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GUEST EDITORIAL:
Informing Pakistan's Negotiations Through the Psychology of Peacebuilding

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ABSTRACT
The Government of Pakistan has played a constructive role in seeking to resolve the current conflict between Iran and the United States. Here, we describe the role of geopsychiatry in promoting research on peacebuilding to address the causes of violent conflicts as a form of primary prevention in mental health. We discuss an evidence-based framework from the Irish Peace Process led by psychiatrist-negotiators that could inform ongoing interventions for Pakistan's negotiators. These interventions include leveraging the psychology of *the mutually hurting stalemate, constructing superordinate identities*, *building a frame for negotiations,* and using *psychodynamic principles of communication*. Numerous obstacles to peace remain, but Pakistan's negotiators can adopt these evidence-bases strategies and inspire hope for resolving other global conflicts.

KEY WORDS: : Armed conflicts and warfare; Conflict resolution; Negotiating; Negotiations; Iran;

As psychiatrists committed to conflict resolution, we welcome Pakistan's peacebuilding initiatives in West Asia. Since the American and Israeli militaries bombed Iran beginning on 28 February 2026, Iran has retaliated against Israel and Gulf Arab states.[1] On 24 March 2026, Pakistani, Turkish, and Egyptian diplomats persuaded American officials to postpone strikes on Iranian civilian infrastructure,

and by 26 March 2026, Pakistan's Foreign Ministry acknowledged mediating indirect talks between American and Iranian officials.[1] Pakistan hosted direct talks between American and Iranian officials on 11 April 2026 in Islamabad – a historic achievement marking the highest level of diplomatic engagement among the adversaries since 1979 – and Egyptian, Pakistani, Saudi, and Turkish diplomats continue to issue calls for peace.[2]

Psychiatrists working in the academic discipline of geopsychiatry have conducted research in peacebuilding to address the causes of violent conflicts as a form of primary prevention in mental health.[3] Sustained geopolitical tensions generate uncertainty, anticipatory anxiety, and vicarious traumas through the news media, migration experiences, and sociopolitical narratives.[3] Conflict-related conditions are linked to greater anxiety, depressive disorders, substance use, and stress-related morbidity that psychiatrists treat in clinical settings.[4] From a geopsychiatric perspective, integrating psychological considerations into diplomatic processes may help to shift the emphasis from reactive intervention to preventive care, thereby reducing the long-term psychosocial burdens associated with violent conflict. A peace-oriented regional framework not only mitigates the risks of introducing new large-scale traumas, but also addresses the cumulative psychological strains that can erode community resilience and precipitate overt psychiatric illnesses.

Since the 1970s, psychiatrists have examined the psychological factors that affect official Track I and unofficial Track II diplomacy to assist policymakers.[5] A recent systematic review of studies on the Irish Peace Process that was led by psychiatrist-negotiators has identified four essential domains underpinning successful negotiations.[5] Table 1 presents these domains, psychological mechanisms, and corresponding diplomatic interventions.[5]

Table 1: Psychological Domains Underpinning Successful Negotiations in Violent Conflicts

Domain with Psychological Mechanism	**Diplomatic Interventions in an Armed Conflict**
Social Conditions Fostering Peace (*the mutually hurting stalemate*)	• Explicit recognition that neither side can defeat the other
Political Incentives (*constructing superordinate identities*)	• External political encouragement and mediation
The Structure of Negotiations (*building the frame*)	• Meeting regularly, not ad hoc or only at one party's request • Using open-ended questions to discover solutions

	• Organizing parallel tracks among fewer participants for creative problem solving
The Communication Process in Negotiations (*essentials of psychodynamic therapy*)	• Allowing all participants to speak freely • Showing respect for each other • Naming and working through negative emotions • Anticipating and interpreting resistance to peace

By 11 March 2026, the Strait of Hormuz emerged as a principal flashpoint, with American and Iranian officials realizing that neither side could defeat the other through violence.[1] This event marks what the negotiations expert I. William Zartman has termed the *mutually hurting stalemate*; in his words, "the parties find themselves locked in a conflict from which they cannot escalate to victory and this deadlock is painful to both of them (although not necessarily in equal degrees or for the same reasons), [and] they seek a way out."[6] Astutely recognizing that both parties may be seeking a way out, Chinese and Pakistani negotiators urged the American and Iranian militaries to grant safe passage for maritime traffic on 1 April 2026.[1]

Furthermore, the parties in a conflict may promote antagonistic, mutually-exclusive large group identities, which have been defined as "the subjective experience of thousands or millions of people who are linked by a persistent sense of sameness," with this link emerging from shared demographic traits such as religion, nationality, or ethnicity.[7] Instead, mediators aim to construct two types of identities during negotiations.[5] In the first type, mediators examine ways that parties in a conflict can peacefully co-exist without antagonism accompanying their large-group identities. In the second type, mediators promote a superordinate, small-group identity among select participants in negotiations who demonstrate a commitment to resolving the conflict. Collaborations among diplomats can offer a public example of cooperation that their populations can model. Indeed, by emphasizing regional "peace, stability and shared prosperity"[2], Pakistani diplomats have already begun to constructively recategorize mutually-exclusive, antagonistic social identities among Americans and Iranians to build *a superordinate, inclusive, large-group identity* that encompasses all sides and de-escalates hostilities.

Moving forward, Pakistani negotiators can deploy evidence-based strategies from the psychology of small group negotiations.[4] Conflicting parties may refuse to meet or adopt positions that maximize their interests to the detriment of the other.[5] Currently, American and Iranian positions diverge over six key issues: a ceasefire in Lebanon, control over the Strait of Hormuz, Iran's nuclear program, Iran's sanctions relief, war reparations for Iran, and security guarantees and non-aggression agreements for both parties.[8] Rather than let any single party dictate the circumstances of meetings to achieve predefined outcomes for contentious issues, negotiators have drawn on *the psychotherapeutic*

concept of the frame to: (1) publicize the expectation of regular meetings to generate positive political pressure from the international community, (2) use open-ended questions to jointly discover solutions rather than debate a single party's demands, and (3) add meetings with fewer people who commit to breaking impasses[5], which Pakistani negotiators can adopt. Diplomats also tend to reiterate their government's positions and leave meetings when demands are not met, but effective intermediaries have used *psychodynamic principles of communication* to: (1) allow participants to speak freely while maintaining respect for each other, (2) express intense emotions of fear, anger, and hatred to develop understanding for each other's perspectives, and (3) overcome barriers in implementing peace initiatives through demonstrable actions,[5] which Pakistani negotiators may find useful.

We end with a wish for Pakistan's negotiators to write about their experiences in resolving the current conflict. Analysing lessons from the negotiations process is one way to grow scholarship on the psychology of peacebuilding.[5] For instance, comparing their experiences with those from negotiators during the Irish Peace Process is one way to formulate hypotheses that connect psychological mechanisms to diplomatic interventions that can be tested and confirmed through other case studies. Pakistan is rapidly becoming a centre of excellence in geopsychiatry as senior psychiatrists examine the mental health impacts of climate change, natural disasters, and displacement from violent conflicts.[9] Pakistani psychiatrists from governmental and non-governmental organizations have hosted seminars to train health professionals worldwide about ways to provide services and advocacy to vulnerable populations.[10] Peacebuilding is another area where Pakistani researchers can take a lead.

We are aware of numerous obstacles to these negotiations. Nonetheless, the world is eager for Pakistan's negotiators to succeed. They may yet offer hope in resolving other global conflicts.

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