

**EVALUATION OF PSYCHOSOCIAL PROJECTS IN
PRIMARY AND SECONDARY SCHOOLS IN
BOSNIA AND HERZEGOVINA 1992-1998**

**A report prepared for
UNICEF Bosnia and Herzegovina**

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Executive summary

Background

During the 1992-1995 war in Bosnia and Herzegovina UNICEF supported projects in primary schools in several parts of the country targeting children who had experienced traumatic events and losses during the war. The main features of this project was: 1) Education of school teachers and pedagogues-psychologists about normal reactions in children following exposure to traumatic events and losses; 2) Training in simple methods (mainly based on expressive techniques) to stimulate communication in the classrooms about war experiences; 3) Training of specialized personnel in specific individual and/or group intervention techniques for the most affected children; 4) Methods for work with parents; and 5) Methods for help to the helpers themselves. The project was implemented by local school authorities in collaboration with local Universities or resource persons and with support from international resource persons and institutions. Based on UNICEF policy decisions to focus on pre- and primary school age children during the war, the projects were implemented in primary schools (plus some kindergartens). Post-war the project was expanded to new geographic locations, and in light of an increased attention from UNICEF towards the situation of adolescents, the project was also expanded to include secondary schools.

External UNICEF evaluation study

An external UNICEF evaluation study was carried out in 1998 to review psychosocial projects in Bosnia-Herzegovina, Croatia, and Federal Republic of Yugoslavia (Richardson, 1998). One of the findings of this report was that although the initial objectives of most of the projects were to help children themselves, the most tangible benefits were those to teachers and psychologists themselves, who reported they had received important information about behavioral changes in their students at an important time. The report suggested that among the thousands who received training, only a small minority had applied what they had learned in the classrooms in a consistent basis. Among the recommendations in this report was the need to assess how well the teachers had applied what they learned in their various training sessions, and to learn more about how the project had impacted students who had participated in it.

About the study

In order to learn more about the actual impact of the project on the school professional personnel, a retrospective, questionnaire based survey was planned and carried in schools where teaching professionals had been through training programmed supported by UNICEF and others in various parts of the country. The study not only addressed how the school personnel perceived the impact of the project activities on themselves and their activities with the children, but also addressed current problems and priorities for the future. The study was carried out by the authors of this report, in collaboration with the Universities of Sarajevo and Banja Luka and with support from UNICEF. Data were collected from 118 teachers, pedagogues-psychologists and headmasters in several locations in the Federation of Bosnia and Herzegovina and in Republika Srpska.

Results

Participants reported the school psychosocial project had offered them much and valuable knowledge and skills. They reported that the training seminars had been efficient in increasing their knowledge about the psychological effects of war on children, and the seminars had helped them not only understand the children, but also their own reactions to traumatic events and losses. Data suggests, however, that there is a need to improve the professional supervision services for those participating in such projects.

About 90% reported they had utilized the skills they received from the project in their daily work with children, parents and/or teachers. About a third of all participants in the study had carried out a lot of activities, both within the regular curriculum as well as specific support activities for children individually or in groups outside the classroom.

Participants in the study reported that they in general had positive experiences with psychological survey studies carried out among school children to document the impact of war. These surveys had been useful to extend the knowledge of the school personnel about the influence of war on children, and most children had readily accepted to fill in the questionnaires while parents were less ready to accept the surveys. Results from such surveys are useful advocacy tools both at community, national and international level. However, due to the complex technical as well as ethical issues related to carrying out such surveys there is a need for well-developed strategies and appropriate professional resources before they are carried out.

The war finished in 1995, but the effects of war were still visible in the children four years after the war ended. The study reveals a strong need for, and wish for, continued efforts to assist the children affected by war. Services in the schools should be complemented with the development of better child mental health services for children displaying significant psychological problems.

Psycho pedagogues and other school personnel involved in the work with children affected by war experienced that they received good support from the educational authorities as well as from colleagues, and it seems reasonable to suggest that UNICEF's support to the school psychosocial projects during and after the war have contributed to this positive finding.

PART 1 HISTORY AND PREVIOUS STUDIES

Introduction

During the 1992-1995 war in Bosnia and Herzegovina UNICEF supported a number of psychosocial projects for children and families affected by war. Systematic assessment studies were carried out at an early phase during the war, and these studies documented a very high level of exposure to traumatic events and losses among children in the war-affected areas. The war was marked by indiscriminate violence against everyone, children and women included, and in many locations children survived almost four years of constant shelling and sniping activities. Many children died, and although no exact data exists covering the entire territory of Bosnia and Herzegovina it is estimated that 16,000 children were among the estimated 200,000 persons killed during the war.

Due to the high level of exposure to violence among children, parents, teachers and others working with and helping children, UNICEF paid priority from the very beginning towards supporting psychosocial services for children. The psychosocial project paid special focus to the school system, but did also support health workers and activities carried out by NGO's. Even though the war resulted in a serious breakdown in the regular institutions in many parts of Bosnia and Herzegovina, and in spite of the immense dangers faced by teachers and children in the active war-zones, schools continued to operate throughout the war. The dedication and professionalism presented by teachers and other school personnel during the war was extremely high, and with little or no resources children were invited to participate in educational activities even during the midst of the bombing.

It was evident that the personnel working in the schools were facing numerous difficulties as they carried out their duties. Not only did they have to carry out their work with little or no material or financial support, oftentimes working in improvised premises and facing great security risks in many places, they also had to provide care and support to children who oftentimes had experienced numerous traumatic events and losses and were in need of extra support. In many places teachers, pedagogues and psycho-pedagogues¹ became the main lifeline in which the children could trust and receive support in an environment marked by all the cruel aspects of war.

In this context UNICEF, together with local and international partners, established a school-based psychosocial project in Bosnia and Herzegovina. Schools were made the main focus of intervention since this was deemed the most efficient way to reach large numbers of children. During the war UNICEF focused its program activities on children of pre-school and primary school age, consequently the psychosocial project focused primarily on children in primary schools while in some places pre-school institutions were also included in the project. These pre-school services were, by European standards,

¹ A psycho-pedagogue is a teacher of pedagogy and psychology, a professional educated at the Department of Pedagogy and Psychology, University of Sarajevo, with a professional competence from the field of pedagogy and psychology. Their role in the schools is close to what is otherwise called a school psychologist. In 1989 the title was changed as the Department of Psychology started to educate psychologists rather than psycho-pedagogues.

very limited in Bosnia and Herzegovina even before the war, and during the war these services were mainly rendered in improvised playgroups in the war-zones.

The project was aimed at improving the standard of care for children through: 1) Increasing the capacities among teachers, pedagogues and psycho-pedagogues to understand the impact of war, and offer methods for work with children who had experienced traumatic events and losses during the war; 2) Strengthening the networks of service-providers (school professional personnel and local mental health workers) and local school authorities, and helping them to develop systematic approaches for support to the school children and parents; and 3) Providing support and help to the helpers themselves.

To reach these overall aims, project teams were established at the Pedagogic Institutes or similar institutions². These teams were supported by the Ministries of Education, and included local mental health professionals where possible. UNICEF offered material and financial support besides technical support through international trainers or partners. These teams organized training seminars for teachers, pedagogues and psycho-pedagogues in their respective locations, following which the trainees were expected to return to their schools to disseminate information to fellow teachers, to parents and to children. Further they were expected to implement specific activities in the classrooms as well as with groups of children or individual children in need of special care. Local project teams (constituting members from the Pedagogic Institute plus local mental health experts) would supervise and support the school professional personnel. International partners offered training and consultation. During the war UNICEF had rather independent field offices in Sarajevo, Mostar, Zenica, Tuzla and Bihac in what was to become the Federation of Bosnia and Herzegovina, and a field office in Pale, later in Banja Luka in what was to become Republika Srpska.

Due to logistic and capacity problems there would be some variation in the project approaches in different locations. In Sarajevo the project was developed and implemented by the local project team (with members from the Pedagogic Institute and University of Sarajevo), in Pale/Banja Luka the Pedagogic Institute received technical support from an expert group in Belgrade, and in Mostar (and later in Zenica) UNICEF contracted the University of London to provide full-time support to the project. Still the main feature of the project was the same in all locations, with some variations in the specific methods applied in the classrooms and in the schools.

The main goals of the training programs in the various parts were: 1) Education of school teachers and pedagogue-psychologists about normal reactions in children following exposure to traumatic events and losses; 2) Training in simple methods (mainly based on expressive techniques) to stimulate communication in the classrooms about war experiences; 3) Training of specialized personnel in individual and/or group intervention techniques for the most affected children; 4) Method for work with parents; and 5) Method for help to the helpers themselves.

² Pedagogic Institute of Sarajevo, Zenica and Tuzla. Republic Pedagogic Institute Banja Luka. Psychosocial boards/Pedagogic Institutes Mostar East and West. Ministry of Education Travnik, Gorazde and Bihac.

UNICEF does not implement projects itself, but collaborates with and supports various governmental and non-governmental institutions. The already mentioned teams at the Pedagogic Institutes implemented the school psychosocial projects, and these teams were in some cases supported by international consultants and partners, five of which deserves to be mentioned specifically: 1) Psychologist Jay Berk from USA supported the project in Tuzla in 1993-94; 2) Institute of Psychiatry University of London was contracted as implementing partner in Mostar and Zenica 1994-1996 and recruited two psychologists to work full-time (one each year) in Mostar; 3) Carmel Institute in Israel supported by the Jewish Distribution Committee/UK Jewish Aid organized and co-sponsored training seminars in Israel and in-country for project partners from all parts of Bosnia and Herzegovina (plus Croatia, Serbia, Montenegro and Macedonia) in 1993-1997. In addition they sponsored a joint meetings with colleagues from all the countries in 1995; 4) The University of Missouri Columbia together with the Coordinating Council of Humanitarian Agencies (an umbrella organization for the Islamic NGOs) supported training activities in Tuzla, Zenica, Sarajevo and Bihac plus organized summer seminars in the US in the period 1994-1997; and 5) The University of California Los Angeles Trauma Psychiatry Unit which was contracted by UNICEF to support the development of a psychosocial project in secondary schools in both entities of Bosnia and Herzegovina following the war.

Just as Bosnia and Herzegovina was divided by war, the UNICEF supported school psychosocial projects were slightly different from one location to another due to differences in available human resources, professional orientation of the partners and due to differences in needs and impact of war. Still, the main orientation of the programs were similar, just as the orientation of most school-based projects supported by other organizations were similar. UNICEF was the lead agency in this field of work in schools, and other NGOs frequently consulted with UNICEF and developed their programs according to the same principles as applied by UNICEF.

As part of the project activities, University partners and Pedagogic Institutes collected questionnaire data in several locations in Bosnia and Herzegovina during the war to assess the impact of the war on children. For obvious reasons there were numerous constraints linked to carrying out systematic studies during the chaos of war, like security and logistical constraints when collecting data (data from Sarajevo in 1993 had to be processed and analyzed in Zagreb), to ethical issues related to how to carry out such studies in a most appropriate manner. The studies supported by UNICEF were carried out either by a local University or Pedagogic Institute alone, or by a local partner in collaboration with an international partner, and in both cases with technical support from UNICEF. The studies carried out during the war were implemented in Sarajevo, Mostar and Tuzla, and were mainly aiming at establishing the prevalence of exposure to traumatic events and losses and the correlating trauma, loss and/or depressive reactions in children. Post-war the situation did improve, and the project could at this stage also include more rigorous in-built assessment and evaluation designs.

Following the conflict, Bosnia and Herzegovina became a new State. The Dayton Agreement in 1995 led to an organizational structure of one State of Bosnia and Herzegovina with two largely self-governing entities, the Federation of Bosnia and Herzegovina and the Republika Srpska. In the post-war years the process of re-integration of the political and government institutions in Bosnia and Herzegovina slowly got underway. While the Republika Srpska had one Ministry of Education, the Federation consisted of ten cantons, each with their own Ministry of Education being headed by a Federal Ministry of Education. In addition, two of the cantons remained de-facto divided for a long time and operated with parallel systems of local authorities. Only very slowly did the political processes allow for people to start returning to their homes and for the political institutions to become functional, and still today more than five years after the war ended the institutions are far from fully functional.

No need to say, the coordination and collaboration between all these partners were not always the best. In Republika Srpska the administrative system was less complicated, with a Republic Pedagogic Institute that reported directly to Ministry of Education in Republika Srpska, and which took responsibility for project activities in all parts of the entity. In the Federation UNICEF would collaborate with one Federal MoE, then the respective Cantonal MoE's, and the corresponding Pedagogic Institutes (where they existed).

From 1996 onwards UNICEF psychosocial project extended its activities to new parts of the country and also extending it's focus to include secondary schools. This was possible first of all due to the improved security situation in Bosnia and Herzegovina, as well as to the re-organization of UNICEF offices and the establishment of a separate psychosocial/child protection project team in UNICEF Bosnia and Herzegovina. During the war activities especially in Republika Srpska had at times been seriously hampered by the complex security situation with the corresponding travel restrictions imposed for UN staff. Another reason for the relatively speaking limited psychosocial activities in this part of the country during the war was linked to the relatively lesser representation in terms of UNICEF offices and personnel in this territory, resulting in the main focus being placed on various material and medical types of supplies and aid. At the same time the high intensity warfare in many parts of the country, especially in places under siege, made it very difficult or impossible to provide as comprehensive assistance as one would have wished at times in places like the so-called enclaves of Gorazde, Srebrenica and Foca, in Bihac, and in Sarajevo and Central Bosnia.

But in post-war Bosnia and Herzegovina UNICEF was able to expand the school psychosocial project, and from 1996 onwards the Republic Pedagogic Institute in Banja Luka organized training seminars for professional school personnel from all parts of Republika Srpska. At the same time UNICEF helped organize a project coordination team at Federal level in the Federation of Bosnia and Herzegovina in 1996, and this team again had each of the ten Cantons appoint project coordinators from the respective cantons. The representatives from all ten cantons met regularly at the Federal Ministry of Education in Sarajevo to discuss project plan and strategies. UNICEF's direct support towards project implementation was delivered at the level of the Cantons. Due to great

administrative and logistic constraints the project was only implemented in some of the cantons. In 1998 the Federal project team was also dissolved, due to changes within the Federal MoE. Frequent changes of people both at political and administrative levels added to the complexities. This illustrates the enormous problems one faced in the efforts to establish countrywide projects in a country shattered by war.

Besides the mentioned activities in the primary schools, UNICEF also expanded the project to secondary schools in 1996. UNICEF invited the UCLA Trauma Psychiatry Team to collaborate in this effort, and the program, titled the “UNICEF School-Based Psychosocial Program for War-Exposed Adolescents” has been implemented in 43 secondary schools throughout Bosnia & Herzegovina from 1996 until 2000. This was a three-tiered, public health-oriented model of intervention. The three tiers were planned to provide, respectively, general information and skills-based support to (potentially) many or all students (Tier 1 intervention), specialized support to traumatized students at significant risk for severe persisting distress and developmental disturbance (Tier 2 intervention), and a professional network through which school counselors both obtained timely expert consultation and could refer severely distressed or high-risk students to community mental health specialists (Tier 3 intervention) (Layne et al, 2000).

It should be stressed here that the school psychosocial project was only one out of three major projects implemented within the UNICEF psychosocial/child protection program 1996-1998. The two other main projects were focusing on the situation of unaccompanied children, and the situation of children with mental disabilities. These projects are, however, not the subject of review in this report and study.

Theory of PTSD

The next chapter is a review of some previous studies of children exposed to war that has been carried out within the UNICEF psychosocial project in Bosnia and Herzegovina. Before we review the main findings of these studies a brief introduction will be offered to the field of trauma psychology and the main concepts applied within this field of work

The concept of psychological trauma is not a new one in psychology and psychiatry, and from the very early days Freud and other key persons within the schools of psychology and psychiatry paid attention to the role traumatic (unpleasant, shocking, disturbing) events played in peoples lives. In his earlier theories Freud did postulate that the various disturbances seen in the adult patients he treated in Vienna were caused by childhood traumas, mainly of sexual nature. This theory was, however, so shocking and disturbing to the establishment in the current historical and cultural context that it was later revised and more importance was now placed on the children's fantasies about alleged traumatic experiences. Today we are inclined to think that Freud's first theory was the correct one, and that traumatic events especially in the early parts of life do play a crucial role in forming the person's personality and his or her life. One may say that there has been a shift over the last two decades away from focusing on various fantasies children may have, and more toward a focus on real, experienced life events that are forming the children as they grow up.

The concept of Post Traumatic Stress Disorder has come to play a crucial role in the modern development of theory and practice for support to people who are suffering due to the experience of shocking or traumatic events. Introduced in the American Diagnostic Statistical Manual in 1982 (DSM-II) PTSD became the first category of psychological suffering that could be attributed to the experience of an external event, namely a traumatic event. The introduction of PTSD into the nomenclature of psychological disturbances (it is an anxiety disorder) was in part caused by the excessive research carried out after the Vietnam War, but as mentioned above the phenomena is far from a new one. The introduction of PTSD as a diagnosis represented the beginning of a new era not only for research but also for development of intervention programs to deal with the impact of the traumatic events on the persons displaying symptoms of PTSD or meeting the full criteria to be diagnosed as suffering from PTSD.

Since 1982 the diagnostic criteria have been further developed and refined, and we will here only review the main characteristics of PTSD while the especially interested reader may find all the details in DSM-IV or ICD-10, the two main diagnostic manuals applied within the sciences of psychology of psychiatry. While there are some differences in reactions between children and adults, the main characteristics are the same for all people experiencing traumatic events. It may, however, also here be worth noting that not everyone reacts in the same way to the same events, there are individual differences in how we react and cope with stress and traumas. We shall revert to this issue shortly.

There are four main criteria that must be met to diagnose PTSD:

- 1) The person has experienced a traumatic event, an event “outside the range of normal human experiences”. This definition does of course lead to some issues over what should be considered normal – if all children in a country experience hunger, or warfare, do that make hunger or warfare “normal”? Seen from the perspective of child developmental psychology the answer to this question is of course no, any dramatic event that is outside the normal range of human experiences and that threatens a child’s sense of safety and survival could be considered a traumatic event. One does also differentiate between exposure to single and multiple traumatic events, with exposure to multiple traumatic events having a potentially more negative effect.
- 2) The person shows intrusive reactions related to the event. This may in our case mean that children are re-experiencing the moment a shell exploded, or someone was shot, or some other terrifying event. This re-experience can take place as a vivid vision, like they “see” what is happening all over again during daytime. Typically a severely traumatized child will say things like “It is like I have a video camera in my head”, or “I can see all the pictures from the event”. These re-experiences can be so strong that the child thinks the event is happening all over again. It is also very normal that they appear at night, as nightmares from the event. This intrusive memories are the result of the shock that literally speaking has overwhelmed the cognitive and nervous system of the child, one may say that a traumatized child is a child who is so shocked by what happened that the sensory impressions of the event are imprinted in the memory and does not (easily) fade away. The re-experiences are not only linked to the visual memories of the event, but also to olfactory, auditory and sensory feelings (smelling gunpowder, hearing shots, sensing the impact of the bomb blast). The hallmark of intrusive memories is that the child has no control over when they come, and the memories are of course accompanied by very strong feelings of anxiety and terror since it normally are the most brutal and gruesome aspects of the traumatic event(s) that are re-experienced.
- 3) Linked to the intrusive reactions are strong physiological reactions caused by the state of hyper-arousal that is part of the trauma reactions. This is most typically seen through an exaggerated startle-response (jumpiness), and disturbed sleep (problems falling asleep and staying asleep).
- 4) Finally avoidance reactions are part of the set of reactions called trauma reactions. Due to the disturbing and anxiety-provoking nature of the traumatic events and the accompanying intrusive memories the child will typically try to avoid anything that reminds of the event. This can mean to avoid the place an event happened (not going back to school if an explosion happened in school), to avoid thoughts or feelings associated with the event, or to avoid any other reminders that are associated with the event.

To meet the diagnostic criteria for PTSD these reactions have to last for more than one month. Naturally, in cases of extreme violence toward children (and adults) due to either manmade or natural disasters, a rather high proportion of the population may be exposed to traumatic events. It is, however, important to realize that it is completely normal to display various reactions after a traumatic event, we may best call these acute stress reactions, and these will normally decrease over time. It is only if a series of specific reactions are present for more than one month after they first appear (normally they will appear shortly after the event but one may also have delayed trauma reactions), that the diagnostic criteria for PTSD can be met. If the reactions last for more than six months we say that the person suffers from chronic PTSD.

These concepts are all taken from the diagnostic literature, and one can ask how useful they are for application in large-scale disasters. Firstly it is important to recognize that although it may be important to apply diagnostic tools in regular health services, in large-scale disasters there may be less of a reason to actually derive at the exact proportion of the population that meets the criteria for instance PTSD according to existing diagnostic manuals. It is also quite typical to find in large-scale disasters that the number of people who ideally could benefit from some specialized psychological or psychiatric treatment far exceeds the available human professional resources to offer such services. In the psychosocial project in Bosnia and Herzegovina focus gradually shifted away from the use of the term PTSD to describe those children who had experienced serious traumatic events and displaced strong trauma-related reactions, towards they use of the concept PTS – Post Traumatic Stress. This was an attempt to decrease the possible stigmatizing effects of the concept PTSD, since it relates to a disorder. At the same time the theory and model of PTS(D) has proved very helpful to: 1) Explain how people are affected when exposed to traumatic events; 2) Offers a model for understanding human behavior that is easily understood and offers a useful model for development of intervention programs.

In these programs the main aspect is to reduce the impact of the traumatic reactions on the child's further development, and this is best done by helping the children process their memories, rather than to support the mechanisms of avoidance that normally and naturally appears in individuals as well as in groups after traumatic events. This again is best achieved, according to the project plans, by offering knowledge and skills to adults who work with children about these reactions and methods to help the children.

It is important to stress that children (and adults) who experience a traumatic event will not necessarily display post-traumatic reactions for an extensive period of time, or at all. But at the same time we do know that a sizable minority of children who do experience traumatic events will develop post-traumatic reactions that lasts for an extensive period of time and may result in developmental damage. The chances for this to happen are greater if children are exposed to multiple traumatic events, like oftentimes if the case in wars. Furthermore, traumatic experiences are often linked to the loss of lives. Loss of close persons and loved ones are therefore also a very important aspect to take into account when one wants to assess how a child has been impacted by a traumatic event, not least in order to understand what support systems still exists around the child.

This introduction is not meant to provide a complete and extensive overview of theory and research findings in this area of work, but to serve as a brief introduction to the theory that has guided the UNICEF assisted school psychosocial project in Bosnia and Herzegovina. As mentioned elsewhere, these project was first of all aimed at normalizing the oftentimes very painful reactions children and adults experience after traumatic events, furthermore to offer an opportunity to express both experienced events and reactions (both through direct/open communication and through expressive/in-direct methods), and where possible to also support the delivery of more specialized support to children who displayed significant traumatic reactions.

As part of these programs, several assessment studies were carried out in Bosnia and Herzegovina during and after the war. These studies were carried out to document the impact of war on children, data that again could be used for awareness raising purposes in the local community, in the country and internationally. Furthermore, data does represent a baseline against which later evaluation studies may be carried out (although during the war this was not always possible). Finally, one may use the data as a screening tool to identify individuals or groups of children at special risk and in need for special care (again, this was only done in some of the studies).

Collecting data in the midst of, or after a war raises important ethical questions. In our work we tried as much as possible to honor some basic principles. Firstly, the assessment studies were carried out as an integrated part the psychosocial project. This means that data were collected from children in schools that were involved in project activities, rather than from randomly chosen schools in which the teachers or children did not receive any special support neither before nor after the data collection. Secondly, the data were collected by the teachers or psycho-pedagogues working in the schools, with support from the local University, and as far as technically possible the data were processed and analyzed in the location where they were collected. Thirdly, results were made available to the schools (teachers, parents, pupils) involved in the studies and were applied in the psycho-educational activities taking place in the schools.

In the earliest studies parents were informed, where possible, about the data being collected as part of the project activities, and they were informed about the (group) results. We say “were possible” because the situation in active war zones are not always such that this is so easy to do. In later studies parents received a letter where they were informed about the planned studies and informed they could contact the schools if they had reservations about this. It should be noted that traditionally there are no practice in Bosnia and Herzegovina for researchers, school authorities or others to ask for parental consent when data are collected from children and these issues were therefore raised by UNICEF and it’s partners.

Previous studies

Sarajevo 1993

The University of Sarajevo Department of Psychology in collaboration with a team of pedagogues and psychologists from Sarajevo carried out the first systematic assessment study of children's exposure to war events in Sarajevo in June 1993 (Dapic et al., 1993). Data were collected from 1505 children from primary schools involved in project activities in Sarajevo city. Their age was between 8 and 15 years. Data was collected with a battery that was first used by UNICEF in Croatia in 1992 (Kuterovac et al., 1994), and which later formed the basis for assessment studies in different parts of former Yugoslavia. This assessment battery tapped data on children's exposure to traumatic events and losses, trauma reactions and depressive reactions. Psychologists and pedagogues, who administered the questionnaires to the children in the classrooms, collected the data. Data from younger children were collected by interviewing them, applying the same questionnaires. The main aim of this study was to collect group data to document the impact of war on children in general.

The 1993 study in Sarajevo documented what everybody who had visited, worked or lived in Sarajevo already knew: The majority of the children had been exposed to direct life threats from sniper bullets and shells, and many had seen people being wounded or killed. The main results are presented in table 1.

Table 1. Exposure to war related traumatic events among children from primary schools in Sarajevo 1993 (N=1505)

Question	% Yes
Have you been forced to flee your town or village because of war	23
Have you experienced shelling at a very close distance	97
Have you experienced shooting at a very close distance	96
Have you stayed for a long time in shelter	87
Have you seen someone who was injured in the war	79
Have you seen someone who was killed in the war	46
Has your home been shelled or attacked	59
Have you been shot at by snipers	55
Has a family member been wounded or killed	37
Have you ever thought you could die from cold	17
Have you ever thought you could die from food or water shortage	11
Have you helped or carried wounded or killed people	33
Have you thought that you could get killed in the war	66

These data were collected from schools, or rather from improvised schools as regular schools were not operating in Sarajevo at this time since school buildings and large groups of people (children or adults) were directly targeted. The sample does not include schools in Dobrinja, a suburb to Sarajevo that was under particularly heavy fire. Nor does it include children from the many collective centers who had fled from the surroundings of Sarajevo and oftentimes had been exposed to particularly gross war crimes. Put differently, this sample is quite representative for the level of exposure to war events among children from

Sarajevo, while other groups of children could possibly have reported even higher levels of exposure to traumatic war events.

Mostar 1994-1997

In December 1993 UNICEF first initiated a psychosocial project in Mostar. The city was divided in two by a brutal and bitter war, and the eastern part of the city was at this time besieged and cutoff. Still, UNICEF managed to organize some small seminars for teachers and psycho-pedagogues who were working with the children in spite of the immense dangers. In the spring of 1994 the war activities decreased following a peace agreement was signed in Washington between the Croat and Bosnian parties (the Washington agreement), and UNICEF was able to establish a psychosocial program in both West and East Mostar.

As part of the project, an assessment study was carried out in West Mostar in March and April 1994 (Kuterovac & Bunjevac, 1994). This study was carried out by UNICEF partners from the University of Zagreb, in collaboration with local project partners from the Education Authorities in West Mostar. Data were collected from 646 children between the ages of 8 and 15 years from ten primary schools in Mostar, Dirinovci, Siroki Brijeg, Citluk and Capljina. Data were collected by psychologists from the University of Zagreb in collaboration with local project partners. Questionnaires were administered to the children in the classroom, and they filled these in themselves and handed them back to the project team members. Like the 1993 Sarajevo study, this study was first of all carried out to document the impact of war on children as a group in this part of the country, and the results applied in later psycho-educational activities with teacher and parents.

Table 2. Exposure to war related traumatic events among children from primary schools in West Mostar and Herzegovina 1994 (N=646)

Question	% Yes
Have you been forced to flee your town or village because of war	70
Have you experienced shelling at a very close distance	81
Have you experienced shooting at a very close distance	78
Have you stayed for a long time in shelter	56
Have you seen someone who was injured in the war	54
Have you seen someone who was killed in the war	34
Has your home been shelled or attacked	37
Have you been shot at by snipers	15
Have you thought that you could get killed in the war	40

The University of London, UNICEF's implementing partner in Mostar, carried out a second study in East Mostar in 1995/96. For two years project staff from University of London lived and worked in Mostar, supporting local project teams on both sides of the still divided city and helping the respective project teams deliver psychosocial support services in the school system. This was done by offering introduction seminars to all

teachers in the primary schools in Mostar, followed by more comprehensive training of selected teachers and psycho-pedagogues in methods for direct work with groups or individual children. In addition the University of London with support from the EU and in collaboration with the local health authorities established and ran a community-counselling center for children in East Mostar 1995-1999. Children showing high levels of distress would be offered counselling at this center by local staff supervised by staff from the University of London.

The study was carried out in ten primary schools in East Mostar, and the sample comprised of 2976 children between 9 and 14 years, ie. all children in this age group attending school in East Mostar. Results from this screening are presented in table 3.

Table 3. Exposure to war related traumatic events among children from primary schools in East Mostar in 1995 (N=2976)

Question	% Yes
Have you been forced to flee your town or village	75
Have you experienced shelling at a very close distance	91
Have you experienced shooting at a very close distance	79
Have you stayed for a long time in shelter	90
Have you seen someone who was injured in the war	63
Have you seen someone who was killed in the war	48
Has your home been shelled or attacked	59
Have you been shot at by snipers	52
Has a family member been killed	52
Have you ever thought you could die from cold	25
Have you ever thought you could die from food or water shortage	41
Have you helped or carried wounded or killed people	11
Have you thought that you could get killed in the war	68

Secondary school project 1996-2000

Following the 1995 Dayton Accord UNICEF increased its attention towards the situation of adolescents, and the psychosocial project was extended to include secondary schools. The project was implemented in parallel in both entities by the various pedagogic institutes/school authorities with support of local clinical psychologists and with support from the UCLA Trauma Psychiatry Unit. The project had an in-built evaluation component.

In 1997 an assessment study was carried out by the University of Banja Luka to establish the level of exposure to war events and losses and of psychological distress among adolescents in schools where the psychosocial project was implemented. The age range for the adolescents was 14-17 years. For results, see table 4.

Table 4. Exposure to war related traumatic events among children from secondary schools in Republika Srpska in 1997 (N=700)

Question	% Yes
Have you experienced shelling at a very close distance	36
Have you experienced shooting at a very close distance	28
Have you seen someone who was killed in the war	17
Has a family member or friend been killed	58
Have you thought that you could get killed or seriously injured in the war	32

This project offered a systematic 12-sessions group intervention program for adolescents displaying a high level of trauma reactions, and an internal evaluation of the 1997-1998 school year program revealed mixed but generally favorable findings (Layne et al., 1998). Students who participated in group treatment, or who met with the school psychologist/pedagogue independently in interviews, reported significantly greater decreases in posttraumatic and grief symptoms at post-treatment compared to a no-treatment control group. Further, the evaluation also revealed positive findings regarding the impact of the program: A professional network of school psycho-pedagogues and clinical psychologists had been established and was valued and used by the school professionals. Teachers, pedagogues and psycho-pedagogues reported that they used the group materials in their professional work outside the groups, both in the classroom and in their other roles at the schools.

In focus groups the students gave various reports that supported the assertion that the program had had a positive impact on the adolescents. They reported that the program had helped them understand the effects of their past traumatic experiences on their current distress symptoms, and that their levels of distress had decreased since they began participating in the program. They also reported feeling more confident, more able to give and receive support, enjoying better sleep, better able to concentrate on their school studies, and that they enjoyed a more positive outlook for the future. In focus groups, the psycho-pedagogues confirmed these findings, reporting that the students were much more attentive in class and that they had improved their social skills and behavior. These changes in behavior again resulted in a change of environment in the classes, and even in the children's homes. (Layne et al., 1998). A weakness of the program was that it had achieved to reach relatively few adolescents in only selected schools in parts of the country.

Results from a program evaluation conducted during the 1999-2000 school year further confirm these findings (Layne et al, 2001). Data were collected from 87 students who participated in the program at 17 secondary schools located throughout different parts of the country. Student's responses to self-report questionnaires revealed that the students' traumatic stress reactions as measured by standardized PTSD measures were significantly reduced after the group treatment program, ($F[1, 53] = 56.97$; $p < .001$; mean scores were 36.49 and 25.73 at pre- and post-treatment, respectively), their depressive symptoms were reduced ($F[1, 52] = 33.00$; $p < .001$; mean scores were 30.79 and 23.09 at pre- and post-treatment, respectively), and that their grief reactions were reduced ($F[1, 52] =$

33.00; $p < .001$; mean scores were 17.15 and 15.08, at pre- and post-treatment, respectively). These results shows that the adolescents showed statistically lower scores on these measurement instruments after the group program, meaning that there had been a real and positive change over time. However, the lack of control groups makes it impossible to establish that the program caused these changes, or by the program alone.

As part of the 1999-2000 school year evaluation, the students were also asked to report on their own perceptions of the effectiveness of the program, using post-group questionnaires. The results are shown in table 5.

Table 5. Group participants' perception of the program as facilitating their post-war adjustment (N=87)

Please indicate how much the program helped you in:	Not at All (0) %	A Little (1) %	Some (2) %	A Lot (3) %	A Great Deal (4) %
Doing well in school?	3	4	35	41	19
Getting along well with your family?	1	3	18	38	41
Getting along well with your friends and classmates?	0	0	16	43	42
Making positive goals and plans for your future?	0	4	16	42	39
Making your symptoms more manageable so they don't interfere so much with your life?	1	2	21	44	32
Helping you get your life back on track?	0	8	15	41	36
When the group first began, how effective, overall, did you expect it would be?	3	26	41	24	6
Now that you have completed the group, how effective, overall, do you think it was?	0	2	4	28	66
How strongly would you recommend the group to other teenagers who have lived through traumatic experiences?	0	0	2	22	77
How strongly do you feel that a program like this should be in place at your school?	0	0	2	21	77

Finally, the evaluation showed that the psycho-pedagogues who participated in the program experienced that the project had re-defined their roles in the schools, resulting in

changes in the nature of the referrals and requests for assistance that they received (Layne et al., 2001).

Project evaluation study

An external UNICEF evaluation study was carried out in 1998 to review psychosocial projects in Bosnia-Herzegovina, Croatia, and Federal Republic of Yugoslavia (Richardson, 1998). The report was based on interviews with 60 teachers, pedagogues, psychologists, aid workers and government representatives, plus a review of evaluations, project proposals, and other project documents dating from 1992 to 1998.

The study concluded: 1) The decision by UNICEF to support psychosocial projects in former Yugoslavia starting early in 1992 was a good one; 2) Bosnia and Herzegovina was the only country which continued with a central programming focus on psychosocial support for trauma affected children following the end of the 1991-1995 wars in Croatia and Bosnia and Herzegovina (it should be noted though that while this was true in 1998, projects with a trauma-component were again initiated in FR Yugoslavia and Macedonia during the 1999 crisis and war in Serbia/Kosovo); 3) That although the initial objectives of most of the projects were to help children themselves, the most tangible benefits were those to teachers and psychologists themselves, who reported they had received important information about behavioral changes in their students at an important time; 4) That the UNICEF supported projects in the three countries reached tens of thousands of pre-school and primary school teachers and other service providers; 5) Out of the thousands who received training, only a small minority have applied what they have learned in the classrooms in a consistent basis; 6) It is less certain but possible to say that hundreds and thousands of pre-school and primary school children participated in the such programmes during (in the three countries) during 1992-1998.

The main limitations of the psychosocial projects were, according to Richardson (1998): 1) It is uncertain what teachers got out of the short term training they received; 2) There were not enough professionals in any of the countries with extensive background in trauma psychology to provide full and adequate supervision to the numbers who have been trained, 3) Donor priorities shifted after the war from psychosocial projects on trauma to reconciliation projects, and many of the interviewees in the study reported that this had been a mistake because the most critical time to deal with trauma is after the war.

Among the recommendations offered by Richardson (1998) were to assess how well the teachers have applied what they learned in their various training sessions, and to learn more about the impact of the projects had impacted students who had participated in them.

PART 2 THE EVALUATION STUDY

About the study

Based on the experiences made during and after the war, and based on the UNICEF evaluation report (Richardson, 1998), the principal author (who was the UNICEF psychosocial advisor to former Yugoslavia in 1993-1995 and the UNICEF project officer for Children in Difficult Circumstances in Bosnia and Herzegovina 1996-1998) and UNICEF Innocenti agreed to document some of the experiences made during these years (Stuvland, 1999) as well as to try to evaluate some of the impact of the school psychosocial project on the professionals who had been involved in the project. In order to try to answer the latter, the authors of this report with the support from UNICEF Bosnia and Herzegovina agreed to carry out a study to obtain systematic information and hard data from school personnel who had attended various training programs and participated in implementation of the school psychosocial project. We were interested to learn about their reports regarding the usefulness of the various training activities, and we did also want to learn more about their present needs and priorities.

It should be noted that persons who were involved in the project from 1992 to 1999 carried out this study, this is in other words not an external study nor it is an evaluation study in the traditional format. Rather it is an attempt by some of the key players in the psychosocial program in Bosnia and Herzegovina to summarize the results achieved in this program, based on quantitative data from school professionals in some of the schools who had participated in the program. In this paper we will report on the main findings from this study

The study was carried out in parallel in the two entities of Bosnia and Herzegovina, in collaboration with the respective school authorities, by distributing a questionnaire to some of the schools involved in the project. Data was processed and analyzed by the Universities of Sarajevo and Banja Luka. In this report we will report findings from both studies, but since the data were processed and analyzed separately the findings will also be reported separately for the two entities. In some cases only findings from one entity will be reported, in order to avoid unnecessary duplication in presentation of results, just making a brief reference to any discrepancies in findings if such exists.

Methodology

Sample

Data were collected from a total of 118 subjects working in primary and secondary schools in the cantons of Sarajevo, Mostar and Tuzla in the Federation of Bosnia and Herzegovina and from different parts of Republika Srpska. The locations included in the study were selected because UNICEF had been actively involved in supporting psychosocial projects in these locations. In these locations schools were chosen for inclusion from a list provided by the Pedagogic Institutes over schools in which the program had been implemented. For details of the sample, see table 6.

Table 6. Sample characteristics

	Federation of B&H	Republika Srpska
Sample size	71	47
Sex in %		
Male	28	26
Female	72	74
Profession in %		
Teachers	42	35
Psycho-pedagogues	48	65
Principal/other	9	10
Age in %		
20-29 years	4	2
30-39 years	17	25
40-49 years	49	39
50-59 years	29	34
60-69 years	1	

Instrument

For the purpose of this study a questionnaire was designed (Stuvland, Durakovic and Perrin, 1999) and translated into local language. It contained questions about the demographic characteristics of the school (to be filled in by principal only), and about training seminars subjects attended during and after the war, questions about psychological screenings of pupils, questions about current problems subjects encounter in their working environment and their suggestions for future projects (for full details see annex 1).

Procedure

Data were collected in June and July 1999 from principals, psycho-pedagogues and teachers in the schools. The respective Universities obtained lists from the Pedagogic Institutes of schools involved in psychosocial programs, and selected schools to visit from this list. Students of psychology visited the schools, offered instructions about the objective of the study, distributed questionnaires and collected the questionnaires.

Either the principal or psycho-pedagogue from each school filled in an extra questionnaire with various data from the schools.

All subjects filled in the questionnaires individually and anonymously.

Data were entered into SPSS by the Universities of Sarajevo and Banja Luka and frequency analyses conducted.

Results

About the schools

The participants in this study from the Federation of Bosnia and Herzegovina worked in 16 different schools, and tables 1 and 2 shows the differences among the schools with regard to composition of the student populations. One school had only 15 displaced children; in another school 1200 children were displaced. One school had 23 children who lived with only one parent; in another school 300 children lived with one parent only. These numbers exemplifies how the demographic changes caused by the population movements during the war has resulted in great diversities between the schools with regard to both composition of student populations and of prevalence of expected risk-groups of students (tables 7 and 8).

Table 7 Primary schools (N=22)

	Min	Max	Mean
Total number of children in school	303	1600	945.6
Number of displaced children in school	15	1200	348.7
Number of returnee children	10	230	115.1
Number of children without one parent	23	300	115.5
Number of children without both parents	0	60	5.5
Number of children with physical disabilities	0	8	2.5
Number of children with mental disabilities	0	25	7.3

Table 8 Secondary schools (N=14)

	Min	Max	Mean
Total number of children in school	277	1319	654.9
Number of displaced children in school	12	283	106.9
Number of returnee children	17	352	84.9
Number of children without one parent	10	306	68.5
Number of children without both parents	1	8	4.5
Number of children with physical disabilities	0	5	1.6
Number of children with mental disabilities	0	10	1.0

Training seminars in the period from 1992 to 1998

Respondents were asked to report how many seminars they had attended from 1992 to 1998. Results are shown in table 9.

Table 9. Number of seminars attended 1992-1999

Number of seminars	Federation of B&H N=71 %	Republika Srpska N=47 %
1	11	63
2	30	16
3	13	14
4	28	
5 or more	18	

In order to get some feedback on the impact of these seminars, respondents replied to a number of questions related to their own evaluation of these seminars. Results from the Federation of Bosnia and Herzegovina are shown in table 10.

Table 10 Evaluation of training, Federation of Bosnia and Herzegovina (N=71)

Question	Not at all %	Some %	A lot %
Did seminars improve your understanding of the consequences that war, trauma and loss can cause in children?	2	24	74
Did seminars provide you with any guidance how to help children traumatized by the war?	2	18	80
Did seminars improve (advance) your way of working with children in classroom?	2	32	66
Did you, after the seminars, apply specific individual work with children traumatized by the war?	8	37	55
Did you, after the seminars, implement specific group work with children traumatized by the war, outside the classroom?	14	38	48
Did you, after the seminars, specifically work with parents with regards to consequences of war in children?	16	52	32
Were you able to pass on the knowledge gained at the seminars to other teachers?	4	52	44
Did you have professional supervision outside the seminar?	34	26	40
How useful that supervision was for you?	34	20	46
How important, in your opinion, is the supervision?	13	20	67
Do you believe that seminars were useful to your work?	0	16	84
Does, in your opinion, seminars make any sense?	0	16	84
How important, in your opinion, is to continue with implementation of psychosocial projects for children traumatized by the war?	2	13	85

The results from Republika Srpska are similar to the ones from the Federation of Bosnia and Herzegovina, and these results shows that most respondents had experienced the seminars as very helpful and important for them in their work with children during and after the war. The training seminars had offered valuable practical guidelines that could be applied in the schools after the seminars.

The maybe most important result is related to the activities carried out by the subjects after the seminars, and to the role of supervision. As can be seen in table 7, 91% of the subjects reported they had done some or a lot of work with children individually following the seminars, and 86% reported they had carried out group counseling activities with children outside their regular classroom activities. 85% reported they had also worked with the children's parents.

We can also see that 96% of the participants in this study reported they had passed on their newly learned skills to other teachers in their place of work.

However, about a third of the sample reported they had not received any supervision after the training, and among those who had received supervision a third reported they had not found it very helpful. The majority did however perceive supervision as an important component of a project.

When asked if they perceived the seminars as useful to their work, 85% reported that the seminars had been very meaningful for them, and 86% reported that they believed it is very important to continue with projects for children traumatized by the war in Bosnia and Herzegovina.

It is likely that some of the school personnel participating in this survey had experienced war-related traumatic events and losses themselves, and we were interested in how their participation in the psychosocial program had influenced the helpers themselves. We asked two questions of relevance for this purpose. First, we asked if the participation in the training seminars had helped them to successfully overcome their own war experiences. Among the respondents, 63% reported it had helped them a lot, 31% that it had helped a little and 6% that it had not helped at all. Secondly, we asked if the work with the children had had any similar impact, and 62% reported that the work with the children had helped them a lot to overcome their own war-experiences, 35% reported it had helped them a little while 3% reported it had not helped at all. In sum, result shows that the majority of the helpers perceived that participation in the project, both through the direct support they received during the seminars and through their own work with the children had been helpful for themselves. We note however that there was no control group for this study of those who had not attended seminars, nor did we ask what other things in their lives had helped with this, therefore it is of course impossible to establish the relative importance the seminars had had but it is interesting to note how the respondents themselves report on this issue.

Psychological surveys of children

In some schools psychological surveys (of trauma exposure and reactions) were carried out during and after the war, and we wanted to learn more about the perception among the respondents of these studies. 90% of the respondents from Republika Srpska and 83% from the Federation of Bosnia and Herzegovina reported that such surveys had taken place in their schools. Table 11 shows the results from the Federation of Bosnia and Herzegovina.

Table 11 Evaluation of the screening surveys in schools (N=71)

Questions	Not at all %	Some %	A lot %
The survey extended my knowledge on influence of the war on children	0	26	74
The survey results were useful in my work with children	0	21	79
Children readily accepted the survey	2	40	58
Parents readily accepted the survey	9	60	31
I am satisfied with the way how the survey was conducted	5	31	64
School received results of the survey in time	16	22	62
Teachers were interested in results of the survey	5	47	48
Survey showed that problems which children have are much bigger than we can cope with	0	36	64
Results of the survey were useful because they raised awareness in teachers and parents on influence of the war traumas on children	0	47	53
Children approved questions on personal experiences from the war even when it was hard for them to talk about it	0	38	62
Children wanted to reveal their war experiences	0	41	59
All children have to be questioned about their most stressful war experiences	2	28	70
Survey gave me some information on children which I did not know before	3	28	69

When we review the results in table 5 some trends become quite clear. Firstly, the subjects reported that the hard data generated from the surveys had been useful for them to understand the impact of war and traumatic events on children, and the results had been very useful in their work with children. Respondents reported that most children readily approved of filling in the survey, but there had been some parents who reportedly were not satisfied with the surveys. The general impression is that the school personnel were satisfied with the way the surveys had been conducted, although it can be noted that the feedback to the schools with results from the surveys in some cases had been given late, and in a few cases the schools had not received any feedback at all. It should also be noted that the respondents reported that children were positive to report their war experiences and their trauma reactions through the surveys. A problem is however linked

to the fact that the surveys are revealing problems of a scope that may appear difficult to cope with in the schools, we shall revert to this and related issues in the discussion.

Current problems observed in children

To learn more about the current problems observed in the children all respondents filled in a detailed questionnaire about some typical problems seen in children after exposure to traumatic events. As seen in table 12, respondents reported various psychological reactions even the war had ended three years before this survey was made. They report a high degree of trauma-related and grief symptoms in children, as well as other symptoms that may follow exposure to traumatic events (restlessness, learning and concentration problems). Risk-behaviors like smoking, alcohol abuse and drug taking are also problems among some children.

Table 12 Reported current problems in children attending schools of respondents

	Federation of Bosnia and Herzegovina N=71			Republika Srpska N=47		
	Not at all %	Some %	A lot %	Not at all %	Some %	A lot %
Depression in children	6	73	21	6	67	27
Trauma in children	0	44	56	10	45	45
Grief and loss reactions	6	47	47	9	51	40
Nervousness or irritability	5	39	56	10	49	41
Hyperactivity	7	59	34	31	63	6
Violent (aggressive) behavior	11	58	31	29	61	10
Learning difficulties	4	40	56	6	45	49
Absence from school	11	44	45	18	53	29
Problems with attention/concentration	6	41	53	13	55	32
Smoking	35	36	29	41	37	22
Drug abuse	55	39	6	82	18	0
Alcohol abuse	56	38	6	67	27	6
Prostitution	82	15	3	96	4	0
Suicide (attempts or ideas and feelings)	58	38	4	65	35	0

Respondents were also asked if they had received any information materials pertaining to the issues that the above issues that children struggled with. 82% had received such materials, and among them 81% reported the materials were very useful.

Support systems in the schools and communities

Having described the reported impact of the past training programs as well as the current problems, we wanted to learn how the psychosocial support systems functioned today in the schools and in the communities. We will present the data from Republika Srpska to illustrate the situation.

Among the participants in the study 57% reported that they had someone they could contact to seek advice or assistance regarding the psychosocial services for the students, i.e. the psycho-pedagogues could contact a clinical psychologist or another mental health expert to seek advice whenever necessary. Furthermore, 71% reported that they could refer a student to mental health services for more specialized support or treatment, if required. These results are from schools in which the psychosocial program had been implemented, we do not have data from non-project schools with which we may compare these findings but these figures are not representative for the entire country and we must assume that the availability of specialized mental health services is not as good in other parts of the country.

Among the respondents, 37% reported that the schools did not offer adequate psychosocial support to the students.

Asked about their satisfaction with the collaboration with educational authorities and the health and social services, 80% reported they were satisfied with the support from the education authorities, 51% reported they were satisfied with the collaboration with the health and social services and 69% reported they were satisfied with the collaboration with parents.

Although the subjects in general are satisfied with the support they received for implementation of various psychosocial support programs in the schools, they are facing constraints. The main constraints are lack of financial means (39%), lack of adequate training (31%), lack of space for activities (20%), problems caused because pupils do not have free time (16%), and lack of free time among the teachers (14%).

Priorities for the future

The last section of the survey dealt with the participants' perception of the main priorities for the future. The results are again very similar in both entities and results are presented in table 9.

Table 9. Problem behaviors that require attention

	Federation of Bosnia and Herzegovina		Republika Srpska	
	Some %	A lot %	Some %	A lot %
Trauma in children	45	49	43	49
Depression in children	54	41	41	49
Grieving for beloved person	55	38	45	47
Sleeping disorders	74	10	67	10
Suicidal thoughts and feelings	55	13	55	14
Nervousness and irritability	41	54	45	47
Hyperactivity	48	48	63	20
Anger/violent behavior, aggressiveness	43	52	53	37
Disobedience	58	35	55	29
Learning difficulties	37	59	47	43
Absence from school	36	58	61	28
Problem to concentrate	44	52	57	37
Cooperation with parents	54	38	37	43
Burn-out teachers	41	56	59	27
Conflict among pupils	71	25	65	22
Conflict between pupils and parents	58	36	51	32
Conflict with returnees	61	17	33	22
Conflict solving in classroom	75	17	61	12
Special needs of physically disabled pupils	61	15	47	14
Special needs of pupils with mental disabilities	48	28	41	25
Alcohol abuse	48	26	20	31
Smoking	44	39	33	33
Drug abuse	41	38	29	20
Prostitution	46	20	14	14

As we can see in table 9 school personnel in both entities report a strong need for continued focus on problem behaviors linked to the direct effects of war on children, like traumas and losses. At the same time there are numerous typical post-war issues that also require attention, ranging from substance abuse to conflicts to prostitution. In addition the schools have to cope with the needs of pupils with physical or mental disabilities.

Asked to set up the most important actions that should be taken in order to improve the psychosocial services for children in the schools, the following list of priorities was established (in rank order).

- 1) To carry out psychosocial surveys of pupils in order to get as accurate information as possible regarding their needs assessment

- 2) To implement general psycho-educational programs designed to reach large numbers of children
- 3) To organize training seminars in order to support teachers and psycho-pedagogues in their current work with pupils
- 4) To organized specialised services for smaller numbers of highly traumatised pupils
- 5) To provide psychosocial support for teachers/school staff themselves
- 6) To provide training in general communication skills
- 7) To intensify the work with parents

The participants were also asked to report what support they themselves required for carrying out psychosocial services in the future. Results are reported in table 10.

Table 10. Support to the school personnel

	Federation of Bosnia and Herzegovina N = 71			Republika Srpska N = 47		
	Not at all %	Some %	A lot %	Not at all %	Some %	A lot %
Training (seminars/workshops)	3	30	67	4	12	84
Regular supervision/professional support	2	46	52	4	29	67
Education materials (books, etc.)	0	20	80	4	4	92
Technical materials (paper, stationary)	4	34	62	4	33	63
Support from the school management	5	30	65	8	31	61
Support from the Pedagogical Institute and MoE	0	23	77	4	18	78

As we can see the results are very similar from both entities, and the respondents report a clear need for more training and support on the technical level as well as for support from the school management and the school authorities.

Discussion

The results from this study offers valuable new insights into the various aspects that should guide UNICEF as well as other players in planning and implementation of psychosocial projects for children affected by war. The results must be read against the background of a war that lasted for almost four years, was unusually brutal, and which was brought to an end through a political agreement which silenced the guns but did not manage to create a political solution which was accepted by all the partners. Put differently, although the war ended in December 1995 the conflicts and memories remain many and bitter in Bosnia and Herzegovina even today, more then five years later.

If we look at the data from the schools regarding their student populations, we see that there's some differences between the schools with regard to what type of problems they are facing, and this should reflect on the interventions to be carried out. In some schools a great part of the student populations are displaced from their original homes, resulting in a separate set of problems besides those caused by the direct exposure to war and violence. Some schools also have large numbers of children who have lost one or both parents. Although the results does not directly state this we do know from other data sources that most of these children are also displaced children. In some schools there were also children with mental and physical disabilities. In project planning and implementation it is important to pay special attention to schools with a high proportion of vulnerable children.

The results show that the respondents attended relatively many trainings seminars during and after the war. One will note that there are some discrepancies between the various parts of the country with more staff from the Federation of Bosnia and Herzegovina having attended 3 or more seminars then in Republika Srpska. Although the security situation was one reason why some areas received less support then others during the war, the results may also be seen as reflecting the need for better coordination within UNICEF as well as between the various organizations with regard to how the available support can be evenly distributed between all the different parts of the country.

If we look at the more specific results from the evaluation of the training activities, the majority of respondents reported the seminars had helped them a lot in understanding the consequences that trauma and loss cause in children. The seminars also helped them to think of ways to help children and how to improve work in the classroom.

Results also showed that most of the trainees had carried out some or a lot of work with children after the seminars. Although this may sound like an obvious finding, this was one of the main questions raised in the external UNICEF evaluation report (Richardson, 1998), and the findings confirm that many trainees did carry out both individual and group work with children, and to a lesser degree with parents, after the seminars. They did also disseminate their new knowledge to other colleagues in the schools.

We were not surprised to find that the respondents wish to receive more, and better quality supervision. This is an issue we have observed over the years, it is relatively easy to organize training seminars and make available some new knowledge and skills, but the lack of mechanisms to offer high-quality follow up including supervision is oftentimes a problem in projects. The school psychosocial project introduced new methods for work with children in the school system, and the psycho-pedagogues and other personnel involved in the project should preferably receive continuous and high-quality training and supervision as they carry out their work. This is an area where more work is required to guarantee the optimal efficiency of the investments made to improve the standards of care for children during and after conflict.

Many and important discussions have taken place over the last years with regard to the pros and cons of carrying out large-scale psychological surveys or screenings of children

during and after a disaster. The psychosocial project in Bosnia and Herzegovina carried out several such studies during and after the war, from which the main results have been presented in the first part of this report. Yet, because of the controversies sometimes arising around this topic we wanted to learn more from the school personnel regarding their perception of these activities. As we have seen in the results, the overall feedback is fairly positive. The data from the survey studies have been very helpful for the local project partners as they planned and implemented their project, hard data regarding the types of experiences the children have had were helpful to open the eyes of teachers as well as parents to the sad yet real fact that children had experienced such traumatic events.

For the reader who is not familiar with work in war zones this may sound like a trivial issue, since one will expect that everyone who lived in for instance Sarajevo during the war would realize that everyone, children included, were exposed to various traumatic war events. The reality is, however, far more complex. Adults do often deny they pain and suffering that they themselves or that children experience, this is no less a truth in the midst of a disaster scene. Again and again during our work we were surprised to see how hard data would serve as a useful tool to raise the awareness in school authorities, teachers and parents about the children's situation.

Hard data are of course also useful tools for later evaluation studies, and although it was hard to carry out methodologically sound evaluation studies during the midst of war such studies were carried out in the post-war years. Furthermore, hard data are valuable tools for awareness raising efforts, whether in a local community or a donor community, and hard data are also very potent tools for use in advocacy work at all levels. An interesting point to make here is that hard data are also a way to give children a voice in the midst of war and chaos, and in the case of Bosnia and Herzegovina some of the early data were widely used by the human rights groups.

In his work with UNICEF the first author has always stressed that such surveys should be seen as an integrated component of a wider project for assistance to the children, in other words not as a research project per se. Our impressions, having carried out several such surveys over the last decade, is that the children in general respond positively to questionnaires that contains questions that are relevant to them. Although the questions may sound harsh, children appear to appreciate that someone asks them questions that are relevant for their experiences.

At the same time there are many, and important issues that will require further discussion. The issue of confidentiality and parental consent is one such issue. While collection of data from children in for instance Norway would require prior approval by an ethical research committee (if data are to be used for research purposes) and written consent by the parents, school authorities and Universities in Bosnia and Herzegovina would normally just go ahead and collect data without having any such mechanisms in place. In the UNICEF supported studies children usually did not enter their names on the surveys, in one case where the purpose was to also identify and offer services for individual children at risk a proper coding system was applied. There would be cases where,

although the original objective was to collect group data rather than to actually screen for individual children at risk, the project partners in the school would themselves score the surveys and identify children at risk. This again can have a positive effect in as much as children are actually identified and offered appropriate support, the negative side of this is the obvious need to be careful not to end up with lists of “traumatized” children that may have strong stigmatizing effects.

We shall not cover all aspects of this discussion in this paper, just conclude this discussion by stating that some experiences have been made with regard to how one may collect data from children that can be useful for several purposes, yet there is a need for further refinement both of the methodology itself (instruments and indicators applied) and not least of how such surveys are carried out, and by whom. This is not least important since more and more groups and organizations do get involved in various types of psychosocial projects, and in collecting various types of data. Our impression is that the two main mistakes one can do in this type of work is either to have too strong a research-objective, i.e. there is no feedback to or involvement of the community members, and secondly that surveys are carried out by people who have no professional skills or experiences that makes them capable of managing this type of work.

The war in Bosnia and Herzegovina ended in December 1995, yet the survey indicates that there still were significant problems among many children three years later. The participants in this survey reported that children still displayed a significant amount of trauma and grief reactions, as well as other well-known secondary symptoms following traumatic experiences including learning and concentration difficulties, aggressive behavior and some degree of substance abuses. Results from both entities are very similar in this regard, pointing to the fact that these problems exists in all parts of the country, although as stated before it will be most important to take into consideration that there will be differences in the needs even between schools within one and the same city.

Asked for their preferences with regard to future training, results shows that respondents requested or identified more training in methods for assistance to children who have experienced traumas and losses, for various behavioral problems displayed in the classrooms as well as for issues related to conflicts between children. Again, these data are from the personnel in the schools, and it would be interested to learn how their perceptions corresponds to the priorities as seen by the parents and the children themselves.

We were positively surprised to learn how many of the respondents reported that they had good support systems within their school, and how they were satisfied with the collaboration and support from the educational authorities. It seems reasonable to attribute this positive result to the fact that the UNICEF supported psychosocial projects had contributed significantly to a closer and better collaboration between the schools, the pedagogic institutes and the ministries. When we state that we were surprised we do so because we know that teachers, psycho-pedagogues and others working in the schools had endured enormous hardship and received limited support not only during, but also after the war. This was not a result of incompetence within the educational authorities,

but rather a result of the tremendous material and financial problems everyone faced due to the high level of destruction many places. Still, it is very positive to see positive appraisal given by the school personnel with regard to the support they receive from the education authorities, and this stresses another possible outcome of such projects: To improve the relationships and problem solving capacities of the educational system at all levels.

Not surprisingly, the subjects participating in this study stressed the need for continued training, supervision and support to the schools in the future. All available data stresses the need for a long-term perspective when projects for children, families and communities are established in conflict or post-conflict countries. We can summarize the findings by stating that the project has been useful and helpful, there are still many and serious problems to cope with in the schools and there is a great need for continued professional support to the psychosocial services in the schools. Furthermore, there is a need to test and evaluate alternative methodologies and project designs, as well as to evaluate the cost-efficiency of the various models.

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List of abbreviations

CCHA	Coordinating Council of Humanitarian Agencies
JDC	Joint Distribution Committee
NGO	Non-Governmental Organization
PTSD	Post Traumatic Stress Disorder
PTS	Post Traumatic Stress
SPSS	Statistics Package for the Social Studies
UCLA	University of Californial Los Angeles
UKJAID	United Kingdom Jewish Aid
UMC	University of Missouri Columbia
UNICEF	United Nations Childrens Fund
UoL	University of London

ANNEX 1

Chronology of School-based Psychosocial Project UNICEF Bosnia & Herzegovina

- October 1992 Project partners identified and project team established by Ministry of Education and led by Prof. R. Dapic, Dept. of Psychology University of Sarajevo
- November 1992 First UNICEF supported seminar take place in Sarajevo
- 1993
- Project implementation starts in Sarajevo and the local team prepared the first in a series of local manuals/handbook, prepared and printed in Sarajevo. Seminars were organized for psycho-pedagogues and teachers. In addition the project team works in a kindergarten in Skenderija. A local mobile team led by M. Mavrak/UNICEF travelled to schools hit by shells/disaster scenes. The first survey was conducted in the spring.
- Project activities start in Tuzla and UNICEF consultant Jay Berk makes several travels to Tuzla/Central Bosnia and Sarajevo to support the program, holds seminars for local mental health professionals and psycho-pedagogues. Pedagogic Institute Tuzla organizes the project.
- UNICEF has meetings with project partners in Pale and Banja Luka, seminars are carried out with technical support from Belgrade.
- 1994
- Project activities continue Sarajevo and Tuzla
- Project starts in Mostar and UNICEF staff and consultants from University of Zagreb holds seminars for local project teams, organized as Psychosocial Boards on both sides of the city, and for psycho-pedagogues, kindergarten teachers and others involved in psychosocial activities.
- UNICEF starts collaboration with JDC/UKJAID and Carmel Institute in Israel. They support project activities in Tuzla, Zenica and Sarajevo. They organize a 2- weeks seminar in Israel, supported by UNICEF, for project partners from Mostar, Sarajevo, Tuzla. Focus of the seminar is on expressive techniques for work with children, debriefing, help to the helpers/self-care. Staff from Carmel Institute later held follow-up seminars in Bosnia and Herzegovina.

UNICEF starts collaboration with CCHA, the umbrella NGO for the international Islamic NGOs working in Bosnia and Herzegovina, and their professional partner the University of Missouri Columbia (UMC). CCHA/UMCA supports psychosocial programs for school and health personnel in Sarajevo, Tuzla, and Zenica. UMC held numerous seminars in 1994-1997, focussing both on trauma and developmental psychology, for both school and health workers.

1995

UNICEF's implementing partners University of London (UoL) opens project office in Mostar and supports programs in East and West Mostar. This project was initiated after the warring parties in Mostar signed a peace agreement, and strong efforts were made to help restore confidence in the city, besides the fact Mostar experienced very heavy warfare. One staff from UoL lives in Mostar for a year, and is replaced in 1996 by another staff that also lives for a year. The staffs offer consultation, training and support to the Psychosocial Boards in Mostar East and West. All schoolteachers in Mostar participate in a brief psycho-educational training, and selected staff from each school receives more comprehensive training. UoL, with support from EU, opens a child-counselling clinic where local staff offers specific therapeutic support to children and parents.

The UMC organizes a one-month summer course for project partners from different parts of Bosnia and Herzegovina in the USA.

JDC/UKJAID and Carmel Institute organizes a 2nd seminar in Israel for 2 weeks, and teachers and psychologists from the Serb-controlled part of B&H attend this time together with colleagues from Serbia, Montenegro and Macedonia.

1996

UNICEF invites UCLA Trauma Psychiatry Unit as a partner for development of a psychosocial project in secondary schools. UNICEF shifts more focus towards adolescents, and post-war this is the first program where one UNICEF partner is engaged to work in parallel in what have now become the two entities of Bosnia and Herzegovina. The project focussed initially on development and implementation of trauma-focussed group therapy model for application in secondary schools, later a psycho-educational classroom based intervention component is added. Implemented by Pedagogic Institutes with support from the Universities of Sarajevo and Banja Luka.

The Univ. London-supported program continues in Mostar and is extended to Zenica and Travnik.

The CCHA/UMC program continues in Sarajevo and Central Bosnia.

The pedagogic institutes in Sarajevo starts a post-war project in primary schools, focussing on work with parents. This project does not run very long.

The pedagogic Institute in Banja Luka organized training seminars for primary school personnel from all parts of Republika Srpska who have not attended seminars previously.

UNICEF assists the Fed. MoE to organize a Federation-wide network of project partners for the school psychosocial projects, and strong efforts are made to help the MoE's in the different Cantons to implement school based psychosocial programs.

1997

The UCLA supported project in secondary schools starts up in parallel in both the Federation of B&H and in Republika Srpska.

Project activities in primary schools continue at various locations, but it proves difficult to establish a well functioning project network involving all the cantons.

Project collaboration between UNICEF and Univ. of London in Mostar comes to an end, but the Univ. of London keeps its presence in Mostar through support of a new child and family counselling center.

1998

Project activities continue in Sarajevo, Tuzla and Travnik in the Federation and in the Republika Srpska.

The Federal Project Team is dissolved and UNICEF is again left to work directly with selected Cantons in the Federation.

The UCLA supported project in secondary schools continues.

1999

Project activities continue in Sarajevo, Tuzla and Travnik in the Federation and in the Republika Srpska.

UNICEF starts project activities in whole country for both primary and secondary schools' psycho pedagogues in cooperation with Norwegian Psychologists Association. This project is not focussing on traumatic war events but rather on policy issues and on the changes in the roles and professional orientation of pedagogues and psychologists. Implemented by the school authorities in collaboration with the Universities of Sarajevo and Banja Luka.

2000

Project activities in both primary and secondary schools continue in whole country.

UNICEF continues cooperation with its international partners – UCLA and Norwegian Psychologists Association. Greater emphasis is now paid to evaluating general program impacts, coverage, system change etc.

Due to crisis in neighbouring countries and huge influx of refugees, UNICEF supports psychosocial project activities in collective centers and refugees camps. Implementing partners is NGO World Vision. Emphasis is on ensuring children get enrolled in schools; catch up classes, parental involvement and play.

UNICEF starts cooperation on psychosocial projects with local NGOs “Zdravo da ste” and “Djelujmo kroz sport”. Target populations are children refugees and internally displaced children. Emphasis is on community involvement, working through existing systems including schools.

2001

UNICEF continues to support of project activities countrywide. Implementing partners are various – from GVTs counterparts on all levels to local and international NGOs.

UNICEF decides to support its partner of many years - University of Los Angeles (UCLA) in internal evaluation of secondary schools' trauma project level 2 to evaluate the impact of the group work. Final report is due in September 2001.

2002

New country programme drafted for UNICEF, School counselling support is blended into young peoples health and development project, looking at dealing with issues teenagers face. All schools based projects move from Child Protection Section to Education project. Child protection retains work with very vulnerable groups but in close collaborations with education programs.