**A Critical Review of UNICEF's Support to Psycho Social and Peace Education Projects in the Countries of the Former Yugoslavia (BHG, Croatia, and FRY) - Part 1 of 2**

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A Critical Review of UNICEF's Support to Psycho Social and Peace Education Projects in the Countries of the Former Yugoslavia

(Bosnia-Herzegovina, Croatia, and Federal Republic of Yugoslavia)

by John Richardson
August 1998
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Preface
The following assessment of UNICEF's support to psycho social programmes in the former Yugoslavia was commissioned by the UNICEF regional office for Central Europe and the Commonwealth of Independent States headquartered in Geneva. It is based on interviews with more than 60 teachers, pedagogues, psychologists, aid workers and government representatives, and a review of more than 30 evaluations, project proposals, and other papers that explain or critique the many projects that have taken place in Bosnia-Herzegovina, the Republic of Srpska, Croatia and the Federal Republic of Yugoslavia since 1992.

It was originally envisaged as a review of all of the psycho social programmes in the region, but since the majority of those programmes have been in the former Yugoslavia it was decided to focus specifically on those. Mention is made of other similar programmes in the region which have been the subject of evaluations or reviews – specifically in Armenia and Kyrgyzstan – but mainly for comparative purposes. Experiences in those countries have been similar to those of former Yugoslavia, as have many of the conclusions about them.

While UNICEF has engaged in a number of programme activities over the years that deal in one way or another with the psychological effects of war, it has been relatively recent that the organization has employed professional psychologists to design programmes the specific intent of which is to address psychological trauma in children. The relatively high profile of such programmes during the terrible wars in former Yugoslavia and Rwanda, in which so many civilians were brutalized, has opened a debate within the organization over just how UNICEF should address such problems.

This assessment provides an explanation of the logic behind the decision to train teachers and other child caretakers without professional background in psychology to respond to the needs of traumatized children, a discussion of some of the dilemmas accompanying such a choice, and an assessment of the extent to which the programmes reached their objectives or led to unforeseen consequences and opportunities.

Interviews were conducted and most of the reading was done during visits to Bosnia-Herzegovina, Republic of Srpska, Croatia and the Federal Republic of Yugoslavia in July 1998, and the report was written in early August 1998. A full list of interviewees and an annotated bibliography of the more useful documents appear at the end of the report.
Summary of Main Points and Recommendations
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Following is a brief summary of main points that are contained in various forms in the report that follows. A limited set of recommendations is also included here. These are not found elsewhere in the report.

Main Points

1. While there is an ongoing debate about the most cost effective and appropriate way to respond to large numbers of people whose lives have been severely disrupted by war, UNICEF’s decision to support psycho social projects in the former Yugoslavia starting early in the war in 1992 was a good decision at the time. UNICEF could not respond with the massive material assistance that UNHCR was able to offer, and its decision to work through school teachers and primary health care providers was consistent with its larger support to such care givers in its global programme.

2. Of the three countries that were visited for this review, Bosnia has continued with a central programming focus on psycho social programmes for trauma effected children. Croatia and the Federal Republic of Yugoslavia shifted their programming priorities toward programmes of peace education and various interactive methodologies toward the end of the war years (1994-95), and now focus primarily on those. In some cases, current interactive or participatory learning projects had their origins in work with traumatized children during the war. It has been in Bosnia where UNICEF supported projects have focused most intensely after the war on the minority of most traumatized students, and on adolescents.

3. Despite the initial objectives of virtually all psycho social programmes to help treat or even heal trauma in children, the most tangible benefits cited now that the war is over are those to teachers. When asked to assess what the benefits of various training programmes have been, the majority of those interviewed – teachers and psychologists involved in the programme – have said that they were given valuable information about behavioral changes in their students at an important time, and that many of them have learned new ways of interacting with their students and incorporating a psychological dimension into their understanding. Since very few children were interviewed, it is difficult to dismiss entirely the possibility that they would have offered a very different assessment of how the programmes affected them.

4. It is possible to say that over a period of six years (1992-98), with the most intensive activity in psycho social work coming during the war years (1992-95), that UNICEF supported projects that provided varying degrees, types and durations of training to tens of thousands of pre-school and primary school teachers. Lesser numbers of primary health care givers and mental health workers were also trained in such programmes. Most were trained in the fundamentals of child
trauma, and given instruction on how to identify its more obvious symptoms. Some teachers were given little more than this, but others were instructed in the application of various therapeutic activities designed to allow children to express their fears and share them with others. These included art, music and play therapy, and in some cases in actual group work that allowed children to speak directly of their experiences of grief, loss, and fear. The majority received training sessions of not more than several days.

5. Out of the thousands who received training, a small minority – perhaps measured now in the low hundreds – have applied what they have learned in their classrooms on any consistent basis. Many of those who received training in psycho social education during the war were subsequently trained in various interactive teaching methodologies that form part of the larger efforts at 'education for development' or 'peace education.'

6. Less certain but also possible to say is that hundreds of thousands of pre-school and primary school children participated in such programmes during that time. There is limited anecdotal evidence and some limited evidence from follow up trauma questionnaires that some of these interventions helped reduce symptomatology in such children. But beyond that it is almost impossible to know with any certainty how the majority of such interventions affected various children – and particularly difficult to know how permanent or profound the affect has been.

7. As in all wars, quantification of exactly how many were reached by what programmes is difficult. Some estimates seem high, and there is little way of knowing what individuals got out of limited training exercise and whether or not they were ever able or willing to apply such instruction in their work or home life. The only consistent form of evaluation was based on questionnaires given to workshop participants, who commented on the workshop itself. In general, workshops were judged helpful and desirable, by both students and teachers. Some have pointed out that this is because the workshops gave participants something to do that was worthwhile and a sense of solidarity during the debilitating days of war. There have been far fewer questionnaires designed to compare the severity and incidence of trauma symptomatology during and after programmes, but among the few there is some evidence that some symptoms diminished. Others point out that for the majority, trauma symptoms will diminish over time anyway.

8. The biggest limitations to further propagation of both psycho social and peace education projects have been the following:

- it is uncertain how much most teachers really got out of the short term training programmes that were offered in abundance during the war; after the war a few programmes (cited in the report) have offered training over several weeks or months that promise a more complete education

- there is little overall systematic acceptance of or support for psycho social work and various interactive or participatory learning projects in peace education by government ministries; such projects are still undertaken by teachers on the edges of the main
curriculum, as optional rather than mandatory classes for students

- there have not been enough professionals in any of the countries with extensive background in trauma psychology or new learning techniques to provide full and adequate supervision to the numbers who have been trained

- donor priorities shifted after the war from psycho social projects on trauma to reconciliation projects; a number of those who were interviewed feel this has been a mistake because the most critical time to deal with trauma is after the war

Recommendations

For future programmes:

1. In cases where UNICEF decides to do psycho social work, it should insist on forming partnerships with psychologists or universities that last long enough to have a serious impact. Trauma is not something that can be dealt with very effectively in a brief training workshop. Almost all are agreed that the short term consultancies that predominated during the peak of the war years were at best limited in their impact and almost impossible to assess. The best programmes - among those in both psycho social and peace education sectors - have been the ones that take place over several months or years.

2. UNICEF should place much greater emphasis than it has until now on evaluating how well teachers are applying what they have learned in training sessions. Since very few receive anything more than short term training, this is particularly important. Very little is known about this.

3. UNICEF should put a higher priority on securing backing for its varied psycho social and peace education projects at the highest ministerial levels. Until some of these programmes are officially sanctioned by the government system, they will continue to be marginalised. One of the more innovative approaches to integrating such projects into the educational mainstream is that of training future teachers at the University of Zagreb. It will be worth following that project for a few years to see whether or not the young teachers are able to apply what they have been trained to do.

4. At the same time, UNICEF should continue where it can to support that small nucleus of progressive partners who have to date been the prime movers of these limited programmes. This is now civil society is created and nurtured.

5. If UNICEF is going to continue to do psycho social work in different parts of the world, it should make more of an effort than it has to work with other international organizations that share the mandate to work with children or the mandate to work in education.
6. There was a suggestion by one UNICEF staff member that information on psycho social projects be included in the organization's 'Life Skills' material. That would be useful as a way of integrating it further into the organization's body of knowledge.

For future evaluation and research:

1. If further evaluation in psycho social work is judged desirable by UNICEF, one of its top priorities should be to assess how well teachers have applied what they have learned in their various training sessions. The countries of the former Yugoslavia would be a fertile ground for such an inquiry. It would require the services of a professional educator or trainer or psychologist who would observe hours and hours of classroom activity, and go far beyond the current system of asking teachers to assess the workshops.

2. One of the more interesting inquiries in former Yugoslavia would be to track down students who participated in various psycho social projects during the war and ask them how or even whether the projects had an impact on their lives. This would involve a bit more than having them fill out a questionnaire, although that would be useful as a starting point. They might now have insights and suggestions about such efforts that they did not or could not have had during the war.

3. It would be worth asking that minority of UNICEF staff who have supervised psycho social projects to get together and consolidate their own lessons learned, both with regard to how best to structure programmes but also with regard to how best to apply professional standards and insights to UNICEF's style of advocacy and programmes.
Background
One:

The Consequences of the War

The story of UNICEF's support for a psycho social programme of response to the wars of former Yugoslavia has developed against a broad background of social and economic forces which is still in a state of uncertainty and flux. It is important to a full understanding of what happened in individual programmes, and a reminder that while the guns have been silenced, many of the problems that led to war still exist.

The wars of separation that resulted in the dismantling of the former Yugoslavia began in the first half of 1991 and ended with the signing of the Dayton Peace Accords at the end of 1995. The northern republic of Slovenia declared its independence and seceded first, and within months the republics of Croatia and Bosnia-Herzegovina attempted to do the same but with far worse consequences. Three years of war among Serbs, Croats and Bosnians followed, during which all of them fought each other at one time or another. As many as 200,000 are estimated to have been killed, and by the middle of 1998 the United Nations estimated that there were still close to two million refugees living in the countries of the former Yugoslavia or in other countries. Another war had started by the middle of 1998 in Kosovo, an autonomous province of the Federal Republic of Yugoslavia, where representatives of an ethnic majority of Albanians started fighting for their own separation.

The geopolitics of the war in Yugoslavia are extremely complex, with an extraordinary variety of regional, national and local permutations. Behind the horrors of ethnic cleansing, concentration camps, and the destruction of so many neighborhoods and old buildings have been a tangle of animosities that were inflamed by nationalist rhetoric and led hundreds if not thousands of people to betray their friendships with neighbors and those with whom they had lived peacefully for many years. The result of the fighting is a new arrangement of states which are troubled by the economic devastations of war, and in which a significant number of citizens have deep feelings of resentment, betrayal, and an enduring desire to see those who were responsible for the war be held accountable -- whomever they may be in their eyes.

Croatia is recovering the most quickly of the three countries, even though there are still regions in the western part of the country bordering Bosnia and the Federal Republic where the physical infrastructure is still damaged and the economy is suffering. They have achieved the independence they had hoped to with secession from Yugoslavia, although at considerable cost. The Federal Republic of Yugoslavia is still suffering severe economic decline brought on in part by international sanctions during the war, and is now involved in what may well be another long war in Kosovo.

The most complicated of the new states is Bosnia. Under the terms of the Dayton Accord, it was divided into the Republic of Srpska, which borders what is now the Federal Republic of Yugoslavia (FRY) and is predominantly Serbian, and a federation run jointly by Croats and
Bosnian Muslims, with a joint federal government and 10 cantons. Because the cantons tend to be ethnically polarized -- with one dominated by Muslims and another by Croats -- it is difficult to secure agreement on many things at the federal level. Most initiatives are made at the cantonal level as a result. Anything resembling a national plan is virtually impossible to realize at this stage, as is anything resembling a true nation.

The psychological dimensions of the war have been as complex as the geopolitical dimensions, and make it impossible to understand the trauma of individuals without reference to larger circumstance. When discussing the traumatic effects of the war in the former Yugoslavia, it is often difficult to isolate cause and effect. The war went on a long time, and many suffered a cumulative trauma that was the result of a series of violent disruptions, shocks and losses. Many people, including large numbers of children, witnessed the death or serious injury of others or were themselves shot at or seriously injured, lost loved ones and neighbors, or suffered extensive physical deprivation from hunger and cold. Some were tortured and raped, and many felt vulnerable and exposed for months on end.

But in addition to the immediacy of such horrors, many lost their identity and sense of place in the world, and many lost their faith in humanity and enthusiasm for life. In all countries of the former Yugoslavia, there are many who took great pride before the war in their identity as citizens of Yugoslavia, which was regarded by many in the world as the most progressive and open of the communist countries. Significant numbers had spouses and friends of other ethnicities, which at the time was regarded as a source of enrichment rather than conflict. They have great trouble now accepting the reduction of their identity to a single ethnicity, and many grieve the loss of friends whom they cannot visit anymore because their ethnicity forced them to flee to another country. Many wistfully remember old friends, and wonder whether they would still be friends today given the deep divisions left by the war.

While the fighting in Bosnia and Croatia has stopped and peace has allowed most people to get on with their lives, the situation remains both complex and volatile. In a summary of the situation written in June 1998, the United Nations High Commissioner for Refugees offered the following assessment:

"The underlying causes of the situations which led to the conflicts and to the forced displacement of people have not yet been removed. Those responsible for the armed conflicts which ravaged the region and the forced displacement that was often the objective of the conflict have remained in power, and many have not demonstrated that they have abandoned this objective, for all they may profess otherwise. This is why, two and a half years after the advent of peace, minority returns have barely begun, despite the commitment of some leaders and the tremendous efforts of the international community.

Failure to resolve the problem of displacement in the region would maintain and reinforce various ethnically-dominated political and
economic systems and different standards of living, and the economic, legal and administrative marginalization of minorities. Social tensions would increase and could again lead to violence.”

Since Yugoslavia was part of Eastern Europe, they are also beginning to confront many of the transitional problems that other countries of Eastern Europe have had to face in the decade since the fall of the Berlin Wall and the collapse of the Soviet Union. Social, economic and psychological problems that may have been so clearly the result of war a couple of years ago have now become part of a larger landscape of social problems that is harder to define and for which the solution of peace is not enough. One psychologist who first visited Sarajevo in 1993 wrote after the war:

“As time passes by, the acute and overwhelming psychological effects of the conflict have become less prominent. People somehow seem to adapt to the direct consequences of a disaster which turned their lives upside down and brought them loss and despair. Life goes on, and nowadays people are confronted with the long term consequences of the war, for which trauma theory has no solution. Daily life in Bosnia has turned into a new situation which can best be described as a steady state of unsolved problems. We should recognize that a major part of peoples' problems is no longer caused by acute traumatization but rather by such factors as material want, insecurity about the future and rage about unsettled scores.”

In the Federal Republic of Yugoslavia, there was little actual fighting but a steady influx of refugees during the war and an economic decline under international sanctions. Much of the anxiety is now a response to conditions that most closely resemble those in other countries of Eastern Europe that have struggled to create democratic alternatives to centralized regimes and open their economies to the perils of free enterprise. That struggle has only recently begun in FRY and has not been easy. Many of those interviewed who work with children commented on the increasing problems of family divorce, delinquency, and even drug addiction that have characterized social life in other countries.

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1 A Regional Strategy for Sustainable Return of Those Displaced by Conflict in the Former Yugoslavia, for presentation to the Steering Board of the Peace Implementation Council, 9 June 1998, United Nations High Commissioner for Refugees

2 From 'The Limits of the Trauma Paradigm,' by Andre Pen, MSF Holland, a chapter in Trauma Recovery Training: Lessons Learned, edited by Dean Ajdukovic, published by Society for Psychological Assistance, Zagreb 1997.
Two:

UNICEF's Response to War Trauma among Children and the Beginnings of Psycho Social Programmes in former Yugoslavia

The First Years (1991-94)

It is difficult to reconstruct the details of the early days of UNICEF supported psycho social projects with total clarity or accuracy, but the basic developments can be discerned from interviews with some of those who worked there at the time, and some of the evaluation documents. UNICEF has supported major evaluation efforts in FRY and Croatia that attempt to systematize existing data and critiques of UNICEF supported psycho social programmes that date back to 1992. Those will be referred to more specifically later in the report, where individual countries are dealt with. They are also cited in the annotated bibliography.

Until 1994-95, when UNICEF’s programmes in former Yugoslavia reached their highest levels of supplementary funding support, psycho social programmes were responses to the constantly changing demands of wartime and pressures for quick action. They were emergency interventions more than properly planned programmes. The emphasis was on training those who were not professionals in mental health to be able to respond to the huge numbers of troubled children and to a lesser extent, their mothers. Projects during this period have been described by the area psycho social adviser at the time as “rather ad-hoc.” One measure of just how ad-hoc they were can be gleaned from assessments of half a dozen individual projects in Croatia that took place between 1992 and the present. Budget details for the majority of them are assessed as incomplete.

Early programmes were started by teams of local psychologists, doctors, and pedagogues who were concerned about what the war was doing to mothers and children. Very few mental health professionals had any background in trauma work, and the numbers needing help quickly exceeded the existing capacities of mental health systems. Those psychologists and doctors who did have the desire and ability to help more often than not lived in urban centres that were far from areas of conflict. The first efforts in Croatia were started by a small group of psychologists

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3 Among the early pioneers of psycho social work during the war in former Yugoslavia who were interviewed for this assessment were Arpad Barath and Dean Adjukovic in Zagreb, Veronika Ispanovic-Radojkovic in Belgrade, and Melita Sultanovic and Mirjana Havrak in Sarajevo.
and doctors in Zagreb in late 1991. Among them were psychologists at the university who had spent close to a decade promoting creative problem solving activities for young children in schools. When the war started they began working with children in Dubrovnik on the Adriatic Coast and Vukovar, a Croatian town on the border with FRY. These were the scenes of some of the worst of the early fighting. They trained teachers in how to use drawing, poetry, story telling and other creative activities as a means of allowing children to express how they felt about their experiences. The only indicators they had at that time that told them whether their approaches were working were children's drawings. If more flowers and sunshine and smiling people began to emerge after a few sessions, they were confident that things were improving. They had none of the complex battery of psychological questionnaires that predominated a year or two later. The UNICEF publication 'I Dream of Peace,' a collection of children's wartime drawings, came from those early efforts. In FRY, staff at the Mental Health Institute in Belgrade had been aware of the need for some kind of psychological assistance to children and mothers since they started seeing refugees coming back from Slovenia in 1991, and started to assemble teams to work with refugees children and mothers.

UNICEF has been credited by several of those interviewed with being the first major international relief organization to support efforts to provide psychological help to war traumatized children in former Yugoslavia. The organization's involvement began in 1992 with pilot projects in Croatia, and built upon the art therapy being done then. Much of the original support for the organization's participation in psycho social work aimed at alleviating war trauma among children came from UNICEF's European regional office in Geneva. UNICEF subsidized the first major training seminars of teachers given by the team that started the art therapy, setting a pattern of teacher training for virtually all future programmes supported by UNICEF. Initial collaboration was with the Ministry of Culture and Education and the Health Psychology Department at the School of Medicine at Zagreb University, where UNICEF's Area Advisor on Psycho Social Programmes had worked until the summer of 1992. Later in the year UNICEF began its involvement in Bosnia, where war had started in April 1992. A similar group of psychologists and pedagogues there had first reacted to growing signs of stress among children by trying to educate parents and teachers. As part of UNICEF's initial response in Bosnia, the executive director tried to organize an ultimately unsuccessful 'week of tranquility' and the organization provided blankets and other relief supplies.

At that time, the UN lead agency for former Yugoslavia was UNHCR. By comparison, UNICEF's operation and accompanying public profile were small. By contrast with other emergency relief operations in the past, in which UNICEF was often called upon to be the lead agency because of its existing operations in the country, it had no office in Yugoslavia when the war broke out. It would never have a particularly large programme there when compared to

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4 Rune Stuvland, who coordinated UNICEF support to psycho social programmes as an area advisor covering Croatia, Bosnia and Federal Republic of Yugoslavia until 1995, has run the psycho social programme for UNICEF in Bosnia-Herzegovina since late 1995.
either the scale of need or some of its bigger relief programmes in other parts of the world. It began its support in 1991, and its budget of supplementary funds in 1992 for programmes in Bosnia and Herzegovina, Croatia, Federal Republic of Yugoslavia, Macedonia, Montenegro, and Slovenia totaled just under 20 million dollars. That figure dropped to just over 13 million dollars in 1993, and hovered at or above 20 million dollars through 1994 and 1995 before beginning a rapid descent to a 1998 figure of just under 3 million for Bosnia and Herzegovina and Federal Republic of Yugoslavia. By 1998 the total amount of its supplementary funding since the beginning of the war was just under 100 million dollars, and UNICEF had plans to close its office in Croatia by the year 2000.

With a low profile, a small budget and limited distribution of supplies, and most of the large scale movement of relief supplies handled by UNHCR, UNICEF's psycho social projects assumed a prominent place in its overall programme. It provided the organization with an unusual niche in the larger anatomy of relief organizations operating during the war in former Yugoslavia, and a set of activities that were relatively inexpensive when compared with the huge costs of feeding and clothing thousands of refugees and others displaced by the war. In part because of its modest presence, UNICEF was criticized a number of times during the war for not doing enough.

UNICEF established an area office in 1993, and had offices in Zagreb, Sarajevo, Belgrade and Skopje (in Macedonia), and various other sub offices in different places at different times. The organization employed psychologists to oversee its psycho social programmes, which were aimed at training those who worked most closely with children in the basics of psychological trauma. They included school teachers, psychologists, and primary health care workers. Those who were trained were expected to be able to detect symptoms of stress induced by the war and were equipped with lesson plans and other suggestions as to how to respond. Serious cases were to be referred to professional psychologists. Until UNICEF's partnership with UCLA's trauma psychiatry team in 1997 focused on adolescents, all of its programmes had involved pre-school and primary school children.

By the middle of 1994 UNICEF began to restructure its offices in former Yugoslavia. The psychologists who had been in charge of running psycho social programmes left the offices in Zagreb and Belgrade, which meant that UNICEF no longer had full time psycho social officers in those countries. Supplementary funding had increased, and in both Croatia and FRY the programmes began to evolve into or be replaced by ones that more closely resembled some of the organization's global programmes in education and CDC (Children in Difficult Circumstances). At that time in Croatia, support for psycho social work in schools began to wane in the Ministry of Education and such programmes became more marginal than before.

In both Croatia and FRY programmes started to turn from an early emphasis on treatment of war trauma in children to a broader menu of projects that had evolved by 1998 into programmes in peace education and interactive learning. Only in Bosnia, where the fighting remained intense and widespread until the war ended in late 1995, did UNICEF continue with a specific focus on programmes to treat traumatized children. Those programmes continue to this day, and provide an example of how such a programme looks if it is allowed to develop over time. This is due
largely to the fact that the area advisor for psycho social programmes went to work full time in Bosnia in 1995, and has since devoted himself to further stages of psycho social programming there.

UNICEF’s support to psycho social work was part of a larger pattern of international aid agency response during the war. War trauma psychology became very popular among aid agencies, reaching its peak in Croatia sometime around 1993, and then in Bosnia in 1994. Many now regard the international community’s interest in treating war trauma to have been one of the major trends in aid agency response during the war. In Bosnia, the first major response to the psychological dimensions of the war came with widespread reports of rapes early in the war (1992-93), which broadened after that into a concern with war trauma, and then moved from there as the war ended to the current programmes in reconciliation and conflict resolution. One attempt to quantify what was done in psycho social projects by the international community listed at least 130 different organizations that were operating during the peak of the war years (1992-95).5

As with all large relief operations, the sudden invasion of hundreds of different organizations put terrible burdens on those living in former Yugoslavia who were trying to cope with the chaos. In psycho social work, a number of teachers went through several training sessions on post traumatic stress from several different organizations. Many were given introductory courses again and again, and treated as though they knew nothing. This was tiring and disheartening to many. In other cases, ambitious relief agency staff who had just arrived were promoting approaches to the delicate problems of ethnic divisions and war memories that were culturally naive. There were visiting psychologists who got close to children who had lost their families and then left after a couple of weeks, thus reinforcing the trauma of loss. But there were also a number of international organizations that contributed indispensable support to people who needed the comfort of international solidarity as much as they needed relief supplies. UNICEF was clearly one of them.

Now almost three years after the fighting stopped, a number of mental health professionals who have been involved in psycho social programmes in the countries of former Yugoslavia worry that the international community has shifted its concerns and funding priorities too soon. Within two years of the Dayton Accords, most of the organizations that had been involved in psycho social programmes had moved into conflict resolution or other types of rehabilitative programming. Yet it is an established fact among mental health professionals that some of the worst symptoms of war induced trauma come well after the war has ended and there is a return to peace. That may mean months, and in some cases it may mean years. That is also the time when those who have been affected by trauma stand the greatest chance of being able to understand what has happened and integrate it properly into their self understanding. In a cruel irony, international interest and funding for psycho social programmes to help heal war trauma has

5 Theory and Practice of Psychosocial Projects Under War Conditions in Bosnia-Herzegovina and Croatia, by Inger Agger, European Commission Humanitarian Office, 1995
virtually disappeared at the very time it may be the most appropriate.

The Broader Debate About War Trauma

The psycho social work that has been done in former Yugoslavia reflects a range of opinion among professionals in trauma psychology and disaster relief about how best to help those who have been traumatized by the loss and disruptions of war. While much of the debate appears academic at times, some of the broader themes are helpful to a fuller understanding of what was done in former Yugoslavia and why. What was done by UNICEF and many other relief agencies was an adaptation of modern trauma psychology to strategies of intervention through community networks or social institutions such as schools, hospitals, and in refugee camps.

With literally hundreds of psychologists working at one time or another in former Yugoslavia during the war, there were many different approaches to dealing with trauma in children. None of them ever proved itself to be the sole antidote, and while a number of efforts have been legitimately criticized as amateurish or hindered by ignorance about war conditions in a part of the world with which most of those visiting had little familiarity, there were some efforts that proved extremely helpful to those teachers, parents and children who were in serious need at the time.

The thinking of much of the international aid community about how best to help heal those who have been traumatized by war has been articulated in the study on the impact of armed conflict on children headed by Graca Machel, excerpts of which are worth quoting here at some length.

"Experience has shown that with supportive care givers and secure communities, most children will achieve a sense of healing...
Integrating modern knowledge of child development and child rights with local concepts and practices will result in more effective and sustainable ways to meet children's needs. Although many symptoms of distress have universal characteristics, the ways in which people express, embody and give meaning to their distress are largely dependent on social, cultural and political contexts and are based on different belief systems.

A number of activities have been identified as supporting healing by fostering in children a sense of purpose, self-esteem and identity. These include establishing daily routines such as going to school, preparing food, washing clothes and working in the fields; providing children with intellectual and emotional stimulation through structured group activities such as play, sports, drawing, drama and story telling; and providing the opportunity for expression, attachment and trust that comes from a stable, caring and nurturing relationship with adults...
Rather than focusing on a child's emotional wounds, programmes should aim to support healing processes and re-establish a sense of normalcy... The most effective and sustainable approach to recovery is to mobilize the existing social care system."

Mental health professionals have contributed their particular concerns to this debate by emphasizing the importance of doing the very thing the Machel study seems to recommend against, which is to focus directly on a child's emotional wounds. Modern trauma psychology is based largely on the notion that the only way to alleviate the worst symptoms from events or processes that subvert or violently threaten one's sense of self and confidence is to confront or in time otherwise come to understand the experiences which generate crippling fears. This must be done in order to integrate what was essentially an aberrant experience into a larger, more normal life that is healthy and productive. What they have added to the programmatic response is a desire to find ways to provide some degree of therapeutic intervention to the most severely traumatized, or those who are not included in the majority who can be expected to heal with a return to peace and some stability in family and social life.

An example of the kind of programme response this concern has generated is the UNICEF/UCLA School Based Programme for War Affected Adolescents that is now being done in secondary schools with adolescents in Bosnia. In a report written early in 1998, UCLA psychologists explain what that means in programmatic terms:

“This programme is primarily a “second tier” (specialized and focused) intervention due to its aim of identifying and treating students with histories of severe war-related trauma and who are at high risk for experiencing chronic, severe post-traumatic stress and associated disorders, including depression, complicated bereavement, and developmental disturbances. In addition, the programme incorporated some elements of a “first tier” (general) intervention, including psycho education-oriented classroom discussions and presentations to parents and teachers.”

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6 Impact of Armed Conflict on Children: Report of Graca Machel, Expert of the Secretary-General of the United Nations, Selected Highlights
7 School-Based Programme for War Affected Adolescents: Progress Report, UCLA Trauma Psychiatry Team, May 28, 1998
In an earlier report, the same authors explain the objectives of the project as follows:

"The overriding therapeutic goals are to prevent adolescent high risk behaviors and to promote normal progression in adolescent development... in contrast to war-time intervention programmes, this intervention programme combines re-exploring past experiences, addressing current adolescent concerns and promoting pro-active efforts to improve their own post-war environment and adjustment."8

The majority of psycho social programmes during and just after the war were a combination of the kinds of activities recommended in the Machel study and those which were intended quite specifically to directly address the subject of trauma. Many teachers and counselors were trained to engage in everything from play and art therapy for younger children to actual counseling for those older students who had behavioral problems related to what they had experienced during the war. These were the beginnings of interactive methodologies which a number of teachers now cite as one of the greatest legacies of the psycho social interventions. If programmes were done early enough in the war they were intended to have preventive value by encouraging enough communication about the experience to prevent it from being suppressed and emerging later in far more complicated behavioral and personality problems. There were also many projects designed to educate care givers and parents about trauma, and the majority of these assumed the form of lectures. There were some teachers and counselors who had training sessions in many if not all of these approaches.

Another one of the psychologists who designed the UCLA project, which clearly falls on that end of the spectrum dealing directly with individual trauma, offered the following observations about the programmes involving non-professional care givers in a trip report he wrote in the middle of 1996 following a visit to Bosnia-Herzegovina. What follows should be understood as a reflection of a trauma specialist whose interest is in helping the minority who are severely traumatized. It also hints at the often nuanced debates among specialists as to what constitutes real trauma work and what does not.

"As part of the Mostar second level of training, teachers and pedagogues are taught to do individual and group counseling. It is their experience that teachers and psycho pedagogues differ widely in their ability to perform these more sophisticated services. Much training and on-going supervision is necessary.

8 UCLA Project Proposal to UNICEF Bosnia and Herzegovina, School Based Post War Psycho Social Interventions: Methods and Evaluations for Period of September 15 - December 31, 1997
(Two colleagues) felt that simple art and expressive therapies do little for trauma related problems. Instead they felt that efforts at psycho social education need to improve parents' understanding and responsiveness to their child while specific cognitive and behavioral methodologies may be applied to help children develop pragmatic adaptive and problem solving skills."

He believed that the various art therapies and other sharing strategies taught in workshops of a few days at most to teachers and pedagogues did not constitute real trauma work for those who are most in need.

"... we believe that the exercise and activities are weighted heavily in terms of solving problems and developing concentration, creativity, and communication skills, primarily within various artistic media.... we are concerned that this work does not offer the type of specialized psychological trauma-focused work which has been found to benefit children who suffer from significant traumatization and co-morbid psychiatric conditions."

Other professional psychologists with extensive experience working with traumatized children during war have come to doubt whether any of the therapeutic interventions that are offered under limitations of time and various cultural and linguistic differences ever really heal the deepest trauma. It is far better to devote limited financial and material assistance to the restoration of the kinds of support structures and opportunities that will assist whatever natural healing is possible for the majority, a point of view that is consistent with the Machel study. If a young person who has been traumatized during a war has a choice between psychological counseling and vocational education, it may be more important in the long run to get the vocational training so that he can get a job and move on with his life.

But there is some evidence that many of these interactive activities had therapeutic value during the war, even if their effects proved only temporary in the long run. Similar questionnaires were used throughout the war by many organizations to assess the effects of war trauma on children.

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9 Travel Report by William R. Saltzman, Ph.D., Consultation Trip to Bosnia-Herzegovina, June 16-August 2, 1996
10 Interview with Neil Boothby, a child psychologist who has worked with traumatized children in Cambodia, Mozambique and Rwanda and is now head of programmes for children at UNHCR in Geneva, June 1998.
and the effectiveness of different programmes, and some programmes were able to set up limited experiments with control groups to provide some measurement of the differences between those children who participated and those who did not. In the case of the art therapy that was questioned above, surveys of children in the months after the programmes did indicate that as many as a third reported a reduction in many of the more troubling symptoms.

Perhaps the most realistic way for non-specialists to appreciate what was done is to view it on a continuum rather than seek a particular approach or measurement that is definitive. Most of those who have either lived with their own trauma or worked closely with it for long enough know that it is not something that ever fully heals or goes away. That is not really the point of therapeutic interventions. The objective is instead to prevent the aggravation of symptoms that turn normal people into dysfunctional people – excessive, intrusive and recurrent memories, an inability to sleep properly, fears that prevent one from visiting certain places or talking about certain people, and deficits in self-confidence that prevent one from moving ahead with one's life. If taken a bit further, it is to enable one to understand what has happened to oneself as an “expected reaction to an abnormal situation,” in the words of one of the prominent Croatian psychologists, hopefully enough to be able to integrate the experience into the larger context of one's life in such a way that it is no longer crippling or intrusive.

When questioned, most psychologists admit that the best one can really hope for is to learn to live with the experience. And all admit that the majority will recover on their own. For a small number, it is an experience from which one can grown and learn. Some of the most meaningful characterizations of what was done came from those who employed literary metaphors rather than technical explanations. One pedagogue in the Republic of Srpska described the purpose of the various educational programmes on trauma for teachers and children as efforts to ‘cleanse the wound’ so it would have a chance to heal. And a psychologist who did art therapy and other interactive programmes with children in both Croatia and Bosnia said that the real objective of different group activities fostering self-expression was “to turn the victim into a hero.”
The Programmes
Three:

UNICEF’s Country Programmes in Bosnia-Herzegovina, Croatia and Federal Republic of Yugoslavia

As already mentioned, the programme in Bosnia-Herzegovina is the only one in which psycho social projects aimed at dealing directly with war trauma still constitute a major part. It was only just beginning to move into interactive learning and CDC programmes as this review was done in the middle of 1998. The programmes in Croatia and FRY, which suffered less from the war than Bosnia, have now evolved into a number of post-war initiatives in conflict resolution, interactive learning, self-esteem enhancement programmes, and others that often build on what was done initially in response to childhood trauma. While the Bosnia programme offers an example of where a psycho social programme might go if it was allowed to mature, the other two provide examples of a more traditional evolution from war time trauma work to post-war work in various rehabilitative educational programmes.

As is the case with relief programmes in virtually all wars and other large scale disasters, quantification is a problem when trying to assess what was done during the wars in former Yugoslavia. It is easier to trust numbers used by particular projects or surveys, in which registers of participants exist or in which estimates are small enough not to be grossly exaggerated. When one says that 500,000 children have benefitted from a particular programme, it is hard to know what that means because there is no way of telling the degree to which individual students benefitted. In one creative response to the problem of numbers, a woman who coordinates such projects for one of the UNICEF country offices has concluded that it is when one can no longer count with any confidence how many people have been involved in various workshops and training sessions that one can be confident that the programme is beginning to have a real impact. In what follows, numbers are used to provide a sense of scale, but should only be regarded as approximations.

Far more important than the numbers is the remarkable consistency of conclusions and insights offered by teachers, psychologists and pedagogues in all three countries about what programmes to train care givers have done and not done for both care givers and children. Equally consistent are their conclusions about related constraints to full realization of many of the projects’ stated objectives. This makes it possible to generalize about all of the programmes in the former Yugoslavia and still come up with meaningful conclusions about what happened. The following sections are an attempt to summarize what has been done in different programmes in each of the countries before a fuller discussion of major lessons.
**Bosnia-Herzegovina**

There has been no effort yet in Bosnia-Herzegovina to do the kind of comprehensive assessments of the different UNICEF supported psycho social projects that have now been completed in FRY and is ongoing in Croatia. Both of those efforts have been undertaken by UNICEF in collaboration with national governments, which makes a similar undertaking in Bosnia highly unlikely for now. Unlike either Croatia or FRY, in which UNICEF has had strong government and national partners, such was not the case in Bosnia.

Until the war ended in late 1995, UNICEF did its psycho social programming by engaging a variety of different international partners. In a paper on lessons learned from various forms of partnership written in early 1995, the UNICEF Psychosocial Project Officer in Bosnia lists six institutional partners (universities in Israel, Germany, United Kingdom, Netherlands and Norway), two implementing partners (universities in United Kingdom and Ireland), three NGOs, four individual consultants, and one classified as 'other' (an international association of child psychologists). At one time or another, individuals from these institutions and organizations were hired on short term consultancies to do screenings of children, assessments and evaluations, develop training manuals, and conduct short training seminars for teachers or other care givers. In the end they probably offered training sessions of varying lengths and quality to perhaps several thousand teachers, who in turn transferred some part of what they learned to perhaps several thousand more students. But because of the short duration of most of their contracts, it is difficult to assess how much of an impact they really had.

In that same paper, UNICEF's Psycho Social Advisor noted that "From an initial phase of short-term consultancies, it has been recognized that it is important to establish more comprehensive agreements between external partners and national counterparts. Although there have been constraints in developing such partnerships, it seems clear that implementing partners may contribute significantly to a project's success."\(^{11}\)

In 1995 the University of London became an implementing partner, thus beginning what was to date the most comprehensive relationship UNICEF had with any partner. University staff went to Mostar, where they were contracted in full to train primary school teachers and, with the help of funding from the European Union Administration, set up a child mental health clinic. They had first worked with UNICEF in the middle of July 1993, and first went to Mostar in September 1994. They surveyed over 3500 children between the ages of 9-14 to determine their reactions to

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\(^{11}\) UNICEF Psychosocial programme in Former Yugoslavia and External Partners: History and Experiences – From Consultants to Implementing Partners, by Rune Stuvland, Zagreb, 23 April 1995
the fighting and various degrees of traumatic symptoms, and they gave a series of introductory seminars to over 400 elementary school teachers in 19 primary schools in and around Mostar which were estimated to serve over 11,000 children. In 1996 they started working in surrounding villages. They later repeated the seminar with over 1500 other teachers in and around Zenica in Central Bosnia. Training sessions were conducted at two levels (referred to as 'tiers'). All teachers got four introductory seminars, and selected ones received advanced training to equip them to work with children individually or in small groups. University partners from Israel and Missouri in the United States also had psychological staff doing training programmes at that time in Bosnia.

One psychologist from the university actually resided in Mostar for a year, and was followed by another who did the same. Teachers interviewed at the counseling centre in the summer of 1998 said this was one of the most significant parts of the programme, because it gave them someone they could get to know and trust because he actually experienced events with them. His extended presence also allowed him to understand the problems in far greater depth than he would have had he only made occasional short visits.

Referring to his earlier work as a consultant who flew into Bosnia and did brief seminars, one of those involved in the project later offered the following summary.

"... it was quickly realised that these one-off hit-and-run training sessions may have helped raise awareness among politicians of the need to consider the effect of war on children, but they were insufficient to train people in new skills to deal with traumatic stress...

There was clearly no point in our implementing a model of service delivery that relied on individual or family approaches as there were no local professionals available to work in such a way and, in any case, the numbers needing help were overwhelming... we took the deliberate decision that a public health approach towards the delivery of child mental health services should start with the institutions that remained most intact – the school system."

The work started by the University of London in Mostar has continued, but at a much reduced scale. The counseling centre continues. In December 1997 they had 28 new referrals, and by the middle of 1998 the director reported that about 125 children had visited the clinic so far that year.

12 Patrick Smith, the psychologist from the University of London, supervised the programme from 1995 until early 1996, and was followed by David Schwartz, an American psychologist from Tennessee who supervised until March 1997.

with problems of bed-wetting, separation anxiety, sexual abuse, and PTSD.

In late 1997 UNICEF started working with the Trauma Psychiatry Team from UCLA (University of California in Los Angeles) on a school based programme for war affected adolescents. It is the first major programme to deal with adolescents, a part of the child population which many resisted working with during the war. Adolescent experience of war is more complicated, and therefore more difficult to treat than that of younger children. In the only attempt at a longitudinal study of children in Sarajevo, based on surveys of students in 1993, 1995, and 1997 by the University of Sarajevo, psychologists there found that family separation and a general state of fear were the most common problems of younger students, but among older students there were many who had served in the military on front lines, witnessed massacres and killings, and lost personal friends. They were old enough to grasp the severity of such losses, but did not have the experience of adulthood to protect them. In the opinion of a number of psychologists interviewed, they were the ones who were most likely to have serious PTSD after the war.

The programme has concentrated on schools in the Republic of Srpska, where presentations on PTSD are made to parents, teachers and school administrators, and approximately 100 students per school are screened to identify the 15 among them who report the highest levels of trauma and distress. Those students are then divided into two groups of six or seven students, who participate in a 16 session group treatment programme. By the end of May 1998, they had surveyed almost 900 students and interviewed 116 students, had held 30 classroom discussions in 10 schools, and had 60 students participating in the group programme. This was intended as a pilot project, which in coming months they hope to expand to all other schools in the Republic of Srpska.

The UCLA team is training psycho pedagogues – those pedagogues with some background in the fundamentals of psychology – to work with teachers on this project. Pedagogues have generally been part of school staff in the former Yugoslavia to advise and monitor teachers on implementation of the curriculum and serve as counselors for children who have learning difficulties or other problems at school, but they have not had the same standing as many teachers do in the system. One of the benefits that the project's designers hope will come with the programme is to give pedagogues a new role in schools and more specialized training.

In a progress report from May 1998, the head of the programme noted that it has been very well received in areas that were directly exposed to war-related conflict or had significant numbers or refugees, but that in those schools in which there was not a clear need for the programme, group leaders encountered resistance from administrators, teachers, parents and even the students themselves.

The UNICEF Psychosocial Project Officer in Sarajevo is due to leave at the end of 1998, but the new area representative has plans to continue the post for another year or two depending upon the availability of funding. He feels it will be important to have someone doing psycho social
work in the next few years in the region, particularly with the war in Kosovo, but he does not feel that the work necessarily needs an exclusive focus on trauma work. Other programmes such as those currently being done in Croatia and FRY may be just as appropriate, and more in keeping with whatever skills the successor to the current advisor brings if it is not a professional psychologist.

Croatia

In Croatia, as in Bosnia, UNICEF has been credited by several of the Croatian educators and psychologists who started the first psycho social projects early in the war with being the first international organization to come in and support their work. The period from 1991 to 1994 is difficult to reconstruct because so much of what UNICEF did was part of a rather chaotic period in which a variety of national and international organizations were responding to problems created by war. But because of a recent effort by UNICEF and the Ministry of Education to assess psycho social projects starting in 1992, it is easier to do so in Croatia than in Bosnia.

A number of efforts from those early years have since grown into more stable programmes. One organization which had its origins in the first days of war relief was started by a group of psychologists and others concerned with mental health during the war and evolved into the Society for Psychological Assistance, which is now one of the country’s leading NGOs. UNICEF was one of its early supporters.

When the current representative for UNICEF’s Croatia office arrived in 1994 she found a cluster of projects and activities without the coherence of a planned programme. When she brought together the various people involved in psycho social work in Croatia in early 1995, she discovered that many did not even know each other. When she prepared the country plan for 1996-98 in 1995, the theme was rehabilitation and development, a deliberate attempt to move from the confusion of emergency to more systematic change. Many of the programmes that were included had components of the Life Skills work she had done at UNICEF headquarters in New York, with emphasis on communication skills and other forms of interactive learning which characterize the education and CDC programmes of today.

In an evaluation of UNICEF supported psycho social programmes from 1992-96, the Ministry of Education has divided the work into seven different programme headings which provide a good summary of where UNICEF’s support was given.\(^{14}\) They include the following groups of

beneficiaries, with the years which were evaluated:

- **War Affected Pupils (Primary Schools):** 1992-95
- **Preschool Children:** 1993-95
- **Children in Centres for Displaced Persons:** October 1994 to February 1996
- **Step by Step (12 Step Programme) for Recovery for children given in libraries:** 1994-95
- **Mental Health Care for Children and Adolescents in various primary health care institutions:** May 1993 to October 1994

For the longest running programme, that of assistance to pupils in primary schools, it is estimated that 4,000 teachers and “several thousands of pupils” were involved. The project summary contains a long list of project collaborators which includes psychologists, pedagogues, special teachers, social workers, physicians, nurses, pupils and parents. It focused initially on war affected areas, and later to those areas under UN supervision during the war that were returned to Croatian authority after the war. The objectives of the first efforts were the reduction of trauma, the education of parents and teachers, longer term goals of building networks among various experts, and ultimately using the project as a replicable pilot. Since 1996, it notes, “the project has been focusing specially on curriculum and out-of-school activities covering free time, together with the combining of relaxation, adaptation-socialization, reaction-sport, and creative techniques.”

The pre school project, which was done in kindergartens, play schools in camps for refugees and displaced, and after 1995 in libraries and pediatric services, is estimated to have “covered directly about 400 educators and 42 kindergarten psychologists and through them some 3,000 displaced and refugee children, and 2,000 parents. 1874 children were screened. Additional 500 educators (and about 1,000 children) were included through supervisors’ workshops and other forms of transfer of knowledge.” After 1995 it is estimated to have covered about 10,000 children. The other projects have been smaller, and the numbers of beneficiaries are counted in the hundreds or less.

Much of what UNICEF provided was financial and material support from training and education. To take one example from one project done between September 1994 and March 1995, another one working through primary health care institutions, UNICEF is reported to have financed part of the project, which included “One day instructive seminar for interviewers, field gathering of data about children, two day seminar with elaboration of results obtained by the analysis of questionnaires and consultations concerning production of the plan to help wounded children.”

As mentioned before, some of the techniques used to help children express their feelings during the war – such as art therapy – have been used subsequently in interactive programmes that are now meant to enhance children’s ability to communicate more effectively. Thus a number of efforts that would currently be characterized as ‘education for development’ – such as conflict resolution, interdependence, peace education, knowledge skills, cooperation, etc. – may have had their origins in the kinds of techniques that were applied by those who were initially responding to war trauma.
Two of the programmes supported by UNICEF that are regarded as most representative of the kinds of interactive learning approaches the organization is now promoting in the country's educational environment actually started in response to the war. These are the cluster of art and other participative activities for children in a network of 30 libraries and the Step-by-Step programme, a programme used in schools to bring children through various stages of understanding their own traumas and prejudices to reconciliation and greater acceptance of others. The library project had its origins in the early art therapy projects that UNICEF supported when it first started in Croatia in 1992.

The only programme that has focused specifically on war trauma in the past two years has been one on 'trauma healing and peaceful problem solving' in the primary schools of Western and Eastern Slavonia which is being done by the Ministry of Education and Sports. The first pilot programme was from February to September 1996 in Osijek and Pakrac, with a subsequent year long programme in Eastern Slavonia and Baranja. These were areas affected by some of the heaviest of the fighting between Croats and Serbs. It involves Croatian and Serbian schools children in the fourth and fifth grades. Like others, the project trains teachers and pedagogues, but is intended not only to help children work through their own trauma but help them develop various reconciliation and problem solving skills they will need to make amends with children who were among their enemies during the war.

The biggest concern now – among UNICEF project officers and partners – is the plan to close the UNICEF office in the year 2000. Some fear that the programmes UNICEF has been supporting, all of which are new and somewhat radical within the larger context of education in Croatia, will have difficulty sustaining themselves without continued support. Whether or not that is the case remains to be seen.

**Federal Republic of Yugoslavia**

The Federal Republic of Yugoslavia had a different experience of war than either Croatia or Bosnia. The extensive fighting that occurred there did not occur in the FRY. But there were many refugees who came to the country during the war, culminating in a mass arrival of perhaps 200,000 refugees in a three week period in late 1995 from the Krajina. While Bosnia-Herzegovina has by far the largest numbers of people who have been displaced and need permanent homes -- as many as 820,000 -- the FRY is estimated by UNHCR to have the greatest number of refugees seeking shelter and homes within its territory of all three countries that were involved in the war. Over 500,000 have come into the country as a result of the war.

During the war as many as 90 percent of the refugees were taken in by families, but with the large numbers of those from Krajina in such a short space of time in late 1995, perhaps only 50
percent were taken in by families and the rest ended up in refugee camps. By then, a network of psychologists and other health workers who were familiar with the effects of war trauma was in place. Mobile teams were sent to the refugee camps in late 1995. Since so many refugees stayed with families, the effects of the war were multiplied several times beyond the individuals who had participated as soldiers or refugees. Children in families that never actually saw fighting watched the war on television, had friends whose fathers were soldiers, and interacted with refugee children at school or at home if their parents took in refugee families.

As has been the case in Croatia, the UNICEF programme started off concentrating on psycho social projects in response to war, but has evolved since then into a broader array of programme options that touch on conflict resolution, tolerance, participation, CRC, and interactive learning. The earliest efforts focused on schools with the greatest numbers of refugees, and then on those schools with the most motivated teachers. One of the early programmes that started in response to refugees involved giving support to families whose parents were worried about the effect that refugees were having on their family life. That programme continues to this day through the Ministry of Education to provide family life education to a number of the more troubled families that have experienced divorce or alcoholism or teenage delinquency and drug abuse -- problems that many now associate with the post-war malaise into which much of the country has fallen.

In an evaluation report commissioned by the UNICEF office in Belgrade that covered psycho social programmes from 1993 to 1995\textsuperscript{15}, it was estimated that in total 14,000 professional staff were trained either directly by UNICEF or by a cascade model in which a core group of trainers in turn trained others, who may have in turn trained others. Among that group were an estimated 10,000 educational professionals, psychologists, pedagogues, and primary and pre school teachers; over 1,000 health professionals and approximately 3,000 social welfare professionals and parents. As many as 163,000 children were estimated to have been helped in some way, approximately 150,000 of whom were primary school children. Most of them received support through what the report describes as "group interventions in the classroom setting," while about 1,000 received individual treatment from school psychologists. In FRY, UNICEF made a conscious decision not to get involved with programmes that dealt with adolescent war trauma, although there is recognition that they now need help. Many of the adolescent problems that other programmes now deal with can be said to have their origins in the war.

One of the more successful programmes that started early in the war and has received UNICEF support has been the ‘Smile Keepers’ programme. The organization was formed in 1993, but

\textsuperscript{15} UNICEF Assistance in Federal Republic of Yugoslavia to Psycho-Social Programmes for Children in Crisis, UNICEF and University of Glasgow, U.K., 1996
those who started it had begun working with refugees back in 1991. This was an example of the cascade model of training that was done in a number of programmes in FRY. An initial group of professional psychologists and educators were trained in different lesson plans that include a variety of techniques to help children understand what happened to them during the war and help them see ways to do something constructive in response. That group in turn went out and trained 20 people in 20 different sites to do their own training sessions, and in that way the numbers trained multiplied and are estimated to have reached about 1300. Most of the trainees were teachers in pre-school and primary school who have done the programme after school or during open periods during the week. When possible, parents of the children in the classes were asked to attend as well. Some of the children who went through the programme a few years ago now train others in similar programmes, and 'Smile Keepers' is now working in Kosovo to bring Serb and Albanian teachers together for training. UNICEF has offered to do the training, which started with an initial group of 18 in April.

As has been the case in both Bosnia and Croatia, some of the mental health professionals have been critical of the rapid shift of focus in UNICEF programmes from psycho social work to reconciliation programmes. One of them is a woman who worked at the Mental Health Institute in Belgrade and was one of the first to respond to refugees arriving from Slovenia back in 1991 by organizing groups of psychologists to respond. She has pointed out that the Mental Health Institute in Belgrade was originally set up in 1962 for all of Yugoslavia, and was in part established to help veterans of World War Two deal with their post war trauma. During the 1970s the early interest in trauma was bypassed by other areas of specialization in psychology among young doctors who themselves had never experienced war. By the time the war started in 1991, there were very few psychologists who had any background at all in the subject. She is afraid that the opportunity to take advantage of this war experience and train a solid network of professionals may be lost again without continued support.

16 Dr. Veronika Ispanovic-Radojkovic, a consultant on Primary Health Care Based Psycho Social Programmes for Children and Adolescents
The Assessment
Four:
The Assessment

The Difficulties of Assessment

As previously noted, it is virtually impossible to quantify what was done in the numerous UNICEF supported projects in psycho social work in the countries of the former Yugoslavia in any truly meaningful way. It is possible to draw a set of conclusions based on their impact on certain groups of beneficiaries and upon their implications.

What UNICEF promoted was not psychotherapy, but support to a variety of care givers who needed help responding to traumatized children. Some of what was done had therapeutic benefits on the children, but it is not known exactly how much except in a very small number of cases. What UNICEF supported was something much closer to community education and introduction of interactive techniques, and only in a smaller number of cases – particularly those after 1995 in Bosnia – some programmes that were focused quite specifically on providing therapeutic settings for the most traumatized children.

What was provided was primarily not material support, so that it is difficult to size it up in physical terms, and it was in an area which is both experimental and can only be judged successful in terms of the extent to which it changes individual behavior or self-perception. Most of the programmes were preventive in the sense that they were trying to provide means of allowing children to communicate about their experiences before their emotions developed into serious trauma later on. In a smaller number of cases – the current project in Bosnia with the UCLA trauma psychiatry team, for example – work is being done closer to the time when war experience has developed into actual post traumatic stress.

The founder of The Society for Psychological Assistance in Zagreb, one of those who initiated psychosocial efforts at the beginning of the war, said he is very cautious about assessing what was done in the chaos of the war from 1992-95, during which the goals of individual projects may not have corresponded to what they were actually able to do. So was one of the initiators of psycho social projects in Sarajevo. Some of those who initiated these projects were either naive or overly optimistic about what they were likely to achieve, and although objectives are only meant to provide goals, many now seem unrealistic.

The Gap Between Objectives and What Most Programmes Achieved
The majority of psycho social projects had a variety of objectives, the most common of which were to help those who worked with children to identify signs of trauma and give them a way to respond, to reduce the worst symptoms and in some cases treat child trauma, and to build networks of professionals capable of working with traumatized children. There were a number of permutations on these themes, but these were the basics. Many also promised to enhance self-esteem, or contribute to the development of the child, or help the child better express himself or herself, but they were guided by the larger objective of helping children cope with their trauma.

The gap between many of these stated objectives and what was actually accomplished was often considerable, a point that has been recognized by a few who have tried to do their own assessments on the meaning and impact of all of the work that was done. One small example, taken from the UNICEF supported evaluation of its psycho social programmes in Croatia, illustrates the point. The stated objective of a project set up to care for children in various pediatric services and school health services in 1993-94 was the “prevention, early detection and timely treatment of war-related psychological problems in children and adolescents through education of primary contact health workers and establishing collaboration and network of experts.”

The direct beneficiaries were listed as various experts and professionals within the primary health care system, and the indirect beneficiaries as “the children and families cared for by these services. The number may only be approximated to tens and hundreds of thousands of beneficiaries.” The final summary of what the project accomplished, however, was as follows: “Despite the fact that the project failed to accomplish all of its phases, during the one and a half year implementation period, it brought together hundreds of primary health care and collaborator institution workers who took part in a range of positively rated seminars. Thus, it contributed to the timely identification of and helping to affected children of Croatia.” A number of other psycho social projects were based on similar objectives, and came to similar conclusions.

One of the reasons why there is such a gap is that most of the investment in psycho social projects was in the form of training, at the beginning of the process. In the majority of them, particularly as the war proceeded, there was very little investment in follow up. Teachers were expected to go back to their schools with whatever they had learned and make something happen without the benefit of material support or adequate space or even the psychological support of

17 These include Rune Stuvland, UNICEF’s Psycho Social Advisor, Dean Adjukovic, Director of the Society for Psychological Assistance in Zagreb, and Narcisa Vojnovic, Coordinator of Psycho Social Rehabilitation Projects for the Ministry of Education and Sports in Croatia.
their superiors or colleagues. Too much was expected to come from too little, and the demands for action during the war were both enormous and constant.\textsuperscript{18}

Very few of those interviewed for this assessment were able to speak with great confidence about the most important objectives of the programmes: the effects on traumatized children. There were a number of anecdotes provided by teachers who had seen marked improvements in the behavior of particular students as a result of their classroom exercise or personal interventions. They were no longer afraid to come to school, they reported being able to sleep better at night, they could actually talk about what had happened to them. And there were a small number of follow up surveys done on groups of children who had been through different programmes that indicated a reduction of a number of the symptoms judged to be indicative of serious trauma, often in a statistically significant number of students. But the data has been only partial, and in the words of UNICEF's Psycho Social Advisor from 1992 until the present, they are "suggestive rather than definitive."

**More Measurements of Trauma Itself than Programme Impact**

In the end, there was probably more done to quantify the existence of war trauma with various screenings and questionnaires than the impact of the programmes. Part of the reason for that is that there were constant and large population movements during the war, which made it difficult and often impossible to track students in the months after the programmes began. What may be the only long term study of trauma in children during the war – that done in Sarajevo between 1993 and 1997 – was based on an initial sampling population of 1920 students. When the next sampling was done in 1995, surveyors found only 507 of the original group. Some children had gone on to higher grades, and many families had left Sarajevo.

While important from an academic standpoint -- and quite useful for that minority of projects that looked to identify the most traumatized students -- such surveys often end up quantifying what seems obvious to a non-specialist who does not require the extensive proof that academic minded professionals so often do. The conclusion of the Sarajevo study, which was a very thorough, 50 page analytical report about the meaning of different indicators of trauma in that group of children, included the following: "Psychological screenings carried out among the pupils of Sarajevo primary schools during 1993 and 1995 proved that during the war in Bosnia and Herzegovina children were repeatedly exposed to a number of multiple stressful and

\textsuperscript{18} This valuable insight came from Narcisa Vojnovic, Coordinator of Social Rehabilitation Projects for the Ministry of Education and Sports in Zagreb and the coordinator of the assessment of UNICEF supported psycho social projects in Croatia.

\textsuperscript{19} Children of Sarajevo – One Year and Three Years Following the Beginning of the War: A Report on Psycho Social Screenings in 1993-95, Renko Dapic and Expert Team, Sarajevo 1998.
traumatized experiences which reached their culmination."19 This was hardly startling news, even to those who had never been to the country. But it was one of the few claims that could be backed up with convincing numbers.

There were a small number of real evaluations of psycho social programmes. These are identified in the annotated bibliography and have been referenced throughout the report. But most programmes were assessed by systems of self-reporting, which are not always the most informative. Seminar participants were often surveyed at the end to determine how well the seminars had been presented, and most of those questioned said they thought the seminars were good. In a small number of cases, children too were surveyed after seminars, and the majority of them report general satisfaction as well. But such surveys say very little about how well teachers subsequently apply what they have been taught in seminars, or about how well children take what they have learned to heart and use it to change their lives beyond the classroom. With the exception of a small number of follow up surveys to determine how programmes affected trauma symptoms, there were none of either kind of inquiry.

What Have Been the Major Benefits?

In the end, what was accomplished was often more understandable by implication than anything distinctly tangible. When asked what they think their work amounted to in the end, those who played a major role in psycho social initiatives often mentioned that they had raised public awareness of mental health issues in general, and more specifically of how children are affected by war.

UNICEF’s role, a number have pointed out, was important because it was the first international organization to support psycho social work, and it came early in the war. It was also the only major organization that worked with the existing systems of national education and health rather than trying to set up temporary alternatives. It was also one of the few organizations that seems to have been respected for upholding professional standards during a period when there was a lot of international assistance that was temporary and not always very professional.

The principal benefits of psycho social work can be summarized as follows:

1. The biggest known benefit has been to the teachers, who have said this has given them new ways of relating to students. Others who provided care to children benefitted in this

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19 Children of Sarajevo – One Year and Three Years Following the Beginning of the War: A Report on Psycho Social Screenings in 1993-95, Renko Dapic and Expert Team, Sarajevo 1998.
way as well. During the war it gave them some understanding of behavioral problems among students and how to deal with them at a time when they desperately needed it.

This was the one point about which almost all of those interviewed agreed. During the war there were hundreds of teachers who were probably able to use what they learned in one or a number of the training seminars they attended, and many apparently did. Voluntarism was high then, and one of the ways in which teachers and other adults transcended their own problems was by devoting their attentions to their children. One of those who helped put together mobile teams to work with mothers and children among the refugee exodus of Serbs into FRY during fighting in the Krajina in 1995 said that the most obvious sign that the training sessions in childhood trauma work had an effect was that those who had been trained did not burn out as quickly as those who had not. They were better able to keep their emotional distance and had some intellectual understanding of what they were experiencing.

The majority of caregivers dealing with traumatized children received short training seminars -- normally not more than a few days -- in both the fundamentals of how to recognize signs of traumatic stress in children and in various ways of responding with support. Later many of those same teachers and others received training in a variety of interactive teaching methodologies which allowed them to address subjects such as conflict resolution, child rights, enhancement of self-esteem, mutual tolerance, racial stereotyping, participation, and others that are often referred to collectively as either 'peace education' or 'education for development' or even 'life skills.' The selection of individual subjects has depended largely upon the decisions of individual UNICEF programme staff and various counterparts, and available consultants. In the better programmes offered after the war ended in 1995 -- such as Smile Keepers in FRY, Step by Step in Croatia, and the UCLA project on war affected adolescents in Bosnia -- training sessions last as long as a semester and therefore give teachers and students a chance to process what they are learning and actually grow while doing so.

After the war, the numbers of teachers who were committed to extra work with their students probably declined dramatically. Many were burned out, and turned to their own problems. Many noted that after the war social values changed, and many of those who were more than willing to devote themselves to acts of solidarity with others no longer saw the need to do so. They were willing to delay gratification until the crisis passed, but many fewer are willing to do so now. The poverty of the post-war period has forced many to concentrate on making money any way they can, and only a small minority now do for free what they might have done then. Training seminars are still popular, but for many that is because they may be offered a daily per diem and some enjoyable distractions from the depressing realities of life after war. One psychologist in Sarajevo who was involved in the very earliest efforts to provide care to traumatized children noted that there is a huge difference between those who express enthusiasm for some of the new teaching ideas and those who actually have the courage and commitment to act on them.

But what is left is a small minority of devoted teachers who found a lasting purpose in the new ways of interacting with students. Many of them now report being better teachers as a result
because they can diffuse behavioral problems in the classroom or simply communicate better with their students. They are the ones who make the most of the newer training sessions and programmes in various forms of interactive learning, and continue to respond to their students' psychological problems. In Mostar, where close to 500 teachers were trained by psychologists from the University of London, a few of the teachers who gave interviews noted that of that original group there are probably only a few of them who still work extra hours with their students and try to help them with their problems. But there are those who do, and in most schools there are one or two teachers to whom the more serious behavioral problems among students will be directed. They are the most distinct legacy of the years of training in psycho social work, and now form the nucleus from which new educational innovations will emerge.

2. The benefits to students is less clear, although a small number of follow up surveys have demonstrated that some of the psycho social programmes appear to have helped reduce the incidence and intensity of trauma symptoms.

Some of the teachers interviewed noted that in some cases evidence of symptoms among some of their students has decreased as a result of psycho social projects in which they were involved. They report that students seem happier, better at school work, report not having as many intrusive memories, or are now able to sleep better at night and talk about their experiences more easily. In a few of the attempts that have been made to compare a group of students who went through a programme to a control group of students who did not -- and there have not been more than a small handful of those -- there is some evidence that those who went through the programme have fewer symptoms. But the students themselves have not been subject to much thorough questioning beyond trauma questionnaires, which are aimed at measuring traumatic symptoms weeks or months after a programme against those that persisted before.

A number of psychologists have noted that over time the symptoms of the majority will diminish anyway, so it is difficult to know how many students would have gotten better with time, or for that matter how many might have gotten worse in some ways. The head of the counseling centre in Mostar reported that of the approximately 3,000 children between nine and fourteen years of age that were surveyed within the last two years, the majority healed on their own after about eight months. She realized that if families were able to solve their basic problems by finding an apartment or getting jobs that they would recover without help. This is why the therapeutic aim now is to reach the minority with persistent symptoms who need more intensive therapy.

Something that was not being addressed by UNICEF at the time of the interviews, or many others for that matter, is the large numbers of returning refugees in all countries. A report on trauma

20 School Based Psychosocial Programme for War Affected Adolescents: A Report to Republic
among students issued in May 1998 by the Banja Luka Department of Psychology in the Republic of Srpska noted that "students who described themselves as displaced reported significantly higher total levels of war related traumatic experiences than did the other students." In Mostar, thousands of refugees were expected to return by the end of the summer this year, but the director of one kindergarten who had adopted a 'Step-by-Step' programme in her school and was one of the community's most active professionals in psycho social work, said there was no plan to help them, and no discussions about it with UNICEF.

3. The benefits to the system as a whole have tended to be minimal so far, and psycho social and interactive learning programmes are still only done on the margins of the school curriculum.

One of the greatest potential benefits of the various psycho social programmes is to the educational system as a whole. Some of the current experiments in interactive learning and creative problem solving among students have their origins as psycho social programmes responding to child trauma during the war. But efforts to integrate psycho social and interactive learning techniques into the regular school system have been met with skepticism and resistance in some places, and something closer to indifference in others. These are still regarded as optional or extra programme oddities that teachers will do after school or during that hour in the week that is allotted for all of the lessons that have no place in the established curriculum. The programme of various interactive learning activities in a network of 30 libraries in Croatia that UNICEF has supported originated as art therapy for school children during the war, but in 1994 the programme was so marginalised in the regular school system that its creators looked for a more congenial atmosphere and decided to try it out in public and eventually some school libraries. It has had modest success there.

Progress is being made, but slowly, around the edges, and in very small steps. Family Life programmes have now been approved by the Ministry of Education in FRY, and there is some backing for the 'Step by Step' programme from the Ministry of Education in Croatia despite the fact that proposals for educational reform have not yet been deal with by the nation's parliament. But these are still options, not requirements. One creative approach has been adopted in Croatia, where students training to become teachers at the University of Zagreb can take courses in 'Education for Development,' which covers a broad range of interactive themes such as conflict resolution, child rights, interdependence, life skills, peace education, and others. This is being taught to a new generation of young teachers who have been exposed to the Internet and modern

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Pedagogic Institute and UNICEF, submitted by Ms. Milena Kutlaca, University of Banja Luka Department of Psychology, May 1998
television, so it is far more natural and understandable to them than it would be for many in their parents' generation of teachers.

One of the hopes among some of the mental health professionals who did psycho social work during the war and after was that such efforts would lead to a professionalization of such work. That has not yet happened to any significant degree, although there are now a number of psychologists in all three countries with a basic knowledge of trauma psychology. Much of this work was done by outsiders in collaboration with a minority of those in a system that had virtually no psychologists trained in trauma, and very few in therapeutic techniques. Perhaps the only move in that direction has come at the University of Sarajevo, which in collaboration with UNICEF and UCLA is offering a one year diploma programme in trauma psychology to approximately 32 teachers who already have an extensive background because of their experiences during the war.

**What Have Been the Main Obstacles?**

In addition to the various dilemmas cited in the sections of the report until now, these are perhaps the most significant factors limiting psycho social work in the former Yugoslavia.

1. **There is an inherent limitation in the introduction of new ideas and methods in limited training sessions of several days, which was the standard method of preparing teachers and other non-professionals in mental health subjects during the war.** The enormous and persistent demand to help people during the war probably made this inevitable.

Many teachers have said they would like to have had more training. It is not known how effective the many training sessions during the war really were. With the relative stability following the Dayton Accords of late 1995, a number of what were probably best described as interventions during the war have been replaced by more serious programmes. The training sessions in some of the better psycho social and interactive learning programmes now take place in multiple sessions over a school semester or several weeks, thus more closely resembling courses of study than quick seminars or workshops.

2. **The emphasis has been put on workshops and training seminars, but there is a serious lack of accompanying follow up and systematic support.** One of the greatest concerns is whether or not there will be adequate professional supervision for those who have been trained and begin to work directly with children.

This is closely related to the previous point, and is a point that has been made elsewhere in this report. While both teachers and students have been queried frequently on how well the seminars
themselves have been conducted, far less attention has been put on monitoring the follow up to the seminars. Despite assurances from those who have conducted the seminars that people have been given enough to be effective, there is no real evidence to fully support this claim. Expressions of content or abject praise for a seminar is not an endorsement of anyone's ability or freedom to apply what one has been taught. There have been a number of indications that the degree and kinds of support that are necessary as follow up have either been inadequate or not properly understood.

One of the most comprehensive lists of such problems is contained in an undated document that was probably written in 1997 or 1998 on the workshop approach to psycho social programmes in the Republic of Srpska.\textsuperscript{21} It is a good generic summary of the inherent obstacles that any of these programmes has to face to one degree or another in all three countries of the former Yugoslavia. It is worth noting that the rest of the document praises both the presentations at the seminars and the quality of ideas being offered at them. Included is a list of what are described as 'limitations,' among which are the following:

- Teachers are not used to intensive in-service training and increased personal engagement
- The question of on-going supervision is not resolved
- Work with students identified through the programme as "risky cases" is not developed
- Insufficient integration of the PAS (the acronym for the programme) with other similar programmes in school
- Schools are not used to respecting children's emotions
- Not understanding enough the weight and complexity of duties arising from getting involved in the programme
- A problem of establishing confidentiality and trust in general
- Non-motivation of teachers for more intensive, more complex and not sufficiently enough known activities
- A programme of permanent in-service education of teachers at the level of Republic of Srpska is not defined
- Resistance of school to the novelties: the programme is formally accepted but without any genuine desire for real change in the situation in the school or the teachers themselves; engagement is accepted if extra financial stimulation is provided.

The profusion of training seminars on traumatic stress during the heights of international involvement during the war has prompted criticisms from some and left some unfortunate legacies.

\textsuperscript{21} Limitations and Achievements of Workshop Approach in the programme of "Psycho Social Assistance in School, Republic of Srpska (no date, but probably late 1997 or 1998)
that have been identified since. One head of a child care institution in Sarajevo who had himself been to a number of them and has benefitted greatly from international support, reflected that many of them seem to have been designed more for the benefit of those doing the lecturing than those attending. Far more of a problem is one that was identified by a psychologist who conducted her own assessment of psycho social projects in Bosnia. She noted that some of those who had attended training seminars had received diplomas, sometimes several of them, and as a result felt they were far better trained than they actually were and became resistant to further instruction.

There has also been widespread demand for more and better supervision. This has come from both those who have designed programmes and those who have received training. Some believe that foreigners who are highly trained in trauma psychology are the only ones who can do this effectively, in part because so many of the supervisors and care givers in the former Yugoslavia are still dealing with their own war trauma. In perhaps the only case in which someone has actually monitored teachers who are applying what they learned in training, an American psychologist noted that among the few teachers she observed were those who were reluctant to explore some of the deeper emotions because they were themselves afraid of confronting them. By telling their students not to express certain feelings, they were inadvertently telling students that their stories were ones that no one wanted to hear – which is exactly the opposite of what trauma debriefings are intended to communicate.

This can be serious, and is related not just to the care giver's own war trauma but to a lack of experience in therapeutic technique or an insufficient understanding of the fundamentals of trauma work. One teacher in Banja Luka who has been involved in the pilot project for the UNICEF/UCLA project for war affected adolescents said that before she got involved in the project she had been afraid to get into deep emotions with her students because of her fear that she would not know how to get out. It is the supervisors who are supposed to help the teachers or pedagogues who are actually working with students to work such problems out, but many of them may not have the experience or training, and many of them are probably still afraid to confront their own trauma.

3. As mentioned earlier in the report, donor priorities have already changed. Psycho social projects are being surpassed by programmes in conflict resolution and peace education, a natural evolution that UNICEF is following in Croatia and FRY and to a lesser extent in Bosnia. But it is an evolution that may be happening too fast if those who supported psycho social work during the war were serious in their commitment.

There has been much talk about post traumatic stress in the former Yugoslavia, but the time to treat it is after the war, when the residual effects often prevent people from resuming normal and productive lives. The rapid shift away from support to trauma work to other kinds of post conflict programmes only reinforces the claim of those who criticize international aid for being responsive to popular trends rather than needs that may be difficult to meet and not terribly glamorous. It is
very appealing to be seen to be dealing with child trauma during a war as savage as the one in former Yugoslavia. It is far less so to deal with the aftermath, when real trauma work with those who need it the most takes a lot of time, dedication and real expertise.

4. Psycho social work is seen by some as a province of specialists who want to professionalize and isolate it.

There is a legitimate desire among many mental health professionals in all three countries to professionalize the kind of work that was done with and by non-professionals during the war. Each of the countries needs more professional mental health workers. But what they desire is not really the objective of what was done by many international agencies during the war. The teachings on modern trauma psychology were used then to achieve what were partly if not largely community education objectives, which is a far different concern.

One of the reasons that so many in both the educational and aid communities seem to be abandoning their commitment to psycho social work may be that they see it as a province of specialists who have isolated it from the broader environment around them, and something that is so specialized that only trained psychologist can be expected to properly execute the programmes. With so many other demands on shrinking donor funds, it has become too much of a specialty, one that was acceptable when merged with broader community initiatives during the war.