

Posttraumatic Stress Disorder

Review 19

Rolfnes, E. S., & Idsoe, T. (2011). School-based intervention programs for PTSD symptoms: A review and meta-analysis. *Journal of Traumatic Stress, 24*(2), 155–165. PubMed abstract available at <http://www.ncbi.nlm.nih.gov/pubmed/21425191>.

Objectives	Examine the effectiveness of school-based intervention programs for reducing posttraumatic stress disorder (PTSD) symptoms.
Studies Included	Nineteen U.S. and international studies published from 1997 to 2010
Participants in the Studies	Children or adolescents who had been exposed to a traumatic event or events, such as political conflict, community violence, natural disaster, World Trade Center attacks, or war
Settings	Settings were not reported for all the studies.
Outcomes	PTSD symptoms
Limitations of the Studies	Lack of randomization; small sample sizes; wide participant age range; lack of independent assessors; lack of blinding; lack of follow-up assessment; few studies reported whether the instruments were validated on the specific populations being studied; some of the programs did not use a manual to guide the delivery of the intervention; a few studies employed a limited number and variety of instruments to measure the participants' symptomatology; the studies had a wide range of inclusionary requirement in relation to PTSD symptomatology, which may have complicated the comparison of the individual studies; inclusion of participants with mild baseline PTSD symptoms may have been problematic in relation to the results of some of the studies

Results

There was a medium-to-large effect size for school-based interventions reducing PTSD symptoms and the most common treatment approach, cognitive behavioral therapy (CBT), was found to be largely effective in the reviewed programs. Importantly, school professionals (e.g., school counselors, school social workers, teachers) can be successfully utilized in providing interventions for children and adolescents following traumatic events. One study showed the school setting led to considerably more students accessing and completing treatment than the clinical setting, although both interventions were offered free of charge. All three non-CBT studies (i.e., play/art, eye movement desensitization and reprocessing, mind-body skills) showed promising results, although these were isolated studies and further research is needed.