression, anxiety, and post-traumatic stress disorder (Cardozo et al., 2004; Ventevogel, et al 2006; 2007).

The new Afghan Authority moved quickly to address these issues. Schools opened on schedule in March 2001 welcoming three million students. The Ministry of Public Health (MoPH) set out to reduce mortality and infectious disease through the creation of a Basic Package of Health Services (BPHS) available at community clinics throughout the country. The BPHS included essential mental health services, and the MoPH embarked on an ambitious program to train both medical professionals, paraprofessional health workers, and mental health workers (Government of Islamic Republic of Afghanistan (GOIRA) & Ministry of Public Health (MoPH), 2009; Bragin et.al, 2018).

However, in the ensuing years, both conflict, drought, and concomitant economic difficulties worsened. With them came the myriad daily stressors that seeped into every aspect of life, inhibiting Afghanistan's progress in all areas of development (Wildt et al., 2017). 80% of Afghans visiting mental health clinics exhibited emotional distress not related to psychiatric illness, but rather the result of adversity-related stressors. These stressors quickly overwhelmed the protective factors that might have mitigated them in better times, requiring psychosocial support (Alemi et al., 2018; Eggerman & Panter-Brick, 2010).

As a response to this high rate of adversity-related stressors, the Dean of Academic Affairs of the Ministry of Higher Education (MoHE) called for the establishment of academic departments that could cultivate a national cadre of professionals qualified to address the psychosocial effects of these stressors. The goal was to fill positions in schools, child protection programs, justice programs, women's rights programs, community development programs, and to work with the university students themselves (Babury & Hayward, 2013; Government of Islamic Republic of Afghanistan (GOIRA) & Ministry of Public Health (MoPH), 2009). The

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3 Ministry of Labor and Social Affairs established National Skills Standards for Social Work at the
4 Associate degree level in 2012. And, in collaboration with the UNICEF and the MoHE, a BSW
5 program opened its doors in 2014 (Bragin, Tosone, et al., 2014). At the same time, the MoHE
6 also called for the establishment of model counseling centers to be established at the university-
7 level and for academic programs in professional counseling to accompany the existing academic
8 programs in social work (Babury & Hayward, 2013). The first counseling department was
9 established in 2012 at Kabul University and the second at Herat University in 2016.

15 In Afghanistan, the medical universities' curricula were developed based on standards
16 established by the World Health Organization (Mental Health Department of the MoPH, 2009).
17 However, no such standard curricula have been validated for social work nor psychological and
18 community counseling, which are professions designed to address adversity related distress in a
19 cultural context. Therefore, these professions had to develop their curricula locally (Missmahl,
20 2018), requiring specific attention to cultural, social, and spiritual values (Bragin, Tosone, et al.,
21 2012; Ventevogel & Faiz, 2018). The newly established departments in Kabul and Herat each
22 did an initial study, based on the DaCUM (Develop-a-Curriculum) method that established the
23 precise nature of the curriculum development needs of each department (Bragin et al., 2018).
24 The resulting curricula were designed to educate graduates who could integrate the specific
25 knowledge, skills, and values required to be effective in both Afghan and international contexts
26 (Bragin et al., 2018; Bragin, Tosone, et al., 2014).

36 Once the curricula were established, the next task was to seek culturally relevant
37 measures by which Afghan clinicians could evaluate the success of their work. The success of
38 psychiatric care is measured by the Afghan Symptom Checklist (Rasmussen, Ventevogel,
39 Sancilio, Eggerman, & Panter-Brick, 2014). However, if the goal of psychosocial counseling and
40 clinical social work is to improve psychosocial wellbeing, the concept of psychosocial wellbeing
41 had to be defined and operationalized in order to create a means of evaluating the success of the
42 work in strengths-based terms (Hoffman, Rueda, & Lambert, 2019).

48 Studies of psychosocial conditions in Afghanistan have identified idioms of distress as
49 well as risk and protective factors that create resilience in the context of mental illness
50 (Ventevogel & Faiz, 2018). Yet only a limited literature exists that addresses the perceptions and
51 understandings of psychosocial wellbeing—in other words, what it means to “be well”
52 psychologically and socially—within the Afghan context (Eggerman & Panter-Brick, 2010).

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Defining “Psychosocial”

The word “psychosocial” has its origins in social work starting with Mary Richmond’s work on “social diagnosis” in 1917. This approach differentiated social work from other disciplines by understanding human behavior as inextricably in dialogue with social environment (Goldstein, 2013). In the humanitarian literature, the health community tends to use the words “mental health” and “mental disorders” when referring to both serious and persistent mental illness, substance use, and neurological disorders as well as other forms of distress. Non-medical professionals tend to use the term “psychosocial distress” when referring to adversity related emotional suffering (Inter-Agency Standing Committee (IASC), 2007). The word psychosocial has been defined by the humanitarian community as a combined term reflecting the...

...dynamic relationship that exists between psychological and social processes, each continually influencing the other. The prefix ‘psycho-’ relates to the psychological aspect of the individual and incorporates individual thoughts, feelings, desires, beliefs, values, cognition and ways in which people perceive themselves and others. The suffix ‘social’ insinuates the relationships and outer environment of the individual, and contains the material world in addition to the social/cultural context in which people live” (United Nations Children’s Fund (UNICEF), 1997).

The linked term “psychosocial” describes their interconnectedness and inseparability, as each aspect influences the other, making it impossible to tease either component apart.

Afghan perceptions of psychosocial distress.

There is a small literature discussing Afghan experience and perception of psychosocial distress within a cultural lens, giving careful attention to local idioms, understandings and definitions of distress (Miller et al., 2006; Panter-Brick, Eggerman, Mojadidi, & McDade, 2008). An idiom of distress is “an adaptive response or an attempt to resolve a pathological situation in a culturally meaningful way” (Nichter, 1982, p. 379; Nichter, M. 2010). Such idioms can be described by somatic complaints, spirit possession and other culture specific ways of discussing experience (Kohrt & Hruschka, 2010). For instance, previous findings indicate three categories describing psychosocial distress in Afghanistan: (1) biological mental disorders; (2) distress caused by *djinn*s, spirits who take over a person’s mind and body for either good or ill; and (3) distress as a result of adverse life experiences, including war, poverty, and violence (Panter-

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3 Brick, 2008; Miller et al., 2006). Specific words also exist that describe certain expressions of
4 stress, anger and, grief as differentiated from anxiety and mental illness, (Eggerman & Panter-
5 Brick, 2010; Rasmussen et al., 2014) These categories, clearly serious and persistent mental
6 illness, from spiritual or adversity related psychosocial distress, have been found in diverse other
7 contexts (Ventevogel, Jordans, Eggerman, van Mierlo, & Panter-Brick, 2013). More specifically,
8 social stressors such as economic and political instability, sickness of a family member, family
9 conflict, and inability to achieve life goals have been reported as the most frequent and
10 burdensome daily stressors among young people seeking psychosocial support (Eggerman &
11 Panter-Brick, 2010; Panter-Brick et al., 2008).

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19 **Subjective wellbeing: The capabilities approach and its relationship to psychosocial**
20 **wellbeing.**
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22 In recent years, social work has begun to incorporate this theoretical framework, derived
23 from economics, into its work with marginalized communities (Jayasundara, 2011; Veale, King,
24 & Marston, 2018). Economists divide wellbeing into two categories, objective wellbeing,
25 involving measurable economic and social assets, and subjective wellbeing, involving thoughts,
26 feelings, attitudes, and social relationships (Scott, 2012). The economist Amartya Sen defines
27 subjective wellbeing as “living a good life” in the present or future (Anand, Hunter, & Smith,
28 2005, p. 10). From that starting point, he defines subjective wellbeing in terms of what he refers
29 to as “capabilities,” or “what people are able to do or able to be” (Anand et al., 2005, p. 11).
30 These capabilities are to be differentiated from activities of daily living and represent potential
31 and aspirational states as well as actual experiences. Sen’s approach is context-dependent,
32 requiring that people define for themselves the conditions for a good life. Feminists have
33 engaged this concept as a way to look at women’s lives and potential (Nussbaum, 2001).
34 Participatory methods, defining and operationalized wellbeing have been found to increase self-
35 efficacy and promote self-esteem and hopefulness, qualities considered important protective
36 factors promoting resilience (Bragin, Onta, Janepher, Nzeyimana, & Eibs, 2014; White & Pettit,
37 2007).
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Methodology

The study was designed to learn how concepts of psychological and social wellbeing are understood and operationalized in contemporary Afghanistan. There were two main research questions for this study:

1. How do Afghans understand psychosocial wellbeing? What language do people use to express wellbeing as a feeling? How do they operationalize the language of wellbeing?
2. What are the conditions that study participants believe are necessary to achieve a feeling of wellbeing?

Methodological Approach

This is a qualitative, phenomenological study of the subjective views of psychosocial wellbeing among people who work with conflict-affected people in four of Afghanistan's seven regions. Two methodological approaches were adapted from the literature for use in this research: stepwise ethnographic exploration (SEE) (Nagpal & Sell, 1985; Sell & Nagpal, 1992) and the participatory ranking method (Stark, Ager, Wessells, & Boothby, 2009). These approaches were selected following their successful adaptation in similar studies completed in conflict and post-conflict environments (Bragin, Onta, et al., 2014; Kühas, Taaka, Adolphs, & Bragin, 2018).

Study Locations and Study Team Composition

All research took place in cities located in four of the country's seven regions; Kabul, (Central) Herat, (Western) Kandahar (Southern) and Mazar-i-Sharif (Northern). Security concerns prohibited research in the northeastern, eastern, and northwestern regions. The research team was comprised of faculty members from Kabul University and Herat University as part of a partnership with Silberman School of Social Work at Hunter College, City University of New York. The Principal Investigators (PIs) from Kabul University and Herat University were both fluent in Dari and English, with native Pashto speakers on each team. A specific interpretation team, led by the Herat PI, was assembled to coordinate language during each step of the research.

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Recruitment and Sampling

The universities had developed Technical Advisory Committees (TACs) to advise on curriculum development. The TACs consisted of representatives of the governmental, non-governmental, and private organisations who currently employ counselors or social workers or who plan to hire graduates of the programs. The research team asked the TAC members to identify experienced Afghan clinicians, professors, or persons currently engaged with the care of people with adversity related distress in schools, community clinics, justice, “de-addiction,” women’s rights and child protection programs. Care was taken to include a sample that had a range of educational level, from basic literacy to advanced degrees. A recruitment letter in the local language was given to potential participants to invite them to participate in the research, along with an IRB approved recruitment script.

A total of 440 persons participated in the study, including 187 women and 253 men, seen in 56 focus group discussions (FGDs). The unequal number of women participants reflected the increasingly difficult security environment during the period when the study took place, with women’s mobility under severe threat- a situation that emerged in the results. Women and men were interviewed separately due to the gendered nature of the Afghan experience, as well as concerns regarding safety among women participants (Government of Islamic Republic in Afghanistan (GoIRA) & UNICEF, 2018; van Mierlo, 2012)

Study Procedures

Aligned with stepwise ethnographic exploration (SEE) (Nagpal & Sell, 1985; Sell & Nagpal, 1992), the methodological approach involved five steps.

Step 1: Concept identification.

In order to study the nature and meaning of a concept in cultural context it is necessary to identify the concept to be studied, so that all of the members of the research team are in agreement. To this end, the study began with a workshop consisting of study team members, and members of the TAC considered to be knowledgeable on psychosocial issues. The workshop introduced the study and then asked the following three framing questions:

- How do you understand the term “psychosocial wellbeing”?
- What language do you use to describe “psychosocial wellbeing”?

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- How would you define “psychosocial wellbeing” for yourself and for program participants?

Answers to these questions were recorded and used to inform step two of the research.

Step 2: Concept clarification.

Using the language and concepts uncovered through the concept identification workshop (step one above), the research team conducted the first round of focus group discussions (FGDs). The FGDs included discussion about the concepts and free listing activities to establish which questions were most useful.

Step 3: Consensus on concepts.

Consensus on concepts was developed through group meetings among research team members immediately upon conclusion of each FGD. The research team members checked methods, compared translation notes, and gathered needed information from the day’s discussions for recording, which was immediately completed by the international (PI) and approved by the research team members present. The typed notes from the FGDs were coded by a research assistant who used Microsoft Word to organize and count the number of FGDs in which the codes occurred. The results of the analysis were combined, synthesized, and discussed in a series of research team conferences with the international PI, the Herat and Kabul PIs, the research assistant, and members of the translation team.

Step 4: Qualitative concept validation.

The international PI conducted an in-person workshop with the research team to present the coded findings, elicit comments and revisions, and discuss questions requiring further clarification from the study participants. This workshop resulted in a preliminary list of domains and indicators.

The preliminary domains and indicators were presented in a second round of FGDs. These FGDs consisted of 50% of the original participants and 50% new participants. The purpose of mixing original and new participants was to see whether the domains and subcategories “held up” with those who had not originally identified them. The research team used the participatory ranking method (Stark et al., 2009) to add additional rigor to the qualitative concept validation step. The ranking method ensured that each research participant would actively comment on each domain. When the research participants were asked to formally rank the domains, each participant took time to consider their response, asked questions, and

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was engaged in the process. This led to rich explanations of the final concepts. However, participants in all of the groups in all of the settings insisted that the ranking was not a realistic exercise, because psychosocial wellbeing was an integrated concept, in which each single domain interacted with others to develop a holistic view.

Step 5: Final data analysis.

Preliminary data analysis was done concurrently with fieldwork using a reflexive and iterative process, including the same procedure described in Step 3. Notes were reviewed and manually coded to discern emerging issues, unique quotations, and crosscutting experiences across regions. Decisions on interpretation were made in research team conferences with the international PI, the Herat and Kabul PIs, the research assistant, and members of the translation team.

Results and Discussion¹

As discussed earlier in this paper, psychosocial wellbeing is a concept imported for use by the international community. The literal translation of *salamat ravani ejtemay* in Dari has come to be used to refer to mental health treatment. However, in Dari there is a word which means to feel psychologically and socially well, or rather, to have “peace of mind” (*aramesh* or *aram*), which was often used in the FGDs. Another word that was used with great frequency was *rahat*, which means to be comfortable and relaxed, with a free state of mind. These terms—*aramesh*, *aram*, and *rahat*—were used by both male and female participants to identify indicators of psychosocial wellbeing. The terms were frequently associated with a state in which one was not plagued by constant worry. A more temporary state would be to be *khob* or “good” or *khosh* meaning happy. Participants also noted phrases that described strong positive emotions including *hama chiz var vefqe morad ast*, meaning “everything is according to my wishes”, or *khod ra azad yaftam* meaning “I found myself free”.

Due to the gendered nature of Afghan experience the findings below are separated by gender. The domains of wellbeing for women are presented in Table 3 and the domains of wellbeing for men are presented in Table 4.

¹ For the purpose of brevity, and because the only participants using Pashto language were in Kandahar, we are only reporting the results and their translation in English and Dari.

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Domains of Wellbeing for Women

Table 1 below details the domains of psychosocial wellbeing operationalized by the women participants. The following section will discuss the above domains in light of the indicators that are used to operationalize them.

<insert Table 1 here>

Peace, security, justice (*solh, amniyat, adalat* ; صلح، امنیت، عدالت).

The female participants described this domain as the necessary precondition for peace of mind. This included a condition of persistent societal peace, as differentiated from temporary lulls in fighting for short cease-fires. They considered peace to be indivisible from a series of rights and conditions of lawfulness, without which armed conflict was inevitable. They explained that ignoring human rights for all of the many cultures and ethnicities of Afghanistan as well as the rights of the poor could exacerbate continuing conflict. They pointed out that corruption feeds discrimination and conflict, while equal justice and lawful practice builds trust. All participants agreed to the importance of women's rights. However, according to the more religiously conservative women in the groups, women's rights are an essential part of Islam and therefore, their abrogation promotes violence. More is said about this under the next category, freedom.

Freedom (*azadi* ; آزادی).

This domain was endorsed quite strongly by the female participants. However, there was disagreement among some groups of women as to the need for a caveat within the Islamic context, which was that no one wanted anarchy or a freedom that did not respect the Afghan culture and the rights of others. Participants in Kandahar and then in other places agreed that "Islamic structure" or *chowkat Islami* (چوکات اسلامی) is something that is understood on a personal level, not something that is juridical. This is the area where women (especially in Kabul and in Kandahar) talked about being subject to constant scrutiny and criticism, whether by family members, co-workers, or strangers in the street, as to any aspect of their behavior, dress, or way of observing their faith.

At the time this research was being conducted, these small but constant criticisms had grown to be dangerous, with female participants reporting that strangers were coming to

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women's homes and workplaces to denounce women. In some cases, these events were followed by threats by members of armed groups.

A particular issue was the fact that, depending on their faith, women might choose different means of "covering" or praying, and women wanted their choices to be respected. While "writing and speaking freely" may seem like an elite concern, there is a strong and still vibrant cultural tradition of poetry memorization, recitation, and (among the literate) written among Afghan women (Dupree, 1992).

Love / support in the family (*eshq, hemayat dar famil* ; عشق، حمایت در فامیل .).

The female participants did not challenge the Afghan norm of living their lives in an extended family structure for as long as they lived in Afghanistan. They assumed that they would live with the extended family of their parents until they themselves were married. And after marriage, they assumed that they would live in the home of their husband's extended family. With 40 years of armed conflict taking its toll on Afghan society, family life can reflect fears and insecurities engendered by violent externalities (Eggerman & Panter-Brick, 2010). Therefore, they carefully discussed their view of the requirements for a supportive and loving family life. They identified the chief dangers as coming from violence and the same sources of judgment and suspicion that caused so much suffering. The difficulties came more from the fact of living with the husband's family and missing one's own parents, family members, and the norms one grew up with. So family harmony, mutual respect, and peaceful problem solving were all ways one could be happy. Mutual love and respect with one's husband was described as a key element of wellbeing. One female participant said, "When you lose your husband's love, you lose all happiness." Yet participants were hopeful that with honesty and trust, love can be regained. Along with that was the children's happiness and that both girl and boy children received equal love.

Physical health (*sehat-e-jesmi* ; صحت جسمی).

Female participants noted that the "gift" of good health was necessary to psychosocial wellbeing. But unlike other countries where this study was done (Bragin, Onta, et al., 2014; Kühas et al., 2018), the issue of adequate or effective health care did not come up in the research process.

Economic security / access to resources (*amniyat-e-eqtesadi, dast rasi be manabe* ;

(امنیت اقتصادی/دسترسی به منابع).

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According to the female research participants, having the basic necessities of life is not a given today in Afghanistan. Women described feeling best when they are able to find ways to contribute with their labor. These contributions need not be done at a workplace or job, although those are important, because they provide stability that entrepreneurial ventures do not. Women also described enjoying women's cooperatives where they can be paid for work at home or women's groups that do economic activities together. Women paraprofessionals talked about the economic benefit of their work with Ministry of Health as well as NGOs that use their professional skills to reach women in need.

Leisure activities (*faliyat-haye-oghat faraghat* ; عالیت های اوقات فراغت).

The participants included this domain because unlike the others, women agreed that it could provide momentary times of happiness, known as *khosh* (خوش هستم) even in the most difficult times.

Indicators with Multiple Meanings for Women

During the qualitative concept validation step (Step 4), the female participants rejected and modified some indicators, which resulted in the above list. But some indicators were the subject of passionate controversy, resulting in agreement to just keep seemingly opposing indicators. These disagreements are discussed below.

Participation in cultural and religious practices (*sherkat dar marasemat-e- farhangi / mazhabi* ; شرکت در مراسمات فرهنگی و مذهبی).

There were four such indicators within this domain. The first was sharing of household responsibilities during religious holidays. For women participants whose faith was deeply important, the role women play during holidays (i.e., cooking, cleaning and serving) prevented them from participating in the spiritual aspects of the holiday, especially Ramazan. Some women participants felt that men forced competition regarding their domestic skills, which they considered contrary to the spiritual aspects of the holiday. They felt strongly that the domestic duties of the holiday should be shared equally among men and women to reduce these issues. However other women felt that their domestic service during holiday times was in itself a special blessing, and therefore, looked forward to it. However, in the end, they agreed that those who wanted to share this should do so as it would remain a blessing for all.

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The question of *namaz* (نماز) or “formal prayer” was also contested. Many women found this practice—when they were not too busy with domestic chores to do it—a source of deep satisfaction and peace of mind. However, a substantial minority of female participants expressed their desire to have their own choice of religious expression respected by others, which was experienced as a great source of peace of mind. Therefore, both indicators were agreed to by the participants and added to the final list.

Visits to selected shrines for prayer and meditation is an accepted part of Shi’a Islam. Women often use this practice as a way to travel, to get time alone, and to gain mental clarity. However, Sunni Islam forbids visits to shrines except for during the *Hajj*, or the annual Islamic pilgrimage to Mecca, Saudi Arabia. In the end this category was removed and subsumed under visits to green places as part of leisure activities so that the findings die not fuel any controversies.

Finally, the question of cultural dress was a point of disagreement. Many female participants from all parts of the country agreed that wearing prescribed local cultural dress, including the *burqa* (an outer garment worn by women that covers the body and face) gave them peace of mind. Some felt pride in wearing *hijab* (a head covering worn by women) as a visible sign of their faith. Other women, felt that they were never free of harassment regardless of what they wore, noting activists who have been murdered while wearing a burqa. These participants felt that each woman (like men) must be free to define what is appropriate dress and that choice should be respected.

Self-efficacy / self-esteem (*khod kar amadi / ezzat –e- nafs* ; خودکارآمدی / عزت ن)

The indicator “to be able to adapt, change or survive any difficulty” is often considered a hallmark of Afghan resilience (Eggerman & Panter-Brick, 2010). During the first round of FGDs and KIIs (Step 2), female participants gave many examples of women who had adapted to the most terrible circumstances in Afghanistan. However, in the qualitative concept validation step (Step 4), almost all female participants questioned whether this contributed to peace of mind or simply reflected a kind of despair disguised as peace. For some, the most important factor was finding a way to fight no matter how subtle. And the participants shared numerous examples, such as some women being hospitalized for mental illness when they shout or try to fight back. The female participants agreed to include all three possibilities as part of one indicator. However, this domain suggests the need for further study.

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Domains of Wellbeing for Men

Table 2 below lists the domains of psychosocial wellbeing operationalized by the male participants. The following section will discuss the above domains in light of the indicators that are used to operationalize them.

<insert Table 2 here>

Peace, security, justice (*solh, amniyat, adalat* ; صلح، امنیت، عدالت)

Like the female participants, the male participants agreed that peace, security, and justice were of utmost importance to achieving wellbeing. A unified nation coupled with law and order, respect for human values, and the rights of all peoples, combined with a lawful society without corruption were reported as factors that were necessary to ensure a lasting peace.

Economic security / ability to provide for family (*amniyat-e-eqtasadi / tavanae baraye tamin-e-famil* ; امنیت اقتصادی/ توانایی برای تأمین فامیل)

The male participants were very clear that economic security and an ability to provide for the family was their responsibility as men. Like peace, it was difficult for the male participants to imagine achieving wellbeing without knowing that they could provide for their families, a responsibility that falls to males at a very early age. To feel well, they described needing to have their basic needs met and being able to support their families. The men indicated that the armed conflict in Afghanistan had destroyed the economy and therefore the best way to provide for their families would be through holding a secure job or being able to access resources.

Strong family relations support (*rawabet mohkam famili / hemayat* ; روابط محکم (فامیلی/حمایت)

According to the male participants, family relations within the large extended family could be a source of tension and distress for men, which is similar to findings uncovered from the women's data. However, unlike women, men have the opportunity to simply go out as they wish. For psychosocial wellbeing, men require unity within the family, mutual respect and kindness, as well as strong marriage.

Independent power and authority (*esteqlal / qudrat va ekhtiar* ; استقلال/قدرت و اختیار)

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Regardless of region, religious belief, or ethnicity, the men who participated in this study longed for independence in their personal lives as well as in their political lives. This included freedom of thought, expression, and spirituality, including what they read and wrote. They wanted free access to information, travel, and choice of work along with the right to ask for or to demand their civil and human rights. They all stated that this should belong to all Afghans, independent of ethnicity or class, although it was unclear if that included women.

Friendship / solidarity outside of the family (*doosti / hambastegi kharej az famil*

(دوستی / همبستگی خارج از فامیل)

Men spend consistently more time outside the family than women do. Time spent sharing with their friends was an important source of psychosocial wellbeing. According to the male participants, sharing of thoughts and experiences with other men could be better than any therapy. Like women, appreciation in the workplace and community were highly valued. However this category also included obligations, which brought satisfaction including participating in traditional systems of governance and “social connections” which would guarantee inclusion in information sharing that could be vital to security.

Religious observance (*payravi az din ; دوستی / همبستگی خارج از فامیل*

The men who participated in the study found it crucial to separate religious observance from cultural practices. They all agreed that going to mosque, praying with others, and making *Hajj* were great sources of wellbeing. Like the women, they also valued participating in charitable giving and shared work. They were careful to explain that faith was a personal matter in Islam and each person’s spiritual practice might differ. But no matter how it is experienced, they insisted that personal faith could be a source of wellbeing, which should be supported.

Successful fulfillment of obligations (*movafaqiyat dar anjame vazayef ; موفقیت در انجام*

(وظایف)

The male participants agreed that once they incur any obligation in their home or work life, they must fulfill it to feel well. When circumstances prevent that fulfillment, they can still feel well only if they can say to themselves and to God, that they have made all possible efforts to do so. These include those obligations incurred to tribe or community, which depended on social location (class) as well as ethnicity.

Leisure activities (*fa’aliyat-haye-oghat faraghat ; فعالیت های اوقات فراغت*

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Like the women, men described the importance of having moments to enjoy life. Sports, active outdoor activities, and time spent in green spaces, and picnics were all highlighted by the male participants. Activities with family members such as playing with their children, cooking with family members, and going to parties were also among their everyday pleasures. Poetry is an Afghan artform that many enjoy. Reading, writing, storytelling, viewing films, and participating in individually chosen art forms were described as leisure activities that bring pleasure and reduce stress. Afghan poetry slams—popular in the cities, especially Herat, Mazar and Kandahar—were mentioned by the male participants with real joy.

Indicators with Multiple Meanings for Men

Like the women participants, the research also revealed areas of complexity that emerged in the qualitative concept validation step (Step 4) through a number of indicators within the domains. They were organized in two areas.

Participation in cultural practices (*sherkat dar marasemat-e-farhangi* ; شرکت در مراسمات فرهنگی)

In the free-listing activity, the male participants spoke with what seemed like pleasure about Afghan traditions such as living in the extended family. They were equally universally positive about wedding ceremonies and all of the practices that accompanied these events. In regards to mate selection, all male participants were insistent that men should be able to choose their own wives rather than having a mate selected by family members.

However, during the during the qualitative concept validation process (Step 4), a number of issues emerged. Many men described their extended families as stressful and did not want to include it as a cultural tradition that leads to wellbeing. Like the female participants, the men confined the discussion to how to improve or lessen the negative impact of such living conditions. Similarly, they dreaded the expense incurred by weddings and other such celebrations as they found that they could lead to debt and many economic difficulties going forward. Therefore, in Step 4, the male participants added an indicator that was almost universally endorsed, which was to have the ability to review and revise the cultural practices that they found challenging.

Personal capacities (*tavanaee-haye-shakhsi* ; توانایی های شخصی)

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The male participants listed characteristics of men whom they admired and stated that such men are happier in life and have greater peace of mind. Physical health, a separate domain identified by the women, was seen by men as an individual attribute, and therefore included as an indicator under the domain of personal capacities.

In fact, this category of personal capacities or capabilities was unique to the male participants. They wondered about and discussed the “capacity for emotional expression” raised in the first round of data collection (Step 2). Did it bring peace of mind, as some of the younger men believed, or did it lead to further distress?

Education was also questioned as an important personal capacity contributing to wellbeing, with one man stating: “There is a saying that those who are educated suffer more. Perhaps education does not bring *aram* or *rahat*, but only troubles.” These critical discussions of personal capacities underscore the need for further research in this area.

Conclusion

This study adds critical value to a limited but growing literature around descriptions and definitions of what it means to be psychosocially “well” in conflict-affected countries in general and in Afghanistan in particular. It is among the first to ask Afghan adults how they define psychosocial wellbeing. This study included 440 participants in 58 focus group discussions supplemented by the views of key informants across four of seven regions in Afghanistan. A qualitative and participatory methodology supported findings that were sensitive to the cultural context.

The fact that even in these most difficult times as reported by the study’s respondents, Afghans could identify what psychosocial wellbeing might look like, indicates the beginning of a frame of reference for further research and program development.

Study Limitations

The study is based on qualitative data collection through focus group discussions, key informant interviews, free listing and participatory ranking, supported by an extensive review of the literature. By their very nature, qualitative, phenomenological studies such as this are limited by the statistically small number of participants, the purposive sampling, and the specificity of the responses. Therefore, the results are not generalizable beyond the specific region in which the

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study is conducted. Nonetheless, sampling resulted in 440 participants, 187 women and 253 men, consisting of a variety of teachers, health workers, volunteers, counselors, and others involved in human service provision across four of Afghanistan's seven regions. Security concerns prevented the research team from traveling to the other three regions, which could have added to the representativeness of the sample. Furthermore, the sample had a disproportionate number of male participants compared to female participants, apparently due to the increasing restrictions on women's movement in Afghanistan at the time of the study, leading to a 15% smaller number of women than men participants.

The Afghan PIs and entire Afghan research team are native speakers of Dari and/or Pashto. They conducted and supported the groups in both rounds of data collection and the information was translated by a research team member fluent in English. Every effort was taken to ensure fidelity and consistency of translation, through daily team meetings, discussions, concept clarification and back-translation. However, inherent in all cross-cultural studies is the potential for mistakes with the translation of words or phrases.

Particularly, no glossary of psychological terms was validated in Afghanistan at the time of this writing, thus leading to inconsistencies in translation. The team used its expertise to compensate for this. Efforts included using a call-and-response method of translation and clarification during concept clarification (Step 2) and qualitative concept validation (Step 4). As back-up, the Afghan team approved all interpretations made by the English-speaking analysis team on a line-by-line basis.

Implications for Social Work Practice and Research

The results from this study have the potential to help professional Afghan social workers and psychological counselors to understand psychosocial wellbeing in their clients and to tailor their work accordingly. Furthermore, Ministry of Higher Education (MoHE) professors will use the results of this study to shape curriculum toward growth and wellbeing in the Afghan context and develop indicators of wellbeing against which counseling success can be evaluated.

The literature on Afghan mental health and psychosocial support called for studies on wellbeing to take place in order to begin to develop indicators of positive outcomes for the practice of counseling by filling in several needed elements; to develop an operational definition of psychosocial wellbeing in a cultural context that can be used to make counseling more effective;

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and to make it more possible to study interventions to improve psychosocial wellbeing. The study will also address a practical need, namely, to suggest an approach to obtaining such definitions rapidly in the field, in order to ensure that psychosocial programs meant to support the wellbeing the Afghan population are informed by the Afghan context.

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Tables

Table 1: Domains and Indicators of Wellbeing for Women

Table 2: Domains and Indicators of Wellbeing for Men

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Table 1: Domains and Indicators of Wellbeing for Women

Domain	Indicators
Peace, security, justice	<ul style="list-style-type: none"> • To have continuous peace in society • To have no armed conflict or war • To have equal rights as women • To be free of all discrimination (e.g., ethnic, gender, religious, class, etc.) • To have a society based on universal respect for civil law and justice <ul style="list-style-type: none"> ○ To have a society free from corruption
Love / support in the family	<ul style="list-style-type: none"> • To have a supportive and loving relationship with all family members • To have equal love for daughters and sons • To have trust and approval from family members • To have a mutually-respectful and loving marriage <ul style="list-style-type: none"> ○ To have a husband who is also feeling well and happy ○ To solve our problems through peaceful means and discussion • To know that children are happy and well • To be honest with one another within the family • For all family members to live together in mutual respect and harmony <ul style="list-style-type: none"> ○ When family members disagree, to find solutions by peaceful means, through discussion
Freedom	<ul style="list-style-type: none"> • To have freedom within Islamic structure (<i>chowkat Islami</i> ; چوکات اسلامی) • To be accepted by others • To live without constant fear of accusations and criticisms on the street, in the workplace, and in the home • To have freedom of movement • To move freely at home, work, or in the streets without harassment, judgment, or threat of violence • To speak and write what one thinks and believes • To be respected for one's religious beliefs and expressions
Physical health	<ul style="list-style-type: none"> • To be physically healthy
Economic security / access to resources	<ul style="list-style-type: none"> • To be economically secure • To have access to the necessities of life <ul style="list-style-type: none"> ○ To have the resources to ensure that these necessities are continuously available ○ To have access to job opportunities ○ To have knowledge and education • To be free to contribute to the economic wellbeing of the family without having the morality of one's efforts questioned

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Participation in cultural / religious practices	<ul style="list-style-type: none"> To participate in cultural traditions / festivals that bring people together, such as weddings, holidays, etc. To be able to fully participate in religious festivals, sharing the responsibility of cooking, cleaning, and providing for others To help others in need, known as the <i>hashar</i> system (حشر) or <i>zakat</i> (زکات) To have a religious faith and a personal relationship with God To practice formal, ritual, daily prayer (<i>namaz</i> ; نماز) To have one's individual expression of religion and culture respected, in one's practice and in one's dress
Friendship /support outside the family	<ul style="list-style-type: none"> To spend time with friends in mutual support (<i>gardak</i> ; گردک یا دور هم بودن) To make others feel good by supporting them To have respectful, honest, and trustworthy friendships To receive praise for one's work in the workplace or in any setting To be able to make important contributions at work or in society and be respected for having made them
Self-efficacy / self-esteem	<ul style="list-style-type: none"> To be able to adapt, change, or survive any difficulty To achieve one's goals and responsibilities To have confidence in one's abilities To be effective in one's actions at home or at work
Leisure activities, or time to enjoy living	<ul style="list-style-type: none"> To follow personal interests (e.g., arts, study, make-up, shopping, etc.) To participate in women's group activities (e.g., sports, reading groups, music or dancing within cultural traditions) To enjoy humor and laughter To be able to travel To go to the park, walk in green areas, and have picnics

Table 2: Domains and Indicators of Wellbeing for Men

Domain	Indicators
Peace, security, justice	<ul style="list-style-type: none"> To have ongoing peace, security and safety To have law and order in the society with no corruption To have societal acceptance of people's differences To have respect for everyone's human values, civil, and human rights To have unity in the country
Economic security / ability to provide for family	<ul style="list-style-type: none"> To be economically secure <ul style="list-style-type: none"> To have a steady job with job security would be best or to have access to necessary resources To have all basic needs fulfilled for self and family To be able to support one's family

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Strong family relations support	<ul style="list-style-type: none"> To have unity within the family To have mutual respect and kindness within the family To have a strong marriage
Independent power and authority	<ul style="list-style-type: none"> To have power and authority To be independent To have freedom of thought, expression and spirituality To be free to access and ask for civil and human rights
Friendship / solidarity outside family	<ul style="list-style-type: none"> To spend time with friends and colleagues To have trustworthy and honorable friends <ul style="list-style-type: none"> To share our thoughts and experiences with one another To participate in night-time gatherings of same-sex friends known as <i>shab nesheni</i> (شب نشینی) To be respected and appreciated in the workplace and community (e.g., to be socially connected) To participate in community governance including <i>shura</i> (جرگه) or <i>jirga</i> (جرگه)
Religious observance	<ul style="list-style-type: none"> To engage in religious observance (e.g., to participate in religious practice such as prayer, going to mosque, or making <i>Hajj</i>) To help one another through <i>hashar</i> (حشر) and <i>zakat</i> (زکات) To have religious faith, such as trust in God, a personal relationship to God, or personal spiritual expression
Successful fulfillment of obligations	<ul style="list-style-type: none"> To set and reach one's goals To have the ability to solve problems and overcome hardships To do one's best To provide support to one's tribe and/or community
Leisure activities	<ul style="list-style-type: none"> To participate in active and outdoor leisure activities (e.g., to play sports, to go to parks and other green areas, and to have picnics) To participate in social leisure activities (e.g., to play games, to go to parties, to play with children, to cook with family) To participate in creative / artistic leisure activities (e.g., to read, write, and recite poetry and stories; to watch cinema)
Participation in cultural practices	<ul style="list-style-type: none"> To participate in cultural practices (e.g., to participate in cultural traditions and festivities) To honor and promote Afghan culture within communities and other countries; To revise cultural practices that bring challenge
Personal capacities	<ul style="list-style-type: none"> To be honest, respectful and accepting To be patient To be realistic and thankful for what one has in life To be hopeful and optimistic To have self-awareness and self-confidence

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	<ul style="list-style-type: none">• To be physically healthy
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