mind the future

Facilitator's Manual

Community MHPSS Toolkit Series

International Child Development Initiatives

2026

Acknowledgements

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International Child Development Initiatives (ICDI) is a knowledge organisation that supports and develops initiatives in the field of early childhood education, child protection and well-being.
www.icdi.nl

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Project Partners

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1. INTRODUCTION

This Facilitator's Manual was developed as part of the Mind the Future programme, a 3-year, innovative programme aiming to intervene in and contribute to systemic change in Ukraine's mental health services sector by enhancing the effectiveness and reach of local mental health services for vulnerable youth affected by the ongoing war. The target groups of the programme are vulnerable and marginalised youth (12 to 26 years old), local mental health service providers, educators, and community members. The programme is implemented by a consortium of partners, consisting of ICDI, Labour and Health Social Initiatives (LHSI), PRO-FIL, and De Veranderkamer.

Community MHPSS Activity of the Programme Background

The Community MHPSS Workshops are one of Mind the Future's key activities, designed to complement the programme's other interventions by strengthening community-level awareness, reducing stigma, and building self-help capacity among local populations.

The workshops are low-threshold, in-person sessions facilitated by Master Trainers, locally based psychologists, social workers, and educators trained and certified by ICDI, and by local facilitators they train through a cascading model. We strongly encourage you to organise the workshops within existing community structures such as schools, sports associations, rehabilitation centres, and social services, to maximise reach and sustainability. A particular focus is placed on engaging family members of vulnerable youth and young people without strong family networks.

The workshops pursue four core objectives:

Ultimately, they aim to foster long-term community resilience by equipping participants with sustainable coping mechanisms and establishing lasting pathways to professional care.

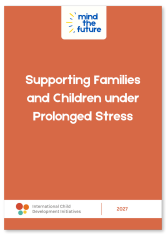
How This Manual and the Toolkits Will Be Used Within the Community MHPSS Activity

This manual is the overarching guide for the Community MHPSS Toolkit Series, developed as part of the Mind the Future programme. It sets out how workshops are planned, facilitated, and quality-assured, and how the four toolkits developed for the programme are to be used in practice. It provides Master Trainers and community facilitators with the background, principles, and practical guidance they need to use the toolkits effectively. Each toolkit in the series addresses a specific theme and audience, but they all share the same foundation — this manual explains what that foundation is and why it matters.

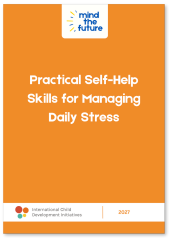
The four toolkits are:

1.Community-Based Psychological First Aid (PFA)
A practical toolkit to strengthen everyday support skills through community-based Psychological First Aid.

2.Stress, Trauma, and Mental Wellbeing in Times of Crisis
Focused on building community resilience.



3.Supporting Families and Children under Prolonged Stress
Addressing the specific needs of families.



4.Practical Self-Help Skills for Managing Daily Stress
Building the resilience of caregivers, including psychologists, social workers, and educators.

All four toolkits are evidence-based, practice-oriented, and available in both English and Ukrainian. These toolkits are grounded in community MHPSS, which the community facilitators can implement smoothly. Each toolkit provides a broad range of content and exercises. Master Trainers and local facilitators are expected to select from this material in advance of each workshop, tailoring their session to the specific needs of the group they are working with.

Master Trainers choose which toolkit(s) they are trained on, though all are encouraged to complete the Community-Based Psychological First Aid Toolkit as a baseline. A Master Trainer becomes certified by ICDI upon active participation in the relevant training session. They then either facilitate workshops themselves or train local facilitators who do so on their behalf.

The toolkits will also be published on partners' websites and social media platforms to support wider uptake across Ukraine beyond the programme's direct reach.

Importance of Community-Based Mental Health and Psychosocial Support in the MtF Context (The Why)

The Context: Why Community-Based MHPSS Matters in Ukraine

Ukraine's ongoing war has created profound and widespread mental distress. At the same time, Ukraine's formal mental health system is under enormous strain, with hundreds of healthcare facilities damaged or destroyed and many professionals displaced. The gap between need and available professional care is significant and growing.

Bridging the Gap

Community-based MHPSS is one of the most effective ways to bridge this gap. When mental health support is woven into everyday community life — through workshops, peer connections, and local facilitators — people cope better, recover faster, and stay more connected to one another. It reaches people where they are, without the barriers of stigma, cost, or complicated systems. Most importantly, **it raises awareness of mental health, helps people recognise what they and those around them are experiencing, reduces stigma around help-seeking, and connects communities to professional services when needed, making it easier and more normal for people to access the right support at the right time.**

Recognising That Distress Looks Different for Everyone

Effective support recognises that people experience distress differently. A child may express it through behaviour rather than words. Two people who lived through the same event may react in completely opposite ways — both responses are normal. Support works best when age, background, gender, and individual circumstances are taken into account.

Supporting the Supporters

This applies equally to those who provide support. Teachers, volunteers, and community workers often carry significant emotional weight while neglecting their own wellbeing. Peer support and stress management are just as important for helpers as for those they help — because a community that takes care of its helpers can sustain its care over time.

What the Mind the Future Workshops and Toolkit Series Do

This is the role the Mind the Future Community MHPSS Workshops and Toolkit Series are designed to fulfil, providing structured activities and practical resources that community members can use in their own contexts. Through community-led sessions, participants gain practical skills to manage stress, language to understand their own experiences, and the ability to recognise when they or someone close to them may need additional support. Facilitators help create shared spaces where people feel less alone and more in control. And when community members begin to support one another, the impact extends well beyond the workshop itself; people feel useful, build confidence, and move from feeling overwhelmed to feeling more connected and capable.

Building Recovery with Communities

Ultimately, recovery is most meaningful when communities are part of shaping it. When people affected by crisis take on active roles, organising activities, offering peer support, stepping into leadership, support becomes something built with communities, not just delivered to them. Whether through peer groups, family networks, or local programmes, what matters most is that people feel connected, understood, and not alone. That sense of belonging is central to healing.

Community-based support does not replace professional mental health care. But in a context like Ukraine's, it plays an essential and active role as a complement to it.

2. KEY CONCEPTS AND KEY PRINCIPLES SHARED FOUNDATIONS

Key Concepts

This section introduces the core concepts that underpin all four toolkits. Facilitators do not need to be mental health professionals to use these toolkits, but a working understanding of these ideas will help them facilitate sessions with confidence, respond to participants appropriately, and stay grounded in a trauma-informed approach.

1. Trauma

Trauma is what happens when a person experiences or witnesses something so frightening or overwhelming that they cannot cope with it in their normal way. It can affect feelings, thoughts, behaviour, and physical health. Trauma is not only individual; whole communities can experience it together, as is the case in Ukraine, where war, displacement, and prolonged uncertainty have touched almost everyone.

For those who do develop trauma, recovery requires professional support from trained mental health practitioners. Supportive relationships, safe environments, and community connection remain valuable, but they are not a substitute for professional care. Facilitators using this toolkit play an important role in recognising signs of trauma and referring people to appropriate professional support — this is distinct from, and should not be confused with, providing trauma treatment themselves.

2. Stress

Stress is the body and mind's natural response to challenge or threat. It is not always harmful — in the short term it helps people respond to difficult situations. But when stress is prolonged or intense, as it often is in crisis contexts, it can lead to fatigue, anxiety, sleep problems, difficulty concentrating, and physical health issues. In Ukraine's current context, chronic stress is widespread and should be understood as a normal response to an abnormal situation.

3. Distress

Distress occurs when stress becomes too much for a person to cope with. It can lead to feelings of helplessness, emotional exhaustion, or being mentally stuck. Distress is not a sign of weakness — it can affect anyone. Ignoring it tends to make it worse, which is why early, accessible support matters.

4. Trauma-informed practice

Trauma-informed practice means being conscious of how trauma affects people and responding in ways that avoid causing further harm. It means prioritising safety and trust, supporting people's sense of choice and control, and focusing on strengths rather than deficits. All workshops in this series should be facilitated with this approach in mind, regardless of the toolkit being used.

5. Community support and collective resilience

Community support and collective resilience shifts the focus from "what is wrong with me?" to "what helps us get through things together?" Recovery from trauma and distress is rarely built alone. When people come together — through regular gatherings, shared routines, peer connection, or simply checking in on one another — they strengthen both individual and collective resilience. Community circles, shared rituals, and consistent group contact are among the oldest and most effective forms of human support. They create belonging, rebuild trust, and remind people that they are not alone.

Real-Life Examples

The examples below show how the concepts above can appear in real situations, helping us better recognise and understand these responses in the people around us — and in ourselves.

1. Trauma Responses

Olena is a teacher who has been struggling since her community experienced repeated air-raid alerts. More than a month on, she finds herself unable to enter her classroom on some days. When she hears loud noises, she is instantly taken back to the worst moments of the attacks — sometimes leaving mid-lesson without being able to explain why. She feels exhausted and disconnected, and finds it hard to be present even with people she is close to.

These reactions are not a sign that something is "wrong" with her — they are recognisable trauma responses after prolonged threat and fear. Understanding colleagues, supportive environments, and opportunities to safely connect with others can help her gradually regain a sense of stability and safety.

2. Stress and Distress

Serhii works with a local volunteer group. At first, the busy schedule and sense of purpose kept him focused. Over time, the long hours and constant exposure to difficult stories began to affect him deeply — he started sleeping poorly, felt emotionally exhausted, and found himself carrying the pain of those he was trying to help.

This is secondary traumatic stress — a recognised consequence of sustained exposure to the trauma and suffering of others. It is distinct from general stress or burnout, and requires specific attention.

Generic coping strategies alone are not sufficient here. What Serhii needs most is access to regular, structured supervision — a dedicated space where volunteers and support workers can process what they are exposed to, with guidance from a qualified person. Without this, secondary traumatic stress can deepen and become harder to recover from.

3. Community Support and Resilience

In one neighbourhood, residents began meeting once a week for tea and conversation after several families were displaced. These simple gatherings created a space to check in, share information, and feel less alone. Over time, people began helping each other with childcare, food, and practical needs. Small shared routines like this can strengthen social bonds and help communities rebuild a sense of stability.

Key Principles

All four toolkits in this series are built on a shared set of principles. These come from well-known principles, including Psychological First Aid (PFA) and Mental Health and Psychosocial Support (MHPSS) standards. Together, they make sure that every activity remains safe, ethical, and genuinely centred on the needs of the community.

These principles are not just guidelines to follow — they guide how you do this work.

1. DO NO HARM

The first important thing is to avoid causing damage. Every activity in this toolkit has been designed to minimise the risk of retraumatisation, negative attitudes/beliefs, or unintended harm. If something does not feel right for your group, trust that instinct and make changes based on what they need.

2. SAFETY AND PROTECTION

People can only open up and participate when they feel safe. Creating a physically and emotionally safe environment is important. Safety comes before everything else.

3. RESPECT, DIGNITY, AND CULTURAL SENSITIVITY

There is no one-size-fits-all approach to psychosocial support. Every community has its own values, traditions, and ways of making sense of their experiences. You can adapt activities thoughtfully to fit the cultural context of their group, always treating participants with dignity and respect.

4. PARTICIPATION AND EMPOWERMENT

People are not just receiving support — they are actively involved in their own recovery. The focus is always on what people and communities already have: skills, knowledge, relationships, and resilience.

5. CONFIDENTIALITY AND TRUST

What is shared in the group stays in the group. Trust is the foundation of all psychosocial support work, so it's crucial to protect it. It should be agreed with their participants on how to keep things private and respect each other's stories at the start of every session.
However, confidentiality has limits. If a participant discloses information that suggests they or someone else may be at risk of harm, this cannot be kept confidential and must be acted upon to ensure safety. Participants should be made aware of this exception from the outset, so that trust is built on transparency.

6. DIFFERENT LEVELS OF SUPPORT AND REFERRAL

Community-level support is powerful, but it has limits. Some participants may need more specialised help than a workshop can provide. Knowing when and how to refer someone to professional services is essential. Clear ways to connect people to support services/knowing where to send people for help should always be in place before sessions begin.

7. NORMALISING REACTIONS

In a crisis, distress is normal. Anxiety, grief, anger, exhaustion, and numbness are not signs of weakness or illness — they are natural human responses to deeply difficult circumstances. Helping people understand this reduces shame, breaks down negative attitudes/beliefs, and opens the door to support.

8. BUILDING CONNECTION AND COMMUNITY

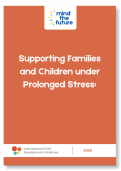
Human connection is one of the most powerful forces in recovery. Strengthening relationships — between peers, within families, and across communities — is at the heart of this entire toolkit series.

3. HOW TO USE THE TOOLKITS

1. How the Toolkit Series is Structured

The **Community MHPSS Toolkit Series** consists of four standalone toolkits, each addressing a distinct theme and audience:

1. Community-Based Psychological First-Aid
A foundational toolkit for community-based MHPSS, with a focus on youth peer-to-peer support.



3. Supporting Families and Children under Prolonged Stress
Addressing the specific needs of families.

2. Stress, Trauma, and Mental Wellbeing in Times of Crisis
Focused on building community resilience.

4. Practical Self-Help Skills for Managing Daily Stress
Building the resilience of caregivers, including psychologists, social workers, and educators.

While each toolkit can be used independently, the Community-Based Psychological First-Aid Toolkit serves as the recommended entry point for all facilitators, as it equips facilitators with the skills to respond when a participant needs immediate support during a workshop.

2. The Role of This Manual

This manual sits above the four toolkits and applies to all of them equally. It provides the conceptual grounding, guiding principles, and facilitation standards that shape how every workshop should be approached, regardless of which toolkit is being used. Facilitators should read and familiarise themselves with this manual before using any of the toolkits, and return to it as a reference point when preparing sessions or navigating difficult situations in the room.

4. HOW TO ORGANISE COMMUNITY MHPSS WORKSHOPS

1. Who Facilitates the Workshops

Workshops are facilitated by Master Trainers — psychologists, social workers, educators, and other community professionals trained and certified by ICDI — and by local facilitators they train through a cascading model. Both groups should only facilitate workshops using the toolkit(s) they have been trained on, and should be familiar with this manual before running any session.

2. Where and For Whom

Workshops work best when embedded in existing community structures — schools, community centres, sports associations, rehabilitation centres, social services, and cultural or religious organisations. Familiar, trusted spaces reduce barriers and help people feel at ease. A particular focus should be placed on engaging family members of vulnerable youth and young people without strong family networks. The same group may participate in more than one workshop using different toolkits.

3. Practical Arrangements

- **Group size:** 20 to 25 participants — large enough for peer connection, small enough to maintain psychological safety.
- **Duration:** approximately one hour, keeping sessions accessible and low-threshold.
- **Language:** workshops should always be facilitated in the language most accessible to participants. Where a single language cannot include everyone, facilitators should consider additional means, such as translation or peer language support to help all participants engage meaningfully.

4. Choosing the Right Toolkit and Preparing the Session

Before each workshop, facilitators should choose the toolkit based on the actual needs of the group, informed where possible by consultation with participants, community leaders, or referring organisations. Consider who is in the room, what they need most, and what feels safe and appropriate given their experiences.

Each toolkit contains more content than can be covered in one session. Facilitators should read it in full in advance and select the most relevant activities. The Community-Based Psychological First-Aid Toolkit is recommended as a starting point for groups new to MHPSS workshops. Preparation should also include arranging the space to feel welcoming, confirming materials needed, and planning how to open and close the session in a grounding and supportive way.

5. Reflection

Reflection is the part of the session where participants think about and discuss what they have just experienced. Talking together helps participants understand their reactions, hear different perspectives, and connect the activity to their daily lives. In stressful situations, having a safe space where people feel heard can strengthen trust and connection within the group. Reflection also helps ensure that activities lead to meaningful learning rather than simply filling time.

As a facilitator, your role is to create an environment where everyone feels comfortable participating. Each activity in the presented toolkits includes two guiding questions to help start the reflection.

Use the checklist below to support a meaningful and productive reflection process:

- ☐ **1. Position the group for connection**
  Try to arrange the space so that everyone is at the same eye level, ideally sitting in a circle. If that isn't possible, encourage participants to face each other as much as they can. This simple change helps everyone feel equal and makes it easier to connect and engage with one another.
- ☐ **2. Allow enough time for reflection**
  Do not shorten the reflection, even if the activity takes longer than planned. Processing the experience is as important as the activity itself.
- ☐ **3. Use the guiding questions as a starting point**
  Begin with the experience and transfer questions provided in the toolkit to guide and anchor the reflection, then allow the conversation to flow naturally from there with the follow up questions.
- ☐ **4. Encourage group input**
  When someone shares an idea, use simple prompts such as "Would anyone else like to add?" or "What do others think?" to keep the dialogue moving.
- ☐ **5. Balance participation**
  Pay attention to group dynamics so everyone has a chance to speak. Gently invite quieter participants to share, while making sure no one dominates the conversation.
- ☐ **6. Listen and summarise**
  Repeat or summarise key points in a neutral language. This shows that you are listening and helps the group stay focused.
- ☐ **7. Link to daily life**
  Guide the discussion toward how the activity connects to participants' everyday lives, such as family relationships, friendships, or managing stress.
- ☐ **8. Observe the group's energy**
  Notice emotional shifts in the group. If the topic becomes difficult, allow a short pause so participants can stay calm and grounded.
- ☐ **9. Recap key points**
  Close the reflection by briefly naming the main ideas shared and linking them back to the session goals.
- ☐ **10. Ensure a clear transition**
  Before moving on, check that participants feel settled and ready for the next part of the programme.

6. Facilitator's Reflection after the Workshop

Facilitators should do self-reflection after each session on what went well, what was difficult, and whether any participants need additional support or referral. Facilitators are also reminded to look after their own wellbeing — working with communities under stress is emotionally demanding, and peer support, check-ins with Master Trainers, and access to supervision are important safeguards against burnout.

Wellbeing as a Daily Practice

One of the defining features of this toolkit series is that the activities are designed to be done in everyday life — not just during the workshops. They are simple enough to be included in daily routines, community gatherings, family time, and professional practice.

Well-being is not something that's achieved in a single session. It is built slowly, through consistent small practices — moments of reflection, connection, and care repeated over time. These toolkits aim to make that possible.

5. GLOSSARY

1. Active listening
A way of listening that involves giving full attention to the person speaking, without interrupting, judging, or rushing, and showing that attention through body language such as eye contact, nodding, and facial expressions. A core skill across all helping and support approaches.

2. Burnout
A state of emotional, physical, and mental exhaustion caused by prolonged stress, particularly common among those who support others in crisis contexts. Prevented through regular self-care, peer support, and supervision.

3. Cascading training
A training model in which Master Trainers train local facilitators, who then facilitate workshops in their communities. This approach extends the reach of the programme beyond those directly trained by ICDI.

4. Collective resilience
The shared ability of a community to cope with, adapt to, and recover from adversity together. Built through connection, mutual support, and shared routines.

5. Collective trauma
Trauma experienced by a whole community or group as a result of a shared event or prolonged situation, such as war or displacement. It affects not only individuals but also social systems and community bonds.

6. Community circles
Inclusive group spaces where participants can share openly, build trust, and support one another. Used in workshops to strengthen connection and collective resilience. Community circles draw on longstanding human traditions of coming together for dialogue, decision-making, and healing.

7. Community routines and rituals
Regular shared practices — such as group gatherings, shared meals, or collective activities — that create a sense of belonging, strengthen social bonds, and help communities maintain stability during difficult times. Consistency and intention are the key elements that make these practices effective.

8. Confidentiality
A core principle in PFA and community support, meaning that personal information shared by a participant is kept private and not shared without their permission. Confidentiality has limits — if there are concerns about someone's safety or risk of harm, a trusted adult or professional must be involved.

9. Consent
Asking whether a person wants to receive support before offering it, and respecting their choice. A foundational principle across all helping and support approaches.

10. Coping skills
Practical ways of managing stress and difficult emotions. Coping skills involve interconnected ways of thinking, feeling, and acting, and can be taught, learned, and practised. When people actively develop coping skills, they are better able to respond to stressful situations in a resilient way. (The same pattern should be applied to all remaining entries.)

11. Cultural responsiveness
An approach to facilitation and support that recognises and respects differences in identity, culture, language, ability, and life experience. It involves using clear and simple language, avoiding assumptions, adapting communication to each person's needs, and ensuring that support is inclusive and accessible to all.

12. Distress
An intense emotional state that develops when stress becomes too much for a person to cope with. It can lead to feelings of helplessness, emotional exhaustion, anxiety, or being mentally stuck. Distress is not a sign of weakness and can affect anyone. Ignoring it tends to make it worse, which is why early, accessible support matters.

13. Do no harm
A core facilitation principle requiring that workshops are designed and delivered in ways that protect participants from re-traumatisation, stigma, and unintended social risks.

14. Inclusive communication
Ways of communicating that ensure everyone can participate fully, regardless of age, ability, language, or background. This includes using simple language, checking for understanding, adapting to different needs, and being sensitive to gender and cultural differences.

15. Mental Health and Psychosocial Support (MHPSS)
A broad term covering any type of support — from community-level peer connection to specialised clinical care — that aims to protect or promote mental health and psychosocial wellbeing, particularly in crisis settings.

16. Normalising distress
A facilitation approach that communicates clearly to participants that stress, anxiety, and emotional difficulty are normal human responses to abnormal situations, not signs of personal weakness or failure.

17. Peer support
Support provided by people with shared or similar experiences, rather than by professionals. In the context of this programme, peer support includes young people supporting one another and community members supporting each other through listening, connection, and practical help. Peer support does not replace professional care but is a valuable and accessible complement to it.

18. Psychological First Aid (PFA)
A simple, practical approach to supporting people who are experiencing distress during or after a difficult event. PFA does not require professional training — it is guided by three core principles: Look, Listen, and Link. It focuses on helping people feel safe, heard, and connected to support, without replacing professional mental health services.

19. Psychosocial wellbeing
A person's overall state of mental, emotional, and social health, including their sense of connection to others, ability to cope with daily life, and capacity to participate in their community.

20. Referral pathway
A clearly defined route through which a facilitator can connect a participant to additional or specialist MHPSS, protection, or health services when needed.

21. Resilience
The capacity of an individual or community to cope with adversity, adapt to difficult circumstances, and recover over time. Resilience is not a fixed trait — it can be strengthened through support, connection, and the development of coping skills.

22. Stress
The body and mind's natural response to challenge or threat. Stress is not always harmful, but when prolonged or intense — as is common in crisis contexts — it can negatively affect mental and physical health, leading to fatigue, anxiety, sleep problems, and difficulty concentrating.

23. Trauma
The lasting emotional, psychological, and physical impact of experiencing or witnessing an overwhelming or life-threatening event. Trauma affects individuals differently and can also be experienced collectively by communities.

24. Trauma-informed practice
An approach to facilitation and support that recognises the widespread impact of trauma, prioritises safety and trust, avoids causing further harm, and supports people's sense of control and empowerment. All workshops in this series should be facilitated with this approach in mind.

6. REFERENCES

Change Mental Health. (n.d.). *Understanding distress*
https://changemh.org/resources/understanding-distress/

Georgia Rural Health Innovation Center. (n.d.). *Transforming trauma into resilience: The community resiliency model in action*
https://www.georgiaruralhealth.org/blog/transforming-trauma-into-resilience-the-community-resiliency-model-in-action/

Henderson, M. (2016). *Energizers and group games* [Activity sheet]. INGENAES.
https://ingenaes.illinois.edu/wp-content/uploads/ING-Activity-Sheet-2016_06-Energizers-and-group-games-Henderson-1.pdf

IASC (2007). *Guidelines on Mental Health and Psychosocial Support in Emergency Settings*
https://interagencystandingcommittee.org/iasc-task-force-mental-health-and-psychosocial-support-emergency-settings/iasc-guidelines-mental-health-and-psychosocial-support-emergency-settings-2007

Mayo Clinic (2023). *Stress symptoms: Effects on your body and behavior*
https://www.mayoclinic.org/healthy-lifestyle/stress-management/in-depth/stress-symptoms/art-20050987

Mental Health and Psychosocial Support Hub. (n.d.). *Community mental health care*
https://mhpsshub.org/about-us/focus-areas/community-mental-health-care/

National Center for Complementary and Integrative Health (2024). *Stress and health*
https://www.nccih.nih.gov/health/stress

Save the Children (2013). *PFA Training Manual for Child Practitioners*
https://resourcecentre.savethechildren.net/document/save-children-psychological-first-aid-training-manual-child-practitioners

The Foundation for Family and Community Healing. (n.d.). *Circle process.* Mediators Beyond Borders International.
https://mediatorsbeyondborders.org/what-we-do/conflict-literacy-framework/circle-process/

WHO (2011). *PFA: Guide for Field Workers*
https://www.who.int/publications/i/item/9789241548205

World Health Organization (2023). *Stress*
https://www.who.int/news-room/questions-and-answers/item/stress

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