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### Introduction

Designing psychosocial projects in areas of armed conflict is a complicated matter. Some projects are designed with the best intentions, but often seem to do more harm than good. This is because these projects make people dependent on outsiders, and destroy or interfere with traditional coping mechanisms of communities for dealing with misfortune. There is a clear and present risk that projects in conflict areas unwittingly reinforce the disintegration of the community and the disempowerment of individuals caused by war and organized violence.

This issue of *Intervention* opens with a contribution by *Weyermann* on just this subject. She discusses the fact that well-meant economic projects may fail to address the social and psychological processes of threat and fear, while equally well-meant psychosocial projects often do not address the material problems of the beneficiaries. In her opinion, such 'specialized' projects not only take the risk of being less effective than the more integrated ones, they may even cause

harm by reinforcing the processes of disempowerment. Therefore, she introduces a tool that helps to better understand the real extent of individual and collective disempowerment in conflict areas, and to facilitate an integrated psychosocial approach to empowerment. She illustrates the application of this tool with two examples: one is about an economic project in which the staff was made more sensitive to what was going on in the mind of the individual beneficiaries of the project, and the other of a psychosocial project in which the tool helped counsellors to take the material needs of their clients more seriously.

An additional example of a program aimed at empowerment that tried to integrate psychosocial assistance with technical support, is described in an article by *Bragin, Prabhu & Czarnocha*. This article, titled 'Mathematics, psychosocial work and human rights', is also interesting because it is not about a donor initiated project in which the goal is community empowerment, but about a collaboration of technical consultants with an activist movement that arose from a particular community. Local activists of the Dalit community in Tamil Nadu, India, requested brief, targeted, external psychosocial assistance, following the tsunami of December 2004. The focus of the assistance, at the community's request, was to increase cognitive capacity among children and volunteer teachers in a community education program.

Two of the field reports in this issue also describe attempts to integrate psychosocial interventions into existing programs of a different nature. The field report by *Petra Joosse* is on the addition of a psychosocial component to a medical program. She describes a sensitization campaign in the north eastern part of the Democratic Republic of Congo

(DRC) on trauma related symptoms and ways of coping with these symptoms. The contribution by *Mikuš Kós & Zemljak* describes how psychosocial activities aimed at child mental health protection were implemented in primary schools and in primary health care settings.

In November 2006 *Intervention* published a special issue on ex-combatants. We return to this topic with three articles. *Odenwald, Hinkel & Schauer* discuss the results of an assessment of over 8000 active militia members and military staff in seven regions of Somalia on the issues of drug abuse, psychological distress and preferences for reintegration assistance in the future. *Ager, Boothby & Wessells* report on a consultation meeting of best practice in care and protection practice with children associated with fighting forces. They describe the consensus methodology that was used to identify issues where research and practice development is needed the most. One of the most frequently mentioned issues was 'documenting the comparative effectiveness of community based psychosocial and clinical interventions'. The field report by *de Gryse & Laumont* offers such a comparison between community based psychosocial and clinical interventions, but in connection with a different target group. It describes a program in the Aceh Province, a conflict area in Indonesia, after the tsunami of December 2004. The beneficiaries appreciated the community based group activities the most. As for individual psychological support, counselling proved to be an unknown approach to the majority of the population, and one that did not always meet their expectations of fast practical solutions to their problems.

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