



Republic of Rwanda



EUROPEAN UNION



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# Consolidating Unity and Resilience through Healing, Rehabilitation and Reconciliation in Rwanda

November 2025

Baseline Survey Report

Executive Summary



PRISON FELLOWSHIP  
RWANDA



HAGURUKA  
Defending the rights of women and children



# Consolidating Unity and Resilience through Healing, Rehabilitation and Reconciliation in Rwanda

## Baseline Survey Report

### Executive Summary

## ■ Background

This summary highlights the key objectives, findings and recommendations of a baseline survey for the programme titled 'Consolidating Unity and Resilience through Healing, Rehabilitation and Reconciliation in Rwanda' (the Consolidating Unity and Resilience programme), which Interpeace will co-implement with Prison Fellowship Rwanda (PFR), Haguruka, and Dignity in Detention (DIDE). The programme will be supported by the European Union. It is designed to address the quiet weight of trauma, unresolved family tensions, and economic uncertainty that continue to affect the daily lives of Rwandans.

The programme will be implemented in four districts (Nyamasheke, Karongi, Nyarugenge, and Bugesera), in two correctional facilities (Gicumbi and Muhanga), and in the Rwamagana Social Reintegration Center. Using the community-based holistic psychosocial care (CB-HPC) model, it will strengthen professional capacity, deliver tailored psychosocial and reintegration support, and facilitate dialogue spaces that promote healing, trust and social cohesion.

Building on the achievements of a previous phase funded by the Swedish International Development Agency (Sida), the programme will extend efforts to institutionalise community-based healing and psychosocial care, and social reintegration mechanisms for ex-prisoners. The baseline survey has supplied the evidence foundation for this work. It has provided a detailed picture of the current status of mental health, psychosocial well-being, family and social resilience, reconciliation, and livelihoods in the programme's intervention districts and correctional facilities.

The baseline survey's findings will guide implementation of the Consolidating Unity and Resilience programme and will act as a benchmark to measure future progress and impact. The findings will also enable the programme to adapt its community-based holistic psychosocial care (CB-HPC) protocols to Rwanda's unity and resilience ecosystem and scale them up.

# Key objectives of the baseline survey

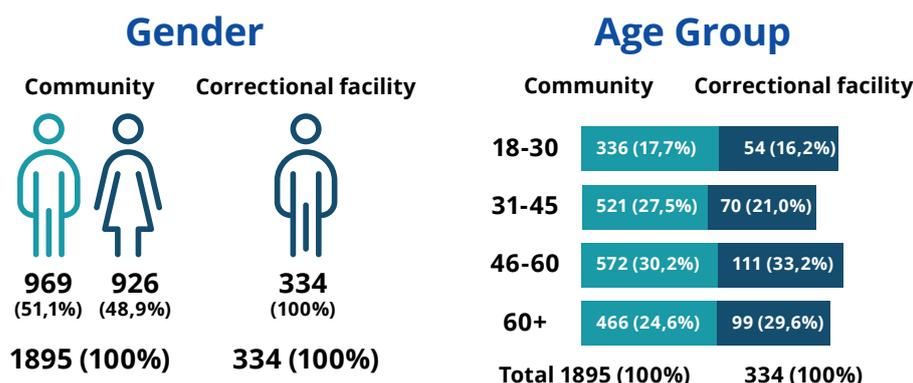
1. To assess the current state of resilience, social cohesion, and psychosocial well-being in selected districts and correctional facilities.
2. To identify the needs of communities and incarcerated individuals, and the challenges they face, particularly with respect to mental health, family reintegration, and economic empowerment.
3. To document community assets, including active community-based organisations (CBOs), service providers, and local best practices, as well as gaps, challenges, and needs.
4. To establish a baseline against which future programme impact can be measured.
5. To inform community-based healing and psychosocial care (CB-HPC) protocols, including their adaptation and scale up.

## Methodology

The baseline survey used a convergent mixed-method design that applied quantitative, qualitative and participatory approaches to capture the multidimensional realities of healing, resilience and reintegration in Rwanda.

### Quantitative component

- The baseline survey included 1,895 community members in four districts (Bugesera, Karongi, Muhanga, Nyarugenge).
- It included 334 inmates in Gicumbi and Muhanga correctional facilities.
- It applied a multi-stage stratified random sampling approach that:
  - Ensured gender balance;
  - Balanced district representation;
  - Reflected key social-historical categories (genocide survivors, ex-prisoners, descendants, economically vulnerable households).



## Qualitative and participatory component

- The project conducted focus group discussions (FGDs) and key informant interviews (KIIs) with:
  - community members;
  - local leaders;
  - service providers.

## Quality assurance

- The National Institute of Statistics of Rwanda (NISR) reviewed and approved all the baseline survey's procedures.
- Mixed methods allowed extensive triangulation of community, institutional, and correctional perspectives.

# Key baseline survey findings

## 1. Psychological healing and mental wellbeing

The baseline survey revealed promising signs of emotional recovery in both communities and correctional facilities. 74% of community respondents and 69% of inmates reported moderate to high levels of well-being. However, psychological distress remains a concern:

- 32% of community members exhibited PTSD symptoms; 30% exhibited symptoms of depression.
- 12% of inmates reported PTSD symptoms. The lower rate of PTSD among inmates probably reflects differences in the populations sampled, and the fact that interviews focused on inmates who had benefited from psych-social care interventions and were looking forward to imminent release after many years of incarceration.

PTSD category	Community		Correctional facilities	
	Frequency	%	Frequency	%
Mild symptoms	472	34	95	40
Minimal symptoms	465	34	114	48
Moderate symptoms	262	19	24	10
Severe symptoms	172	13	4	2
<b>Total</b>	<b>1,371</b>	<b>100</b>	<b>237</b>	<b>100</b>

## Overall PTSD prevalence among respondents

The results underscore the need to extend accessible, community-based mental health support.

## 2. Psychological resilience

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Resilience remains one of Rwanda's strongest social assets. 72.5% of respondents demonstrated moderate to high resilience, reflecting strong determination to overcome adversity. Respondents attributed their resilience to:

- Community-based sociotherapy;
- Religious involvement;
- Mutual support networks.

The Consolidating Unity and Resilience programme will therefore need to strengthen resilience but also ensure that resilience is sustained and woven into community structures that support collective well-being.

## 3. Family relations and intergenerational dynamics

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Families continue to play a central role in Rwanda's recovery. The baseline survey found:

- 52.5% of families in communities were resilient;
- 71.6% inmates who remained connected to their families during incarceration were resilient.

Most families showed warmth and cohesion. However, challenges that persist include communication breakdown, financial strain, and evolving gender roles.

To reinforce families as units of resilience, the Consolidating Unity and Resilience programme should promote:

- Family dialogue;
- Parenting education;
- Intergenerational healing;
- Improved communication within households.

## 4. Social cohesion and trust

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Social cohesion remains one of Rwanda's most visible achievements.

- Over 80% of respondents expressed high trust in others;
- Over 90% said they were willing to forgive.

## Willingness to forgive (communities)

	I could forgive easily	I could forgive eventually, but it would take time	I could never forgive
1. Someone who killed my parents / children / relatives.	914 (48.2%)	834 (44.0%)	147 (7.8%)
2. Someone who raped me/my partner/ my relatives.	784 (41.4%)	788 (41.6%)	323 (17.0%)
3. Someone who destroyed or looted my properties.	983 (51.9%)	817 (43.1%)	95 (5.0%)
4. Someone who hurt me.	1144 (60.4%)	689 (36.4%)	62 (3.3%)
<b>Average percentage</b>	<b>50.5%</b>	<b>41.3%</b>	<b>8.3%</b>

## Trust in members of other groups (correctional facilities)

	Yes, I could	I could but it would take time	I could not
1. I can leave my child with survivor families I participated in killing during the Genocide against the Tutsi.	283 (84.7%)	35 (10.5%)	16 (4.8%)
2. I can leave my child with someone with whom we do not share the same ethnicity or background.	294 (88.0%)	38 (11.4%)	2 (0.6%)
3. I can invite members from a Genocide survivor's family.	308 (92.2%)	25 (7.5%)	1 (0.3%)
4. During elections I can trust someone with whom we do not share the same history or background.	310 (92.8%)	22 (6.6%)	2 (0.6%)
5. Are you ready to share your historical background with others in socio therapy groups?	319 (95.5%)	15 (4.5%)	0 (0.0%)
<b>Average percentage</b>	<b>90.6%</b>	<b>8.1%</b>	<b>1.3%</b>

The findings highlight the impact of community dialogues, commemorative practices, and reconciliation initiatives such as *Ndi Umunyarwanda*.

A minority still reported feelings of exclusion or mistrust, particularly towards ex-prisoners and families of genocide perpetrators. Continued inclusive dialogues that foster empathy and coexistence remain essential.

## 5. Livelihoods and economic participation

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Economic vulnerability continues to cause psychosocial stress.

- 62% of community members had gone for three months or more without paid work;
- Only 45% had earned income recently.

Despite economic hardship, 82% reported that they felt comfortable working with people from different backgrounds, suggesting that social inclusion remains strong in the context of economic activity.

Among inmates:

- 77.5% had employment plans for their lives after release. These mainly focused on farming, small businesses and cooperatives;
- Many lacked the capital, tools, and skills they needed to implement these plans.

## Sources of livelihood income (communities)

Forms of income	Yes	No
1. I receive money in the form of a regular monthly salary.	173 (9.1%)	1722 (90.9%)
2. I receive money in the form of day wages.	832 (43.9%)	1063 (56.1%)
3. I receive money in the form of service fees, consulting fees, or for selling products as an individual trader.	762 (40.2%)	1133 (59.8%)
4. We receive money in the form of service fees, consulting fees, or for selling products, in a collaborative enterprise with other people, and then divide the money between us.	294 (15.5%)	1601 (84.5%)
5. We directly use the product of our labour, without converting it to money (for instance, build our own home, eat the food we produce).	523 (27.6%)	1372 (72.4%)
<b>Average percentage</b>	<b>27.3%</b>	<b>72.7%</b>

To achieve sustainable reintegration, the Consolidating Unity and Resilience programme will need to integrate livelihood support with psychosocial rehabilitation.

## 6. Rehabilitation and reintegration

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Rehabilitation responses in correctional facilities were encouraging.

- 74% of inmates showed strong resilience;
- Over 90% of inmates planned to return to their home communities.

These results suggest that a genuine transformation has occurred, supported by spiritual care, psycho-social education and rehabilitation programmes.

However, reintegration remains fragile. Many inmates anticipated community stigma or unemployment after release. To realise reintegration effectively, it will be necessary to put in place:

- Pre-release counselling;
- Community sensitisation programmes;
- Strong family support systems.

## Conclusion

The baseline survey portrays a nation that is steadily healing, although high levels of social trust, inclusion, and willingness to forgive still coexist with persistent emotional wounds, economic vulnerability, and fragile family relationships. The findings suggest that psychosocial healing, social cohesion, integration and economic inclusion must advance together if unity and resilience are to be fully consolidated.

The Consolidating Unity and Resilience programme provides a timely opportunity to build on strengths and address identified gaps. To build on the foundation that has been laid, the following strategic priorities are recommended for the programme:

- 1.** Expand community-based healing and psychosocial care (CB-HPC).
- 2.** Embed trauma-sensitive approaches in governance and service delivery.
- 3.** Strengthen family resilience and intergenerational healing.
- 4.** Link rehabilitation and reintegration to livelihood restoration.
- 5.** Improve coordination, learning, and policy integration across sectors.

When these elements are pursued together, healing can shift from aspiration to lived experience, enabling Rwandans to continue to restore dignity, trust and social resilience. The baseline survey portrays a society that is both scarred and strong. While psychological distress, stigma and family cohesion remain obstacles to resilience, the social foundations of trust and forgiveness are remarkably high. Rwanda's recovery has reached a stage of emotional maturity. To sustain and deepen its progress, the society now requires integrated systems that link mental health, family cohesion, community reintegration and livelihoods.



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