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Relevance of Qualitative Research Approach in Evaluating Mental Health Interventions among Victims of Violence

Victims of violence have been exposed to trauma, which implies violation of their human rights and causes several consequences on their mental health. Studies among victims predominantly show a high level of depression, fear, social isolation, anxiety and post-traumatic stress disorder (PTSD) symptoms.^{1,2} These studies have generated intervention strategies that reduce mental health disorders in violence victims.^{3,4}

Studies worldwide have shown the effectiveness of interventions for mental health among victims of violence, for example, with a cognitive-behavioral approach. In the last decade, there have been many randomized controlled trials (RCT) conducted in countries affected by violence, especially in Africa and Asia.³⁵ Current evidence derived from these research studies were focused on the identification of symptoms, local validation processes, and the implementation of mental health interventions to determine the effectiveness of these strategies through experimental designs.⁶ In order to fully understand influential factors and appropriately assess mental health interventions, it is imperative to apply qualitative research studies to improve overall mental health research.

Psychological therapies have been proven by clinical trials to improve patients with anxiety, depression, and PTSD.7 Although qualitative studies evaluating mental health interventions are still incipient, their effectiveness cannot be ignored especially in countries with widespread violence. In particular, the principle of expansion and improvement of mental health interventions is supported by the WHO Mental Health Gap Action Program (mhGAP). The program suggests that after the process of identification of effective interventions, it is necessary to assess the constraints in implementing them. These limitations operate at the community and domestic levels, as well as in mental health care services, such as the lack of infrastructure, institutional capacity, professional training, and social inequality.8 Given that these interventions have been tested mainly in low- and middle-income countries (LMICs), a qualitative methodology is appropriate to identify some of the social and administrative barriers of these particular contexts.9 As a result, qualitative studies and results provide a better understanding of the contextual settings of mental health interventions in relation to violence.

Other studies that have been done in Colombia show how qualitative methods contribute to the structuring of intervention programs through the understanding of the social meanings and subjectivities of people involved, as well as the recording and assessment of whether the actions were adjusted to the culture and social characteristics of the population.¹⁰⁻¹² These studies have identified cultural and social factors such as community support, mourning customs, social and government care services, that are necessary elements in the quality of life and mental health of people, enriching the intervention strategies for the surviving population of the Colombian armed conflict victims. This has provided a better understanding of resilience within one of the most vulnerable population groups.^{13,14} While some results cannot be generalized, these studies provide insight into contexts with similarly affected populations; particularly an awareness to collective intervention needs, local appropriate intervention strategies, the perception of results in vulnerable areas and in nations with an active, armed conflict.^{11,14}

In LMICs, the importance of describing and analyzing the perception of the phenomenon of mental health and interventions contributes to building effective and sustainable solutions to populations in vulnerable conditions. Therefore, complementation with qualitative studies can strengthen mental health research in a way that highlight the needs within each country, as well as compile, evaluate and disseminate lessons learned in the intervention process.

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References

1. Husain F, Anderson M, Lopes Cardozo B, Becknell K, Blanton C, Araki D, et al. Prevalence of war-related mental health conditions and association with displacement status in postwar Jaffna District, Sri Lanka. JAMA. 2011 Aug 3;306(5):522-31.

2. Somasundaram D. Collective trauma in the Vanni-a qualitative inquiry into the mental health of the internally displaced due to the civil war in Sri Lanka. Int J Ment Health Syst. 2010 Jul 28;4:22.

3. Bass J, Poudyal B, Tol W, Murray L, Nadison M, Bolton P. A controlled trial of problem-solving counseling for war-affected adults in Aceh, Indonesia. Soc Psychiatry Psychiatr Epidemiol. 2012 Feb;47(2):279-91.

4. Bass JK, Annan J, McIvor Murray S, Kaysen D, Griffiths S, Cetinoglu T, et al. Controlled trial of psychotherapy for Congolese survivors of sexual violence. N Engl J Med. 2013 Jun 6;368(23):2182-91.

5. Bolton P, Bass J, Neugebauer R, Verdeli H, Clougherty KF, Wickramaratne P, et al. Group interpersonal psychotherapy for depression in rural Uganda: a randomized controlled trial. JAMA. 2003 Jun 18;289(23):3117-24.

6. Murray LK, Tol W, Jordans M, Sabir G, Amin AM, Bolton P, et al. Dissemination and implementation of evidence based, mental health interventions in post conflict. low resource settings. Intervention. 2014;12 Suppl 1:94-112.

7. Bisson JI, Roberts NP, Andrew M, Cooper R, Lewis C. Psychological therapies for chronic post-traumatic stress disorder (PTSD) in adults. Cochrane Database Syst Rev. 2013 Dec 13;12:CD003388.

8. World Health Organization (WHO). mhGAP intervention guide for mental, neurological and substance use disorders in non-specialized health settings: Mental Health Gap Action Programme (mhGAP). Geneva: World Health Organization; 2010.

9. Saraceno B, van Ommeren M, Batniji R, Cohen A, Gureje O, Mahoney J, et al. Barriers to improvement of mental health services in low-income and middle-income countries. Lancet. 2007 Sep 29;370(9593):1164-74.

10. Santaella-Tenorio J, Nieto-Gil L, Bonilla-Escobar FJ, Fandiño-Losada A, Gutiérrez-Martínez MI, Bass J, et al. Mental health problems and needs of survivors of torture and violence in the Colombian Pacific coast: a qualitative study in Buenaventura and Quibdo. Cali (Colombia): Cisalva Institute -Universidad del Valle; 2015.

11. Osorio-Cuellar G, Pacichana-Quinayáz SG, Bonilla-Escobar FJ, Fandiño-Losada CA, Gutierrez-Martinez MI. Perceptions about implementation of a narrative community-based group therapy for Afro-Colombians victims of violence. Cali (Colombia): Cisalva Institute - Universidad del Valle; 2015.

12. Pacichana-Quinayáz SG, Osorio-Cuellar G, Bonilla-Escobar FJ, Fandiño-

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Correspondence

Losada CA, Gutierrez-Martinez MI. Common elements treatment approach based on a cognitive behavioral intervention: implementation in the Colombian Pacific. Cali (Colombia): Cisalva Institute - Universidad del Valle; 2015.

13. Bass JK, Bolton PA, Murray LK. Do not forget culture when studying mental health. Lancet. 2007 Sep 15;370(9591):918-9.

14. Bonilla-Escobar FJ, Osorio-Cuellar G, Pacichana-Quinayáz SG, Sanchez-Renteria G, Fandiño-Losada CA, Gutierrez-Martinez MI. Do not forget culture when implementing mental health interventions. Cali (Colombia): Cisalva Institute - Universidad del Valle; 2015

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