

SCREENING FOR MENTAL DISORDER IN POST-CONFLICT REGIONS USING COMPUTER APPS – A FEASIBILITY STUDY FROM BURUNDI

A. Crombach¹, C. Nandi¹, M. Bambonye², M. Liebrecht³, R. Pryss³, M. Reichert³, T. Elbert⁴ and R. Weierstall¹

1 – Department of Psychology, University of Konstanz, Konstanz, Germany;

2 – Université Lumière de Bujumbura, Bujumbura, Burundi;

3 – Institute of Databases and Information Systems, University of Ulm, Ulm, Germany;

4 – Department of Psychology, University of Konstanz & vivo international, Konstanz, Germany

A high level of psychosocial functioning is essential for survival in many resource-poor countries and is needed for development in these regions. Organized violence, often in combination with other stressors such as poverty and familial conflict, however, result in a range of mental disorders and damage socio-economic progress. An efficient assessment of mental health is a prerequisite for prevention and intervention measures. However, this may require considerable resources that are difficult to obtain in resource-poor countries. We present new methods for the efficient and effective assessment of mental, especially trauma- and stress-related disorders that can easily be administered by trained local paramedics. For decades, Burundi has been a staging ground for armed conflicts leaving behind many survivors with trauma-related illness. In a study with over 900 combatants and veterans from the military as well as former rebels in Burundi, we used a tablet-computer (ipad)-based survey for the assessment of trauma-related syndromes, especially PTSD, in need for treatment. All participants reported the experience of serious traumatic stressors and a substantial portion presented severe symptoms of the trauma-spectrum. Based on the PSS-I and other standardized screening instruments, an ipad app guided the semistructured clinical interviews. Psychologists from the University of Konstanz, the Burundian military as well as psychologist students from the University Lumière, Bujumbura, Burundi carried out the interviews. In this contribution, we use the Burundian example to portray the logistics and technology of data acquisition and present respective data. We demonstrate the feasibility of using a computerbased screening approach in the field and in clinical settings. We provide evidence, that the computerized assessment of clinical symptoms can be a useful tool for mental health assessment and screenings, both in research and practice.