

Volume 5, Number 1

Contents

Page 1 Introduction

Reviewed articles

- Page 3 Psychosocial interventions for children in war-affected areas: the state of the art
Brechtje Kalksma-Van Lith
- Page 18 Appraisal of psychosocial interventions in Liberia
Jeannette Lekskes, Susan van Hooren and Jos de Beus
- Page 27 Planning needs and services after collective trauma: should we look for the symptoms of PTSD?
Carmelo Vázquez and Pau Pérez-Sales
- Page 41 Participatory tools for evaluating psychosocial work with children in areas of armed conflict: a pilot in eastern Sri Lanka
Jason Hart, Ananda Galappatti, Jo Boyden and Miranda Armstrong

Field report

- Page 61 Improving the quality of psychosocial support for children and adolescents in the Darfur refugee camps
Micha de Winter
- Page 67 Book review
- Page 69 Summaries in Arabic, French, Sinhalese, Spanish & Tamil

Introduction

The design of psychosocial interventions can be based on diverging views of the needs of people affected by armed conflict. To bring this down to its most basic components, some psychosocial interventions are based on the assumption that armed conflicts result in traumatization of individuals and thus cause an epidemic of a psychiatric disorder called post traumatic stress disorder (PTSD). The need for an intervention in a conflict area can be demonstrated by an epidemiological study; this produces an estimate of the number of people suffering from PTSD in a particular conflict area. According to this approach the individuals suffering from this disorder can be helped by offering them curative interventions, for example, by providing trauma counselling. A successful intervention would therefore result in a decrease in the number of people suffering from psychiatric symptoms related to trauma.

Another type of psychosocial intervention, known as community-based intervention, is based on the assumption that armed conflict damages community structures and mechanisms that are vital for psychosocial wellbeing and the healthy development of individuals and families. Interventions of this sort are therefore aimed at restoring these structures and mechanisms. In psychosocial projects that focus on children as their main target group, the community-based approach is also often described as the developmental approach.

In this issue of *Intervention*, several articles discuss the comparative effectiveness of these two approaches. *Brechtje Kalksma-Van Lith* focuses on interventions aimed at children. She concludes that, from the current base of evidence, it cannot be proven that one type

of intervention is generally more successful than the other. Curative programmes can help only a small number of children; thus, in catastrophic situations where thousands of children are affected, their usefulness is very limited. Although the success of developmental programmes appears even more difficult to demonstrate scientifically than the effects of curative programmes, developmental programmes are now widely regarded as the most appropriate generic approach to psychosocial intervention with war-affected children.

In the article by *Leskes, Van Hooren & De Beus*, two interventions for Liberian women, one curative (trauma counselling) and the other more community-based, are compared. The results of this comparison are not unambiguous; both approaches in some way are effective.

Curative approaches are often justified by epidemiological studies measuring the prevalence of PTSD among people affected by armed conflict. The article by *Vázquez & Perez* discusses the methodological problems

of such studies. For example, slightly changing the criteria for PTSD can make an enormous difference in the amount of traumatization that is found.

Community-based interventions obviously can be evaluated best by, or in close cooperation with, community members. *Hart, Galappatti, Boyden & Armstrong* describe one example of such an evaluation in a project designed for children in east Sri Lanka, and discuss the challenges they encountered.

Evaluating psychosocial interventions must begin with a clear description of the content of the intervention. *Micha de Winter* writes on psychosocial support for children and adolescents in the Darfur refugee camps. In these overcrowded camps, curative interventions could not ever be more than just a drop in the ocean. The author describes how the quality of the intervention was improved by involving enthusiastic members of the community.

Guus van der Veer