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— DIALOGUE FOR — PREVENTION



INTERCULTURAL DIALOGUE FOR
CONFLICT TRANSFORMATION BRIEFS SERIES

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SHORT SUMMARY

Peace Begins with Dialogue!

In an era where geopolitical power struggles disrupt traditional peacebuilding, where identity and misinformation fuel divisions, and where trust in institutions is eroding, UNESCO's *Intercultural Dialogue for Conflict Transformation* briefs series presents an adaptable, culturally grounded, and people-centred approach to peacebuilding.

With 1.5 billion people living in contexts with low intercultural dialogue where global challenges such as absolute poverty, terrorism and forced displacement are more prevalent, this four-part series draws on firsthand experience, country case studies, and expert analysis to demonstrate the transformative potential of dialogue in fragile and conflict-sensitive settings.

The *Dialogue for Prevention* brief, developed with the Auschwitz Institute for the Prevention of Genocide and Mass Atrocities, explores the powerful role intercultural dialogue can play in preventing large-scale identity-based violence, particularly in the upstream and downstream phases of conflict. Grounded in the idea that dialogue can bridge divides and foster mutual understanding, the brief argues that enabling environments for intercultural dialogue—marked by stability, inclusive governance, freedom of expression, horizontal equality, and social cohesion—also mitigate key risk factors for atrocity violence. Drawing on diverse examples from Cambodia, Colombia, Italy, and Kenya, it showcases creative, context specific applications of dialogue.

Through practical guidance, the brief equips policymakers, practitioners and civil society seeking to embed dialogue into prevention strategies.

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"Since wars begin in the minds of men and women it is in the minds of men and women that the defences of peace must be constructed"

— DIALOGUE FOR — **PREVENTION**

Foreword

At the heart of many conflicts lie misunderstandings, misconceptions, and mistrust, exacerbated by divisive narratives and polarizing discourses that reinforce beliefs and perceptions along identity lines. These dynamics deepen divisions and perpetuate stereotypes, creating echo chambers that stifle dialogue and inhibit empathy. As identities become entangled in conflict, individual experiences are overshadowed by monolithic views, magnifying differences and obscuring commonalities.

To break this cycle, opportunities for engagement and exchange must be fostered. Here lies the transformative power of meaningful and inclusive dialogue: a space that acknowledges the complexity, nuances and richness of individual experiences, bringing forth shared values and beliefs often concealed by perceived differences. By nurturing such connections, societies can build resilience, not only to prevent conflict but to transform differences into opportunities for growth, healing, and mutual understanding.

In a world marred by identity-based divisions, the *Dialogue for Prevention* brief developed with the Auschwitz Institute for the Prevention of Genocide and Mass Atrocities, arrives at a critical moment. It demonstrates how strengthening the structures that support intercultural dialogue can bolster societies' resilience against atrocity violence by mitigating the risk factors known to be associated with it. Atrocity prevention is a long journey, and this brief makes a compelling case of the unique capacity of intercultural dialogue to address the deep-seated drivers of atrocity violence, particularly in its upstream (prevention) and downstream (post-violence) phases.

Through inspiring examples from around the world, this brief showcases the creative applications of intercultural dialogue – from the use of film for cultural preservation and empowerment in indigenous communities in Cambodia, to culinary exchanges that build community bonds between Venezuelan migrants and Colombians, from cross-cultural youth peacebuilding in Italy to localized early warning systems in Kenya.

These examples demonstrate that by leveraging history, memory and local realities, intercultural dialogue can be tailored to any context and can turn communities once divided into places of shared understanding where the gravest threats to human dignity have no fertile ground to take root. It is my hope that this brief will inspire bold commitment and innovative action in our ongoing pursuit of a more peaceful, just, and inclusive world.



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I. Introduction

The world today is experiencing “the highest number of violent conflicts since the Second World War,” with a quarter of the world’s population living in conflict-affected societies (United Nations, 2023). While the United Nations was established in the wake of the Second World War with the goal of bringing an end to interstate conflict, the vast majority of violent conflict today is intrastate in nature, though regional and international actors still maintain stakes in these conflicts because

“Violent conflict in the 21st century, more than perhaps any time in human history, often revolves around issues of identity.”

of the complexities of global geopolitics. Such conflict requires a different set of response tools than would be used in brokering peace amidst traditional, interstate warfare. Moreover, violent conflict in the 21st century, more than perhaps any time in human history, often revolves around issues of identity (Jeong, 2022; United Nations General Assembly, 2023). Identity—that is, the way that individuals and groups define themselves—comes in many forms, including race, ethnicity, religion, language, gender, sexual orientation, political affiliation, ability/disability, and class, just to name a few. Although the presence of different identity groups within a society does not, in itself, signify that conflict is imminent, when identity categories align with issues like horizontal inequality or access to resources, identity becomes

a particularly salient component and driver of conflict (Schlee, 2008). In such cases, successful conflict transformation and prevention requires the coming-together of the identity groups that are at odds with each other in an effort to facilitate discussion, generate empathy, and cultivate non-violent resolutions to the conflict. That is, it requires Intercultural Dialogue.

UNESCO defines **Intercultural Dialogue** (ICD) as “a process undertaken to realize transformative communication that requires space or opportunities for engagement and a diverse group of participants committed to values such as mutual respect, empathy and a willingness to consider different perspectives” (UNESCO, IEP, 2022, p.26). At the core of the practice of ICD is the notion of identity, as culture itself “can be understood as the multiple identities that people assume in different settings” (UNESCO, IEP, 2022, p.12). In any given moment, an individual can represent multiple overlapping identities. In times of identity-based violent conflict, however, one or more of these identity categories takes precedence, framing the way people within a society understand the conflict around them and how they interact with others. Various forces encourage individuals to “choose a side,” and, in doing so, that identity marker becomes the only one that matters, as the other identity groups to which a person belongs fall by the wayside. ICD is a process whereby individuals and groups can reclaim the vastness and flexibility of their identities through dialogue with “the other.” It is a way to build bridges across divides by highlighting shared values, beliefs, and goals that have been obscured by the tunnel vision of violent conflict. Importantly, ICD is not a promise to eliminate all conflict and disagreement within a society or among societies. Rather, it is a process that can transform violent conflict into non-violent disagreements that can be adjudicated through

participatory processes based on empathy and mutual respect. Disagreement and political conflict exist in all societies. The key is to find avenues for stakeholders to resolve such conflict without resorting to violence (Maddison, 2016). ICD is a practice particularly well suited to this purpose.

This brief will detail the role that ICD can and has played in responding to and preventing identity-based conflict, including the most grave forms of identity-based conflict: mass atrocities. To begin, it will articulate the importance of taking a broad view of prevention as a long-term process that can be engaged at all points of the conflict cycle: before (upstream), during (midstream), and after (downstream) violent conflict has broken out. It will argue for the specific utility of ICD in preventing mass atrocities, which are the gravest forms of human rights violations, including genocide, crimes against humanity, and war crimes. Identity sits at the core of mass atrocity violence, and ICD has a particularly strong role to play in upstream and downstream atrocity prevention strategies. Next, the brief will explain how strengthening the structural factors that can facilitate ICD simultaneously increases the resilience of societies against atrocity violence by mitigating the risk factors known to be associated with it. Finally, this brief will provide concrete examples of the variety of ways that ICD can be implemented in the upstream and downstream phases of violent conflict to prevent the escalation of violence and/or its recurrence. By looking at the role ICD has played across different regions around the world, these examples will demonstrate how ICD is a practice and process from which any context can benefit.



What are mass atrocities?

The term “mass atrocity” is not, in itself, a legally defined term. Rather, it is an umbrella term that has been developed to describe the three gravest forms of human rights violations under international law: genocide, crimes against humanity, and war crimes.

Genocide

Genocide is legally defined in the 1948 UN Convention on the Prevention and Punishment of the Crimes of Genocide, more commonly known as the Genocide Convention. It was the first international treaty ever passed by the United Nations. According to the Genocide Convention, genocide is any of five acts committed “with the intent to destroy, in whole or in part, a national, ethnical, racial, or religious group, as such.” The five acts that can constitute genocide are:

- Killing members of the group
- Causing serious bodily or mental harm to members of the group
- Deliberately inflicting on the group conditions of life calculated to bring about its physical destruction, in whole or in part
- Imposing measures intended to prevent births within a group
- Forcibly transferring children of the group to another group

Crimes Against Humanity

Crimes Against Humanity are widespread and/or systematic attacks against civilian populations that are conducted by a state or state-like organization as part of an official policy. The kinds of attacks that can be considered crimes against humanity include:

- Murder
- Extermination
- Enslavement
- Deportation or forcible transfer of a population
- Imprisonment
- Torture
- Rape and other forms of sexualised violence
- Persecution
- Enforced disappearance of persons
- Apartheid
- Other inhumane acts of a similar character

War Crimes

War Crimes are violations of international humanitarian law that take place during a period of armed conflict. Generally, war crimes fall into one of three categories:

- Attacks against protected persons, such as civilians and non-combatants
- Attacks against protected property, such as hospitals, schools, places of worship, or cultural heritage sites
- Use of unlawful means of warfare, such as chemical and biological weapons, landmines, the taking of hostages, or conflict-related sexual violence

According to the 2005 World Summit Outcome Document, each individual State has the responsibility to protect its populations from genocide, war crimes, ethnic cleansing and crimes against humanity. This responsibility entails the prevention of such crimes, including their incitement, through appropriate and necessary means.

II. Prevention as a Process

Large-scale, identity-based violence—including and especially in its most egregious forms of mass atrocities, that is, genocide, crimes against humanity, and war crimes—does not happen overnight. It is a long-term social and political process beginning with small steps that, when they remain unaddressed, can escalate into mass atrocity (Rosenberg, 2012). Such violent conflict is also complex in nature, resulting from an array of factors, including the historical relationships among identity

“ It is a long-term social and political process beginning with small steps that, when they remain unaddressed, can escalate into mass atrocity.

groups, the way some nation-states were established and how societies are governed, the economic wellbeing of a society, the manner in which individuals and groups are recognized and acknowledged, and how they interact on a daily basis. Because of the complexity of how identity-based conflict operates, there are no simple, one-size-fits-all solutions to resolving it. Rather, responding to and preventing identity-based conflict requires a multifaceted and interdisciplinary approach that integrates an array of policy responses, practices, skills and competences and other initiatives. Given its central goal of bringing together groups across identity-based groups to engage in dialogue and develop non-violent solutions to social and political problems, ICD represents a particularly powerful practice in the prevention toolbox.

To understand the role that ICD can play in prevention, it is first essential to understand how prevention works throughout a conflict cycle. Just as identity-based violent conflict is a process, rather than a spontaneous event, prevention, too, can be understood as a process that requires different approaches at different stages of conflict. Genocide prevention scholar James Waller (2016) uses the metaphor of a stream or river as a particularly useful way of understanding the process of prevention. **Upstream prevention** describes the actions that can be taken before violent conflict breaks out to make sure a situation never reaches the level of mass violence. Such primary prevention strategies involve identifying the structural and contextual risk factors known to be associated with identity-based mass violence and taking actions to mitigate those risk factors through policy and practice. **Midstream prevention** describes the use of political, legal, economic, and military tools to bring an end to ongoing violence so that as few people as possible suffer. Inevitably, midstream prevention is more costly, both economically and in terms of human life, and less likely to succeed, as the number of tools in the prevention toolbox increasingly diminishes as violent conflict rages on. **Downstream prevention** describes the actions a society can take to rebuild in the aftermath of violent conflict in a way that prevents the recurrence of such conflict in the future. The tools of downstream prevention involve looking backward to deal with the legacies of past violence but also looking forward to see how those legacies can be addressed in a way that they do not perpetuate identity-based divisions going forward.

This brief is designed specifically for thinking about the role of ICD in the prevention of large-scale, identity-based violence, especially atrocity crimes (genocide, crimes against humanity, and war crimes). It is important to state from the outset that there are at once many similarities, but also some

differences in an atrocity prevention approach versus a conflict prevention approach. Many of the starkest differences arise in the midstream prevention phase in the ways that each approach opts to treat parties to the conflict. As Kate Ferguson and Fred Carver put it in a 2021 report by Protection Approaches, a UK-based atrocity prevention NGO, “Conflict prevention generally seeks to treat parties to conflict in a similar manner through a commitment to impartiality. Conversely, atrocity prevention aims ultimately to deter international crimes, meaning that it would be wrong to treat would-be or actual perpetrators and victims equally” (Ferguson and Carver, 2021, p. 30). While a conflict prevention approach seeks the most direct avenue to bringing an end to violent conflict, even if that means appeasing the perpetrators of atrocity crimes, an atrocity prevention approach sees perpetrators of atrocity crimes as inherently bad actors and, typically, spoilers, who should face accountability for their crimes, rather than be treated as parties worthy of consideration.

Although this is certainly a big difference between the two approaches, what is also clear is that, in the upstream and downstream phases of conflict, there is much more in common between the two approaches. Both are interested in identifying and responding to the structural factors that can lead to or that have sustained conflict among groups. And while an atrocity prevention approach may focus much more on criminal accountability in the downstream stage of a conflict, both approaches have increasingly made use of other, more restorative forms of justice as a way of avoiding future conflict.

No matter the perspective, however, what is clear is that contemporary conflicts around the world often have a clear identity component that fuels or exacerbates them (Chowdhury, 2021; Rothman

“Given that ICD holds identity at its center, it represents a particularly useful practice in dealing with identity-based conflict.”

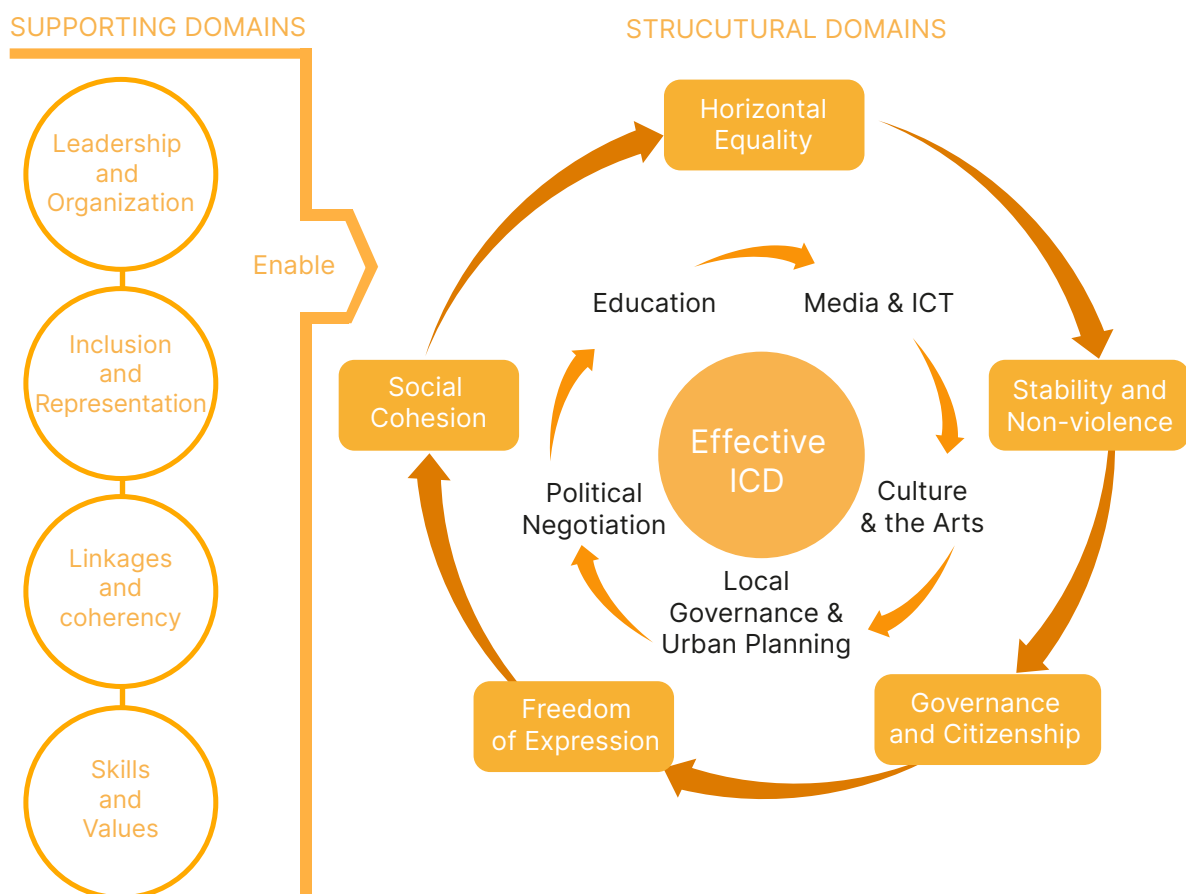
and Alberstein, 2013). In order to prevent such conflicts from escalating to violence, then, we must engage actively with identity, the ways it brings people together (for good and ill), and the ways it is tearing societies apart. Given that ICD holds identity at its center, it represents a particularly useful practice in dealing with identity-based conflict. Of course, it can be difficult to imagine creating a gathering space centered on empathy and mutual understanding at the height of ongoing violence. But for actors geared toward both conflict prevention, broadly, and atrocity prevention, specifically, ICD has a special and important role to play in the upstream and downstream phases of conflict to ensure that identity-based divisions and disagreements are acknowledged and negotiated through productive and open dialogue, rather than through violence.

III. Preventing Identity-Based Violence through Enabling Intercultural Dialogue

In many scenarios, particularly scenarios of deeply entrenched, identity-based conflict, productive intercultural dialogue does not occur spontaneously. Indeed, the sustained nature of identity-based conflict often stems from a lack of dialogue among interested parties. These hostilities among identity groups are often the result of the instrumentalization of identity by elites, who leverage these divisions to maintain power. They may also stem from the legacies of colonial periods, when colonizers would often use identity as a tool to “divide and conquer” colonized populations. Reversing this trend and encouraging the kind of ICD that can be healing, and preventive requires an environment that enables respectful, empathetic dialogue among discordant groups.

In *We Need to Talk: Measuring Intercultural Dialogue for Peace and Inclusion*, UNESCO and the Institute for Economics and Peace outline the *Framework for Enabling Intercultural Dialogue* (UNESCO, IEP, 2022). This Architecture outlines nine domains that are essential for enabling the most effective kinds of intercultural dialogue.

FIGURE 1 | Architecture for the UNESCO Framework for Enabling Intercultural Dialogue



These nine domains include five macro-level, structural domains, which “reflect the systemic elements of society at the social and institutional levels, defined by policies and legal frameworks,” including: **Stability and Non-Violence; Governance and Citizenship; Freedom of Expression; Horizontal Equality; and Social Cohesion.**

Along with these, four micro-level, supporting domains, include “the principles, values and competencies that impact actions, policies, and activities of ICD based on individuals’ interaction and engagement, as well as ICD working ‘on the ground’” (UNESCO, IEP, 2022, pp. 12-13). While the four supporting domains provide essential dimensions to consider when connecting ICD to atrocity prevention—Leadership and Organization; Inclusion and Representation; Linkages and Coherency; and Skills and Values—the five structural domains are particularly related to the institutional structures necessary to promote atrocity prevention through ICD. As a result, this report will focus primarily on these five structural domains and their relationship to atrocity prevention.

Although many atrocity prevention efforts focus on responses to ongoing instances of mass killing, the field of atrocity prevention is much broader than this, as well. Atrocity prevention also involves identifying the factors that put a society most at risk for large-scale, identity-based violence and taking actions to mitigate those risks. This kind of upstream prevention is possible thanks to the work of various scholars and practitioners over the last several decades, who have used quantitative and qualitative measures to assess which risk factors are most common across cases that experience atrocity-level violence. This research has led to the introduction of various risk assessment models that allow policymakers and practitioners to evaluate where risk is highest and where resources need to be allocated. Some examples of these risk assessment frameworks include qualitative models like UN’s *Framework of Analysis for Atrocity Crimes* (United Nations, 2014) and highly quantitative models, such as the United States Holocaust Memorial Museum’s Early Warning Project (United States Holocaust Memorial Museum, n.d.) and the Australian National University’s Atrocity Forecasting Project (Australia National University, n.d.). Research is increasingly arguing for risk assessment frameworks that combine the strengths of both qualitative and quantitative assessment when evaluating atrocity risk (Nyseth Nzitatira et al., 2024; Whigham, 2023). Across these models, the risk factors most commonly associated with atrocity violence typically fall into four different categories: risks related to the ways a society is governed, its history of conflict, its economic conditions, and the way social groups interact with the state and each other (Waller, 2016).

“ **Atrocity prevention also involves identifying the factors that put a society most at risk for large-scale, identity-based violence and taking actions to mitigate those risks.**

What is particularly important to note about these five structural domains necessary for productive ICD is that each is also directly aligned with an environment in which risk for atrocities and other forms of large-scale, identity-based violence is low. Each of these five structural factors is the inverse of one or more known risk factors of atrocity violence. In other words, by focusing on building up environments that enable ICD, we are simultaneously mitigating known risk factors for atrocity violence. For this reason alone, we can argue that ICD serves a preventive function across the spectrum of global societies. To understand this relationship, we can look at each of the enabling factors and see how building up these factors simultaneously makes a society more resilient against risk for atrocity violence.

Stability and Non-Violence

Bringing groups of people together in dialogue across identity-based divisions can be incredibly difficult, if not impossible, in scenarios where political instability and outright violence is present. It is for this reason that ICD is a practice that is especially useful for upstream and downstream prevention, whereas its role in midstream prevention is much more difficult to imagine. As the Framework articulates, “Violence affects the structures and space of civil society and populations, shutting down avenues for ICD” (UNESCO, IEP, 2022, p.18). When active political violence and/or armed conflict is ongoing, it becomes extremely difficult to generate the good faith necessary to bring people together in processes of ICD that can engage with conflict transformation at a deeper level. Instead, the focus tends to be on simply responding to the demands of armed actors in order to bring an immediate end to violence (Shonk, 2024; Skylar Mastro, 2019).

Similarly, political instability and the presence of violent conflict is one of the largest predictive risk factors when it comes to atrocity violence. In particular, societies experiencing the instability that comes from transitioning from one form of government to another, or the instability of transitioning from a period of armed conflict to a period of peace, are at particularly high risk for experiencing mass atrocities. For example, according to the most recent research from the [Transitional Justice Evaluation Tools \(TJET\)](#) research team, in the absence of policies or practices that deal with the legacies of

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past violence, such as ICD, societies in a state of transition between armed conflict and peace only make it 10 years without experiencing new armed conflict about 60% of the time. The odds are even worse over a 20-year period; only 40% of societies will survive this transitional period without reverting to armed conflict (*Takeaway #2*, 2024). For this reason, many risk assessment models place special importance on the role of violent instability in increasing atrocity risk (Goldsmith et al., 2013; Goldsmith and Butcher, 2017; Harff, 2003; Verdeja, 2016). According to some of these models, the presence of internal violence and civil war is the single biggest predictor of atrocity violence.

Societies that want to create an environment that enables ICD must first focus on creating a stable environment in which participants in ICD processes do not have to worry about protecting their most basic human rights, such as physical integrity rights¹. Building up the capacity of a society to use ICD as a practice simultaneously decreases that society’s instability and its likelihood to revert to violence to resolve conflict. Processes of ICD stimulate and strengthen the idea that, while conflict and disagreement can exist in all societies, there are always ways of resolving that conflict without resorting to violence. Engaging in ICD reinforces a belief in basic human dignity and respect—a pillar upon which all healthy and stable societies are built.

¹ Physical integrity rights describe the most basic rights that protect individuals from violence, especially violence perpetrated by a government, including torture, extrajudicial killing, and enforced disappearance.

Governance and Citizenship

“Successful ICD requires engagement from all levels of society.”

Successful ICD requires engagement from all levels of society. It necessitates the willingness and capacity of a government to engage in ICD, just as it entails active participation by stakeholders in civil society. A successful ICD process relies upon “the capacity of government to implement sound policies for social integration, building citizens’ trust and meaningfully engaging government and non-governmental institutions” (UNESCO, IEP, 2020, p.21). A governance and citizenship

model that enables ICD is one in which top-down and bottom-up approaches work together to support civil society’s capacity to engage locally with the authority, a capacity that only state structures can command.

Building such an environment simultaneously engages several risk factors known to be associated with atrocity violence. For one, atrocities are more likely to occur in societies with weaker state structures that are lacking in capacity to provide necessary resources and services to the population. One indicator included in most quantitative risk assessment frameworks that is highly predictive of atrocity risk is a country’s infant mortality rate. In designing algorithms to predict when atrocities are imminent, the most reliably predictive models find this indicator to be one of the top five most relevant factors in predicting atrocity (Valentino, 2024). Of course, the infant mortality of a country in itself has nothing directly to do with mass atrocities. Rather, infant mortality rate is an indicator used to stand in for an important factor that is related to atrocity: state capacity. Countries with high infant mortality typically have weaker state structures that lack capacity to engage in the full scope of responsibilities that states must typically carry out—including the provision of adequate healthcare to their populations. Relatedly, states with low capacity often experience high levels of legitimacy deficit, as the broader population—or specific identity groups within it—do not trust that the state is either willing or able to serve their interests (Waller, 2016).

With this structural factor, the Framework also articulates the importance of a functioning and active civil society, which is essential for ensuring that “local, community-based efforts feed into governmental policymaking and practice” (UNESCO, IEP, 2020, p. 21). This, too, is related to atrocity prevention. Vibrant civil societies serve as a mitigating factor to atrocity violence. For instance, the UN *Framework of Analysis for Atrocity Crimes* identifies “a strong, organized and representative national civil society” as a key mitigator of atrocity risk (United Nations, 2014, p. 15). When such civil societies are present, and when states actively consider the requests and demands of civil society, the social contract between government and the governed is strengthened, and it becomes significantly less likely that members of that civil society will be targets of atrocity crimes. For all these reasons, by focusing on stimulating governance and citizenship as a means of enabling ICD, societies are also inherently doing the work of prevention.

Freedom of Expression

For ICD to serve its purpose, participants in such dialogue must be free to speak their minds and share their experiences with the expectations that others will listen with empathy and respect. Of course, successful ICD does not require that all participants agree with each other. Rather, ICD supports an environment in which, even when groups inevitably disagree, an underlying ethos of mutual respect and shared human dignity unifies all participants. Such an enabling environment nourishes an inclusive and participatory culture that empowers and protects the rights of all people.

“As freedom of expression has a social dimension that enables individuals to enjoy other human rights, an environment that enables plurality and diversity of opinions and ideas is also an environment that is less likely to experience human rights violations and atrocities.”

As freedom of expression has a social dimension that enables individuals to enjoy other human rights, an environment that enables plurality and diversity of opinions and ideas is also an environment that is less likely to experience human rights violations and atrocities. Countries that uphold civic liberties where pluralistic and diverse dialogue is encouraged, dissent is protected, and journalism thrives—such as freedom of expression, freedom of information, and freedom of association—are less susceptible to experiencing mass atrocities. Nearly every risk assessment model includes a measurement of the democratic nature of a society within its analytical framework. According to genocide scholar Benjamin Valentino, it is the single biggest predictor of risk for mass atrocity (Valentino, 2024).

Given that successful processes of ICD are built upon a foundation of free expression and mutual respect, they are intrinsically connected to building more inclusive societies that recognize the voices of all people within them. As a result, focusing on strengthening this structural factor necessary for enabling ICD is directly tied to mitigating risks related to atrocities and large-scale, identity-based violence.

Horizontal Equality

The foundations of ICD are built upon a concept developed by social psychologist Gordon Allport in the 1950s called Intergroup Contact Theory (ICT) (Allport, 1954). ICT proposes that the best way to alleviate identity-based divisions in a community is to bring into contact the various identity groups, who all too often have no regular contact with “the other,” and therefore do not see them as equal—or, in some cases, as fully human. Simply bringing together opposing groups does not, on its own, work, however. Allport says that, for ICT to be most effective, four conditions must be met. The first is that everyone within that space of contact must be of equal status. In other words, there must be horizontal equality (McLeod, 2023)—the fourth structural factor to enable ICD, according to the Framework.

The Framework rightly notes, “No society is without inequality” (UNESCO, IEP, 2020, p.21). Recognition of this fact must come first, but it should not ultimately be an immovable impediment to ICD. Rather,

“ICD offers an opportunity to acknowledge and begin the work of diminishing the horizontal inequalities that exist in all societies.

“addressing, confronting and challenging socio-economic inequality across groups forms the bedrock of successful ICD” (UNESCO, IEP, 2020, p.21). It also forms the foundation of an important aspect of atrocity prevention. Atrocities occur in situations with high levels of horizontal inequality—when certain identity groups have more or exclusive access to power, privilege, goods, and services, while other identity groups have less or no access to those same things. Economic discrimination based on identity; differential access to goods and services, like food, water, healthcare, and education; governments populated with members of only one racial, ethnic, religious, or linguistic group; gender-based discrimination; and high levels of division and/or

segregation of the general population based on identity are all significant risk factors for mass atrocity (Waller, 2016). They are also all related to a lack of horizontal equality.

ICD offers an opportunity to acknowledge and begin the work of diminishing the horizontal inequalities that exist in all societies. It involves bringing as many people to the table as possible, then valuing the rights of all those people equally. Through establishing an environment that enables cross-cultural dialogue among identity groups with different levels of power and privilege, ICD can start to address such horizontal inequality and, in the process, deescalate processes that might otherwise lead to atrocity.

Social Cohesion

Creating a sense of social cohesion is a core goal of ICD, just as it is a core objective of any atrocity prevention effort. According to the UNESCO Framework, “Social cohesion, or the sense of belonging, trust and community, provides strength and resilience in society and the foundation for transformative exchange. Social cohesion facilitates collective action and cooperation among individuals in pursuit of shared objectives” (UNESCO, IEP, 2020, p.22). Identity-based social divisions, or a lack of social cohesion, lie at the core of any atrocity. A particular risk for large-scale, identity-based violence are societies that are often labeled as “deeply divided” (Guelke, 2012) or that exist within a broader

“In these societies, there may be high levels of social cohesion within identity groups, but intergroup cohesion is non-existent.

seemingly intractable conflict (Bar-Tal, 2007, 2000; Gadlin, 2013; Whigham, 2019). These are societies where identity-based divisions are so deeply entrenched that who you are determines almost every aspect of your daily life, including where you live and work, who your friends are, and even which sports teams you support. In these societies, there may be high levels of social cohesion within identity groups, but intergroup cohesion is non-existent (Guelke, 2012).

In these cases, as the examples in the next section will demonstrate, ICD can play a significant role in building bridges across the identity-based divides that shape social and political life. Oftentimes, the best hope for building these

bridges comes from deemphasizing the identity-based divisions that have shaped social life and turning focus to the superordinate goals and aspirations that can be shared across groups, for instance, collectively building a peaceful society for the next generation (Sherif, 1958; Whigham, 2019). Building social cohesion across entrenched divisions is both an enabling factor and a product of ICD—and it is also atrocity prevention in action, mitigating the risks associated with longstanding identity-based social divisions.

This section has focused broadly on how strengthening the structural factors necessary for enabling ICD are intimately entwined with mitigating the risk factors related to large-scale, identity-based violence, including mass atrocity. That is; by taking the steps necessary to engage in intercultural dialogues, societies are simultaneously building a society's resilience to the factors that place it most at risk for experiencing large-scale, identity-based violence. And so, even without calling this work "atrocity prevention," through facilitating ICD, societies are inevitably building resilience to the stressors that might otherwise result in atrocity violence. The next section will provide some concrete examples of what this looks like in practice by turning to four examples from four different regions. Collectively, these examples will illustrate four vastly different forms that ICD has taken, and how these creative and culturally sensitive approaches have each, in their own way, reduced risks for identity-based violence through the process of enabling intercultural dialogue.

IV. Examples: Preventing Large-Scale, Identity-Based Violence through Intercultural Dialogue

ICD can take a vast array of forms. For it to succeed, it must be responsive to the specific cultural and contextual factors at play in any given society. But it also presents a grand opportunity for government and civil society to think creatively about addressing the identity-based issues that their society is facing. This section will provide four diverse examples of ICD, each from a different region: an initiative to amplify and preserve the voices and cultures of Indigenous Peoples in Cambodia; a creative, culinary effort to integrate forcibly displaced Venezuelans in Colombia; a cross-societal approach to preventing electoral violence in Kenya; and a cross-cultural program that brings together young people from societies in conflict in Italy.

Example: Cambodia

Indigenous communities around the world face some of the highest levels of risk for atrocity violence (“Minority Rights Group,” n.d.). Much of this risk is related to the legacies of violence they have long been experiencing since the beginning of the colonial period, including the dispossession of land and resources and discriminatory policies and attitudes. Roughly two-thirds of the world’s Indigenous population lives in Asia (“Indigenous Peoples,” 2020). In Asia and globally, Indigenous people face a number of hardships, including “eviction from ancestral lands they have inhabited for generations, as well as restricted access to education, health care and housing” (“Indigenous peoples rights are human rights.,” n.d.). Additionally, “Indigenous people are more likely to live in extreme poverty and suffer higher rates of landlessness, malnutrition and internal displacement than other groups” (“Indigenous peoples rights are human rights.,” n.d.).



© Bophana Audiovisual Resource Center - Ratanakiri province- Cambodia: Indigenous youth, trained by the Bophana Center, film a scene within their community.

In the Mekong region of Southeast Asia, the [Bophana Audiovisual Resource Center \(BARC\)](#) in Phnom Penh, Cambodia, developed two programs to amplify and preserve the voices of young Indigenous people and their communities.



© Bophana Audiovisual Resource Center - Ratanakiri province- Cambodia: An Indigenous woman filmmaker, trained by the Bophana Center, captures a rice ceremony in her community.

The first of these projects, Amplifying Voices of Indigenous Women and Discriminated Groups², included 12 Indigenous Cambodian women from rural areas of Cambodia (Bophana Audiovisual Resource Center, n.d.). Through the two-year-long fellowship, these young people were trained in all aspects of documentary film making, including directing, camera work, sound, and video editing. They were then tasked to produce short documentary films of the experiences of their

Indigenous communities living along the Mekong River. In addition to telling the story of Indigenous communities, they were also asked to make the films in their Indigenous languages, which they then transcribed and translated into both Khmer and English. According to BARC's Executive Director Chea Sopheap, this was the first time that some of these languages had ever been written down and translated, much less preserved on film (Sopheap, 2022). As a way of disseminating the stories of these Indigenous communities, the resulting documentaries were screened to the public and to government officials at national and international film festivals. A second project, Building Capacity for Indigenous Youth and Establishing Indigenous Audiovisual Archives through Wiki Tools in Cambodia³, trained 30 Indigenous youth to use the tools of documentary film making and Wiki-tools to document and preserve at-risk Indigenous languages, creating an accessible online archive for the public.



© Bophana Audiovisual Resource Center - Ratanakiri Province- Cambodia: Indigenous youth filmmakers, trained by the Bophana Center, document a woman harvesting rice.

² The project involved the following ethnic groups and languages:

Khmer - Khmer language
Jarai - Jarai language
Kreng - Kreng language
Tampuon - Tampuon language
Punong - Punong language
Kui - Khmer language

³ The project involved the following ethnic groups and languages:

Brao - Brao language
Kavet - Kavet language
Kreng - Kreng language
Tampuon - Tampuon language
Jarai - Jarai language
Lon - Lon and Kreng
Punong - Punong language
Kachak - Kachak language

According to the UNESCO Framework, a key supporting domain for promoting ICD is the promotion of specific Skills and Values:

Certain values and skills are seen to underpin effective intercultural dialogue. Collectively, these are commonly referred to as intercultural competencies—the attitudes, behaviors and values needed to flourish in diverse environments and effectively and reflexively change one's viewpoints towards others (UNESCO, IEP, 2020, p.23).

Developing such skills and values takes effort and requires that individuals be exposed to the perspectives and worldviews of communities that are different than their own. The arts are a particularly vital tool in opening these doors for exposing people to different cultures, practices, and ideas, paving the way to new paths forward in the future. These projects represent fascinating examples of using ICD to do just that. By providing Indigenous people with the tools and space to share the stories of their communities—who are often not heard enough—with a broader public, they are helping to strengthen this key enabling factor for ICD. Additionally, the simple act of documenting the stories and languages of the Indigenous cultures of Southeast Asia in itself contributes to preventing their disappearance.

This example from Cambodia demonstrates several ways in which risk for identity-based violence can be mitigated through ICD. First, the project provides Indigenous youth with tools and a forum to speak for themselves to a broader, non-Indigenous public, thus opening democratic space through promoting their freedom of expression. It also foregrounds the experiences and needs of Indigenous communities, allowing Indigenous youth to highlight both the beauty of their cultures, but also the horizontal inequalities they have experienced and that need to be addressed. By providing a platform that amplifies the voices of Indigenous communities of Cambodia, this project humanizes a group that may otherwise exist outside of the realm of social concern for many non-Indigenous Cambodians. Through seeing their stories, they are then asked to consider their own responsibilities as individuals and as citizens to respond to the risks that Indigenous communities face.



© Bophana Audiovisual Resource Center - Kampong Thom Province- Cambodia: A Mobile Cinema screening in an Indigenous community, organized by the Bophana Center in collaboration with Indigenous youth filmmakers trained by the Center.

Example: Colombia

Since 2013, nearly 8 million Venezuelans have left their home country, with nearly three million currently living in the neighbouring country of Colombia (UNHCR, 2023). Despite commendable efforts by the Colombian government, from emergency humanitarian response to long-term integration, to regularise their status by providing them with the right to work and access to healthcare and other services, refugees and migrants still face a number of challenges (I-GMAP and AIPG, 2024).

In this situation, many Colombian- and Venezuelan-led civil society organizations are stepping up to provide humanitarian assistance to displaced Venezuelans and to build social cohesion among Venezuelans and the Colombian communities. One such organization is [Fundación Entre Dos Tierras](#), or Between Two Worlds Foundation, which works primarily in Bucaramanga, a regional capital not far from the Venezuelan border. In addition to providing food to Venezuelan migrants and refugees, Fundación Entre Dos Tierras has also found creative ways of using food as a premise of ICD. Venezuelan migrant and chef Alba Cecilia Pereira and her colleagues have drawn on a shared aspect of Venezuelan and Colombian culinary culture as a premise for bringing together Colombians and Venezuelan migrants to build community ties. A culinary staple in both Venezuela and Colombia is the *arepa*, a cornmeal flatbread that can be stuffed with other food and eaten like a sandwich or served alongside another dish as a bread. Though both cultures eat arepas, the methods for preparing and serving them differ. One way that Fundación Entre Dos Tierras helps to integrate displaced Venezuelans with Colombians in Bucaramanga is to hold events in which local Venezuelans and Colombians teach each other their own methods of preparing and serving arepas. They cook them together, then prepare large spreads to help feed the local community. Such efforts at once highlight commonalities among two different cultures while simultaneously celebrating and honouring the diversity of the community and providing space for those communities to interact. Pereira says, “This is a shared culture, a richness that unites the two nations” (“A donde vaya un venezolano siempre llevará la arepa” - Migravenezuela,” 2020). Programs like this from Fundación Entre Dos Tierras illustrate that intercultural dialogue (ICD) is not limited to verbal exchanges; it can take many forms.

Forcibly displaced communities often face risks for identity-based violence as they transit from their home countries to receiving countries (I-GMAP and AIPG, 2024). In this light, ICD has an especially essential role to play, as it is one of the clearest tools available to connect host communities and displaced communities, building bridges rather than walls. ICD like this example from Fundación Dos Tierras constructs a new vision for what the community is by highlighting the ways that displaced groups contribute to the community, rather than detract from it.

Example: Italy

Monte Sole sits in the mountains just outside of Bologna, Italy. In 1945, as Nazi troops were pulling out of Italian territory, they stopped in Monte Sole. Seven hundred seventy civilians were murdered, most of them women and children, in what was the largest attack on a civilian population on the western front during the Second World War. Today, Monte Sole hosts the [Scuola di Pace Monte Sole](#) (the Monte Sole Peace School), an organization that directs a number of programs that use ICD as a means for peacebuilding and conflict prevention.

One of the flagship programs of the Scuola di Pace is called [Peace in Four Voices](#). It is an initiative that brings together groups of young people from four different identity groups: two that used to be in conflict, but are now at peace, and two that are currently in states of conflict and division. Given the Scuola di Pace's location and history, the first two groups are typically young people from Italy and Germany. The members of the second two groups change. Past editions of the program have included young ethnic Serbs and Albanians from Kosovo* (UNSC Res 1244), for instance, or young Jewish Israelis and Palestinians. The young people spend a week or more on the beautiful grounds of Monte Sole, living, working, and eating together. They engage in peacebuilding work and ICD, all motivated by a central goal of learning from each other. Importantly, for the young people coming from societies that are currently facing high levels of conflict and division, it is particularly useful to remove them from the home context and bring them to this new site that does not have the same personal connections they might have at home. Still, when the young people tour the ruins from the WWII-era crimes of Monte Sole, the participants are able to make active connections with their own experiences.



© Fondazione Scuola di Pace di Monte Sole - "Stay in contact"

The Peace in Four Voices program is an example of ICD that deals directly with many of the social risk factors related to atrocities and identity-based violence. Through establishing an environment based on mutual respect and empathy, it opens doors for breaking down the divides that have prevented ICD in the past. And by introducing participants to others from totally different societal contexts, it pushes them outside of the “boxes” that may normally define their lives, offering the opportunity to empower each other and build international networks of solidarity that help cultivate critical thinking, hope, and new insights to counter violent discourses.



© Fondazione Scuola di Pace di Monte Sole - "Naming the human"

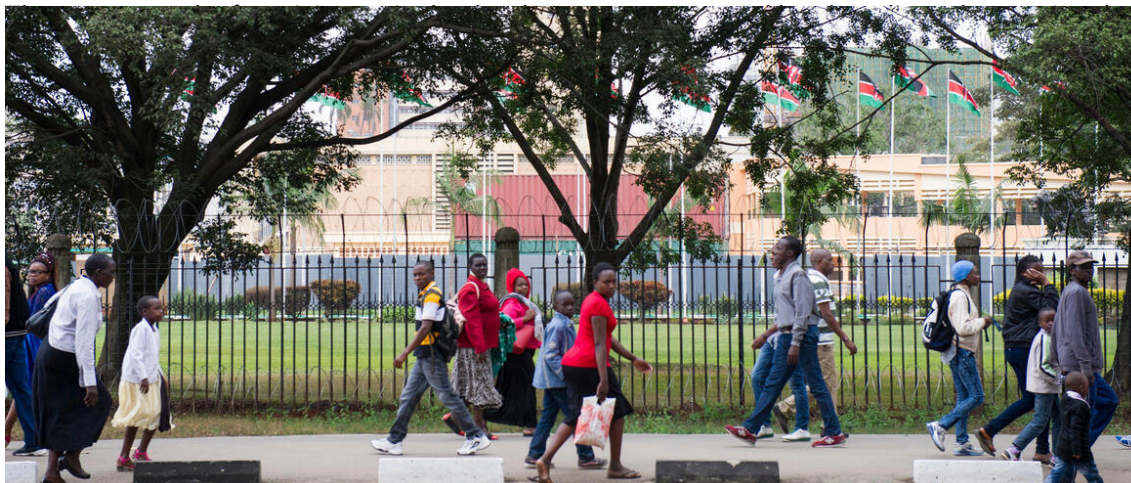
Example: Kenya

Following a disputed election in 2007, Kenya descended into post-election violence. As with many contested elections in sub-Saharan Africa, these divisions—driven in part by structural factors such as discrimination, poverty, and disenfranchisement—fell along ethnic lines. In the wake of this violence, Kenya established several processes to prevent its recurrence. Among them was the [National Cohesion and Integration Commission](#) (NCIC), a government agency created by the 2008 National Cohesion and Integration Act, tasked with addressing and reducing inter-ethnic conflict by preventing discrimination based on race or ethnicity, promoting social cohesion among diverse communities, and enforcing legal provisions under the Act. Another major reform was the adoption of the 2010 Constitution of Kenya, which introduced significant changes to enhance democracy, devolve power to county governments, and strengthen checks and balances within the state. The new Constitution aimed to address longstanding issues such as ethnic divisions, land disputes, and electoral reforms, laying the groundwork for a more inclusive and accountable governance system. Beyond addressing the root causes of the violence, Kenya also engaged in a multi-stakeholder effort to develop a preventive mechanism: Uwiano.

Uwiano, a Swahili word that connotes “cohesion”, was established as a mechanism for preventing electoral violence in the wake of the 2007–2008 crisis. Developed through a participatory and inclusive process, it brought together international, national, and local actors—including the government, NGOs, and private sector entities—while remaining sensitive to the country’s ethnic and religious diversity. The initiative was supported by several United Nations

agencies, national institutions such as the newly formed NCIC, and over 500 civil society and non-governmental organizations represented by PeaceNet.

While Uwiano serves as a nationwide platform accessible to all identity groups in Kenya, its creation is particularly noteworthy as the outcome of an ICD process. It exemplifies how a multi-stakeholder dialogue—bringing together local, national, and global actors—can yield solutions to identity-based conflicts. The result of this dialogue process was the establishment of an early warning system to identify areas at risk of post-election violence and respond proactively before violence could erupt or escalate (“Profiles in Prevention: Alice Nderitu,” n.d.).



©UN Photo/Rick Bajornas, Nairobi, Kenya*

in ensuring that Kenyans across the country knew about the resource. When any person had information about the potential outbreak of violence, heard hate speech, or identified speech or action that could incite violence, they were able to call, email, or send an SMS message alerting the platform of the event. Uwiano team members would then work to verify the claim through an authentication process by calling local authenticators where the claim originated. These authenticators included police officers, young people trained as cohesion monitors, and community leaders, including chiefs, elders, youth and women leaders. When the claim was verified, local authorities or institutions would be sent to address the incident before it could escalate.

Although the Uwiano Platform for Peace is not itself an instance of ICD, its establishment and operational modalities involve ICD approaches that brought together local communities, government actors, NGOs, and international organizations working together to confront the latent risks for identity violence in Kenya. It is therefore an example of the concrete results that can emerge through ICD. As a result, and in addition to other key measures and reforms, the Uwiano Platform for Peace that was developed through this dialogue process, contributed to lower levels of recorded violence in the aftermath of both the 2010 national referendum election and the 2013 general elections that followed (Kiriti, 2018). Consequently, the platform has been expanded to become a tool for conflict prevention more broadly. It is a prime example of ICD's potential in both the downstream and upstream forms of atrocity prevention. By engaging with and learning from past instances of violence, the Uwiano Platform for Peace together with the National Cohesion and Integration Commission can lead the way in preventing new instances of violence in the future.

V. Conclusion

Preventing large-scale, identity-based violent conflict, including mass atrocities, is no simple task and requires an in-depth contextual analysis and culturally sensitive approach. But the tools in the prevention toolbox are much more plentiful than many tend to recognize. One need not wait until the outbreak of genocide, crimes against humanity, or war crimes to act. The most effective prevention comes before violence escalates to such horrific levels, and it involves finding ways for societies to manage conflicts and differences without resorting to violence. In an age when violent conflict is often rooted in divisions based on identity in various forms, intercultural dialogue has a specifically powerful role to play in the work of prevention, as it is centered on the very premise of bringing together groups of people with different cultures, perspectives, and identities to determine collectively and collaboratively how to move forward peacefully.

This brief demonstrates the key role that ICD can play in preventing atrocities and other forms of large-scale, identity-based violent conflict, particularly in the upstream and downstream phases of such conflict. It focuses on how ICD can provide avenues for addressing conflict within a society through non-violent means. It illustrates how, by focusing on building societies that are more invested in bringing groups of people together in dialogue with others, the risk factors that are statistically most highly correlated with the probability of atrocity violence begin to diminish. By strengthening the structural factors that enable ICD—stability and non-violence; governance and citizenship; freedom of expression; horizontal equality; and social cohesion—we are simultaneously increasing the resilience of our societies to identity-based violent conflict.

Finally, the four examples explored in this brief from Cambodia, Colombia, Italy, and Kenya show the diversity of forms that ICD can take. They are clear examples of how ICD can be a practice, and a process applied and adapted to every cultural context, no matter the geographic region or the country's specific relationship to identity-based conflict in the past and present. Additionally, it is a practice that can be used effectively both by governmental actors and civil society organizations at the local, national, regional, and international levels—and one that can be even stronger when it incorporates both governments and non-governmental actors working together. In an era where atrocity violence is on the rise, we have a collective responsibility to think broadly and creatively about how to prevent this escalation. When so much violent conflict today is based on identity, Intercultural Dialogue—the practice of bringing together people from different identity groups to resolve differences through discourse and a culturally sensitive approach rather than violence—should be a practice that we utilise much more frequently, and at all stages of the conflict cycle.

VI. Implications

Acknowledge Power and Privilege Dynamics in ICD – For ICD to be successful, it is essential to conduct a candid assessment of power dynamics and privileges linked to various identity groups. Recognizing how factors such as race, ethnicity, religion, and class shape social hierarchies allows participants to engage more thoughtfully, with a deeper understanding of their positionality and the structural inequalities affecting dialogue.

Acknowledging power dynamics can be achieved through dialogue circles where participants are given equal speaking opportunities, or by using tools like anonymous surveys, positionality statements, role-playing, or power mapping. Structured facilitation that actively encourages participation from underrepresented groups can further foster participatory and equal engagement, promote respect, and ensure meaningful dialogue.

Guarantee Physical Safety and Basic Rights for ICD Participants – Ensuring that all ICD participants feel safe and free from threats to their safety and livelihoods is vital. Safeguarding basic rights, particularly the right to physical integrity, creates an environment conducive to open and honest dialogue, where individuals can engage without fear.

This can be achieved through clearly communicating the rights and protections afforded to all participants or establishing a code of conduct or safe space agreement that emphasizes a commitment to a secure and respectful environment. In certain contexts, trauma-informed facilitation, where facilitators are trained to recognize signs of trauma and establish confidentiality protocols, can help participants feel emotionally safe.

Provide Guidance and Training for Dialogue Facilitators – Effective intercultural dialogue requires facilitators trained in intercultural communication, conflict resolution, and trauma-informed practices to navigate complex dynamics and foster inclusive participation.

Facilitators should reflect the diversity of the groups involved, demonstrate cultural competence, and use co-facilitation models to promote balance and trust. Training programs should include managing power imbalances, creating safe spaces, and addressing sensitive topics constructively, with ongoing mentorship and peer learning opportunities.

Promote State-Society Engagement – ICD can be a powerful platform to enhance trust between citizens and the government, strengthening governmental legitimacy. Fostering collaboration between state entities and civil society, while acknowledging their respective strengths, is crucial for the sustainability of ICD efforts. Encouraging participation from all social groups, especially marginalized communities, helps create non-violent avenues for conflict resolution.

In Kenya, the Uwiano Platform was created through a dialogue involving civil society, national institutions, and the UN while the alert authentication engages diverse actors, including police officers, community leaders, and youth leaders. By promoting citizen and civil society

involvement in atrocity prevention processes, such initiatives help build trust and foster a sense of belonging in governance.

Support Grassroots ICD Initiatives – Empowering grassroots ICD initiatives offer local spaces for dialogue, fostering trust, addressing grievances, and promoting empathy. These efforts significantly reduce the likelihood of localised identity-based conflicts escalating into larger-scale violence. Leveraging local traditions and knowledge in conflict resolution helps integrate culturally relevant practices, enhancing the effectiveness of dialogue and fostering deeper community connections.

In Colombia, Fundación Entre Dos Tierras draws on shared Venezuelan and Colombian culinary traditions to bring together communities, celebrating diversity while highlighting commonalities. Such grassroots efforts create opportunities for different groups to interact, fostering unity and mutual respect.

Ensure Equal Status and Horizontal Equality in ICD Spaces – To improve the effectiveness of ICD, it is essential to ensure that all participants, regardless of identity, hold equal status. Actively addressing horizontal inequalities in resources, rights, and opportunities within ICD spaces fosters meaningful dialogue and minimizes identity-based tensions.

In Cambodia, the Bophana Audiovisual Resource Centre supports Indigenous youth in highlighting both the beauty of their cultures and the horizontal inequalities they face. By providing a platform for Indigenous voices, the project humanizes marginalised communities and encourages non-Indigenous Cambodians to reflect on their responsibilities toward addressing these inequalities.

Use ICD to Foster Shared Goals and Unifying Narratives – Focusing ICD efforts on identifying shared goals and common identities that transcend traditional divisions is crucial for fostering unity. Emphasizing collective aspirations, such as peace and stability, can help dismantle entrenched hostilities and promote cohesion among diverse groups.

In Italy, the Monte Sole School for Peace project aimed to foster unity by bringing together groups of young people from different conflict environments, creating connections that previously did not exist. These new relationships help to dismantle identity-based divisions and allow young people to see beyond their own experiences in a way that can unite people across differences.

Leverage Creative ICD Practices – Expanding ICD beyond formal discussions to include creative practices such as art, music, sports, theater, and culinary events can facilitate connections where dialogue might be challenging. Creative experiences help break down barriers and build trust across cultural divides, while also making dialogue more engaging and relatable. This can be achieved through activities like hosting art exhibitions, cultural festivals, or community sports events that encourage collaboration among diverse groups.

In Cambodia, the Bophana Audiovisual Resource Centre equips Indigenous women and youth with training, creative tools, and a platform to share their culture and experiences as Indigenous communities living along the Mekong River. This initiative allows them to express their heritage and challenges to a broader audience, raising awareness and fostering greater understanding of their way of life.

Utilise Non-Politically Charged and Neutral Spaces for ICD – In high-tension situations, conducting ICD in neutral, non-politically charged environments can mitigate hostility. Relocating discussions to spaces free from local political tensions, or involving participants from different backgrounds, introduces fresh perspectives and enriches dialogue. ICD initiatives can take place in public spaces, community centers, or parks, and incorporate cultural ambassadors or representatives from unrelated groups to offer new viewpoints.

In Italy, the Monte Sole School for Peace's Peace in Four Voices program brings together youth from different identity groups in a neutral location, free from personal connections, to facilitate more open dialogue. This creates opportunities for mutual empowerment and the building of international solidarity networks, fostering critical thinking, hope, and fresh perspectives.

Integrate ICD into Early Warning Systems and Conflict Resolution Mechanisms – Embedding ICD practices into early warning systems allows for proactive identification and resolution of identity-based tensions before they escalate. Establishing non-violent, participatory conflict resolution models through ICD can help manage disagreements across societal sectors, reducing the risk of violence.

In Kenya, the Uwiano Platform for Peace is an early warning network that trains individuals to identify and address potential conflicts before they escalate. It engages a diverse group of alert authenticators, including police officers, youth trained as cohesion monitors, and community leaders such as chiefs, elders, and women leaders, to proactively and collectively prevent violence.

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INTERCULTURAL DIALOGUE FOR
CONFLICT TRANSFORMATION BRIEFS SERIES

Identity often lies at the heart of violent conflict and mass atrocities. Recognising this reality, UNESCO's *Dialogue for Prevention* brief, developed with the Auschwitz Institute for the Prevention of Genocide and Mass Atrocities, explores the significance of intercultural dialogue—an approach championed by UNESCO—as a practical and adaptable tool to proactively mitigate risks known to be associated to atrocity violence. This publication demonstrates dialogue's unique capacity to bridge identity-based divides by fostering mutual understanding, tolerance and perspective-taking among diverse groups. By examining insightful good practices from Cambodia, Colombia, Italy, and Kenya, this brief equips policymakers, practitioners, and civil society with targeted, culturally responsive methods to identify early warning signs, disrupt harmful dynamics, and build resilient communities capable of preventing mass atrocities.

